

Part II Balance Sheets (see the instructions for Part II)
 Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	331,432	22	339,348
23 Land and buildings	1,660	23	1,614
24 Other assets (describe in Schedule O)	106,276	24	99,562
25 Total assets	439,368	25	440,524
26 Total liabilities (describe in Schedule O).	8,217	26	1,142
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	431,151	27	439,382

Part III Statement of Program Service Accomplishments (see the instructions for Part III)
 Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose?
 Labor negotiations, advancement and improvement of public education

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

Expenses
 (Required for section 501(c)(3) and 501(c)(4) organizations, optional for others)

28 See Additional Data Table

(Grants \$) If this amount includes foreign grants, check here **28a**

29 See Additional Data Table

(Grants \$) If this amount includes foreign grants, check here **29a**

30

(Grants \$) If this amount includes foreign grants, check here **30a**

31 Other program services (describe in Schedule O)

(Grants \$) If this amount includes foreign grants, check here **31a**

32 Total program service expenses (add lines 28a through 31a) **32** 171,897

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV)
 Check if the organization used Schedule O to respond to any question in this Part IV.

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Amanda Hogan President	40 00	7,200		
Laura Sheinberg Vice President	3 00	0		
Cherise Bonsell Secretary	2 00	0		
Dan Ham Treasurer	3 00	0		
Rebecca Falk Director	2 00	0		
Adam Lev Director	2 00	0		
David Dingman Director	2 00	0		
Maureen Van Keulen Director	2 00	0		
Sarah Todd Director	2 00	0		
Margaret Acosta Director	2 00	0		
Diana Schuster Director	2 00	0		
Andrea Genchi Director	2 00	0		

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

Table with columns for question number, question text, and Yes/No response boxes. Rows include questions 33 through 45b regarding organizational activities, financials, and compliance.

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 46 No

Part VI Section 501(c)(3) organizations only
All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51. Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 47
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 48
49a Did the organization make any transfers to an exempt non-charitable related organization? 49a
b If "Yes," was the related organization a section 527 organization? 49b

Table with 5 columns: (a) Name and title of each employee, (b) Average hours per week devoted to position, (c) Reportable compensation (Forms W-2/1099-MISC), (d) Health benefits, contributions to employee benefit plans, and deferred compensation, (e) Estimated amount of other compensation. Row 1 contains 'NONE'.

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

Table with 3 columns: (a) Name and business address of each independent contractor, (b) Type of service, (c) Compensation. Row 1 contains 'NONE'.

d Total number of other independent contractors each receiving over \$100,000.

52 Did the organization complete Schedule A? NOTE. All Section 501(c)(3) organizations must attach a completed Schedule A Yes No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here *****
Signature of officer
Date 2019-01-19
Amanda Hogan President
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name Gary W Janke
Preparer's signature
Date
Check [X] if self-employed PTIN P01395073
Firm's name GARY W JANKE Firm's EIN 95-3944763
Firm's address 17024 LASSEN ST NORTHBRIDGE, CA 913251941 Phone no (818) 700-1099

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Additional Data

Software ID: 17005038

Software Version: 2017v2.2

EIN: 95-2315033

Name: SIMI EDUCATORS ASSOCIATION

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.	Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)	
<p>28 Encouraging young people to pursue goals of higher education and consider teaching as a career (15 students benefited) (Grants \$ 7,825)</p> <p style="text-align: right;">If this amount includes foreign grants, check here . . . <input type="checkbox"/></p>	28a	7,825

Form 990EZ, Part III - Statement of Program Service Accomplishments

<p>Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.</p>	<p>Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)</p>	
<p>29 Representation of teachers in the Simi Valley Unified School District and negotiation of a contract on their behalf (Approximately 800 teachers benefit) (Grants \$ 164,072)</p> <p style="text-align: right;">If this amount includes foreign grants, check here . . . <input type="checkbox"/></p>	<p>29a</p>	

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue ServiceName of the organization
SIMI EDUCATORS ASSOCIATION**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017**Open to Public Inspection**

Employer identification number

95-2315033

990 Schedule O, Supplemental Information

Return Reference	Explanation
Grants and Similar Amounts Paid In Excess of \$5,000 1	Class of Activity Scholarships Donee's Name High School Seniors (15) Donee's Address 40 W Cochran St Simi Valley CA 93065 Relationship of Donee None Cash Amount Given \$7825

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 1002	Office Expenses \$1281

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 1007	Conferences, Conventions, and Meetings \$22945

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 1009	Depreciation \$1617

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 1012	Insurance \$985

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 1	Officer release time costs \$64583

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 2	Public education advocacy \$9000

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 3	Member recognition \$4144

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 4	Membership costs \$3889

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 5	Meeting costs \$3393

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 6	New teacher meeting \$2876

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 7	Telephone \$2564

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 8	Community relations \$2129

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 9	Transportation, mileage \$1854

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 11	Repairs, maintenance \$361

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 12	Personal property taxes \$274

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 14	Filing fees \$99

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Assets 1002	Furniture and Fixtures - Beginning \$3807 Furniture and Fixtures - Ending \$2236

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Assets 1009	Notes and Loans Receivable - Beginning \$102469 Notes and Loans Receivable - Ending \$97326

990 Schedule O, Supplemental Information

Return Reference	Explanation
Total Liabilities 1002	Grants Payable - Beginning \$7998 Grants Payable - Ending \$956

990 Schedule O, Supplemental Information

Return Reference	Explanation
Total Liabilities 1	Payroll taxes payable - Beginning \$219 Payroll taxes payable - Ending \$186