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Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

➤ Sponsoning organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than \$0.000 and total assets less than \$1,250,000 at the end of the year may use this form.

➤ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No. 1545-1150

2009

Open to Public Inspection

	tment of that Revenue	he Treasury s Service		► The organ				d of the year ma return to satisfy			irements		Inspection
		2009 calenda	ar year,							and endin			, 20
Вс	heck if ap	plicable	Please	C Name of c	organizațion				_		D Emp	oloyer iden	tification number
=	ddress cl	-	use IRS label or	u	Inidos	s Ni	Cara	014/0			2	7- 17.	36736
=	lame cha	-	print or				is not delive	red to street ad	dress)	Room/suit		phone num	
_	nıtıal retur erminated		type See	10-	30/	NE	145+	1.51			4/	2 5 - 8	721-5252
=	mended		Specific	City or town,	, state or cour	ntry, and ZIP	+ 4		.,	-		oup Exemp	
=		n pending	Instruc- tions.	R	thell.	WA	4	8011				mber ►	Mon
_		ion 501(c)(3)	o ranni						- 44 4	0.00			7 Cook 57 Account
	- Secti			npleted Sch				trusts must	attacn		her (specif		☐ Cash 🔀 Accrual
			,		,					H C	eck ▶ 🗆	if the org	anization is not
N I	/ebsite	e:▶ <u>ʎ</u>	<u> </u>	/unid	OShic	araqu	(a. o	ra		re	quired to a	ttach Sche	edule B (Form 990,
J T	ах-ехе	mpt status (d	Heck or	ıly one) — 🛭	₹ 501(c) (🗧	ر ر (inse	rt no.)	4947(a)(1) or	52	7 99	0-EZ, or 99	90-PF)	
K C	heck >	► ☐ if the	organi	zation is not	a section 50	9(a)(3) supp	orting orga	nization and i	ts gross	receipts a	re normally	not more	than \$25,000. A
F	orm 99	0-EZ or Form											
		5b, 6b, and 7											376 322
	art I							or Fund B					
	1											11	373 878
	2	Program se										2	2 444
	3											3	
	4	Investment	•		omonio .							4	
	5a	Gross amo			septe other	rthan invo	nton:		50	• • •			
	b	Less: cost							5a 5b			-	
	C							 tract line 5b		no Fo\		+=-1	
9	_											5c	
ב	6							ny amount is fr	om gam ı	i ng, check r	iere 🕨 📋		
Revenue	а	Gross reve	nue (no	at including	\$		of co	ntributions	1 . 1				
œ		reported or							6a			4	
-		Less: direc	t e ≱per	ises other t	than fundra	aising expe	enses .		6b		<u> </u>		
	اعاما	Net mcom) of (los	ss) from spe	ecial event	s and activ	∕ities (Sub	tract line 6b	from [ine 6a) .		6c	
	7a	Gross sale	გჯ\ inv	entory, less	s returns a	nd allowan	ices		7a			_	
4 4		Less; cost							7b				
ΛA	(4c 4	Grossbrof			les of inver	ntory (Subt	ract line 7	7b from line	7a) .			7c	
	8	Other reve)	8	
D	$\nabla \mathbf{g} \in \mathbb{C}$	Total teve	nue. Ac	d lines 1, 2	2, 3, 4, 5c,	6c, 7c, and	d8				▶	9	376.322
9		Cfants and	ew hila	amounts p	paid (attac	h schedule))					10	4,240
	11	Benefits pa	id to o	r for memb								11	-
es	12	Salaries, of	her co	mpensatior	n, and emp	oloyee bene	efits					12	32,644
Expenses	13							ractors				13	5 223
be	14											14	14.728
ᄶ	15	Printing of	hlicati	one noetac	and chi	inning						15	17,120
	16	Other expe	nees (c	iescribe 🟲	,0, dila 311	ا اسا	1	rtation,		<i>.</i>		16	30,750
	17	Total expe	nese	Add lines 1	O through	<u> </u>	Transpo	PHATION,	JUPP	is, m	<u>15C</u>)		
_	18	. oto. oxpe	11000.7	TOO III IES T	o unougn	10	<u></u>		<u> </u>	<u> </u>		17	87,585
Assets	19	Not appete	dencity	for the year	ir (Subtract	t line 17 tro	m line 9)					18	<u> 288,737</u>
SS	15	and of you	or iun	u balances	at beginn	iing of yea	ir (trom lir	ne 27, colur	nn (A))	(must ac	ree with		
												19	-o-
Net	20	Other chan	ges in	net assets	or fund ba	lances (atta	ach expla	nation)				20	
	21	Net assets	or fund	balances	at end of y	ear. Comb	ine lines	18 through 2	<u> 20 .</u>		▶	21	288,737
Ρ?	art II	Balance	Shee					are \$1,250,0	00 or r	nore, file	Form 990	instead	of Form 990-EZ.
						ns for Part I	ll.)			(A)	Beginning o	of year	(B) End of year
22		sh, savings,		vestments							-0	22	54.963
23	Lai	nd and build	lings .							. —	P	23	
24		her assets (d		مر ♦ ه	ا . د مدمان	AIR	Pro	روح أمامه	 E115 C	~	-0-	24	
25		tal assets .		-to	Tacat	7.443.	- 112	FRIE EF	E11) C	* ′	- -	25	
26		tal liabilitie:		ribe.►	1 -		11/2			∵, ├─	<u>-</u> B-	26	
27		t assets or			ne 27 of co	20.75 PR Nump (R) ≠	nust sare	e with line ?	1)	-' ├─		27	+
		y Act and Pa							<u> </u>	<u></u> _	<u> </u>		
	PLINSV	, not ally ra	PC! WU!	a meduction	MCL NOTICE	, see the se	eparate in:	structions.		Cat No	106421	F	Form 990-EZ (2009
	Privacy												-

Part	Other Information (Note the statement requirements in the instructions for Part V.)			
•			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	1	./
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.	-		
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		_/
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		/
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a			
b	Did the organization file Form 1120-POL for this year?	37b		/
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on line 9]		
b	Gross receipts, included on line 9, for public use of club facilities	. ,		1
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶			
Ь	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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? If "Yes," complete Schedule L, Part I	40b		/
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization	,		
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		
41	List the states with which a copy of this return is filed. ▶ Washington			
42a	The organization's books are in care of ► Hilario Pardo Telephone no. ► 423	-21	6-4	1422
	Located at ► 10301 NE 145th St Bothell, WA ZIP+4 ► g	1801		
b	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		Yes	No
	account)?	42b		<u>~</u>
	If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		
_	If "Yes," enter the name of the foreign country:	720	-	
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here			• □
	and enter the amount of tax-exempt interest received or accrued during the tax year	· ·		
		ſ	Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of	\Box		
	Form 990-EZ	44		/
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45		
				<u> </u>

Part V	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 and	17(a)(1) nonexempt chari	xempt charitab table trusts mus	le trusts only. Alt answer questio	l section ns 46–49	1 9b
	Did the organization engage in direct or indirect				Ye	s No
	candidates for public office? If "Yes," complete s				46	1
	Did the organization engage in lobbying activities				47	/ '
	s the organization a school as described in section		•		48	\
	Did the organization make any transfers to an ex	•	•		49a 49b	+~
	If "Yes," was the related organization a section 5 Complete this table for the organization's five hi					nd kev
	employees) who each received more than \$100,					
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Exp accoun other allo	t and
	None					
				 		
		1		1		
f	Total number of other employees paid over \$100	0,000 > /	rone	_		
	\$100,000 of compensation from the organizatio (a) Name and address of each independent contractor	paid more than \$100,000		pe of service	(c) Comper	sation
	Noke					
_ 						
d	Total number of other independent contractors of	each receiving over \$100,0	00▶	rone		
	Under penalties of perjury, I declare that I have examin and belief, it is true, correct, and complete Declaration	ed this return, including accompar of preparer (other than officer) is l	nying schedules and sta based on all information	atements, and to the bes	st of my kno any knowle	wledge dge
Sign Here	Signature of officer VICEPUES I DENT Type or print name and title	J. Hilario Parde	>	3/17/ Date	201	0_
Paid Prepare	Preparer's signature	Date	Check if self- employed ▶ □	Preparer's identifying nur	nber (See inst	ructions)
Use On	(Firm's name (or		E	N		
	address, and ZIP + 4		Pi	hone no		
May th	e IRS discuss this return with the preparer show	n above? See instructions	<u></u>	<u>.,.</u> ▶ [Yes L	No No
				Fa	rm ッケリーに	. (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

		Uni	Los Ni	eraqua					27	1236	736
Pai	rt I	Reason	for Public Ch	arity Status (All or	ganizatio	ns mus	comple	ete this			
- The	orga			dation because it is.							
1				rches, or association		-					
2		A school des	scribed in <mark>sectio</mark>	n 170(b)(1)(A)(ii). (Att	ach Sche	edute E)					
3		A hospital or	a cooperative	ospital service organ	ization de	escribed	ın sectio	n 170(b)	(1)(A)(iii).		
4			esearch organiza ime, city, and sta	tion operated in conj	unction v	vith a ho	spital des	scribed in	section	170(b)(1)(A)(iii). Enter the
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)									
6		A federal, sta	ate, or local gov	ernment or governme	ntal unit	describe	d in secti	ion 170(b	o)(1)(A)(v)	١.	
7		An organizat	ion that normally	receives a substantia	al part of						the general public
8			• • •	in section 170(b)(1)		omplete	Part II.)				
9				receives (1) more that				n contrib	utions, m	embersh	p fees, and gross
				ed to its exempt funct							
				ent income and unre						511 tax)) from businesses
		acquired by	the organization	after June 30, 1975	See sec	tion 509(a)(2). (Co	mplete F	Part III)		
10		An organizat	ion organized ar	nd operated exclusive	ely to test	for publ	ic safety	See sec	tion 509	(a)(4).	
11				nd operated exclusiv							r to carry out the
		purposes of	one or more pul	olicly supported organ	nizations	describe	d in secti	on 509(a	(1) or sec	ction 509	(a)(2) See section
		509(a)(3). Ch	neck the box tha	it describes the type	of suppo	rting orga	anızatıon	and com	iplete line	es 11e thi	rough 11h.
		a 🗌 Type	1 b [Type II c	: 🗌 Тур	e III–Fun	ctionally	integrate	d	d□	Type III-Other
e				ofy that the organizat							
				n managers and other	r than one	e or more	publicly	supporte	ed organiz	zations de	escribed in section
		509(a)(1) or	section 509(a)(2)	•							
f				a written determinati	on from	the IRS	that it is	a Type	l, Type II	, or Type	III supporting
		•	, check this box								🗆
g		Since Augus following pe		the organization acce	epted any	gift or c	ontributio	on from a	iny of the	:	
			-	r indirectly controls, enting body of the supp		-		h persor	ns describ	oed in (ii)	11g(i) Yes No
		(ii) A family	member of a pe	rson described in (i) a	above?						11g(iı)
				of a person described		(iı) above	?				11g(iii)
<u>h</u>		Provide the	following informa	ation about the suppo	orted orga	anızatıon	(s)				
(ı)		of supported ganization	(n) EIN	(iii) Type of organization		organization		ou notify		s the	(vii) Amount of
	υıξ	janization		(described on lines 1-9 above or IRC section		sted in your document?		nzation in of your	organizat (i) organi:	zed in the	support
			ļ	(see instructions))	ļ			oort?		S?	1
					Yes	No	Yes	No	Yes	No	
											
											-
			l	l	i	l l	l	ŧ .	Į.	l I	l

	Support Schedule for Org (Complete only if you chec	j <mark>anizations l</mark> ked the box	Described in on line 5, 7,	Sections 17 or 8 of Part I	O(b)(1)(A)(iv) .)	and 170(b)(1)(A)(vi)
Sec	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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		<u> </u>			<u> </u>	
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	<u> </u>					
	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 IV)						
11	Total support. Add lines 7 through 10 .		` `	3 15	À .	€ 4	
12	Gross receipts from related activities, etc.	•				12	
13	First five years. If the Form 990 is for organization, check this box and stop he	re					on 501(c)(3)
	tion C. Computation of Public Su					20	
14	Public support percentage for 2009 (line		-	1, column (f))		14	%
15	Public support percentage from 2008 Sc					15	%
16a	33½ % support test—2009. If the organiand stop here. The organization qualifies	as a publicly	supported orga	nization			. ▶ [
b	33% % support test—2008. If the organic box and stop here. The organization qua	zation did not i alifies as a publ	check a box on licly supported	line 13 or 16a, organization .	and line 15 is	33½ % or more	check this
17a	10%-facts-and-circumstances test – 20 more, and if the organization meets the "forganization meets the "facts-and-circum	09. If the orgar acts-and-circui	nization did not e mstances" test,	check a box on check this box	line 13, 16a, or and stop here	r 16b, and line 1 . Explain in Part	4 is 10% or IV how the
b 18	10%-facts-and-circumstances test—2008 more, and if the organization meets the "facts-and-circumsta Private foundation. If the organization dict	acts-and-circun ances" test The	nstances" test, o organization qua	check this box a alifies as a public	and stop here cly supported or	Explain in Part ganization	IV how the
_							

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

	(Complete only if you checke	ed the box o	n line 9 of Pa	rt I.)			
	tion A. Public Support						
Ca	elendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include					373,878	373 878
2	any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the					3/3,8/0	373,878
	organization's tax-exempt purpose						2,444
3	Gross receipts from activities that are not an unrelated trade or business under section 513						<u> </u>
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						-0-
5	The value of services or facilities furnished by a governmental unit to the organization without charge						-0-
6	Total. Add lines 1 through 5						<u>376,32</u> 2
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						-0-
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						
	Add lines 7a and 7b		ļ.,	_ ~ ×	*	- 9, -,	<u> </u>
8	Public support (Subtract line 7c from line 6)	r r	y 15		**	, in the second	376,32Z
	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(-) 2007	(-f) 0000	(-) 0000	(O Takal
		(a) 2003	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						<u>376,37</u> 2
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						-
С 11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						. o
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						-0-
13	Total support. (Add lines 9, 10c, 11, and 12)						376.322
14	First five years. If the Form 990 is for organization, check this box and stop	here		nd, third, fourth			n 501(c)(3) ▶ 💢
Sec	tion C. Computation of Public Su	pport Perce	ntage				
15	Public support percentage for 2009 (lin	e 8, column (f	f) divided by lir	ne 13, column (f))	15	%
16	Public support percentage from 2008 S	Schedule A, P	art III, line 15	<u> </u>		16	%%
	tion D. Computation of Investmen					1 1	
17	Investment income percentage for 200	9 (line 10c, co	lumn (f) divide	d by line 13, co	olumn (f)) .	17	<u>%</u>
18	Investment income percentage from 20	108 Schedule	A, Part III, line	17		18	<u> </u>
19a	33½ % support tests—2009. If the organism not more than 33½ %, check this b	ox and stop h	ere. The organ	ization qualifies	as a publicly	supported orga	nızation 🕨 🗆
b	331/3 % support tests - 2008. If the organ line 18 is not more than 331/3 %, check this	s box and stop	here. The orga	nization qualifies	s as a publicly	supported orga	nization 🕨 🔲
20	Private foundation. If the organization						

ichedule A (Fr	orm 990 or 990-EZ) 2009		Page 4
Part IV	Supplemental Information. Complete this Part II, line 17a or 17b; and Part III, line 12	s part to provide the explanations required? Provide any other additional information.	by Part II, line 10; See instructions.
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