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CLIENT'S COPY

The Ozurovich Group, Inc.
1901 Avenue of the Stars, Suite 1050
Los Angeles, CA 90067
310-226-7576 Fax 310-226-7595

March 19, 2018

Association For Waldorf Education
IN San Diego
3547 Altadena Avenue
San Diego, CA 92105

Association For Waldorf Education IN San Diego:

Enclosed is the organization's 2016 Exempt Organization return. The state Exempt Organization return and Annual Report are also enclosed. These should be signed, dated, and mailed, as indicated.

Specific filing instructions are as follows.

FORM 990 RETURN:

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-EO to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS.

CALIFORNIA FORM 199 RETURN:

The California Form 199 return has been prepared for electronic filing. If you wish to have it transmitted electronically to the FTB, please sign, date and return Form 8453-EO to our office. We will then submit the electronic return to the FTB. Do not mail the paper copy of the return to the FTB.

No payment is required.

CALIFORNIA FORM RRF-1:

The California Form RRF-1 should be mailed as soon as possible to:

Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470

Enclose a check or money order for \$150.00, payable to

Attorney General Registry of Charitable Trusts.

The report should be signed and dated by the authorized individual(s).

Copies of all the returns are enclosed for your files. We suggest that you retain these copies indefinitely.

Sincerely,

The Ozurovich Group, Inc.

THE OZUROVICH GROUP, INC.
1901 AVENUE OF THE STARS, SUITE 1050
LOS ANGELES, CA 90067
310-226-7576 FAX 310-226-7595

March 19, 2018

Association For Waldorf Education
IN San Diego
3547 Altadena Avenue
San Diego, CA 92105

Association For Waldorf Education IN San Diego:

Enclosed are the original and one copy of the 2016 Exempt
Organization returns, as follows...

2016 Form 990

2016 California Form 199

2016 California Form RRF-1

Each original should be dated, signed and filed in accordance
with the filing instructions. The copy should be retained
for your files.

Sincerely,

The Ozurovich Group, Inc.

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

June 30, 2017

Prepared for	Association For Waldorf Education IN San Diego 3547 Altadena Avenue San Diego, CA 92105
Prepared by	The Ozurovich Group, Inc. 1901 Avenue of the Stars #1050 Los Angeles, CA 90067
Amount due or refund	Not applicable
Make check payable to	Not applicable
Mail tax return and check (if applicable) to	Not applicable
Return must be mailed on or before	Not applicable
Special Instructions	This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-EO to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS.

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2016, or fiscal year beginning JUL 1, 2016, and ending JUN 30, 2017

2016

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**

▶ **Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.**

Name of exempt organization

**ASSOCIATION FOR WALDORF EDUCATION
IN SAN DIEGO**

Employer identification number

95-3641387

Name and title of officer

**PATRICK GODDARD
TREASURER**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a**, **2a**, **3a**, **4a**, or **5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, or **5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	1b <u>5,079,475.</u>
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b _____
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b _____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2016 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize THE OZUROVICH GROUP, INC. to enter my PIN 95364
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the organization's tax year 2016 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2016 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ _____ Date ▶ _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

95660295450

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2016 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ _____

**ERO Must Retain This Form - See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So**

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2016)

623051 09-26-16

Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2016 calendar year, or tax year beginning **JUL 1, 2016** and ending **JUN 30, 2017**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization ASSOCIATION FOR WALDORF EDUCATION IN SAN DIEGO Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 3547 ALTADENA AVENUE City or town, state or province, country, and ZIP or foreign postal code SAN DIEGO, CA 92105 F Name and address of principal officer: PATRICK GODDARD SAME AS C ABOVE	D Employer identification number 95-3641387 E Telephone number 619-287-3054 G Gross receipts \$ 5,656,358. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ HTTP://WWW.WALDORFSANDIEGO.ORG/		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1981 M State of legal domicile: CA

Part I Summary

Part I	1 Briefly describe the organization's mission or most significant activities: MAKE WALDORF EDUCATION AVAILABLE TO ALL CHILDREN IN THE SAN DIEGO AREA. 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 11 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 7 5 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 94 6 Total number of volunteers (estimate if necessary) 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 7b 0.																			
Revenue	8 Contributions and grants (Part VIII, line 1h) 275,466. 269,219. 9 Program service revenue (Part VIII, line 2g) 4,303,978. 4,628,664. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 203. 203. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 216,972. 181,389. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 4,796,619. 5,079,475.	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:50%;"></th> <th style="width:25%;">Prior Year</th> <th style="width:25%;">Current Year</th> </tr> </thead> <tbody> <tr> <td>8 Contributions and grants (Part VIII, line 1h)</td> <td style="text-align:right">275,466.</td> <td style="text-align:right">269,219.</td> </tr> <tr> <td>9 Program service revenue (Part VIII, line 2g)</td> <td style="text-align:right">4,303,978.</td> <td style="text-align:right">4,628,664.</td> </tr> <tr> <td>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td> <td style="text-align:right">203.</td> <td style="text-align:right">203.</td> </tr> <tr> <td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td> <td style="text-align:right">216,972.</td> <td style="text-align:right">181,389.</td> </tr> <tr> <td>12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td> <td style="text-align:right">4,796,619.</td> <td style="text-align:right">5,079,475.</td> </tr> </tbody> </table>		Prior Year	Current Year	8 Contributions and grants (Part VIII, line 1h)	275,466.	269,219.	9 Program service revenue (Part VIII, line 2g)	4,303,978.	4,628,664.	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	203.	203.	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	216,972.	181,389.	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,796,619.	5,079,475.
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Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 490,382. 487,751. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2,902,094. 3,056,090. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. b Total fundraising expenses (Part IX, column (D), line 25) ▶ 103,965. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,147,583. 1,261,600. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 4,540,059. 4,805,441. 19 Revenue less expenses. Subtract line 18 from line 12 256,560. 274,034.	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:50%;"></th> <th style="width:25%;">Beginning of Current Year</th> <th style="width:25%;">End of Year</th> </tr> </thead> <tbody> <tr> <td>20 Total assets (Part X, line 16)</td> <td style="text-align:right">5,998,736.</td> <td style="text-align:right">6,186,378.</td> </tr> <tr> <td>21 Total liabilities (Part X, line 26)</td> <td style="text-align:right">4,684,839.</td> <td style="text-align:right">4,598,447.</td> </tr> <tr> <td>22 Net assets or fund balances. Subtract line 21 from line 20</td> <td style="text-align:right">1,313,897.</td> <td style="text-align:right">1,587,931.</td> </tr> </tbody> </table>		Beginning of Current Year	End of Year	20 Total assets (Part X, line 16)	5,998,736.	6,186,378.	21 Total liabilities (Part X, line 26)	4,684,839.	4,598,447.	22 Net assets or fund balances. Subtract line 21 from line 20	1,313,897.	1,587,931.						
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Part II Signature Block

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 PATRICK GODDARD, TREASURER Type or print name and title	Date
Paid Preparer Use Only	Print/Type preparer's name ANDREW J. OZUROVICH Preparer's signature Date Check if self-employed <input type="checkbox"/> PTIN P00736945 Firm's name ▶ THE OZUROVICH GROUP, INC. Firm's EIN ▶ 95-4502766 Firm's address ▶ 1901 AVENUE OF THE STARS #1050 LOS ANGELES, CA 90067 Phone no. (310) 226-7576	Date

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

ASSOCIATION FOR WALDORF EDUCATION
IN SAN DIEGO

Form 990 (2016)

95-3641387 Page 2

Part III 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:
**TO AWAKEN EACH STUDENT'S CAPACITY FOR LOVE OF LEARNING, FOR
INDEPENDENT THINKING, AND FOR HEARTFELT SERVICE TO THE WORLD. MAKE
WALDORF EDUCATION AVAILABLE TO ALL CHILDREN IN THE SAN DIEGO AREA
THROUGH ACTIVE ENGAGEMENT WITH FAMILIES OF ALL ETHNIC, SPRITUAL, AND**

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
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? Yes No
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 \$ 3,889,375. including grants of \$ 487,751.) (Revenue \$ 4,698,424.)
**K-12 EDUCATION. WALDORF SCHOOLS OFFER A DEVELOPMENTALLY APPROPRIATE,
EXPERINTIAL APPROACH TO EDUCATION. THEY INTEGRATE THE ARTS AND
ACADEMICS FOR CHILDREN FROM PRESCHOOL THROUGH TWELFTH GRADE. THE AIM OF
THE EDUCATION IS TO INSPIRE LIFE-LONG LEARNING IN EACH STUDENT AND
ENABLE THEM TO FULLY DEVELOP THEIR UNIQUE CAPACITIES. FOUNDED IN
GERMANY IN THE EARLY 20TH CENTURY, WALDORF EDUCATION IS AN INDEPENDENT
AND INCLUSIVE FORM OF EDUCATION BASED ON THE INSIGHTS AND TEACHING OF
RENOWNED ANTROPOSOPHIST, ARTIST, AND SCIENTIST, RUDOLF STEINER.
EVOLVING FROM A PROFOUND UNDERSTANDING OF THE HUMAN SPIRIT AND HUMAN
DEVELOPMENT, WALDORF EDUCATION IS REGIONALLY ADAPTIVE AND HAS GROWN TO
INCLUDE HUNDREDS OF SCHOOLS WORLDWIDE. 315 STUDENTS WERE ENROLLED FOR
2016/2017 SCHOOL YEAR.**

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **3,889,375.**

Form 990 (2016)

**ASSOCIATION FOR WALDORF EDUCATION
IN SAN DIEGO**

Part 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>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors?</i>	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
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>		X
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>		X
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 I</i>		X
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>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
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>		X
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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
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>		X
c 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>		X
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>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
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>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	X	
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
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>		X
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>		X
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</i>		X
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>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

**ASSOCIATION FOR WALDORF EDUCATION
IN SAN DIEGO**

Form 990 (2016)

95-3641387 Page 4

Part IV Checklist of Required Schedules *(continued)*

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
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>		X
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>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b 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>		X
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 "Yes," complete Schedule L, Part II</i>		X
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>		X
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):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c 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>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
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>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
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>		X
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>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
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>		X
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	X	

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Part 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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	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		
2b	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)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		
4a	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)?		X
4b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
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?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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?		X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	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?		
12b	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.		
13a	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.		
13b	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		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section 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.	1a	11		
b Enter the number of voting members included in line 1a, above, who are independent	1b	7		
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			X
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			X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6 Did the organization have members or stockholders?	6			X
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			X
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			X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?	8a		X	
b Each committee with authority to act on behalf of the governing body?	8b		X	
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			X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a			X
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		X	
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		X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		X	
13 Did the organization have a written whistleblower policy?	13		X	
14 Did the organization have a written document retention and destruction policy?	14		X	
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?				
a The organization's CEO, Executive Director, or top management official	15a		X	
b Other officers or key employees of the organization	15b		X	
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			X
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			

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **▶ CA**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 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, address, and telephone number of the person who possesses the organization's books and records: **▶**
KIM GALVIN - 619-287-3054
3547 ALTADENA AVENUE, SAN DIEGO, CA 92105

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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, and 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.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BONNIE HOLDEN TEACHER/BOARD MEMBER	40.00	X					75,000.	0.	0.	
(2) ANDREW KEMAL PRESIDENT	5.00	X		X			0.	0.	0.	
(3) BRANDON ISELIN-BRADLEY BOARD MEMBER	2.00	X					0.	0.	0.	
(4) PATRICK GODDARD TREASURER	2.00	X		X			0.	0.	0.	
(5) ANTHONY CIRONE DEV. DIRECTOR/BOARD MEMBER	40.00	X		X			74,500.	0.	0.	
(6) LYNNE ROSS-WITSCHER TEACHER/BOARD MEMBER	40.00	X					63,082.	0.	0.	
(7) DOMINICK ARENA BOARD MEMBER	2.00	X					0.	0.	0.	
(8) RACHEL DAVIS ADMINISTRATOR/BOARD MEMBER	40.00	X		X			74,000.	0.	0.	
(9) MARY CARMICHAEL TEACHER/BOARD MEMBER	40.00	X					61,082.	0.	0.	
(10) MIREILLE CRONIN MATHER BOARD MEMBER	2.00	X					0.	0.	0.	
(11) ERIC MITCHELL SECRETARY	5.00	X		X			0.	0.	0.	
(12) MICAH PARZEN BOARD MEMBER	2.00	X					0.	0.	0.	

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Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line 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	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	269,219.				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f		269,219.				
Program Service Revenue	2 a TUITION	Business Code 611710	4,156,220.	4,156,220.			
	b SCHOOL FEES	611710	215,162.	215,162.			
	c FIELD TRIP REVENUE	611710	183,049.	183,049.			
	d EXTENDED CARE	611710	74,233.	74,233.			
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f		4,628,664.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		203.			203.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	35,988.				
		(ii) Personal	0.				
		c Rental income or (loss)	35,988.				
	d Net rental income or (loss)		35,988.			35,988.	
	7 a Gross amount from sales of assets other than inventory	(i) Securities					
		(ii) Other					
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)					
	d Net gain or (loss)						
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a	120,658.					
	b Less: direct expenses	45,017.					
	c Net income or (loss) from fundraising events		75,641.			75,641.	
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses						
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a	600,757.					
	b Less: cost of goods sold	531,866.					
	c Net income or (loss) from sales of inventory		68,891.	68,891.			
Miscellaneous Revenue		Business Code					
11 a MISCELLANEOUS		611710	869.	869.			
	b						
	c						
	d All other revenue						
e Total. Add lines 11a-11d			869.				
12 Total revenue. See instructions.			5,079,475.	4,698,424.	0.	111,832.	

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 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 domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	487,751.	487,751.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
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	2,586,583.	2,120,063.	389,062.	77,458.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	274,355.	224,872.	41,267.	8,216.
10 Payroll taxes	195,152.	159,954.	29,354.	5,844.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	16,162.		16,162.	
d Lobbying				
e 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 Sch O.)	32,270.		32,270.	
12 Advertising and promotion	3,675.		3,675.	
13 Office expenses	10,123.		10,123.	
14 Information technology				
15 Royalties				
16 Occupancy	232,707.	174,530.	58,177.	
17 Travel	4,596.	4,596.		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	175,487.	122,841.	52,646.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	145,081.	116,065.	29,016.	
23 Insurance	62,144.		62,144.	
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 FIELD TRIPS AND CLASSRO	216,194.	216,194.		
b CLASSROOM SUPPLIES	127,418.	127,418.		
c UTILITIES	59,149.	47,319.	11,830.	
d PROFESSIONAL DEVELOPMEN	36,679.	36,679.		
e All other expenses SEE SCH O	139,915.	51,093.	76,375.	12,447.
25 Total functional expenses. Add lines 1 through 24e	4,805,441.	3,889,375.	812,101.	103,965.
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 if following SOP 98-2 (ASC 958-720)

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Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing	341,718.	1	516,581.	
	2 Savings and temporary cash investments	201,921.	2	202,123.	
	3 Pledges and grants receivable, net	52,424.	3	37,194.	
	4 Accounts receivable, net	28,046.	4	76,898.	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L			6	
	7 Notes and loans receivable, net			7	
	8 Inventories for sale or use	85,392.	8	73,242.	
	9 Prepaid expenses and deferred charges	235.	9	1,636.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	6,172,845.	10a		
	b Less: accumulated depreciation	980,088.	10b		
	11 Investments - publicly traded securities			11	
	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	55,063.	15	85,947.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	5,998,736.	16	6,186,378.		
Liabilities	17 Accounts payable and accrued expenses	115,061.	17	97,755.	
	18 Grants payable		18		
	19 Deferred revenue	443,740.	19	479,866.	
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	
	23 Secured mortgages and notes payable to unrelated third parties	4,108,872.	23	4,003,775.	
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	17,166.	25	17,051.	
	26 Total liabilities. Add lines 17 through 25	4,684,839.	26	4,598,447.	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	1,099,195.	27	1,394,843.	
	28 Temporarily restricted net assets	214,702.	28	193,088.	
	29 Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
33 Total net assets or fund balances	1,313,897.	33	1,587,931.		
34 Total liabilities and net assets/fund balances	5,998,736.	34	6,186,378.		

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Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,079,475.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,805,441.
3	Revenue less expenses. Subtract line 2 from line 1	3	274,034.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,313,897.
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	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,587,931.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____		X
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 _____		

ASSOCIATION FOR WALDORF EDUCATION

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...						
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test - 2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
1		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 Activities Test. Answer (a) and (b) below.		Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.			
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
3 Parent of Supported Organizations. Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
2a			
2b			
3a			
3b			

ASSOCIATION FOR WALDORF EDUCATION

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

ASSOCIATION FOR WALDORF EDUCATION

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations *(continued)*

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2016 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI). See instructions			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
6 Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
7 Excess distributions carryover to 2017. Add lines 3j and 4c			
8 Breakdown of line 7:			
a			
b Excess from 2013			
c Excess from 2014			
d Excess from 2015			
e Excess from 2016			

ASSOCIATION FOR WALDORF EDUCATION

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Multiple horizontal lines for supplemental information.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**
▶ **Attach to Form 990.**

OMB No. 1545-0047

2016

Open to Public Inspection

▶ **Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.**

Name of the organization **ASSOCIATION FOR WALDORF EDUCATION IN SAN DIEGO** **Employer identification number** **95-3641387**

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2016

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IN SAN DIEGO**

Schedule D (Form 990) 2016

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Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other _____
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ _____ %
 - b** Permanent endowment ▶ _____ %
 - c** Temporarily restricted endowment ▶ _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|---------------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,553,796.		1,553,796.
b Buildings		4,323,171.	819,047.	3,504,124.
c Leasehold improvements				
d Equipment		45,393.	15,167.	30,226.
e Other		250,485.	145,874.	104,611.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				5,192,757.

Schedule D (Form 990) 2016

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IN SAN DIEGO**

Schedule D (Form 990) 2016

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Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ACCRUED LIABILITIES	17,051.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	17,051.

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

Schedule D (Form 990) 2016

**ASSOCIATION FOR WALDORF EDUCATION
IN SAN DIEGO**

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	5,168,607.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	576,883.	
e	Add lines 2a through 2d		2e	576,883.
3	Subtract line 2e from line 1		3	4,591,724.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	487,751.	
c	Add lines 4a and 4b		4c	487,751.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	5,079,475.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	4,894,573.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	576,883.	
e	Add lines 2a through 2d		2e	576,883.
3	Subtract line 2e from line 1		3	4,317,690.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	487,751.	
c	Add lines 4a and 4b		4c	487,751.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	4,805,441.

Part 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.

PART X, LINE 2:

THE SCHOOL HAS ADPOTED THE PROVISIONS OF ACCOUNTING STANDARDS CODIFICATION ("ASC") 740-10-05 RELATING TO ACCOUNTING AND REPORTING FOR UNCERTAINTY IN INCOME TAXES. FOR THE SCHOOL, THESE PROVISIONS COULD BE APPLICABLE TO INCURRANCE OF ANY UNRELATED BUSINESS INCOME ATTRIBUTABLE TO THE SCHOOL. BECAUSE OF THE SCHOOL'S GENERAL TAX-EXEMPT STATUS, ASC 740-10-05 IS NOT ANTICIPATED TO HAVE A MATERIAL IMPACT ON THE SCHOOL'S FINANCIAL STATEMENTS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENTS EXPENSES

COST OF GOODS SOLD

ASSOCIATION FOR WALDORF EDUCATION
IN SAN DIEGO

Part XIII Supplemental Information (continued)

PART XI, LINE 4B - OTHER ADJUSTMENTS:

GRANTS AND ASSISTANCE

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENTS EXPENSES

COST OF GOODS SOLD

PART XII, LINE 4B - OTHER ADJUSTMENTS:

GRANTS AND ASSISTANCE

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.**
▶ **Attach to Form 990 or Form 990-EZ.**

OMB No. 1545-0047

2016

Open to Public Inspection

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

Name of the organization **ASSOCIATION FOR WALDORF EDUCATION IN SAN DIEGO** Employer identification number **95-3641387**

Part I

	YES	NO
1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	X	
2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	X	
3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	X	
THE SCHOOL PUBLICIZES ITS RACIALLY NONDISCRIMINATORY POLICY THROUGH THE USE OF ITS SCHOOL WEBSITE.		
4 Does the organization maintain the following?		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	X	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	X	
d Copies of all material used by the organization or on its behalf to solicit contributions?	X	
If you answered "No" to any of the above, please explain. If you need more space, use Part II.		
5 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		X
b Admissions policies?		X
c Employment of faculty or administrative staff?		X
d Scholarships or other financial assistance?		X
e Educational policies?		X
f Use of facilities?		X
g Athletic programs?		X
h Other extracurricular activities?		X
If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.		
6a Does the organization receive any financial aid or assistance from a governmental agency?		X
b Has the organization's right to such aid ever been revoked or suspended?		X
If you answered "Yes" on either line 6a or line 6b, explain on Part II.		
7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	X	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ.

Schedule E (Form 990 or 990-EZ) 2016

ASSOCIATION FOR WALDORF EDUCATION

Part II **Supplemental Information.** Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable.

Also provide any other additional information.

Horizontal lines for supplemental information.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization **ASSOCIATION FOR WALDORF EDUCATION
IN SAN DIEGO** Employer identification number **95-3641387**

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a** Mail solicitations
 - b** Internet and email solicitations
 - c** Phone solicitations
 - d** In-person solicitations
 - e** Solicitation of non-government grants
 - f** Solicitation of government grants
 - g** Special fundraising events
- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**
- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total	▶					

- 3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

ASSOCIATION FOR WALDORF EDUCATION

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		GALA EVENT (event type)	WINTER FAIRE (event type)	1 (total number)		
Revenue	1	Gross receipts	87,051.	23,144.	10,463.	120,658.
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)	87,051.	23,144.	10,463.	120,658.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs	1,800.			1,800.
	7	Food and beverages	9,465.			9,465.
	8	Entertainment				
	9	Other direct expenses	13,076.	11,233.	9,444.	33,753.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				45,018.
11	Net income summary. Subtract line 10 from line 3, column (d)				75,640.	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
 b If "Yes," explain: _____

Part IV Supplemental Information *(continued)*

Multiple horizontal lines for supplemental information.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public
Inspection

Name of the organization **ASSOCIATION FOR WALDORF EDUCATION
IN SAN DIEGO**

Employer identification number
95-3641387

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ _____
- 3** Enter total number of other organizations listed in the line 1 table ▶ _____

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2016)

**ASSOCIATION FOR WALDORF EDUCATION
IN SAN DIEGO**

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
TUITION ASSISTANCE	0	487,751.	0.	BOOK-COST OF TUITION	

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

FINANCIAL AID IS BASED ON NEED. A TUITION MANAGEMENT COMPANY COLLECTS
 INFORMATION FROM THE FAMILIES SEEKING TUITION ASSISTANCE AND COMPILES
 FINANCIAL REPORTS. A TUITION ASSISTANCE COMMITTEE THEN REVIEWS THE REPORTS
 AND DETERMINES AWARDS.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

2016

Open to Public
Inspection

Name of the organization ASSOCIATION FOR WALDORF EDUCATION IN SAN DIEGO	Employer identification number 95-3641387
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FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SOCIOECONOMIC BACKGROUNDS.

FORM 990, PART VI, SECTION B, LINE 11B:

FORM 990 IS REVIEWED BY THE FINANCE COMMITTEE, COMPRISED OF AT LEAST ONE BOARD MEMBER, AND IS ALSO REVIEWED BY BUSINESS STAFF AT THE SCHOOL SITE. ONCE THE REVIEW IS COMPLETE, IT IS PROVIDED TO THE ENTIRE BOARD IN A BOARD MEETING.

FORM 990, PART VI, SECTION B, LINE 12C:

THE SCHOOL MONITORS AND ENFORCES ITS CONFLICTS OF INTEREST POLICY BY THE FORM OF DISCUSSION/QUESTIONING DURING BOARD MEETINGS AND GROUP MEETINGS.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION OF OFFICERS, MANAGEMENT, AND KEY EMPLOYEES IS DETERMINED BY THE BOARD OF DIRECTORS BASED UPON AVAILABILITY OF FUNDS AND COMPARABLE SALARIES IN THE AREA. THE BOARD HAS CURRENTLY ESTABLISHED A PAYSACLE BASED UPON COMPARABLE SALARIES IN THE AREA.

FORM 990, PART VI, SECTION C, LINE 18:

THE SCHOOL MAKES IT'S DOCUMENTS AVAILABLE FOR INSPECTION UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19:

AVAILABLE UPON REQUEST

FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSES:

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2016)

Name of the organization	ASSOCIATION FOR WALDORF EDUCATION IN SAN DIEGO	Employer identification number	95-3641387
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MEMBERSHIP DUES:

PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	26,206.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	26,206.

TUITION PROTECTION PLAN:

PROGRAM SERVICE EXPENSES	24,315.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	24,315.

TELEPHONE:

PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	14,911.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	14,911.

EQUIPMENT RENTAL:

PROGRAM SERVICE EXPENSES	10,663.
MANAGEMENT AND GENERAL EXPENSES	2,666.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	13,329.

EDUCATIONAL SUPPORT & DEVELOPMENT EXPENSES:

PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	12,447.

Name of the organization	ASSOCIATION FOR WALDORF EDUCATION IN SAN DIEGO	Employer identification number	95-3641387
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TOTAL EXPENSES	12,447.
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FINANCE CHARGES AND MERCHANT FEES:

PROGRAM SERVICE EXPENSES	0.
--------------------------	----

MANAGEMENT AND GENERAL EXPENSES	11,507.
---------------------------------	---------

FUNDRAISING EXPENSES	0.
----------------------	----

TOTAL EXPENSES	11,507.
----------------	---------

PROPERTY TAX:

PROGRAM SERVICE EXPENSES	7,209.
--------------------------	--------

MANAGEMENT AND GENERAL EXPENSES	3,089.
---------------------------------	--------

FUNDRAISING EXPENSES	0.
----------------------	----

TOTAL EXPENSES	10,298.
----------------	---------

SECURITY:

PROGRAM SERVICE EXPENSES	8,906.
--------------------------	--------

MANAGEMENT AND GENERAL EXPENSES	0.
---------------------------------	----

FUNDRAISING EXPENSES	0.
----------------------	----

TOTAL EXPENSES	8,906.
----------------	--------

BAD DEBT EXPENSES:

PROGRAM SERVICE EXPENSES	0.
--------------------------	----

MANAGEMENT AND GENERAL EXPENSES	8,717.
---------------------------------	--------

FUNDRAISING EXPENSES	0.
----------------------	----

TOTAL EXPENSES	8,717.
----------------	--------

BORAD EXPENSES:

PROGRAM SERVICE EXPENSES	0.
--------------------------	----

Name of the organization	ASSOCIATION FOR WALDORF EDUCATION IN SAN DIEGO	Employer identification number	95-3641387
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MANAGEMENT AND GENERAL EXPENSES	4,318.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	4,318.

MISCELLANEOUS:

PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	3,365.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	3,365.

OUTREACH PROGRAM:

PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	1,596.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	1,596.

TOTAL OTHER EXPENSES ON FORM 990, PART IX, LINE 24E, COL A 139,915.

FORM 990, PART XII, LINE 2C:

THE SCHOOL HAS NOT CHANGED ITS OVERSIGHT PROCESS.

2016 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	FURNITURE & FIXTURES														
5	2ND GRADE CHAIRS	08/25/05	SL	5.00		16	1,496.				1,496.	1,496.		0.	1,496.
6	PHONE SYSTEM	08/25/05	SL	10.00		16	3,250.				3,250.	3,250.		0.	3,250.
7	PHONE UPGRADE	09/13/05	SL	10.00		16	1,467.				1,467.	1,467.		0.	1,467.
8	PHONE UPGRADE	10/03/05	SL	10.00		16	2,250.				2,250.	2,250.		0.	2,250.
9	AUDITORIUM BENCHES	01/30/06	SL	5.00		16	1,000.				1,000.	1,000.		0.	1,000.
10	BIRCH EURHMY FLOOR	06/14/06	SL	20.00		16	20,493.				20,493.	10,246.		1,025.	11,271.
11	OFFICE RE-CARPET	06/23/06	SL	5.00		16	1,441.				1,441.	1,441.		0.	1,441.
25	SEA CARGO CONTAINER	07/23/06	SL	5.00		16	800.				800.	800.		0.	800.
26	FURNITURE& KITCHEN SUPPLIES	08/14/06	SL	5.00		16	1,368.				1,368.	1,368.		0.	1,368.
27	AUDITORIUM FOLDING CHAIRS	09/06/06	SL	5.00		16	592.				592.	592.		0.	592.
28	TABLE	09/14/06	SL	5.00		16	790.				790.	790.		0.	790.
29	3 CABINETS	09/19/06	SL	5.00		16	1,200.				1,200.	1,200.		0.	1,200.
30	38 CHAIRS	09/19/06	SL	5.00		16	1,900.				1,900.	1,900.		0.	1,900.
31	CHAIRS	09/28/06	SL	5.00		16	3,019.				3,019.	3,019.		0.	3,019.
32	FAST SIGNS	09/28/06	SL	5.00		16	800.				800.	800.		0.	800.
33	CHALKBOARDS	09/28/06	SL	5.00		16	1,258.				1,258.	1,258.		0.	1,258.
34	LIVE WIRE COMMUNICATIONS	10/04/06	SL	10.00		16	1,298.				1,298.	1,298.		0.	1,298.

2016 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
35	BENCHES	10/10/06	SL	5.00		16	790.				790.	790.		0.	790.
36	FAST SIGNS	11/03/06	SL	5.00		16	1,394.				1,394.	1,394.		0.	1,394.
37	COMPUTERS	02/27/07	SL	5.00		16	1,608.				1,608.	1,608.		0.	1,608.
38	WEBSITE	03/30/07	SL	5.00		16	4,150.				4,150.	4,150.		0.	4,150.
56	WEBSITE	07/31/07	SL	5.00		16	1,490.				1,490.	1,490.		0.	1,490.
57	NEW CHAIRS/TABLES	08/06/07	SL	5.00		16	3,446.				3,446.	3,446.		0.	3,446.
58	CHAIRS	08/06/07	SL	5.00		16	2,621.				2,621.	2,621.		0.	2,621.
59	TRAKWARE INC	12/07/07	SL	5.00		16	3,363.				3,363.	3,363.		0.	3,363.
60	SWING SET	10/12/07	SL	5.00		16	701.				701.	701.		0.	701.
61	SPACE ARCH	01/30/08	SL	5.00		16	1,450.				1,450.	1,450.		0.	1,450.
62	TRAKWARE INC	04/28/08	SL	5.00		16	2,435.				2,435.	2,435.		0.	2,435.
97	DISCOUNT SCHOOL	09/23/09	SL	5.00		16	2,135.				2,135.	2,135.		0.	2,135.
113	FENCE EXPANSION	07/30/10	SL	10.00		16	1,900.				1,900.	1,330.		190.	1,520.
114	SCIENCE TABLE	08/13/10	SL	5.00		16	5,064.				5,064.	5,064.		0.	5,064.
115	11 WOODEN CHAIRS	09/10/10	SL	5.00		16	1,854.				1,854.	1,854.		0.	1,854.
116	8 STUDENT DESKS	09/10/10	SL	5.00		16	960.				960.	960.		0.	960.
117	EQUIPMENT	09/27/10	SL	5.00		16	1,689.				1,689.	1,689.		0.	1,689.
118	BIZCHAIR FURNITURE	10/11/10	SL	5.00		16	552.				552.	552.		0.	552.

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119	DELL IT	10/11/10	SL	5.00		16	2,040.				2,040.	2,040.		0.	2,040.
120	EQUIPMENT	01/12/11	SL	5.00		16	2,375.				2,375.	2,375.		0.	2,375.
121	TABLE/BECH	03/03/11	SL	5.00		16	601.				601.	601.		0.	601.
122	STACKING CHAIRS	03/03/11	SL	5.00		16	796.				796.	796.		0.	796.
125	WASHER/DRYER	11/13/12	SL	5.00		16	1,346.				1,346.	987.		269.	1,256.
126	CIRCULAR SAW	03/07/13	SL	5.00		16	678.				678.	453.		136.	589.
129	ASUS H61M-PLUS DESTOP	08/28/13	SL	5.00		16	2,422.				2,422.	1,409.		484.	1,893.
130	CHAIRS COLINA CAMPUS	08/12/13	SL	5.00		16	951.				951.	570.		190.	760.
131	FOLDING CHAIRS - COLINA CAMPUS	08/12/13	SL	5.00		16	799.				799.	479.		160.	639.
132	CHALKBOARDS -- COLINA CAMPUS	08/12/13	SL	5.00		16	979.				979.	588.		196.	784.
133	ACER ASPIRE -- V5471P	09/03/13	SL	5.00		16	789.				789.	459.		158.	617.
134	PRINTER	10/09/13	SL	5.00		16	809.				809.	456.		162.	618.
135	SCANNER	11/01/13	SL	5.00		16	475.				475.	259.		95.	354.
136	WINTER FAIRE SUPPLIES	01/01/14	SL	5.00		16	8,093.				8,093.	4,121.		1,619.	5,740.
137	50 METAL FOLDING CHAIRS	01/22/14	SL	5.00		16	688.				688.	338.		138.	476.
138	50 METAL FOLDING CHAIRS	01/22/14	SL	5.00		16	687.				687.	337.		137.	474.
139	SCRIP PRINTER	03/01/14	SL	5.00		16	325.				325.	154.		65.	219.
140	CREDIT CARD TERMINAL	03/03/14	SL	5.00		16	678.				678.	321.		136.	457.

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141	WOODCREST CHAIR	06/18/14	SL	5.00		16	151.				151.	63.		30.	93.
148	CONTAINER	07/01/14	SL	5.00		16	500.				500.	200.		100.	300.
149	SOLAR EXPENDITURE	07/01/14	SL	5.00		16	22,772.				22,772.	7,627.		4,554.	12,181.
150	CABINETS	07/09/14	SL	5.00		16	351.				351.	140.		70.	210.
151	30 DESKES	07/15/14	SL	5.00		16	6,105.				6,105.	2,340.		1,221.	3,561.
152	CHAIRS FOR MUSIC ROOM	08/11/14	SL	5.00		16	1,552.				1,552.	569.		310.	879.
153	6 FOLDING TABLES	08/13/14	SL	5.00		16	548.				548.	201.		110.	311.
154	WARDROBS	08/18/14	SL	5.00		16	952.				952.	349.		190.	539.
155	USMARKER BOARD	08/20/14	SL	5.00		16	547.				547.	200.		109.	309.
156	TABLES & STOOLS	08/22/14	SL	5.00		16	2,725.				2,725.	999.		545.	1,544.
157	CLASSROOM FURNITURE	08/23/14	SL	5.00		16	5,745.				5,745.	2,107.		1,149.	3,256.
158	BLACKBOARDS	08/27/14	SL	5.00		16	756.				756.	277.		151.	428.
159	ASUS DESKTOP MOTHERBOARD	08/29/14	SL	5.00		16	1,592.				1,592.	583.		318.	901.
160	IKEA FURNITURE082714	08/30/14	SL	5.00		16	470.				470.	172.		94.	266.
161	FURNITURE & FIXTURE	09/05/14	NC	.000	HY		-226.				-226.			0.	
162	12X12 COLEMAN TENT	09/10/14	SL	5.00		16	580.				580.	203.		116.	319.
163	FUJITSU SNAPSCAN SCANNER	09/10/14	SL	5.00		16	968.				968.	339.		194.	533.
164	DESKTOP MOTHERBOARD	12/09/14	SL	5.00		16	2,511.				2,511.	753.		502.	1,255.

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165	COMMERCIAL GRILL	12/12/14	SL	5.00		16	400.				400.	120.		80.	200.
166	COMPUTER HARDWARE & SOFTWARE	02/17/15	SL	5.00		16	1,062.				1,062.	283.		212.	495.
167	SECURITY CAMERA SYSTEMS	03/27/15	SL	5.00		16	7,913.				7,913.	1,179.		1,583.	2,762.
168	EQUIPMENT	06/30/15	SL	5.00		16	13,000.				13,000.	1,300.		2,600.	3,900.
175	SECURITY SYSTEM	07/01/15	SL	5.00		16	10,777.				10,777.	1,976.		2,155.	4,131.
176	FURNITURE & FIXTURE	08/13/15	SL	5.00		16	508.				508.	85.		102.	187.
177	BOOKSHELVES	08/21/15	SL	5.00		16	264.				264.	44.		53.	97.
178	2 NEC DSX 34 BUTTON TELEPHONE SET	08/26/15	SL	5.00		16	259.				259.	43.		52.	95.
179	REFRIGRATOR	08/30/15	SL	5.00		16	1,336.				1,336.	223.		267.	490.
180	NEC DSX 34 BUTTON TELEPHONE	09/01/15	SL	5.00		16	319.				319.	48.		64.	112.
181	STUDENT CHAIRS	09/03/15	SL	5.00		16	1,064.				1,064.	160.		213.	373.
182	BACKYARD ADVENTURES	09/04/15	SL	5.00		16	1,825.				1,825.	274.		365.	639.
183	18000 BTU A/C UNIT	09/09/15	SL	5.00		16	3,289.				3,289.	494.		658.	1,152.
184	CHAIRS FOR FACULTY LOUNGE	09/12/15	SL	5.00		16	82.				82.	12.		16.	28.
185	6 DESKTOP COMPUTERS	09/14/15	SL	5.00		16	4,745.				4,745.	712.		949.	1,661.
186	TABLE FOR KITCHEN	09/14/15	SL	5.00		16	209.				209.	31.		42.	73.
187	FURNITURE FOR FIBER ROOM	09/23/15	SL	5.00		16	238.				238.	36.		48.	84.
188	UAP-LR 2.4 ACCESS POINT WIRELSS	10/05/15	SL	5.00		16	396.				396.	53.		79.	132.

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189	5 PORT NETWORK SWITCH	10/05/15	SL	5.00		16	737.				737.	98.		147.	245.
190	2 COMPUTERS	10/30/15	SL	5.00		16	1,593.				1,593.	212.		319.	531.
191	COMPUTER MONITOR	11/10/15	SL	5.00		16	144.				144.	17.		29.	46.
192	BUS OFFICE DESK	11/18/15	SL	5.00		16	119.				119.	14.		24.	38.
193	NEC DESK PHONE	12/04/15	SL	5.00		16	199.				199.	20.		40.	60.
194	QQUEST SOFTWARE SYSTEM	06/21/16	SL	5.00		16	4,082.				4,082.			816.	816.
195	5 COMPUTERS	06/30/16	SL	5.00		16	1,782.				1,782.			0.	
196	CHALKBOARDS	06/30/16	SL	5.00		16	11,830.				11,830.			2,366.	2,366.
210	SWITCH	07/26/16	SL	5.00		16	1,080.				1,080.			198.	198.
211	BADGE PRINTER AND PORTABLE MONITORS	11/30/16	SL	5.00		16	1,190.				1,190.			139.	139.
212	PRINTER	12/28/16	SL	5.00		16	900.				900.			90.	90.
213	IPAD AND MOUNT	12/31/16	SL	5.00		16	860.				860.			86.	86.
214	WATER COOLER	12/31/16	SL	5.00		16	781.				781.			78.	78.
215	IPAD LOCK BOXES	03/27/17	SL	5.00		16	225.				225.			11.	11.
216	FURNITURE & FIXTURE	06/30/17	SL	5.00		16	2,928.				2,928.			0.	
217	HVAC UNIT	06/30/17	SL	5.00		16	6,350.				6,350.			0.	
218	METAL LUCH TRAYS	06/30/17	SL	5.00		16	550.				550.			0.	
219	KITCHEN EQUIPMENTS	06/30/17	SL	5.00		16	1,112.				1,112.			0.	

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220	STAINLESS STEELE SERVING TRAYS	06/30/17	SL	5.00		16	760.				760.			0.	
221	TOOLS	06/30/17	SL	5.00		16	1,549.				1,549.			0.	
222	FURNITURE & FIXTURE	06/30/17	SL	5.00		16	3,774.				3,774.			0.	
223	TOOLS	06/30/17	SL	5.00		16	384.				384.			0.	
224	SERVER	06/30/17	SL	5.00		16	1,125.				1,125.			0.	
225	IT EQUIPMENT	06/30/17	SL	5.00		16	2,597.				2,597.			0.	
	* 990 PAGE 10 TOTAL FURNITURE & FIXTURES						250,491.				250,491.	112,506.		28,804.	141,310.
	TRANSPORTATION EQUIPMENT														
207	VOLKSWAGON VAN #1	10/30/15	SL	5.00		16	15,131.				15,131.	2,036.		3,026.	5,062.
208	VOLKSWAGON VAN #2	10/30/15	SL	5.00		16	15,131.				15,131.	2,026.		3,026.	5,052.
209	VOLKSWAGON VAN #3	10/30/15	SL	5.00		16	15,131.				15,131.	2,027.		3,026.	5,053.
	* 990 PAGE 10 TOTAL TRANSPORTATION EQUIPMENT						45,393.				45,393.	6,089.		9,078.	15,167.
	LAND														
2	LAND--3547 ALTADENA	09/29/99	L				147,685.				147,685.			0.	
22	VACANY LOT ALTADENA	02/09/06	L				213,403.				213,403.			0.	
23	LAND--3539 ALTADENA	04/14/06	L				52,192.				52,192.			0.	
24	LAND--3541 ALTADENA	04/14/06	L				52,190.				52,190.			0.	
78	LAND--3565 ALTADENA	07/19/07	L				85,796.				85,796.			0.	

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128	LAND -- 4135-4137 54TH PLACE	11/18/13	L				1,002,530.				1,002,530.			0.	
	* 990 PAGE 10 TOTAL LAND						1,553,796.				1,553,796.	0.		0.	0.
	BUILDINGS														
1	BUILDING--3547 ALTADENA	09/29/99	SL	50.00		16	590,740.				590,740.	218,953.		11,815.	230,768.
3	BUILDING--3539 ALTADENA	04/14/06	SL	50.00		16	208,760.				208,760.	43,932.		4,175.	48,107.
4	BUILDING--3541 ALTADENA	04/14/06	SL	50.00		16	208,760.				208,760.	43,931.		4,175.	48,106.
55	BUILDING--3565 ALTADENA	07/19/07	SL	50.00		16	343,184.				343,184.	63,879.		6,864.	70,743.
79	BUILDING IMPROVEMENT--3547 ALTADENA	04/13/09	SL	50.00		16	5,040.				5,040.	807.		101.	908.
127	BUILDING -- 4135-4137 54TH PLACE	11/18/13	SL	50.00		16	1,897,470.				1,897,470.	100,048.		37,949.	137,997.
	* 990 PAGE 10 TOTAL BUILDINGS						3,253,954.				3,253,954.	471,550.		65,079.	536,629.
	* 990 PAGE 10 TOTAL -						5,103,634.				5,103,634.	590,145.		102,961.	693,106.
	BUILDINGS														
12	IMPROVEMENTS	08/15/05	SL	10.00		16	6,979.				6,979.	6,979.		0.	6,979.
13	IMPROVEMENTS	09/01/05	SL	10.00		16	1,300.				1,300.	1,300.		0.	1,300.
14	IMPROVEMENTS	09/17/05	SL	50.00		16	7,711.				7,711.	1,696.		154.	1,850.
15	IMPROVEMENTS	10/18/05	SL	10.00		16	19,000.				19,000.	19,000.		0.	19,000.
16	IMPROVEMENTS	12/29/05	SL	10.00		16	1,500.				1,500.	1,500.		0.	1,500.
17	IMPROVEMENTS	01/19/06	SL	10.00		16	1,747.				1,747.	1,747.		0.	1,747.

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18	IMPROVEMENTS	05/04/06	SL	50.00		16	2,000.				2,000.	400.		40.	440.
19	IMPROVEMENTS	06/10/06	SL	10.00		16	1,500.				1,500.	1,500.		0.	1,500.
20	IMPROVEMENTS	06/19/06	SL	10.00		16	4,000.				4,000.	4,000.		0.	4,000.
21	IMPROVEMENTS	06/20/06	SL	10.00		16	2,746.				2,746.	2,746.		0.	2,746.
39	IMPROVEMENTS	07/23/06	SL	50.00		16	7,940.				7,940.	1,588.		159.	1,747.
40	IMPROVEMENTS	07/23/06	SL	50.00		16	12,306.				12,306.	2,461.		246.	2,707.
41	IMPROVEMENTS	07/23/06	SL	50.00		16	8,500.				8,500.	1,700.		170.	1,870.
42	IMPROVEMENTS	08/14/06	SL	10.00		16	11,525.				11,525.	11,525.		0.	11,525.
43	IMPROVEMENTS	08/14/06	SL	50.00		16	20,446.				20,446.	4,089.		409.	4,498.
44	IMPROVEMENTS	08/15/06	SL	50.00		16	1,219.				1,219.	243.		24.	267.
45	IMPROVEMENTS	10/10/06	SL	50.00		16	171,937.				171,937.	34,388.		3,439.	37,827.
46	IMPROVEMENTS	10/12/06	SL	50.00		16	16,437.				16,437.	3,288.		329.	3,617.
47	IMPROVEMENTS	10/12/06	SL	10.00		16	1,950.				1,950.	1,950.		0.	1,950.
48	IMPROVEMENTS	11/03/06	SL	50.00		16	1,393.				1,393.	279.		28.	307.
49	IMPROVEMENTS	02/09/07	SL	50.00		16	9,395.				9,395.	1,785.		188.	1,973.
50	IMPROVEMENTS	02/09/07	SL	50.00		16	764.				764.	145.		15.	160.
51	IMPROVEMENTS	03/02/07	SL	50.00		16	14,446.				14,446.	2,745.		289.	3,034.
52	IMPROVEMENTS	03/30/07	SL	10.00		16	1,535.				1,535.	1,459.		76.	1,535.

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53	IMPROVEMENTS	05/08/07	SL	50.00		16	5,392.				5,392.	971.		108.	1,079.
54	IMPROVEMENTS	06/27/07	SL	10.00		16	13,300.				13,300.	11,970.		1,330.	13,300.
63	IMPROVEMENTS	07/20/07	SL	50.00		16	35,726.				35,726.	6,431.		715.	7,146.
64	IMPROVEMENTS	09/27/07	SL	50.00		16	17,704.				17,704.	3,187.		354.	3,541.
65	IMPROVEMENTS	11/02/07	SL	50.00		16	24,587.				24,587.	4,426.		492.	4,918.
66	IMPROVEMENTS	11/18/07	SL	50.00		16	4,274.				4,274.	769.		85.	854.
67	IMPROVEMENTS	12/19/07	SL	50.00		16	5,898.				5,898.	1,003.		118.	1,121.
68	IMPROVEMENTS	01/22/08	SL	50.00		16	13,926.				13,926.	2,368.		279.	2,647.
69	IMPROVEMENTS	02/15/08	SL	50.00		16	3,953.				3,953.	672.		79.	751.
70	IMPROVEMENTS	03/07/08	SL	50.00		16	17,368.				17,368.	2,952.		347.	3,299.
71	IMPROVEMENTS	04/02/08	SL	50.00		16	5,713.				5,713.	971.		114.	1,085.
72	IMPROVEMENTS	04/14/08	SL	50.00		16	5,983.				5,983.	1,017.		120.	1,137.
73	IMPROVEMENTS	04/17/08	SL	50.00		16	589.				589.	100.		12.	112.
74	IMPROVEMENTS	04/28/08	SL	50.00		16	7,136.				7,136.	1,213.		143.	1,356.
75	IMPROVEMENTS	05/27/08	SL	50.00		16	23,786.				23,786.	4,044.		476.	4,520.
76	IMPROVEMENTS	05/28/08	SL	50.00		16	3,349.				3,349.	569.		67.	636.
77	IMPROVEMENTS	06/10/08	SL	50.00		16	11,913.				11,913.	2,025.		238.	2,263.
80	IMPROVEMENTS	08/06/08	SL	50.00		16	15,039.				15,039.	2,406.		301.	2,707.

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81	IMPROVEMENTS	08/15/08	SL	50.00		16	7,601.				7,601.	1,216.		152.	1,368.
82	IMPROVEMENTS	08/22/08	SL	50.00		16	85.				85.	14.		2.	16.
83	IMPROVEMENTS	09/12/08	SL	50.00		16	9,283.				9,283.	1,486.		186.	1,672.
84	IMPROVEMENTS	09/19/08	SL	50.00		16	802.				802.	128.		16.	144.
85	IMPROVEMENTS	10/03/08	SL	50.00		16	701.				701.	113.		14.	127.
86	IMPROVEMENTS	10/16/08	SL	5.00		16	75.				75.	75.		0.	75.
87	IMPROVEMENTS	10/16/08	SL	50.00		16	5,845.				5,845.	935.		117.	1,052.
88	IMPROVEMENTS	10/31/08	SL	50.00		16	1,645.				1,645.	263.		33.	296.
89	IMPROVEMENTS	11/10/08	SL	50.00		16	11,185.				11,185.	1,790.		224.	2,014.
90	IMPROVEMENTS	11/21/08	SL	50.00		16	2,209.				2,209.	353.		44.	397.
91	IMPROVEMENTS	12/08/08	SL	50.00		16	804.				804.	129.		16.	145.
92	IMPROVEMENTS	01/26/09	SL	50.00		16	5,000.				5,000.	800.		100.	900.
93	IMPROVEMENTS	03/19/09	SL	50.00		16	789.				789.	127.		16.	143.
94	IMPROVEMENTS	05/13/09	SL	50.00		16	8,681.				8,681.	1,389.		174.	1,563.
95	IMPROVEMENTS	05/27/09	SL	50.00		16	4,993.				4,993.	799.		100.	899.
96	IMPROVEMENTS	06/29/09	NC	5.00	HY		-1,413.				-1,413.			0.	
98	IMPROVEMENTS	07/28/09	SL	50.00		16	1,000.				1,000.	160.		20.	180.
99	IMPROVEMENTS	07/31/09	SL	5.00		16	-589.				-589.			0.	

2016 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
100	IMPROVEMENTS	07/31/09	SL	50.00		16	153,116.				153,116.	24,498.		3,062.	27,560.
101	IMPROVEMENTS	08/01/09	SL	50.00		16	6,000.				6,000.	840.		120.	960.
102	IMPROVEMENTS	09/24/09	SL	50.00		16	4,950.				4,950.	693.		99.	792.
103	IMPROVEMENTS	10/09/09	SL	50.00		16	543.				543.	76.		11.	87.
104	IMPROVEMENTS	10/20/09	SL	50.00		16	5,896.				5,896.	826.		118.	944.
105	IMPROVEMENTS	12/10/09	SL	50.00		16	720.				720.	100.		14.	114.
106	IMPROVEMENTS	12/21/09	SL	50.00		16	6,307.				6,307.	883.		126.	1,009.
107	IMPROVEMENTS	01/20/10	SL	50.00		16	460.				460.	64.		9.	73.
108	IMPROVEMENTS	02/03/10	SL	50.00		16	2,500.				2,500.	350.		50.	400.
109	IMPROVEMENTS	02/09/10	SL	50.00		16	4,225.				4,225.	592.		85.	677.
110	IMPROVEMENTS	02/19/10	SL	50.00		16	11,895.				11,895.	1,665.		238.	1,903.
111	IMPROVEMENTS	02/25/10	SL	50.00		16	2,060.				2,060.	288.		41.	329.
112	IMPROVEMENTS	03/11/10	SL	50.00		16	10,417.				10,417.	1,458.		208.	1,666.
123	IMPROVEMENTS	09/10/10	SL	50.00		16	3,250.				3,250.	390.		65.	455.
124	IMPROVEMENTS	11/01/10	SL	50.00		16	5,300.				5,300.	636.		106.	742.
142	IMPROVEMENTS	08/01/13	SL	5.00		16	66,726.				66,726.	40,035.		13,345.	53,380.
143	IMPROVEMENTS	09/30/13	SL	5.00		16	491.				491.	277.		98.	375.
144	IMPROVEMENTS	10/08/13	NC	.000	HY		-2,238.				-2,238.			0.	

2016 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
145	IMPROVEMENTS	01/01/14	SL	10.00		16	1,342.				1,342.	341.		134.	475.
146	IMPROVEMENTS	09/25/14	SL	5.00		16	867.				867.	303.		173.	476.
147	IMPROVEMENTS	12/18/14	SL	5.00		16	500.				500.	150.		100.	250.
197	IMPROVEMENTS	07/06/15	SL	7.00		16	4,939.				4,939.	647.		706.	1,353.
198	IMPROVEMENTS	08/07/15	SL	7.00		16	1,518.				1,518.	181.		217.	398.
199	IMPROVEMENTS	08/10/15	SL	7.00		16	975.				975.	116.		139.	255.
200	IMPROVEMENTS	08/18/15	SL	7.00		16	1,260.				1,260.	150.		180.	330.
201	IMPROVEMENTS	08/26/15	SL	50.00		16	1,435.				1,435.	24.		29.	53.
202	IMPROVEMENTS	09/07/15	SL	7.00		16	739.				739.	79.		105.	184.
203	IMPROVEMENTS	09/07/15	SL	7.00		16	330.				330.	35.		47.	82.
204	IMPROVEMENTS	09/09/15	SL	5.00		16	400.				400.	60.		80.	140.
205	IMPROVEMENTS	09/30/15	SL	50.00		16	33,297.				33,297.	499.		666.	1,165.
206	IMPROVEMENTS	02/01/16	SL	50.00		16	33,726.				33,726.	225.		675.	900.
227	ANNEX REMODEL (ALTA DENA CAMPUS)	09/30/16	SL	50.00		16	16,294.				16,294.			244.	244.
228	DOOR	12/20/16	SL	7.00		16	1,140.				1,140.			81.	81.
229	6 WINDOWS	12/23/16	SL	7.00		16	2,533.				2,533.			181.	181.
	* 990 PAGE 10 TOTAL BUILDINGS						986,521.				986,521.	241,865.		33,710.	275,575.
	* 990 PAGE 10 TOTAL -						986,521.				986,521.	241,865.		33,710.	275,575.

2016 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	BUILDINGS														
169	COMMERCIAL KITCHEN REPAIR	09/17/14	SL	10.00		16	2,039.				2,039.	357.		204.	561.
170	MUSIC ROOM STORAGE	10/11/14	SL	10.00		16	8,768.				8,768.	1,462.		877.	2,339.
171	INSTALL LOWER PARKING LOT	11/14/14	SL	10.00		16	2,832.				2,832.	448.		283.	731.
172	REPLACE POST BOLTED TO STAIRS	11/15/14	SL	10.00		16	132.				132.	21.		13.	34.
173	ROOF REPAIR	01/13/15	SL	10.00		16	4,000.				4,000.	567.		400.	967.
174	ROOF REPAIR	01/21/15	SL	10.00		16	7,158.				7,158.	1,014.		716.	1,730.
226	SPORT COURT(ALTA DENA)	05/31/17	SL	10.00		16	57,772.				57,772.			481.	481.
	* 990 PAGE 10 TOTAL BUILDINGS						82,701.				82,701.	3,869.		2,974.	6,843.
	* 990 PAGE 10 TOTAL -						82,701.				82,701.	3,869.		2,974.	6,843.
	* GRAND TOTAL 990 PAGE 10 DEPR						6,172,856.				6,172,856.	835,879.		139,645.	975,524.
	CURRENT YEAR ACTIVITY														
	BEGINNING BALANCE						6,068,952.			0.	6,068,952.	835,879.			973,935.
	ACQUISITIONS						103,904.			0.	103,904.	0.			1,589.
	DISPOSITIONS						0.			0.	0.	0.			0.
	ENDING BALANCE						6,172,856.			0.	6,172,856.	835,879.			975,524.
	ENDING ACCUM DEPR											975,524.			

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**

▶ **Information about Form 8868 and its instructions is at www.irs.gov/form8868 .**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

		Enter filer's identifying number
Type or print	Name of exempt organization or other filer, see instructions. ASSOCIATION FOR WALDORF EDUCATION IN SAN DIEGO	Employer identification number (EIN) or 95-3641387
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 3547 ALTADENA AVENUE	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. SAN DIEGO, CA 92105	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

KIM GALVIN

• The books are in the care of ▶ **3547 ALTADENA AVENUE - SAN DIEGO, CA 92105**
Telephone No. ▶ **619-287-3054** Fax No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **MAY 15, 2018**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶ calendar year _____ or
▶ tax year beginning **JUL 1, 2016**, and ending **JUN 30, 2017**.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

2016 TAX RETURN FILING INSTRUCTIONS

CALIFORNIA FORM 199

FOR THE YEAR ENDING

June 30, 2017

Prepared for	Association For Waldorf Education IN San Diego 3547 Altadena Avenue San Diego, CA 92105
Prepared by	THE OZUROVICH GROUP, INC. 1901 AVENUE OF THE STARS #1050 LOS ANGELES, CA 90067
To be signed and dated by	Not Applicable
Amount of tax	Total tax \$ 0.00 Less: payments and credits \$ 0.00 Plus: other amount \$ 0.00 Plus: interest and penalties \$ 0.00 No pmt required \$
Overpayment	Credited to your estimated tax \$ 0.00 Other amount \$ 0.00 Refunded to you \$ 0.00
Make check payable to	Not applicable
Mail tax return and check (if applicable) to	This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the FTB, please contact our office. We will then submit the electronic return to the FTB. Do not mail the paper copy of the return to the FTB.
Return must be mailed on or before	Not Applicable
Special Instructions	

2016

California Exempt Organization Annual Information Return

199

Calendar Year 2016 or fiscal year beginning (mm/dd/yyyy) **07/01/2016**, and ending (mm/dd/yyyy) **06/30/2017**

Corporation/Organization name ASSOCIATION FOR WALDORF EDUCATION IN SAN DIEGO		California corporation number 0988153
Additional information. See instructions.		FEIN 95-3641387
Street address (suite or room) 3547 ALTADENA AVENUE		PMB no.
City SAN DIEGO	State CA	ZIP code 92105
Foreign country name	Foreign province/state/country	Foreign postal code

<p>A First Return <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>B Amended Return <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>C IRC Section 4947(a)(1) trust <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>D Final Information Return? <input type="checkbox"/> Dissolved <input type="checkbox"/> Surrendered (Withdrawn) <input type="checkbox"/> Merged/Reorganized Enter date: (mm/dd/yyyy)</p> <p>E Check accounting method: (1) <input type="checkbox"/> Cash (2) <input checked="" type="checkbox"/> Accrual (3) <input type="checkbox"/> Other</p> <p>F Federal return filed? (1) <input type="checkbox"/> 990T (2) <input type="checkbox"/> 990-PF (3) <input type="checkbox"/> Sch H (990) (4) <input checked="" type="checkbox"/> Other 990 series</p> <p>G Is this a group filing? See instructions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>H Is this organization in a group exemption <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," what is the parent's name?</p> <p>I Did the organization have any changes to its guidelines not reported to the FTB? See instructions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>J If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>K Is the organization exempt under R&TC Section 23701g? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," enter the gross receipts from nonmember sources \$ _____</p> <p>L If organization is exempt under R&TC Section 23701d and meets the filing fee exception, check box. No filing fee is required. <input checked="" type="checkbox"/></p> <p>M Is the organization a Limited Liability Company? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>N Did the organization file Form 100 or Form 109 to report taxable income? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>O Is the organization under audit by the IRS or has the IRS audited in a prior year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>P Is a federal Form 1023/1024 pending? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date filed with IRS _____</p>
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Part I Complete Part I unless not required to file this form. See General Instructions B and C.

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	5,387,139.00
	2	Gross dues and assessments from members and affiliates	2	00
	3	Gross contributions, gifts, grants, and similar amounts received STMT 1	3	269,219.00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$50,000, see General Instruction B	4	5,656,358.00
	5	Cost of goods sold STMT 2	5	531,866.00
	6	Cost or other basis, and sales expenses of assets sold	6	00
	7	Total costs. Add line 5 and line 6	7	531,866.00
	8	Total gross income. Subtract line 7 from line 4	8	5,124,492.00
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	4,845,022.00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	279,470.00
Filing Fee	11	Total payments	11	00
	12	Use tax. See General Instruction K	12	00
	13	Payment balance. If line 11 is more than line 12, subtract line 12 from line 11	13	00
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12	14	00
	15	Filing fee \$10 or \$25. See General Instruction F	15	N/A 00
	16	Penalties and Interest. See General Instruction J	16	00
	17	Balance due. Add line 12, line 15, and line 16. Then subtract line 11 from the result	17	00

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 taxpayer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer	Title TREASURER	Date	• Telephone
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	• PTIN P00736945
	Firm's name (or yours, if self-employed) and address THE OZUROVICH GROUP, INC. 1901 AVENUE OF THE STARS #1050 LOS ANGELES, CA 90067			• FEIN 95-4502766
				• Telephone (310) 226-7576

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

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.

628951 11-30-16

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions	•	1	721,415.00
	2	Interest	•	2	203.00
	3	Dividends	•	3	00
	4	Gross rents	•	4	35,988.00
	5	Gross royalties	•	5	00
	6	Gross amount received from sale of assets (See Instructions)	•	6	00
	7	Other income	•	7	4,629,533.00
	8	Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1	•	8	5,387,139.00
	9	Contributions, gifts, grants, and similar amounts paid	•	9	487,751.00
	10	Disbursements to or for members	•	10	00
	11	Compensation of officers, directors, and trustees	•	11	0.00
	12	Other salaries and wages	•	12	2,586,583.00
	13	Interest	•	13	175,487.00
	14	Taxes	•	14	195,152.00
	15	Rents	•	15	232,707.00
	16	Depreciation and depletion (See instructions)	•	16	139,645.00
	17	Other Expenses and Disbursements	•	17	1,027,697.00
	18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	•	18	4,845,022.00

Schedule L Balance Sheet		Beginning of taxable year		End of taxable year	
		(a)	(b)	(c)	(d)
Assets					
1	Cash		543,639.		718,704.
2	Net accounts receivable		28,046.		76,898.
3	Net notes receivable				
4	Inventories		85,392.		73,242.
5	Federal and state government obligations				
6	Investments in other bonds				
7	Investments in stock				
8	Mortgage loans				
9	Other investments				
10	a Depreciable assets	4,515,147.		4,619,049.	
	b Less accumulated depreciation	(835,006.)	3,680,141. (980,088.)		3,638,961.
11	Land		1,553,796.		1,553,796.
12	Other assets STMT 7		107,722.		124,777.
13	Total assets		5,998,736.		6,186,378.
Liabilities and net worth					
14	Accounts payable		115,061.		97,755.
15	Contributions, gifts, or grants payable				
16	Bonds and notes payable				
17	Mortgages payable		4,108,872.		4,003,775.
18	Other liabilities STMT 8		460,906.		496,917.
19	Capital stock or principal fund				
20	Paid-in or capital surplus. Attach reconciliation				
21	Retained earnings or income fund		1,313,897.		1,587,931.
22	Total liabilities and net worth		5,998,736.		6,186,378.

Schedule M-1 Reconciliation of income per books with income per return			
Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000.			
1	Net income per books	•	279,470.
2	Federal income tax	•	
3	Excess of capital losses over capital gains	•	
4	Income not recorded on books this year	•	
5	Expenses recorded on books this year not deducted in this return	•	
6	Total. Add line 1 through line 5	•	279,470.
7	Income recorded on books this year not included in this return.	•	
8	Deductions in this return not charged against book income this year	•	
9	Total. Add line 7 and line 8	•	
10	Net income per return. Subtract line 9 from line 6	•	279,470.

FORM 199

COST OF GOODS SOLD
INCLUDED ON PART I, LINE 5

STATEMENT 2

COST OF GOODS SOLD

1. INVENTORY AT BEGINNING OF YEAR		85,392
2. MERCHANDISE PURCHASED.	519,716	
3. COST OF LABOR.		
4. MATERIALS AND SUPPLIES		
5. OTHER COSTS.		
6. ADD LINES 1 THROUGH 5		605,108
7. INVENTORY AT END OF YEAR		73,242
8. COST OF GOODS SOLD (LINE 6 LESS LINE 7) . .		531,866

FORM 199	OTHER INCOME	STATEMENT	3
DESCRIPTION		AMOUNT	
MISCELLANEOUS		869.	
TUITION		4,156,220.	
FIELD TRIP REVENUE		183,049.	
EXTENDED CARE		74,233.	
SCHOOL FEES		215,162.	
TOTAL TO FORM 199, PART II, LINE 7		4,629,533.	

FORM 199	CASH CONTRIBUTIONS, GIFTS, GRANTS AND SIMILAR AMOUNTS PAID	STATEMENT	4
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ACTIVITY CLASSIFICATION: TUITION ASSISTANCE

DONEES NAME	DONEES ADDRESS	RELATIONSHIP	AMOUNT
VARIOUS INDIVIDUALS	3547 ALTADENA AVENUE - SAN DIEGO, CA 92105	NONE	487,751.

TOTAL FOR THIS ACTIVITY 487,751.

TOTAL INCLUDED ON FORM 199, PART II, LINE 9 487,751.

 FORM 199 COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES STATEMENT 5

NAME AND ADDRESS	TITLE AND AVERAGE HRS WORKED/WK	COMPENSATION
BONNIE HOLDEN 3547 ALTADENA AVENUE SAN DIEGO, CA 92105	TEACHER/BOARD MEMBER 40.00	0.
ANDREW KEMAL 3547 ALTADENA AVENUE SAN DIEGO, CA 92105	PRESIDENT 5.00	0.
BRANDON ISELIN-BRADLEY 3547 ALTADENA AVENUE SAN DIEGO, CA 92105	BOARD MEMBER 2.00	0.
PATRICK GODDARD 3547 ALTADENA AVENUE SAN DIEGO, CA 92105	TREASURER 2.00	0.
ANTHONY CIRONE 3547 ALTADENA AVENUE SAN DIEGO, CA 92105	DEV. DIRECTOR/BOARD MEMBER 40.00	0.
LYNNE ROSS-WITSCHER 3547 ALTADENA AVENUE SAN DIEGO, CA 92105	TEACHER/BOARD MEMBER 40.00	0.
DOMINICK ARENA 3547 ALTADENA AVENUE SAN DIEGO, CA 92105	BOARD MEMBER 2.00	0.
RACHEL DAVIS 3547 ALTADENA AVENUE SAN DIEGO, CA 92105	ADMINISTRATOR/BOARD MEMBER 40.00	0.
MARY CARMICHAEL 3547 ALTADENA AVENUE SAN DIEGO, CA 92105	TEACHER/BOARD MEMBER 40.00	0.
MIREILLE CRONIN MATHER 3547 ALTADENA AVENUE SAN DIEGO, CA 92105	BOARD MEMBER 2.00	0.
ERIC MITCHELL 3547 ALTADENA AVENUE SAN DIEGO, CA 92105	SECRETARY 5.00	0.

MICAH PARZEN	BOARD MEMBER	0.
3547 ALTADENA AVENUE	2.00	
SAN DIEGO, CA 92105		

TOTAL TO FORM 199, PART II, LINE 11	0.
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FORM 199	OTHER EXPENSES	STATEMENT	6
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DESCRIPTION	AMOUNT
FIELD TRIPS AND CLASSROOM EXPENSES	216,194.
CLASSROOM SUPPLIES	127,418.
UTILITIES	59,149.
PROFESSIONAL DEVELOPMENT	36,679.
MEMBERSHIP DUES	26,206.
TUITION PROTECTION PLAN	24,315.
TELEPHONE	14,911.
EQUIPMENT RENTAL	13,329.
EDUCATIONAL SUPPORT & DEVELOPMENT EXPENSES	12,447.
FINANCE CHARGES AND MERCHANT FEES	11,507.
PROPERTY TAX	10,298.
SECURITY	8,906.
BAD DEBT EXPENSES	8,717.
BORAD EXPENSES	4,318.
MISCELLANEOUS	3,365.
OUTREACH PROGRAM	1,596.
	0.
DIRECT EXPENSES OF FUNDRAISING EVENTS	45,017.
OTHER EMPLOYEE BENEFITS	274,355.
ACCOUNTING FEES	16,162.
OTHER PROFESSIONAL FEES	32,270.
ADVERTISING AND PROMOTION	3,675.
OFFICE EXPENSES	10,123.
TRAVEL	4,596.
INSURANCE	62,144.
TOTAL TO FORM 199, PART II, LINE 17	1,027,697.

FORM 199	OTHER ASSETS	STATEMENT	7
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DESCRIPTION	BEG. OF YEAR	END OF YEAR
PLEDGES AND GRANTS RECEIVABLE	52,424.	37,194.
PREPAID EXPENSES AND DEFERRED CHARGES	235.	1,636.
CONSTRUCTION IN PROGRESS	55,063.	85,947.
TOTAL TO FORM 199, SCHEDULE L, LINE 12	107,722.	124,777.

FORM 199	OTHER LIABILITIES	STATEMENT	8
DESCRIPTION	BEG. OF YEAR	END OF YEAR	
ACCRUED LIABILITIES	17,166.	17,051.	
DEFERRED REVENUE	443,740.	479,866.	
TOTAL TO FORM 199, SCHEDULE L, LINE 18	460,906.	496,917.	

Corporation Depreciation and Amortization

Attach to Form 100 or Form 100W.

FORM 199

FEIN 95-3641387

Corporation name

ASSOCIATION FOR WALDORF EDUCATION IN SAN DIEGO

California corporation number

0988153

Part I Election To Expense Certain Property Under IRC Section 179

Table with 5 rows for election details and 13 rows for property description and cost calculations.

Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

Table with 8 columns: (a) Description property, (b) Date acquired, (c) Cost or other basis, (d) Depreciation allowed or allowable in earlier years, (e) Depreciation Method, (f) Life or rate, (g) Depreciation for this year, (h) Additional first year depreciation.

Part III Summary

Summary table with 3 rows for total expense, total depreciation claimed, and depreciation adjustment.

Part IV Amortization

Table with 7 columns: (a) Description of property, (b) Date acquired, (c) Cost or other basis, (d) Amortization allowed or allowable in earlier years, (e) R&TC section, (f) Period or percentage, (g) Amortization for this year.

CA 3885		DEPRECIATION				STATEMENT	9
ASSET NO./ DESCRIPTION	DATE IN SERVICE	COST OR BASIS	PRIOR DEPR	METHOD	LIFE	DEPRE- CIATION	BONUS
1 BUILDING--3547	ALTADENA 09/29/99	590,740.	218,953.	SL	50.00	11,815.	
2 LAND--3547	ALTADENA 09/29/99	147,685.		L		0.	
3 BUILDING--3539	ALTADENA 04/14/06	208,760.	43,932.	SL	50.00	4,175.	
4 BUILDING--3541	ALTADENA 04/14/06	208,760.	43,931.	SL	50.00	4,175.	
5 2ND GRADE CHAIRS	08/25/05	1,496.	1,496.	SL	5.00	0.	
6 PHONE SYSTEM	08/25/05	3,250.	3,250.	SL	10.00	0.	
7 PHONE UPGRADE	09/13/05	1,467.	1,467.	SL	10.00	0.	
8 PHONE UPGRADE	10/03/05	2,250.	2,250.	SL	10.00	0.	
9 AUDITORIUM BENCHES	01/30/06	1,000.	1,000.	SL	5.00	0.	
10 BIRCH EURHMY FLOOR	06/14/06	20,493.	10,246.	SL	20.00	1,025.	
11 OFFICE RE-CARPET	06/23/06	1,441.	1,441.	SL	5.00	0.	
12 IMPROVEMENTS	08/15/05	6,979.	6,979.	SL	10.00	0.	
13 IMPROVEMENTS	09/01/05	1,300.	1,300.	SL	10.00	0.	
14 IMPROVEMENTS	09/17/05	7,711.	1,696.	SL	50.00	154.	
15 IMPROVEMENTS	10/18/05	19,000.	19,000.	SL	10.00	0.	
16 IMPROVEMENTS	12/29/05	1,500.	1,500.	SL	10.00	0.	
17 IMPROVEMENTS	01/19/06	1,747.	1,747.	SL	10.00	0.	
18 IMPROVEMENTS	05/04/06	2,000.	400.	SL	50.00	40.	
19 IMPROVEMENTS	06/10/06	1,500.	1,500.	SL	10.00	0.	
20 IMPROVEMENTS	06/19/06	4,000.	4,000.	SL	10.00	0.	
21 IMPROVEMENTS	06/20/06	2,746.	2,746.	SL	10.00	0.	
22 VACANY LOT	ALTADENA 02/09/06	213,403.		L		0.	
23 LAND--3539	ALTADENA 04/14/06	52,192.		L		0.	

24	LAND--3541 ALTADENA						
	04/14/06	52,190.		L			0.
25	SEA CARGO CONTAINER						
	07/23/06	800.	800.	SL	5.00		0.
26	FURNITURE& KITCHEN SUPPLIES						
	08/14/06	1,368.	1,368.	SL	5.00		0.
27	AUDITORIUM FOLDING CHAIRS						
	09/06/06	592.	592.	SL	5.00		0.
28	TABLE						
	09/14/06	790.	790.	SL	5.00		0.
29	3 CABINETS						
	09/19/06	1,200.	1,200.	SL	5.00		0.
30	38 CHAIRS						
	09/19/06	1,900.	1,900.	SL	5.00		0.
31	CHAIRS						
	09/28/06	3,019.	3,019.	SL	5.00		0.
32	FAST SIGNS						
	09/28/06	800.	800.	SL	5.00		0.
33	CHALKBOARDS						
	09/28/06	1,258.	1,258.	SL	5.00		0.
34	LIVE WIRE COMMUNICATIONS						
	10/04/06	1,298.	1,298.	SL	10.00		0.
35	BENCHES						
	10/10/06	790.	790.	SL	5.00		0.
36	FAST SIGNS						
	11/03/06	1,394.	1,394.	SL	5.00		0.
37	COMPUTERS						
	02/27/07	1,608.	1,608.	SL	5.00		0.
38	WEBSITE						
	03/30/07	4,150.	4,150.	SL	5.00		0.
39	IMPROVEMENTS						
	07/23/06	7,940.	1,588.	SL	50.00		159.
40	IMPROVEMENTS						
	07/23/06	12,306.	2,461.	SL	50.00		246.
41	IMPROVEMENTS						
	07/23/06	8,500.	1,700.	SL	50.00		170.
42	IMPROVEMENTS						
	08/14/06	11,525.	11,525.	SL	10.00		0.
43	IMPROVEMENTS						
	08/14/06	20,446.	4,089.	SL	50.00		409.
44	IMPROVEMENTS						
	08/15/06	1,219.	243.	SL	50.00		24.
45	IMPROVEMENTS						
	10/10/06	171,937.	34,388.	SL	50.00		3,439.
46	IMPROVEMENTS						
	10/12/06	16,437.	3,288.	SL	50.00		329.
47	IMPROVEMENTS						
	10/12/06	1,950.	1,950.	SL	10.00		0.
48	IMPROVEMENTS						
	11/03/06	1,393.	279.	SL	50.00		28.
49	IMPROVEMENTS						
	02/09/07	9,395.	1,785.	SL	50.00		188.
50	IMPROVEMENTS						
	02/09/07	764.	145.	SL	50.00		15.

51	IMPROVEMENTS	03/02/07	14,446.	2,745.	SL	50.00	289.
52	IMPROVEMENTS	03/30/07	1,535.	1,459.	SL	10.00	76.
53	IMPROVEMENTS	05/08/07	5,392.	971.	SL	50.00	108.
54	IMPROVEMENTS	06/27/07	13,300.	11,970.	SL	10.00	1,330.
55	BUILDING--3565 ALTADENA	07/19/07	343,184.	63,879.	SL	50.00	6,864.
56	WEBSITE	07/31/07	1,490.	1,490.	SL	5.00	0.
57	NEW CHAIRS/TABLES	08/06/07	3,446.	3,446.	SL	5.00	0.
58	CHAIRS	08/06/07	2,621.	2,621.	SL	5.00	0.
59	TRAKWARE INC	12/07/07	3,363.	3,363.	SL	5.00	0.
60	SWING SET	10/12/07	701.	701.	SL	5.00	0.
61	SPACE ARCH	01/30/08	1,450.	1,450.	SL	5.00	0.
62	TRAKWARE INC	04/28/08	2,435.	2,435.	SL	5.00	0.
63	IMPROVEMENTS	07/20/07	35,726.	6,431.	SL	50.00	715.
64	IMPROVEMENTS	09/27/07	17,704.	3,187.	SL	50.00	354.
65	IMPROVEMENTS	11/02/07	24,587.	4,426.	SL	50.00	492.
66	IMPROVEMENTS	11/18/07	4,274.	769.	SL	50.00	85.
67	IMPROVEMENTS	12/19/07	5,898.	1,003.	SL	50.00	118.
68	IMPROVEMENTS	01/22/08	13,926.	2,368.	SL	50.00	279.
69	IMPROVEMENTS	02/15/08	3,953.	672.	SL	50.00	79.
70	IMPROVEMENTS	03/07/08	17,368.	2,952.	SL	50.00	347.
71	IMPROVEMENTS	04/02/08	5,713.	971.	SL	50.00	114.
72	IMPROVEMENTS	04/14/08	5,983.	1,017.	SL	50.00	120.
73	IMPROVEMENTS	04/17/08	589.	100.	SL	50.00	12.
74	IMPROVEMENTS	04/28/08	7,136.	1,213.	SL	50.00	143.
75	IMPROVEMENTS	05/27/08	23,786.	4,044.	SL	50.00	476.
76	IMPROVEMENTS	05/28/08	3,349.	569.	SL	50.00	67.
77	IMPROVEMENTS	06/10/08	11,913.	2,025.	SL	50.00	238.

78	LAND--3565	ALTADENA					
		07/19/07	85,796.		L		0.
79	BUILDING IMPROVEMENT--3547	ALTADENA					
		04/13/09	5,040.	807.	SL	50.00	101.
80	IMPROVEMENTS						
		08/06/08	15,039.	2,406.	SL	50.00	301.
81	IMPROVEMENTS						
		08/15/08	7,601.	1,216.	SL	50.00	152.
82	IMPROVEMENTS						
		08/22/08	85.	14.	SL	50.00	2.
83	IMPROVEMENTS						
		09/12/08	9,283.	1,486.	SL	50.00	186.
84	IMPROVEMENTS						
		09/19/08	802.	128.	SL	50.00	16.
85	IMPROVEMENTS						
		10/03/08	701.	113.	SL	50.00	14.
86	IMPROVEMENTS						
		10/16/08	75.	75.	SL	5.00	0.
87	IMPROVEMENTS						
		10/16/08	5,845.	935.	SL	50.00	117.
88	IMPROVEMENTS						
		10/31/08	1,645.	263.	SL	50.00	33.
89	IMPROVEMENTS						
		11/10/08	11,185.	1,790.	SL	50.00	224.
90	IMPROVEMENTS						
		11/21/08	2,209.	353.	SL	50.00	44.
91	IMPROVEMENTS						
		12/08/08	804.	129.	SL	50.00	16.
92	IMPROVEMENTS						
		01/26/09	5,000.	800.	SL	50.00	100.
93	IMPROVEMENTS						
		03/19/09	789.	127.	SL	50.00	16.
94	IMPROVEMENTS						
		05/13/09	8,681.	1,389.	SL	50.00	174.
95	IMPROVEMENTS						
		05/27/09	4,993.	799.	SL	50.00	100.
96	IMPROVEMENTS						
		06/29/09	0.			5.00	0.
97	DISCOUNT SCHOOL						
		09/23/09	2,135.	2,135.	SL	5.00	0.
98	IMPROVEMENTS						
		07/28/09	1,000.	160.	SL	50.00	20.
99	IMPROVEMENTS						
		07/31/09	0.		SL	5.00	0.
100	IMPROVEMENTS						
		07/31/09	153,116.	24,498.	SL	50.00	3,062.
101	IMPROVEMENTS						
		08/01/09	6,000.	840.	SL	50.00	120.
102	IMPROVEMENTS						
		09/24/09	4,950.	693.	SL	50.00	99.
103	IMPROVEMENTS						
		10/09/09	543.	76.	SL	50.00	11.
104	IMPROVEMENTS						
		10/20/09	5,896.	826.	SL	50.00	118.

105	IMPROVEMENTS	12/10/09	720.	100.	SL	50.00	14.
106	IMPROVEMENTS	12/21/09	6,307.	883.	SL	50.00	126.
107	IMPROVEMENTS	01/20/10	460.	64.	SL	50.00	9.
108	IMPROVEMENTS	02/03/10	2,500.	350.	SL	50.00	50.
109	IMPROVEMENTS	02/09/10	4,225.	592.	SL	50.00	85.
110	IMPROVEMENTS	02/19/10	11,895.	1,665.	SL	50.00	238.
111	IMPROVEMENTS	02/25/10	2,060.	288.	SL	50.00	41.
112	IMPROVEMENTS	03/11/10	10,417.	1,458.	SL	50.00	208.
113	FENCE EXPANSION	07/30/10	1,900.	1,330.	SL	10.00	190.
114	SCIENCE TABLE	08/13/10	5,064.	5,064.	SL	5.00	0.
115	11 WOODEN CHAIRS	09/10/10	1,854.	1,854.	SL	5.00	0.
116	8 STUDENT DESKS	09/10/10	960.	960.	SL	5.00	0.
117	EQUIPMENT	09/27/10	1,689.	1,689.	SL	5.00	0.
118	BIZCHAIR FURNITURE	10/11/10	552.	552.	SL	5.00	0.
119	DELL IT	10/11/10	2,040.	2,040.	SL	5.00	0.
120	EQUIPMENT	01/12/11	2,375.	2,375.	SL	5.00	0.
121	TABLE/BECH	03/03/11	601.	601.	SL	5.00	0.
122	STACKING CHAIRS	03/03/11	796.	796.	SL	5.00	0.
123	IMPROVEMENTS	09/10/10	3,250.	390.	SL	50.00	65.
124	IMPROVEMENTS	11/01/10	5,300.	636.	SL	50.00	106.
125	WASHER/DRYER	11/13/12	1,346.	987.	SL	5.00	269.
126	CIRCULAR SAW	03/07/13	678.	453.	SL	5.00	136.
127	BUILDING -- 4135-4137 54TH PLACE	11/18/13	1,897,470.	100,048.	SL	50.00	37,949.
128	LAND -- 4135-4137 54TH PLACE	11/18/13	1,002,530.		L		0.
129	ASUS H61M-PLUS DESTOP	08/28/13	2,422.	1,409.	SL	5.00	484.
130	CHAIRS COLINA CAMPUS	08/12/13	951.	570.	SL	5.00	190.
131	FOLDING CHAIRS - COLINA CAMPUS	08/12/13	799.	479.	SL	5.00	160.

132	CHALKBOARDS -- COLINA CAMPUS					
	08/12/13	979.	588.	SL	5.00	196.
133	ACER ASPIRE -- V5471P					
	09/03/13	789.	459.	SL	5.00	158.
134	PRINTER					
	10/09/13	809.	456.	SL	5.00	162.
135	SCANNER					
	11/01/13	475.	259.	SL	5.00	95.
136	WINTER FAIRE SUPPLIES					
	01/01/14	8,093.	4,121.	SL	5.00	1,619.
137	50 METAL FOLDING CHAIRS					
	01/22/14	688.	338.	SL	5.00	138.
138	50 METAL FOLDING CHAIRS					
	01/22/14	687.	337.	SL	5.00	137.
139	SCRIP PRINTER					
	03/01/14	325.	154.	SL	5.00	65.
140	CREDIT CARD TERMINAL					
	03/03/14	678.	321.	SL	5.00	136.
141	WOODCREST CHAIR					
	06/18/14	151.	63.	SL	5.00	30.
142	IMPROVEMENTS					
	08/01/13	66,726.	40,035.	SL	5.00	13,345.
143	IMPROVEMENTS					
	09/30/13	491.	277.	SL	5.00	98.
144	IMPROVEMENTS					
	10/08/13	0.			.000	0.
145	IMPROVEMENTS					
	01/01/14	1,342.	341.	SL	10.00	134.
146	IMPROVEMENTS					
	09/25/14	867.	303.	SL	5.00	173.
147	IMPROVEMENTS					
	12/18/14	500.	150.	SL	5.00	100.
148	CONTAINER					
	07/01/14	500.	200.	SL	5.00	100.
149	SOLAR EXPENDITURE					
	07/01/14	22,772.	7,627.	SL	5.00	4,554.
150	CABINETS					
	07/09/14	351.	140.	SL	5.00	70.
151	30 DESKES					
	07/15/14	6,105.	2,340.	SL	5.00	1,221.
152	CHAIRS FOR MUSIC ROOM					
	08/11/14	1,552.	569.	SL	5.00	310.
153	6 FOLDING TABLES					
	08/13/14	548.	201.	SL	5.00	110.
154	WARDROBS					
	08/18/14	952.	349.	SL	5.00	190.
155	USMARKER BOARD					
	08/20/14	547.	200.	SL	5.00	109.
156	TABLES & STOOLS					
	08/22/14	2,725.	999.	SL	5.00	545.
157	CLASSROOM FURNITURE					
	08/23/14	5,745.	2,107.	SL	5.00	1,149.
158	BLACKBOARDS					
	08/27/14	756.	277.	SL	5.00	151.

159	ASUS DESKTOP MOTHERBOARD					
	08/29/14	1,592.	583.	SL	5.00	318.
160	IKEA FURNITURE					
	08/30/14	470.	172.	SL	5.00	94.
161	FURNITURE & FIXTURE					
	09/05/14	0.			.000	0.
162	12X12 COLEMAN TENT					
	09/10/14	580.	203.	SL	5.00	116.
163	FUJITSU SNAPSCAN SCANNER					
	09/10/14	968.	339.	SL	5.00	194.
164	DESKTOP MOTHERBOARD					
	12/09/14	2,511.	753.	SL	5.00	502.
165	COMMERCIAL GRILL					
	12/12/14	400.	120.	SL	5.00	80.
166	COMPUTER HARDWARE & SOFTWARE					
	02/17/15	1,062.	283.	SL	5.00	212.
167	SECURITY CAMERA SYSTEMS					
	03/27/15	7,913.	1,179.	SL	5.00	1,583.
168	EQUIPMENT					
	06/30/15	13,000.	1,300.	SL	5.00	2,600.
169	COMMERCIAL KITCHEN REPAIR					
	09/17/14	2,039.	357.	SL	10.00	204.
170	MUSIC ROOM STORAGE					
	10/11/14	8,768.	1,462.	SL	10.00	877.
171	INSTALL LOWER PARKING LOT					
	11/14/14	2,832.	448.	SL	10.00	283.
172	REPLACE POST BOLTED TO STAIRS					
	11/15/14	132.	21.	SL	10.00	13.
173	ROOF REPAIR					
	01/13/15	4,000.	567.	SL	10.00	400.
174	ROOF REPAIR					
	01/21/15	7,158.	1,014.	SL	10.00	716.
175	SECURITY SYSTEM					
	07/01/15	10,777.	1,976.	SL	5.00	2,155.
176	FURNITURE & FIXTURE					
	08/13/15	508.	85.	SL	5.00	102.
177	BOOKSHELVES					
	08/21/15	264.	44.	SL	5.00	53.
178	2 NEC DSX 34 BUTTON TELEPHONE SET					
	08/26/15	259.	43.	SL	5.00	52.
179	REFRIGRATOR					
	08/30/15	1,336.	223.	SL	5.00	267.
180	NEC DSX 34 BUTTON TELEPHONE					
	09/01/15	319.	48.	SL	5.00	64.
181	STUDENT CHAIRS					
	09/03/15	1,064.	160.	SL	5.00	213.
182	BACKYARD ADVENTURES					
	09/04/15	1,825.	274.	SL	5.00	365.
183	18000 BTU A/C UNIT					
	09/09/15	3,289.	494.	SL	5.00	658.
184	CHAIRS FOR FACULTY LOUNGE					
	09/12/15	82.	12.	SL	5.00	16.
185	6 DESKTOP COMPUTERS					
	09/14/15	4,745.	712.	SL	5.00	949.

186	TABLE FOR KITCHEN					
	09/14/15	209.	31.	SL	5.00	42.
187	FURNITURE FOR FIBER ROOM					
	09/23/15	238.	36.	SL	5.00	48.
188	UAP-LR 2.4 ACCESS POINT WIRELSS					
	10/05/15	396.	53.	SL	5.00	79.
189	5 PORT NETWORK SWITCH					
	10/05/15	737.	98.	SL	5.00	147.
190	2 COMPUTERS					
	10/30/15	1,593.	212.	SL	5.00	319.
191	COMPUTER MONITOR					
	11/10/15	144.	17.	SL	5.00	29.
192	BUS OFFICE DESK					
	11/18/15	119.	14.	SL	5.00	24.
193	NEC DESK PHONE					
	12/04/15	199.	20.	SL	5.00	40.
194	QQUEST SOFTWARE SYSTEM					
	06/21/16	4,082.		SL	5.00	816.
195	5 COMPUTERS					
	06/30/16	1,782.		SL	5.00	0.
196	CHALKBOARDS					
	06/30/16	11,830.		SL	5.00	2,366.
197	IMPROVEMENTS					
	07/06/15	4,939.	647.	SL	7.00	706.
198	IMPROVEMENTS					
	08/07/15	1,518.	181.	SL	7.00	217.
199	IMPROVEMENTS					
	08/10/15	975.	116.	SL	7.00	139.
200	IMPROVEMENTS					
	08/18/15	1,260.	150.	SL	7.00	180.
201	IMPROVEMENTS					
	08/26/15	1,435.	24.	SL	50.00	29.
202	IMPROVEMENTS					
	09/07/15	739.	79.	SL	7.00	105.
203	IMPROVEMENTS					
	09/07/15	330.	35.	SL	7.00	47.
204	IMPROVEMENTS					
	09/09/15	400.	60.	SL	5.00	80.
205	IMPROVEMENTS					
	09/30/15	33,297.	499.	SL	50.00	666.
206	IMPROVEMENTS					
	02/01/16	33,726.	225.	SL	50.00	675.
207	VOLKSWAGON VAN #1					
	10/30/15	15,131.	2,036.	SL	5.00	3,026.
208	VOLKSWAGON VAN #2					
	10/30/15	15,131.	2,026.	SL	5.00	3,026.
209	VOLKSWAGON VAN #3					
	10/30/15	15,131.	2,027.	SL	5.00	3,026.
210	SWITCH					
	07/26/16	1,080.		SL	5.00	198.
211	BADGE PRINTER AND PORTABLE MONITORS					
	11/30/16	1,190.		SL	5.00	139.
212	PRINTER					
	12/28/16	900.		SL	5.00	90.

213	IPAD AND MOUNT					
	12/31/16	860.	SL	5.00	86.	
214	WATER COOLER					
	12/31/16	781.	SL	5.00	78.	
215	IPAD LOCK BOXES					
	03/27/17	225.	SL	5.00	11.	
216	FURNITURE & FIXTURE					
	06/30/17	2,928.	SL	5.00	0.	
217	HVAC UNIT					
	06/30/17	6,350.	SL	5.00	0.	
218	METAL LUCH TRAYS					
	06/30/17	550.	SL	5.00	0.	
219	KITCHEN EQUIPMENTS					
	06/30/17	1,112.	SL	5.00	0.	
220	STAINLESS STEELE SERVING TRAYS					
	06/30/17	760.	SL	5.00	0.	
221	TOOLS					
	06/30/17	1,549.	SL	5.00	0.	
222	FURNITURE & FIXTURE					
	06/30/17	3,774.	SL	5.00	0.	
223	TOOLS					
	06/30/17	384.	SL	5.00	0.	
224	SERVER					
	06/30/17	1,125.	SL	5.00	0.	
225	IT EQUIPMENT					
	06/30/17	2,597.	SL	5.00	0.	
226	SPORT COURT(ALTA DENA)					
	05/31/17	57,772.	SL	10.00	481.	
227	ANNEX REMODEL(ALTA DENA CAMPUS)					
	09/30/16	16,294.	SL	50.00	244.	
228	DOOR					
	12/20/16	1,140.	SL	7.00	81.	
229	6 WINDOWS					
	12/23/16	2,533.	SL	7.00	181.	
TOTAL DEPR TO FORM 3885		6,177,322.	835,879.		139,645.	

TAXABLE YEAR
2016

California e-file Return Authorization for Exempt Organizations

FORM
8453-EO

Exempt Organization name ASSOCIATION FOR WALDORF EDUCATION IN SAN DIEGO	Identifying number 95-3641387
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Part I Electronic Return Information (whole dollars only)

1 Total gross receipts (Form 199, line 4)	1 5,656,358.00
2 Total gross income (Form 199, line 8)	2 5,124,492.00
3 Total expenses and disbursements (Form 199, line 9)	3 4,845,022.00

Part II Settle Your Account Electronically for Taxable Year 2016

4 <input type="checkbox"/> Electronic funds withdrawal	4a Amount	4b Withdrawal date (mm/dd/yyyy)
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Part III Banking Information (Have you verified the exempt organization's banking information?)

5 Routing number _____	7 Type of account: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
6 Account number _____	

Part IV Declaration of Officer

I authorize the exempt organization's account to be settled as designated in Part II. If I check Part II, Box 4, I authorize an electronic funds withdrawal for the amount listed on line 4a.

Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2016 California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization's fee liability, the exempt organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. **If the processing of the exempt organization's return or refund is delayed, I authorize the FTB to disclose to the ERO or intermediate service provider the reason(s) for the delay.**

Sign Here Signature of officer _____ Date _____ **TREASURER** Title _____

Part V Declaration of Electronic Return Originator (ERO) and Paid Preparer.

I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the exempt organization's return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB 8453-EO before transmitting this return to the FTB; I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2016 e-file Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for **four** years from the due date of the return or **four** years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

ERO ERO's signature _____	Date _____	Check if also paid preparer <input type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's PTIN P00736945
Must Sign Firm's name (or yours if self-employed) and address	THE OZUROVICH GROUP, INC. 1901 AVENUE OF THE STARS #1050 LOS ANGELES, CA			FEIN 95-4502766 ZIP code 90067

Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

Paid Preparer Paid preparer's signature _____	Date _____	Check if self-employed <input type="checkbox"/>	Paid preparer's PTIN P00736945
Must Sign Firm's name (or yours if self-employed) and address	THE OZUROVICH GROUP, INC. 1901 AVENUE OF THE STARS #1050 LOS ANGELES, CA		
			FEIN 95-4502766 ZIP code 90067

TAX RETURN FILING INSTRUCTIONS

CALIFORNIA FORM RRF-1

FOR THE YEAR ENDING

June 30, 2017

Prepared for	Association For Waldorf Education IN San Diego 3547 Altadena Avenue San Diego, CA 92105
Prepared by	The Ozurovich Group, Inc. 1901 Avenue of the Stars #1050 Los Angeles, CA 90067
Amount due or refund	Balance due of \$150.00
Make check payable to	Attorney General Registry of Charitable Trusts
Mail tax return and check (if applicable) to	Registry of Charitable Trusts P.O. Box 903447 Sacramento, CA 94203-4470
Return must be mailed on or before	Please mail as soon as possible.
Special Instructions	The report should be signed and dated by the authorized individual(s).

MAIL TO:
 Registry of Charitable Trusts
 P.O. Box 903447
 Sacramento, CA 94203-4470
 Telephone: (916) 445-2021

WEB SITE ADDRESS:
<http://ag.ca.gov/charities/>

**ANNUAL
 REGISTRATION RENEWAL FEE REPORT
 TO ATTORNEY GENERAL OF CALIFORNIA**

Sections 12586 and 12587, California Government Code
 11 Cal. Code Regs. sections 301-307, 311 and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties as defined in Government Code section 12586.1. IRS extensions will be honored.

State Charity Registration Number: CT 041463 ASSOCIATION FOR WALDORF EDUCATION IN SAN DIEGO <small>Name of Organization</small> 3547 ALTADENA AVENUE <small>Address (Number and Street)</small> SAN DIEGO, CA 92105 <small>City or Town, State and ZIP Code</small>	Check if: <input type="checkbox"/> Change of address <input type="checkbox"/> Amended report Corporate or Organization No. <u>0988153</u> Federal Employer I.D. No. <u>95-3641387</u>
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ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311 and 312)
 Make Check Payable to Attorney General's Registry of Charitable Trusts

Gross Annual Revenue	Fee	Gross Annual Revenue	Fee	Gross Annual Revenue	Fee
Less than \$25,000	0	Between \$100,001 and \$250,000	\$50	Between \$1,000,001 and \$10 million	\$150
Between \$25,000 and \$100,000	\$25	Between \$250,001 and \$1 million	\$75	Between \$10,000,001 and \$50 million	\$225
				Greater than \$50 million	\$300

PART A - ACTIVITIES

For your most recent full accounting period (beginning 07/01/2016 ending 06/30/2017) list:
 Gross annual revenue \$ 5,079,475. Total assets \$ 6,186,378.

PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: If you answer "yes" to any of the questions below, you must attach a separate sheet providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

	Yes	No
1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest?		X
2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?		X
3. During this reporting period, did non-program expenditures exceed 50% of gross revenues?		X
4. During this reporting period, were any organization funds used to pay any penalty, fine or judgment? If you filed a Form 4720 with the Internal Revenue Service, attach a copy.		X
5. During this reporting period, were the services of a commercial fundraiser or fundraising counsel for charitable purposes used? If "yes," provide an attachment listing the name, address, and telephone number of the service provider.		X
6. During this reporting period, did the organization receive any governmental funding? If so, provide an attachment listing the name of the agency, mailing address, contact person, and telephone number.		X
7. During this reporting period, did the organization hold a raffle for charitable purposes? If "yes," provide an attachment indicating the number of raffles and the date(s) they occurred.		X
8. Does the organization conduct a vehicle donation program? If "yes," provide an attachment indicating whether the program is operated by the charity or whether the organization contracts with a commercial fundraiser for charitable purposes.		X
9. Did your organization have prepared an audited financial statement in accordance with generally accepted accounting principles for this reporting period?	X	

Organization's area code and telephone number 619-287-3054

Organization's e-mail address _____

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, it is true, correct and complete.

PATRICK GODDARD

TREASURER

Signature of authorized officer

Printed Name

Title

Date