(99	Return of Organization Exempt From I	ncome 7	Гах	OMBNo 15	
orm S	33	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue	Code (exce	pt private	20'	13
	ent of the	foundations)	e public By	law, the IRS		
	Revenue :	Service generally cannot redact the information on the	orm	,	Open to Inspec	
Fai		► Information about Form 990 and its instructions is at <u>www.IRS.gov</u>				
		2013 calendar year, or tax year beginning 09-01-2013 , 2013, and ending 08-31 pplicable C Name of organization Weakington Education	2014	D Employer	identification nu	umber
	ress cha	washington Education Association		91-0460		
Nan	ne chan	Doing Business As		91-0400	045	
_	ial retur					
	minated	Number and sheet (of P O box if mains not delivered to sheet address) Room/suite		E Telephone	number	
	ended n			(253)94	1-6700	
		Federal Way, WA 980639100 pending		G Gross rocou	pts \$ 34,954,146	
		F Name and address of principal officer	H(a) Ic thu	s a group ret		
		Margaret Knight		dinates?		es 🔽 No
		PO Box 9100 Federal Way, WA 980639100	H(b) A	11		
			incluc	ll subordınat ded?	es į re	es 🔽 No
Тах	k-exem	pt status 🔽 501(c)(3) 🔽 501(c)(5) 📲 (insert no) 🔽 4947(a)(1) or 🔽 527	If "No	o," attach a l	ıst (see ınstruc	ctions)
W	ebsite	: 🕨 www.washingtonea.org	H(c) Grou	p exemption	number 🕨	
Form	n of ora	anization 🔽 Corporation 🗍 Trust 🗍 Association 🗍 Other 🕨		mation 1889	M State of legal	domicile
UII	n or org				WA	donnelle
	- - 2 C	To promote the teaching profession and public education in the State of Washing Check this box T if the organization discontinued its operations or disposed of	more than 2		1	
	1 - 2 3 4	Check this box F if the organization discontinued its operations or disposed of Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b)	more than 2		t assets 3 4 5	7
	<u> </u>	Check this box 🏹 if the organization discontinued its operations or disposed of Jumber of voting members of the governing body (Part VI, line 1a)	more than 2		3	7 19
	<u> </u>	Check this box F if the organization discontinued its operations or disposed of Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) .	more than 2		3 4 5	7 19
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Fend Balances EXI) Historia Havenue	Image: 1 Image: 2 Image: 3 Image: 4 Image: 4	Check this box ▶ If the organization discontinued its operations or disposed of Number of voting members of the governing body (Part VI, line 1a)	more than 2		3 4 5 5 5 5 7b Current 7b 34 7 34 7 34 8 34 9 34 9 34 10 34 11 16 12 16 13 16 14 34 15 16 16 34 17 16 18 16 19 34 10 34 10 34 11 16 12 16 13 16 14 34	(49,07(2,242 4,950,684 1,118,114 5,017,541 (5,825,848 2,961,503 1,989,181

1

Under penalties of perjury, I declare that I have examined this return, including my knowledge and belief, it is true, correct, and complete Declaration of prepar preparer has any knowledge

		:	*								
Sign	1	Sıg	nature of officer								
Here		Ма	largaret Knight CFO								
		Ту	pe or print name and title								
Deid			Print/Type preparer's name Laird S Vanetta	Preparer's signature							
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Use On			Firm's address Þ 3131 Elliott Avenue Ste 290								
			Seattle, WA 98121								
	C 1			1 2/ 1							

May the IRS discuss this return with the preparer shown above? (see instructio

For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (2013) Page
Par	IIII Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission
	ission of the Washington Education Association is to advance the professional interests of its members in order to make public tion the best it can be for students, staff, and communities
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	Governance/Administration - To formulate Association policy and to insure implementation of the goals, objectives and activities of the Association in accordance with the desires and needs of the membership. To provide governance with advice and counsel as prescribed in WEA policy on the formulation of goals, objectives, policy and activities of the Association in the following general areas accreditation, certification, instruction, personnel, collective bargaining, state and federal legislation, human relations, and rights of school employees. To provide legal services and advice to WEA, its staff and governance, local associations, and member to protect and strengthen the legal and bargaining rights of school employees.
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	Public Policy Center - To insure that WEA is a significant participant in the legislative process of the state and nation, obtain passage and implementation of legislation consistent with Association goals and assure adequate resource allocations to improve salaries, conditions of work, and educational programs
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	Organizing and Advocacy Center - To provide program and staff services to assist individual school employees and leaders to obtain and utilize the individual and collective power they need to control their work environment, including appropriate compensation To provide research support enabling the Association to carry out its goals and objectives in an efficient manner
	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	(Code) (Expenses \$ including grants of \$) (Revenue \$) Communication and PR Center - To inform the membership and the public through utilization of internal and external media of the Association's goals and achievements and of the profession's concern for public education in Washington
	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	Learning and Education Center - To strengthen the human rights of school employees, and to enhance school employees' personal and professional development To work with schools and communities on efforts to improve student skills and facilitate an effective learning environment
	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	Support Services Center - To provide the Association with administrative support and business services including computer technology to assist the governance and program units of the Association in accomplishing their goals and activities
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 🕨
	Eorm 990 (2011

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 🕄	3	Yes	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part 1</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 🔂	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 😨	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 🖘	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> 😼	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> 🔂	11c		No
d	DID the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 😼	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🔞	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> <i>"Yes," complete Schedule G, Part III</i>	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Page **3**

Par	Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> 🔞	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? \ldots .	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
Ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M .	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

38 Yes Form **990** (2013)

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Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			<u>.</u>
1-	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 197		Yes	No
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		
Za	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
Ь	If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
E.		E.		Ne
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot .	5a		No No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? \cdot .	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
с	Enter the amount of reserves on hand	Į		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O \ldots .	14b		

Form	990 (2013)			Page
Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7 "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or chang See instructions. Check if Schedule O contains a response or note to any line in this Part VI			
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
Ь	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	eveni	le Cod	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply			

	Own website Another's website Upon request Other (explain in Schedule O)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of
	interest policy, and financial statements available to the public during the tax year

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►Margaret Knight PO Box 9100

Federal Way, WA 980639100 (253)765-7007

Part VII Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

◆ List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

+ List all of the organization's current key employees, if any See instructions for definition of "key employee "

◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

• List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

厂 Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours	A veragePosition (do notnours permore than one boxweek (listperson is both arany hoursand a director/ti					;	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)		Institutional Trustee	Officei	Key employee	2/1099-MISC)		2/1099-MISC)	(W- 2/1099- MISC)	organızatıon and related organızatıons
										Form 990 (2013)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	week (list person is both an officer from the any hours and a director/trustee) organization (V						Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	c	(F) Estima nount of ompens from t ganizati	other ation he		
		organizations below dotted line)	Officei Institutional Trustee Individual trustee or director		Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-14130)		relate	d
1b	Sub-Total		• •	•				٠					
c م	Total from continuation sheet				•	•	•	<u>ب</u>	2,419,556		0	1	,092,714
 2	Total (add lines 1b and 1c) . Total number of individuals (in	cluding but not					d abov	e) wi			<u> </u>		,052,714
	\$100,000 of reportable compe							,					
												Yes	No
3	Did the organization list any fo on line 1a? <i>If "Yes," complete S</i>					key	emplo	yee, •	or highest compension	sated employee	3		No
4	For any individual listed on line organization and related organ individual										4	Yes	
5	Did any person listed on line 1 services rendered to the organ										5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation				
Foster Pepper Attorneys 1111 Third Ave Suite 3400 Seattle WA 98101	Legal Services	581,553				
Pacifica Law Group 1191 2nd Ave Suite 2100 Seattle WA 98101	Legal Services	251,215				
Harriet Strasberg, 3136 Maringo South East Olympia WA 98501	Legal Services	193,378				
Stoel Rives LLP One Union Square 600 University St Seattle WA 98101	Legal Services	172,145				
Pacific Northwest Catering 747 North 135th St Seattle WA 98133	Food Service	165,744				
2 Total number of independent contractors (including but not limited to those listed above)	who received more than					

\$100,000 of compensation from the organization ►13

Form 99								Page S
Part V	/111	Statement of		onse or note to any li	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
sε	1a	Federated camp	paigns 1	.a				
ant	b	Membership du	es 1	.b				
ΰĝ	с	Fundraising eve	ents 1					
iffs,	d	Related organiz	ations 1	.d				
nii Gi	e	Government grants	<i>.</i>	.e				
ons, Sin	f							
her		sımılar amounts no	t included above					
<u>e</u> E	g	Noncash contributio 1a-1f \$	ons included in lines					
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines	31a-1f	🖕				
				Business Code				
- Ul	2a	Membership Dues		611710	30,162,245	30,162,245		
He K	Ь	National Financial S	Support	611710	2,688,162	2,688,162		
- 26	с	Unified Legal Servio	ces	611710	789,936	789,936		
ĕr и	d	Reimbursements		611710	547,496	547,496		
ŝ	е	Benefit Service Fee	25	524298	532,850		532,850	
Program Service Revenue	f	All other progra	m service revenue		178,683	178,683		
ξ	g	Total. Add lines	2a-2f		34,899,372			
	3		ome (including divide		52,532			52,53
	4		ar amounts) tment of tax-exempt bon					· · ·
	5	Royalties		🕨				
		[(ı) Real	(11) Personal				
	6a	Gross rents						
	Ь	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental incor	me or (loss)					
	7-	Gross amount	(I) Securities	(II) O ther				
	7a	from sales of assets other						
		than inventory Less cost or						
	b	other basis and		3,462				
	с	sales expenses Gain or (loss)		-3,462				
	d	Net gaın or (los	s)	· · · · · •	-3,462	-3,462		
á)	8a	Gross income fr events (not incl						
Other Revenue		\$						
eve		of contributions See Part IV , lin	reported on line 1c)					
τ ά				a				
the	b	Less directex	penses	b				
0	С		loss) from fundraısın					
	9a	Gross income fi See Part IV, lin	rom gaming activities e 19	5				
		,		a				
	b			Ь				
			loss) from gaming ac	tivities				
	10a	Gross sales of returns and allo						
			а	2,242				
	Ь	Less costofgo			2.242	2.242		
	С	Net income or (Miscellaneous	loss) from sales of ir		2,242	2,242		
	11a	miscellaneous	Revenue	Business Code				
	b							
	c							
	d	All other revenu						
	e	Total. Add lines	;11a-11d	.				
	12	Total revenue.	See Instructions .		24 050 694	24 265 202	E22 8E0	E3 E3.

Part IX Statement of Functional Expenses

	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV , line 21	1,118,114			
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,589,207			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	7,807,698			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,987,540			
9	Other employee benefits	1,979,036			
.0	Payroll taxes	654,060			
1	Fees for services (non-employees)				
а	Management				
b	Legal	2,203,349			
с	Accounting	133,475			
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on	(22.000			
.2	Schedule O)	682,888			
.2 .3	Office expenses	45,158			
.3 .4					
	Information technology	435,704			
.5	Royalties	604.004			
.6	Occupancy	684,931			
.7		1,316,553			
.8	Payments of travel or entertainment expenses for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	683,796			
20	Interest	248,759			
1	Payments to affiliates	8,599,754			
22	Depreciation, depletion, and amortization	333,587			
3	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	Dues and fees	74,837			
b	Credit Card and Bank Pr	18,375			
с					
d		1			
е	All other expenses				
5	Total functional expenses. Add lines 1 through 24e	32,961,503			
26	Joint costs. Complete this line only if the organization	,,			
-	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here F T if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		Check in Schedule O contains a response of hote to any line in				-	1
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			6,834,513	1	7,150,727
	2	Savings and temporary cash investments			3,522,276	2	5,132,536
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			4,635,315	4	4,739,235
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete P Schedule L	of		5		
ts	6	Loans and other receivables from other disqualified persons (a 4958(f)(1)), persons described in section 4958(c)(3)(B), and and sponsoring organizations of section 501(c)(9) voluntary e organizations (see instructions) Complete Part II of Schedule	contrib mploye	outing employers		6	
Assets	-	Notes and loans receivable, net				7	
Å.	7 8					8	
	9					9	
	9 10a	Prepaid expenses and deferred charges		14,306,599		9	
	ь	Less accumulated depreciation	10b	4,699,520	9,676,104	10c	9,607,079
	11	Investments—publicly traded securities				11	0,001,010
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets		•		14	
	15	Other assets See Part IV, line 11		•	8,049,876		10,692,001
	16	Total assets. Add lines 1 through 15 (must equal line 34)			32,718,084		37,321,578
	17	Accounts payable and accrued expenses			1,179,870		1,161,200
	18				1,173,070	17	1,101,200
	19	Grants payable			266,434		487,624
	20				200,454	20	407,024
		Tax-exempt bond liabilities					
Ìties	21	Escrow or custodial account liability Complete Part IV of Sch				21	
	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqual	Ified				
Liabi		persons Complete Part II of Schedule L			5 040 000	22	5 45 4 205
	23	Secured mortgages and notes payable to unrelated third partie			5,612,309		5,454,625
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa D	art X of	Schedule	41,010,285	25	51,763,825
	26	Total liabilities. Add lines 17 through 25			48,068,898		58,867,274
es		Organizations that follow SFAS 117 (ASC 958), check here lines 27 through 29, and lines 33 and 34.					
ju No	27	Unrestricted net assets	-		-15,350,814	27	-21,545,696
Balances	28	Temporarily restricted net assets	•••		,	28	
	29	Permanently restricted net assets				29	
Fund		Organizations that do not follow SFAS 117 (ASC 958), check h				25	
or F		complete lines 30 through 34.		j and			
2	30	Capital stock or trust principal, or current funds	•			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
AS.	32	Retained earnings, endowment, accumulated income, or other	funds			32	
Net	33	Total net assets or fund balances			-15,350,814	33	-21,545,696
Z	34	Total liabilities and net assets/fund balances			32,718,084	34	37,321,578
	·				·	·	Form 990 (2013)

Form	990	(201	.3)
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Par	TXI Reconcilliation of Net Assets Check If Schedule O contains a response or note to any line in this Part XI				ম.
1	Total revenue (must equal Part VIII, column (A), line 12)				
-		1		34,9	950,684
2	Total expenses (must equal Part IX, column (A), line 25)	2		32,9	961,503
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3		1,9	989,181
		4		-15,3	350,814
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-8,	.84,063
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		-	545,696
	t XII Financial Statements and Reporting Check If Schedule O contains a response or note to any line in this Part XII	• •			. Г
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If `Yes,' check a box below to indicate whether the financial statements for the year were compiled or revio a separate basis, consolidated basis, or both	ewed or	۱ 		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	🔽 Separate basis 🔰 Consolidated basis 👘 Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	IN			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	ne	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Software ID:Software Version:EIN:91-0460645Name:Washington Education Association

Compensated Employees, and Inde	pendent Cor	htracto	rs			•	-		1	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th persoi and a	non (nan o n is b	ne b oth a ctor/	ox, u an oi ⁄trus	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organızatıons below dotted lıne)	Individual trustee or dilector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
Kathie Axtell	5 00	x						0	0	0
Board Member Jennie Beltramini	5 00									
Board Member	5 00	x						0	0	0
Patricia Benavidez	5 00	x						0	0	0
Board Member Jeb Binns	5 00									
Board Member	5 00	x						0	0	0
Logan Birgenheier	5 00	~								
Board Member Lisa Brackin	5 00	×						0	0	0
Board Member	5 00	х						0	0	0
Shaerie Bruton	5 00	x						0	0	0
Board Member Phyllis Campano	5 00	x						0	0	0
Board Member Tracie Cannon	5 00	x						0	0	0
Board Member Debby Chandler	5 00	x						0	0	0
Board Member Mark Cole	5 00									
Board Member Cathy Comar	5 00	×						0	0	0
Board Member Sharon Dolan	5 00	×						0	0	0
Board Member	5.00	х						0	0	0
Jamie Downing	5 00	x						0	0	0
Board Member Courtney Eyer	5 00	x						0	0	0
Board Member Antoinette Felder	5 00	x						0	0	0
Board Member Justin Fox-Bailey	5 00									
Board Member		×						0	0	0
Christine Fraser Board Member	5 00	x						0	0	0
Amy Frost Board Member	5 00	x						0	0	0
Barbara Gapper Board Member	5 00	x						0	0	0
Daniel Gossett	5 00	x						0	0	0
Board Member Eric Grant	5 00	x						0	0	0
Board Member Bill Green	5 00	x						0	0	0
Board Member Paul Hope	5 00			<u> </u>						
Board Member Bob Ingraham	5 00	X						0	0	0
Board Member		х						0	0	0

Compensated Employees, and Inde		ntracto					1	1	I	
(A) Name and Title	(B) Average hours per week (list any hours	Posit more th persoi and a	nan (nan o n is b	ne bo oth a	ox, u an of	nless ficer tee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
Myra Johnson	5 00	x						0	0	0
Board Member Marguente Jones	5 00	x						0	0	0
Board Member Julie Kastien Board Member	5 00	x						0	0	0
Jonathan Knapp	5 00	x						0	0	0
Board Member Karen Laase	5 00	x						0	0	0
Board Member Norma LaChine	5 00	x						0	0	0
Board Member Sonya Langford Board Member	5 00	x						0	0	0
Steve Lembeck	5 00	x						0	0	0
Board Member Roxanne Luchini	5 00	x						0	0	0
Board Member Bill Lyne	5 00	x						0	0	0
Board Member Ted Mack	5 00	x						0	0	0
Board Member Patricia Marcum	5 00	x						0	0	0
Board Member Steven Mayer	5 00	x						0	0	0
Board Member Joyce McDonald	5 00	x						0	0	0
Board Member Steve McKenna	5 00	x						0	0	0
Board Member Karen McNamara	5 00	x						0	0	0
Board Member Jeri Morrow	5 00	x						0	0	0
Board Member Mark Morrow	5 00	x						0	0	0
Board Member Angel Morton	5 00	x						0	0	0
Board Member Carla Naccarato-Sinclair	5 00	x						0	0	0
Board Member Patrick Nicholson	5 00	x						0	0	0
Board Member Andı Nofziger-Meadows	5 00	x						0	0	0
Board Member Amy Nylen	5 00	x						0	0	0
Board Member Jan Olmstead	5 00	x						0	0	0
Board Member Linda Overlie	5 00	x						0	0	0
Board Member	J									

Compensated Employees, and I		ntracto I						I	I	I I
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	nan (nan o n is b	ne b oth : ctor/	ox, u an of /trus	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke; emplo;ee	Highest compensated employee	Former	_,,	_,,	related organizations
Christyna Paris	5 00	x						0	0	0
Board Member Martha Patterson	5 00									
Board Member	5 00	x						0	0	0
Janice Petrin	5 00	x						0	0	0
Board Member Cındy Prescott	5 00									
Board Member		X						0	0	0
Ted Raihl	5 00	x						0	0	0
Board Member Kıt Raney	5 00									
Board Member	5.00	x						0	0	0
Shannon Rasmussen	5 00	x						0	0	0
Board Member Robert Reynolds	5 00									
Board Member		X						0	0	0
Jenny Rose	5 00	x						0	0	0
Board Member Bev Schaefer	5 00	x						0	0	0
Board Member Ted Schelvan	5 00									
Board Member	5.00	x						0	0	0
Gloria Smith	5 00	x						0	0	0
Board Member John Solberg	5 00	×						0	0	0
Board Member Teri Staudinger	5 00									
Board Member	5 00	x						0	0	0
LaDonna Sterling	5 00	x						0	0	0
Board Member Deborah Strayer	5 00									
Board Member		x						0	0	0
Fern Tresvan Board Member	5 00	x						0	0	0
Terry Van Meter	5 00	x						0	0	0
Board Member Michele Miller	5 00									
Board Member		x						0	0	0
Cindie Webb	5 00	×						0	0	0
Board Member Bradford Williams	5 00	x						0	0	0
Board Member Susan Yaw	5 00									
Board Member		×						0	0	0
Margaret Knight Chief Financial Officer	37 50			x				157,437	0	73,312
John Okamoto	37 50			x				227,740	0	105,740
Executive Director Kim Mead	37 50									,
President				х				41,873	0	5,629
			-	_	-	-	-	·		·

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	person is both an officer and a director/trustee) o		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations				
			¢			ted				
Stephen Miller	37 50			x				34,129	0	5,173
Vice President										
Aimee Iverson General Counsel	37 50				x			153,866	0	81,526
James Fotter	37 50				v			1(7.249		
Director/Organizing and Ad					X			167,348	0	82,079
Manuel Bosser	37 50				x			164,051	0	89,311
Director/Human Resources					Â			104,031	0	
Lisa Kodama Director/Learning and Educ	37 50				x			155,201	0	83,104
Glenn Bafia	37 50									
Manager/UniServ					X			162,237	0	80,115
James Regan	37 50				x			198,786	0	92,329
Director/Governmental Rela Michael Horner	37 50									
UniServ Representative						x		148,952	0	69,649
Scott Poirier	37 50									
Coord /Ed Policy Issues						х		149,242	0	76,633
Gary McNeil	37 50							140.000		71 200
Higher Ed/UFWS Org						X		148,900	0	71,306
Dale Folkerts	37 50					x		146,688	0	71,282
Media Coordinator						^		140,000	·	/1,202
Linda Mullen Director/Communications	37 50					x		149,296	0	83,380
Mary Lindquist	37 50									
Past President							X	122,465	0	11,304
Mıke Ragan	37 50						x	91,345	0	10,842
Past Vice-President							^	51,343	0	10,042

efile GRAPHIC pr	int - DO NOT P	ROCESS As Filed	Data -			DL	N: 93493097006375
SCHEDULE C	P	olitical Campaig	n and L	obbying	Activitie	es	OMBN0 1545-0047
(Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	► Complete if t	ions Exempt From Inco the organization is descri instructions. ► Informa instructions is	ibed below. ation about	► Attach to F Schedule C (Fe	orm 990 or orm 990 or 9	Form 990-EZ.	
 Section 501(c)(3) o Section 501(c) (oth Section 527 organiz If the organization an Section 501(c)(3) o Section 501(c)(3) o 	rganizations Comp er than section 50 zations Complete F swered "Yes" to rganizations that h rganizations that h swered "Yes" to	olete Parts I-A and B Do r 1(c)(3)) organizations Co	not complete omplete Part e 4, or For stion under s (election ur	e Part FC s FA and C bel m 990-EZ, Par section 501(h)) inder section 50	ow Do not o t VI, line 4 7 Complete F 1(h)) Comp	complete Part 7 (Lobbying / Part II-A Do no lete Part II-B [Activities), then ot complete Part II-B Do not complete Part II-A
Name of the organiza Washington Education Ass	tion					Employer ide	ntification number
		nization is exempt (91-0460645	
	te if the orgar	nization is exempt (concurred by the organiza)(3).	* 	\$ \$
2 Enter the amount	t of any excise tax	incurred by organization	n managers	under section	4955		\$
4a Was a correctionb If "Yes," describ	made? e ın Part IV	on 4955 tax, dıd ıt file Fo					「Yes 「No 「Yes 「No
		nization is exempt u					01(C)(3).
	t of the filing orgar	d by the filing organization hization's funds contribut					\$0 \$0
3 Total exempt fun	ction expenditure	s Add lines 1 and 2 Ent	er here and	on Form 1120	D-POL, line	17b 🕨	\$
4 Did the filing orga	anızatıon file Form	1120-POL for this year?					Ţ ŢYes ∏ No
organization mad amount of politic	le payments For e al contributions re	mployer identification nu each organization listed, eceived that were prompt tical action committee (P	enter the a ly and direc	mount paid froi tly delivered t	m the filing of a separat	organızatıon's e political org	funds Also enter the janization, such as a
(a) Name		(b) Address		(c) EIN	filing or	unt paıd from ganızatıon's one, enter -0	contributions received
For Paperwork Reduction	n Act Notice, see th	e instructions for Form 99	0 or 990-EZ	•		Schedule C	(Form 990 or 990-EZ) 2013

Sc	hedule C (Form 990 or 990-EZ) 2013			Page 2
Р	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3) ar	nd filed Form 5768	
	Check F if the filing organization belongs to expenses, and share of excess lobb Check F if the filing organization checked bo		ed group member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means a	Expenditures	(a) Filing organization's totals	(b) A ffiliated group totals
1a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisl	atıve body (dırect lobbyıng)		
С	Total lobbying expenditures (add lines 1a and 1	b)		
d	O ther exempt purpose expenditures			
е	Total exempt purpose expenditures (add lines 1	c and 1d)		
f	Lobbying nontaxable amount Enter the amount columns			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lir	ne 1f)		
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -		
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -		
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1i, did the organization file Form 472	0 reporting	└ Yes └ No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expenditures During 4-Year Averaging Period													
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total								
2a	Lobbying nontaxable amount													
b	Lobbying ceiling amount (150% of line 2a, column(e))													
с	Total lobbying expenditures													
d	Grassroots nontaxable amount													
e	Grassroots ceiling amount (150% of line 2d, column (e))													
f	Grassroots lobbying expenditures													

Schedule C (Form 990 or 990-EZ) 2013

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a	ı)		(b)	
For e activ	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying ity.	Yes	No	A	moun	ıt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	O ther activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Ī			
b	If "Yes," enter the amount of any tax incurred under section 4912					
с	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		Ī			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		Ī			
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	6 01(c))(5), o	r se	ectio	n
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		No
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		No
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered " line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
Ь	Carryover from last year	2b				
С	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation
Part I-A, Line 1	Communications to members concerning state and local candidates

Part IV Supplemental Info	prmation <i>(continued)</i>
Return Reference	Explanation

Schedule D (Form 990) 2013

efile GRAPHIC	print - DO NOT PROCESS As F	iled Data -			DLN:	93493097	006375
SCHEDULE D Form 990)			al Statements			OMB No 15	
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b						IJ	
Department of the Treasury Attach to Form 990. See separate instructions. Information about Schedule D (Form 990) Open to Public Internal Revenue Service and its instructions is at <u>www.irs.gov/form990</u> Dispection							
Name of the organ Washington Education					-	ification num	ber
Part I Orga	nizations Maintaining Donor Adv	vised Funds	or Other Similar F		0460645 or Accou	nts. Comp	lete ıf the
	ization answered "Yes" to Form 990	, Part IV, line	6.			•	
		(a) Dor	or advised funds		(b) Funds a	and other acc	ounts
L Total number	,						
	ntributions to (during year)						
	ints from (during year) lue at end of year						
	ization inform all donors and donor advise	ors in writing the	at the assets held in dor	nor advı	sed		
	organization's property, subject to the or ization inform all grantees, donors, and d	-	-	can be		∏ Yes	∏ No
used only for conferring im	charitable purposes and not for the bene permissible private benefit?	fit of the donor o	r donor advisor, or for a	ny othe	r purpose	∏ Yes	
	ervation Easements. Complete if			to Forn	n 990, Par	rt IV, line 7.	
☐ Preservat	conservation easements held by the org ion of land for public use (e g , recreation n of natural habitat						а
	ion of open space						
	es 2a through 2d if the organization held a the last day of the tax year	a qualified conse	ervation contribution in t	the form	n of a conse	ervation	
	,				Held at	the End of t	he Year
-	of conservation easements			2a			
	e restricted by conservation easements			2b			
d Number of co	nservation easements on a certified histo nservation easements included in (c) acc ture listed in the National Register			2c 2d			
	nservation easements modified, transferi •	red, released, ex	tinguished, or terminate	ed by th	ie organizat	tion during	
Number of sta	ates where property subject to conservat	ion easement is	located 🕨				
	anization have a written policy regarding to find the conservation easements it holds?	the periodic mor	nitoring, inspection, han	dlıng of	violations,	and FYes	
Staff and volu ►	nteer hours devoted to monitoring, inspe	cting, and enfor	cıng conservatıon easeı	ments d	luring the y	ear	
	penses incurred in monitoring, inspecting	g, and enforcing	conservation easement	s during	g the year		
	nservation easement reported on line 2(70(h)(4)(B)(II)?	d) above satısfy	the requirements of sec	ction 17	70(h)(4)(B)	(I)	∏ No
balance shee	describe how the organization reports con t, and include, if applicable, the text of th on's accounting for conservation easeme	e footnote to the					
	nizations Maintaining Collection			or Ot	her Simil	ar Assets.	
.	lete if the organization answered "Y ation elected, as permitted under SFAS 1				temontar	halanco cho	ot
works of art, h	nistorical treasures, or other similar asse de, in Part XIII, the text of the footnote t	ts held for publi	c exhibition, education,	or rese	arch ın furt		
works of art, h	ation elected, as permitted under SFAS 1 historical treasures, or other similar asse de the following amounts relating to thes	ts held for publi					ıblıc
(i) _{Revenues}	included in Form 990, Part VIII, line 1				►\$_		
(ii) Assets in	cluded in Form 990, Part X						
If the organiz	ation received or held works of art, histor unts required to be reported under SFAS						
a Revenues inc	luded ın Form 990, Part VIII, lıne 1				►\$		
b Assets includ	led in Form 990, Part X				► \$		

For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Cat No 52283D	Schedule D (Form 990) 2013

Sche	dule D (Form 990) 2013									Page 2
Part	Organizations Maintaining Co	ollections of Art	, His	tori	cal Trea	asur	es, or Othe	r Similar Ass	ets (cc	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds,cł	necka	any of the	follo	wing that are a	sıgnıfıcant use o	fıts	
а	Public exhibition		d	Γ	Loan or	exch	ange programs			
b	☐ Scholarly research		е	Γ	Other					
с	Preservation for future generations									
4	Provide a description of the organization's c Part XIII	ollections and expla	ın hov	w the	y further t	he or:	ganızatıon's ex	empt purpose in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than	to be maintained as	part o	ofthe	organızat	tıon's	collection?		Yes	∏ No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar						answered "Y	es" to Form 99	0,	
1a	Is the organization an agent, trustee, custor included on Form 990, Part X?						r other assets		Yes	∏ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	follov	ving t	able					
								Amo	unt	
C	Beginning balance						1c			
d	Additions during the year						1d			
e £	Distributions during the year						1e			
f	Ending balance						1f	_		
2a L	Did the organization include an amount on F								Yes	
b	If "Yes," explain the arrangement in Part XI								<u></u>	1
Ра	rt V Endowment Funds. Complete	(a)Current year)Prior				Three years back (e)Four v	ears back
la	Beginning of year balance				,	. ,	<u>, ()</u>	, í		
b	Contributions									
с	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cur	rent year end baland	e (lin	ie 1g	, column (a)) he	eld as			
а	Board designated or quasi-endowment 🕨									
b	Permanent endowment 🕨									
с	Temporarily restricted endowment > The percentages in lines 2a, 2b, and 2c sho	uld equal 100%								
Ba	Are there endowment funds not in the posse organization by	-	ation	that a	are held a	nd ad	Iministered for		Yes	No
	(i) unrelated organizations					• •		3a(i)	_	<u> </u>
b	(ii) related organizations							3a(ii)	/	I
	Describe in Part XIII the intended uses of t					•			_	
-	t VI Land, Buildings, and Equipme	=				insw	ered 'Yes' to	Form 990, Par	t IV, lu	ne
	11a. See Form 990, Part X, line									
	Description of property) Cost or oth is (investme		(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Bo	ok value
La	Land						2,573,437			2,573,437
b	Buildings		•				8,960,524	2,266,129		6,694,395
с	Leasehold improvements		•							
d	Equipment						1,501,976	1,214,692		287,284

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Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) .

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e Other .

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51,963

9,607,079

1,218,699

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1,270,662

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Schedule	D	Form	990'	2013
Scheuule			990,	12013

Part VIII Investments-Other Securities. Com	plete if the organization	answered 'Yes' to Form 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. Cor	nplete if the organizatio	n answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13.	(b) Deelevelue	(a) Mathad a furshina a
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		
		_ 0, Part IV, line 11d See Form 990, Part X, line 15
(a) Descrip		(b) Book value
(1) Supplies and Deferred Expenses		244,230
(2) Unfunded Pension Receivable - affiliates		10,447,771
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15		
Part X Other Liabilities. Complete if the organ Form 990, Part X, line 25.	ization answered 'Yes' t	o rothi 330, Part IV, lille 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
Accrued payroll and payroll taxes	103,405	
Accrued PTO & sick leave	1,138,351	
Accrued post retirement benefits	1,782,442	
Dues collected, payable to affiliates	835,640	
Accrued pension contribution	47,903,987	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	51,763,825	

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Γ

Schedule	D	Form	990)	2013

Par	XI Reconciliation of Revenue per Audited Financial Statements With Revenue the organization answered 'Yes' to Form 990, Part IV, line 12a.	per Reti	ırn Complete ıf
1	Total revenue, gains, and other support per audited financial statements	1	34,950,684
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
е	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	34,950,684
4	Amounts included on Form 990, Part VIII, line 12, but not on line ${f 1}$		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
с	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	34,950,684
Par 1	XII Reconciliation of Expenses per Audited Financial Statements With Expense If the organization answered 'Yes' to Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements	sperRe	32,961,503
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		52,901,505
ے a	Donated services and use of facilities		
b	Prior year adjustments	-	
c	Other losses	-	
d	Other (Describe in Part XIII)	-	
e	Add lines 2a through 2d	2e	0
3		3	32,961,503
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		52,501,505
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
a b	Other (Describe in Part XIII)	-	
c		4c	0
_	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	4C 5	0
5	rotar expenses Add lines 3 and 4c. (rms must equal Form 990, Part 1, line 10)	2	32,961,503
Dar	XIII Supplemental Information		

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation

Part XIII Supplemental Info	prmation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2013

Schedule I (Form 990) Department of the Treasury Internal Revenue Service	ent of the Treasury Revenue Service Comparison about Schedule I (Form 990) and its instructions is at <u>www.irs.gov/form990</u>.											
Name of the organization Washington Education Association						Employer identificat	ion number					
-						91-0460645						
Part I General Information 1 Does the organization maintain r the selection criteria used to awa 2 Describe in Part IV the organization Part II Grants and Other As Form 990, Part IV, line	ecords to substanti ard the grants or as tion's procedures fo ssistance to Go	ate the amount of the sistance? or monitoring the use o vernments and O	f grant funds in the Unite rganizations in the	ed States United States. Con	nplete if the organ	۰۰۰۰۰ nızatıon answered "۱	マYes 「No 'es" to					
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
See Additional Data Table												

Schedule I (Form 990) 2013

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistanc	e (b) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e) Method of valuation (book, FMV , appraisal, other)	(f)Description of non-cash assistance
Part IV Supplemental In	formation. Provide the inf	formation required in	Part I, line 2, Part III, co	lumn (b), and any other a	dditional information.
Return Reference	Explanation				
Part I, Line 2	Grants or assistance is only pr	ovided to organizations l	ocated within the United Stat	tes sharing common interests	

Schedule I (Form 990) 2013

Additional Data

Software ID:

Software Version:

EIN: 91-0460645

Name: Washington Education Association

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Economic Opportunity Institute 1900 N Northlake Way Seattle, WA 98103	91-1999302	501(c)(3)	25,000				Provide support to organizations that share common interests

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Washington Community Action Network 220 S River St 11 Seattle, WA 98108	91-1259403	501(c)(3)	9,216				Provide support to organizations that share common interests

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Win Win Action 1402 3rd Ave Ste 201 Seattle, WA 98101	26-3921408	501(c)(4)	9,000				Provide support to organizations that share common interests

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Fairtest 15 Court Square 820 Boston, MA 02130	22-2653502	501(c)(3)	5,000				Provide support to organizations that share common interests

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Class Size Counts 603 Stewart St 819 Seattle, WA 98101	46-3039002	501(c)(4)	1,000,000				Provide support to organizations that share common interests

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Sea Mar Comm Health Centers 1040 S Henderson St Seattle, WA 98108	91-1020139	501(c)(3)	5,000				Provide support to organizations that share common interests

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SW Youth and Family Services 4555 Delridge Way SW Seattle, WA 98106	91-1117862	501(c)(3)	10,000				Provide support to organizations that share common interests

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WA Progress Alliance 1402 3rd Ave Ste 201 Seattle, WA 98101	20-4258530	501(c)(4)	5,500				Provide support to organizations that share common interests

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YES SeaTac PO Box 69257 Seattle, WA 98168	46-2635995	501(c)(4)	5,000				Provide support to organizations that share common interests

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Fuse Washington 1402 3rd Ave Ste 310 Seattle, WA 98101	27-0573960	501(c)(4)	5,000				Provide support to organizations that share common interests

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Step Forward 603 Stewart St 819 Seattle, WA 98101	46-5341671	501(c)(4)	6,500				Provide support to organizations that share common interests

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NTHF Memorial 1200 Commercial Campus Box 4014 Emporia,KS 66801	48-1085948	501(c)(3)	5,000				Provide support to organizations that share common interests

efil	le GRAPHIC p	orint - DO NOT PROCESS	As Filed	Data -		DLN: 9	9349309	7006	375
Sch	edule J	Cor	npensa	tion Inf	ormation		OMBNo 1	545-0	047
(Form 990)		For certain Officers	est	20	13)			
			nization ans		s" to Form 990, Part IV,	line 23.	Open to		
	nent of the Treasury Revenue Service	► Attach t Information about Schedule			parate instructions. structions is at www.irs	.aov/form990.	Inspe		
	ne of the organiz	zation	, (1 0111 550) and ico ii	scructions is at <u>minimis</u>	Employer ident if			
Was	hington Education A	ssociation				01 0460645			
Pa	rt I Questi	ons Regarding Compensat	tion			91-0460645			
1 (2)	Quebe	one Regularing compensat						Yes	No
1a		opiate box(es) if the organization Section A , line 1a Complete Part							
	First-class	or charter travel		Housing a	llowance or residence for	personal use			
	✓ Travel for a	companions	Г	Payments	for business use of pers	onal residence			
		ification and gross-up payments	Г		social club dues or initiat				
	Discretion	ary spending account	Г	Personal	services (e g , maid, chau	iffeur, chef)			
b		xes in line 1a are checked, did the or provision of all of the expenses							
`						•	1b	Yes	
2		ation require substantiation prior ees, officers, including the CEO/E					2	Yes	
3	organization's o used by a relate Compensa Independe	, if any, of the following the filing o CEO/Executive Director Check a ed organization to establish comp tion committee nt compensation consultant of other organizations	ll that apply	/ Do not c the CEO/E Written er Compens	neck any boxes for metho	ids kplain in Part III			
1	During the year or a related org	r, dıd any person lısted ın Form 99 anızatıon	90, Part VII	, Section A	, line 1a with respect to t	the filing organizat	ion		
а	Receive a seve	rance payment or change-of-cont	trol paymen	t?			4a		No
b	Participate in, o	or receive payment from, a supple	mental non	qualified re	tırement plan?		4b		No
С	Participate in, o	or receive payment from, an equity	y-based cor	npensatioi	n arrangement?		4 c		No
	If "Yes" to any	of lines 4a-c, list the persons and	d provide th	e applicab	e amounts for each item	ın Part III			
5	For persons list	and 501(c)(4) organizations only ted in Form 990, Part VII, Section contingent on the revenues of	-			any			
а	The organizatio	002					5a		
Ь	Any related org						5b		
	If "Yes," to line	e 5a or 5b, describe in Part III							
6		ted in Form 990, Part VII, Section contingent on the net earnings of	n A, line 1a,	, dıd the or	ganızatıon pay or accrue	any			
а	The organizatio	on?					6a		
b	Any related org	janization?					6b		
	If "Yes," to line	e 6a or 6b, describe in Part III							
7		ted in Form 990, Part VII, Section lescribed in lines 5 and 6? If "Yes				n-fixed	7		
8		nts reported in Form 990, Part VI nitial contract exception describe					8		
9	If "Yes" to line section 53 495	8, dıd the organızatıon also follow 58-6(c)?	the rebutta	ible presur	nption procedure describ	ed in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown o'	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred In prior Form 990
See Additional Data Table	·'	· · · · · · · · · · · · · · · · · · ·	· ′				

Schedule J (Form 990) 2013

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Return Reference	Explanation
Part I, Line 1a	The Organization pays travel cost for family members accompanying officers while they attend business functions

Schedule J (Form 990) 2013

Software ID:

Software Version:

EIN: 91-0460645

Name: Washington Education Association

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Torin 330, Schedule 3, Part		onicers, birecu	is, indstees, key	Employees, and	ingliest compense	acca Employees		
(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred		(E) Total of columns	(F) Compensation reported in prior Form
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
Margaret Knight Chief Financial Officer	(1) (11)	157,437 0	0	0	56,838 0	16,474 0	230,749 0	0 0
John Okamoto Executive Director	(1) (11)	2 2 7 ,7 4 0 0	0	0	82,044 0	23,696 0	333,480 0	0 0
Aımee Iverson General Counsel	(1) (11)		0	0	57,810 0	23,716 0	235,392 0	0 0
James Fotter Dırector/Organızıng and Ad	(1) (11)		0 0	0 0	57,910 0	24,169 0	249,427 0	0 0
Manuel Bosser Dırector/Human Resources	(1) (11)	164,051 0	0 0	0 0	58,917 0	30,394 0	2 5 3 , 36 2 0	0 0
Lısa Kodama Dırector/Learnıng and Educ	(1) (11)	155,201 0	0 0	0 0	59,388 0	23,716 0	238,305 0	0 0
Glenn Bafia Manager/UniServ	(1) (11)		0	0	55,946 0	24,169 0	242,352 0	0 0
James Regan Dırector/Governmental Rela	(1) (11)	198,786 0	0	0 0	70,387 0	21,942 0	291,115 0	0 0
Mıchael Horner UnıServ Representatıve	(1) (11)		0	0 0	49,377 0	20,272 0	218,601 0	0 0
Scott Poirier Coord /Ed Policy Issues	(1) (11)	149,242 0	0	0	49,450 0	27,183 0	225,875 0	0 0
Gary McNeil Higher Ed/UFWS Org	(1) (11)		0	0	49,556 0	21,750 0	220,206 0	0 0
Dale Folkerts Media Coordinator	(1) (11)	146,688 0	0	0	49,799 0	21,483 0	217,970 0	0
Lında Mullen Dırector/Communications	(1) (11)	149,296 0	0	0 0	52,986 0	30,394 0	232,676 0	0 0

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SCHEDULE O				OMBNo 1545-0047				
(Form 990 or 990-EZ)	Supplemental Internation to Form 990 or 990 F/							
Department of the Treasury Internal Revenue Service	· · ·	Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. Attach to Form 990 or 990-EZ.						
	Information about	Schedule O (Form 990 o www.irs.gov/fo	or 990-EZ) and its instructions is at m990.					
Name of the organization Washington Education Associati			Employe	r identification number				
Hushington Education Associati			91-0460	0645				

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section A, line 2	Stephen Miller and Michele Miller are married
Form 990, Part VI, Section A, line 6	The Organization has dues paying members that are public school employees in the State of Washington These members have the right to vote for members of the Board of Directors
Form 990, Part VI, Section A, line 7a	Membership annually elects the Board of Directors
Form 990, Part VI, Section B, line 11	The Form 990 is reviewed by members of the Budget and Finance Committee of the Board of Directors prior to filing
Form 990, Part VI, Section B, line 12c	Any identified conflicts are addressed as provided for in the Board approved conflict of interest document
Form 990, Part VI, Section B, line 15	The compensation determination process includes approval by the Executive Committee of the Board of Directors, comparisons to other organizations, and is documented in Board minute s Officer/Key Employee compensation is determined as employment contracts are established and renew ed President and Vice President/Treasurer compensation is set by Board policy Ongoing compensation is periodically review ed by the Executive Committee or during contract t renew als
Form 990, Part VI, Section C, line 18	Forms are available upon request at the Organization's headquarters
Form 990, Part VI, Section C, line 19	Governing documents are available upon request at the Organization's headquarters and are available on the Organization's website
Form 990, Part XI, line 9	Adjustment for change in unfunded pension liability -8,184,063