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Department of the Treasury Internal Revenue Service

## **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)

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

OMB No 1545-0047 Open to Public

				•	,, <u> </u>	
<u>A</u>			ear, or tax year beginning , and ending	<b>7</b> 5 5		
$\overline{}$	Check if applicat	IDC	C Name of organization	D Employer identification number		
$\sqsubseteq$	Address change	label or	WESTERN ENERGY WORKERS, S1978	74-	2525929	
	Name change	print or	Doing Business As	<del></del>	none number	
	Initial return	type. See	Number and street (or P O box if mail is not delivered to street address)  Room/suite		-362-3820	
$\overline{\sqcap}$	Termination	Specific	PO BOX 1426		222 424	
$\equiv$		Instruc-	City or town, state or country, and ZIP + 4  ROCK SPRINGS WY 82902	G Gross rece	eipis \$ 255, 161	
$\sqsubseteq$	Amended return	<u> </u>		H(a) le this	a group return for	
Ш	Application pend	ding   Nami	e and address of principal officer	affiliati		
		-		H(b) Are all	affiliates	
				includ	attach a list (see instructions)	
_	T	<b>Y</b>	501(c) ( <b>5</b> ) ◀ (insert no ) 4947(a)(1) or 527	<b>─</b>   " ''' <sup>0</sup> ,	dilacti a list (see liistiuciiolis)	
<u>+</u>	Tax-exempt Website: ▶		501(c) ( <b>5</b> ) ◀ (insert no )   4947(a)(1) or   527	H(c) Groun	exemption number > 1252	
		ation X Co	ooration Trust Association Other ▶ L Year of formation	TI(C) GIOUP	M State of legal domicile	
	art 1	Summa			State of legal doffliche	
95.			he organization's mission or most significant activities			
	I Dilei	-	DRGANIZATION		•	
JC .	1	TABOK (	AGANIZATION .			
る声			•	•		
Š.	2 Chec	ck this box	if the organization discontinued its operations or disposed of more than 25% of its net	accate		
<b>Z</b> 8	ı		g members of the governing body (Part VI, line 1a)	3		
TI'S			endent voting members of the governing body (Part VI, line 1b)	4		
בֱּב		•	employees (Part V, line 2a)	5		
≓્ટ	L		volunteers (estimate if necessary)	6		
7	1		ated business revenue from Part VIII, column (C), line 12	7a		
7 January Covernance Activities & Governance	l	•	siness taxable income from Form 990-T, line 34	7b	0	
.5	D Net	uniciated be		Year	Current Year	
<u></u>	8 Conf	tributions an	d grants (Part VIII, line 1h)			
Sevenue Several	9 Prog	ram service	revenue (Part VIII, line 2g)	80,212	220,508	
eve	10 Inve	stment inco	ne (Part VIII, column (A), lines 3, 4, and 7d)	257	10,099	
Œ	11 Othe	er revenue (l	Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	25,845	2,574	
	12 Tota	l revenue –	add lines 8 through 11 (must equal Part VIII, column (A), line 12)	54,624	233,181	
			ar amounts paid (Partix, column (A), lines 1–3)			
			or for members (Rati-1x, collymp (A), line 4)			
S			ompensation employee benefits (Part IX, column (A), lines 5–10)	26,063	32,141	
enses	16a Prof	essional fun	draising fees (Part X) Bollimn (Art Ine 11e)	V DO WESSES O C	A	
Expe	<b>b</b> Tota	l fundraisin	expenses (Rarl IX, column (D), line 25)			
Ш	17 Othe	er expenses	(Part IX, column (A) Intest 1 1a 111d-111-24f)	136,730	134,780	
	18 Tota	I expenses.		L62,793	166,921	
	19 Rev	enue less ex		L08,169 Current Year	66,260	
ts of	9 T-1-	l to /Do		230,597	End of Year 296,857	
Net Assets or	ZU lota			,	250,037	
Ę.	21 10ta		Part X, line 26) and balances Subtract line 21 from line 20	230,597	296,857	
	u zz wer Part√II∜		re Block	30,031	230,037	
17	वानसार,		Ities of perjury, I declare that I have examined this return, including accompanying schedules and statemen	nts and to the h	est of my knowledge	
		and belief, i	is true correct, and complete Declaration of preparer (other than officer) is based on all information of will	nch preparer ha	s any knowledge	
Si	gn		Chusan K Nichola	1		
	ere	Signati	rg of officer	Date	<del></del>	
• • • • • • • • • • • • • • • • • • • •		Signal.	Jusay R. Nichols			
		Type o	print name and title			
_			Date C	neck if	Preparer's identifying number	
Pa	iid	Preparer's signature	Se		(see instructions) P00144725	
Pr	eparer's		Heyborne, Radakovich & Company, PC	EIN	► 83-0288275	
Us	se Only	Firm's name	1 F7F Difference Charles 200	Phone		
	-	ıf self-emple address, ar			▶ 307-382-8510	
NAO	v the IDS 4		eturn with the preparer shown above? (see instructions)	on _	Yes No	
	<u> </u>		rwork Reduction Act Notice, see the separate instructions.		Form <b>990</b> (2009)	
DA		ot and Fapt	The state of the section of the sect		1 0/111 330 (2009)	

	WESTERN ENERGY		74-252592	29	Page <b>2</b>
	ribe the organization's missio	Service Accomplishments			
	ORGANIZATION	*1			
	•	•			•
		•			
_ <del></del>			<del></del>	<del></del>	
_	· · · · · · · · · · · · · · · · · · ·	icant program services during the yea	ir which were not listed on		□ v <b>▽</b> v
	rm 990 or 990-EZ? scribe these new services on	Schedulo O	•		Yes X No
		r make significant changes in how it c	onducts, any program		
services?			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Yes X No
If "Yes," des	scribe these changes on Scho	edule O			
		ents for each of the organization's thre			
		tions and section 4947(a)(1) trusts are		ount of grants and	
allocations	to others, the total expenses,	and revenue, if any, for each program	i service reported		
4a (Code	) (Expenses \$	including grants o	of \$	) (Revenue \$	)
N/A					
•				-	
•		•	•		
	•				
		•			
4b (Code.	) (Expenses \$	including grants o	of \$	) (Revenue \$	
		•			
	•				
					•
		•			
	•				
•					
•					•
4c (Code	) (Expenses \$	including grants of	of \$	) (Revenue \$	)
				•	
		-			
				•	
	•	•			
	•			•	
			•		
					•
	•				
4d Other progr	ram services (Describe in Sc	hedule O )			
(Expenses		including grants of \$	) (Revenue	\$	
4e Total progr	ram service expenses 🕨				

orm	990 (2009) WESTERN ENERGY WORKERS, S1978 74-2525929			Pa	age 3
Pa	rt 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)? If "Yes,"			į	7.5
_	complete Schedule A	1	_		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2	<u>-</u>		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	3	,	l	x
	candidates for public office? If "Yes," complete Schedule C, Part I	-3	<u>`</u>	$\dashv$	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	1 4	.		
5	Schedule C, Part II Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	-"	<b>'</b>	-+	
3	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	.		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have	F	1		
Ū	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"		1		
	complete Schedule D, Part I	6	,		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	F	+		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	,	1	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	<u>                                   </u>	$\top$		_==_
٠	complete Schedule D, Part III	١,	3		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part		$\top$		
•	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			- 1	
	complete Schedule D, Part IV	؛	9		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or				
	quasi-endowments? If "Yes," complete Schedule D, Part V	1	0		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,				
	VII, VIII, IX, or X as applicable	1	1	x	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	ŝ-di			ر ه م
	Schedule D, Part VI	77			1,5
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	(4)	* * * * * * * * * * * * * * * * * * *	点道.	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	10		E. K.	
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	1,5			25 179 18 18
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	) r		i,	100
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets	- Eg	3c, ,		15
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		`## \	1	ž .
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	( ) ( )		€36 £	\(\frac{1}{2}\), \(\frac{1}\), \(\frac{1}\), \(\frac{1}{2}\), \(\frac{1}2\
•	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? If "Yes," complete Schedule D, Part X	10,-		九	المام والمام والمام المام والمام
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	F.	205	•	X
	Schedule D, Parts XI, XII, and XIII		12	3 5	
12A	· ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	<u>Ιο</u> '''		385 72	
13	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		ستسا 13		X
13 14a			4a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	F	-		
_	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	1	4b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	Ė			
-	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	1	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance		$\dashv$		
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III		16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services		$\top$		
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	. L1	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on				
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	. Li	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII. line 9a?	- 1			l

If "Yes," complete Schedule G, Part III

20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

Pa	art/IV% Checklist of Required Schedules (continued)	-		ago .
	Officeration of frequines correspondents	ſ	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	1	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? If "Yes," complete Schedule J	23		x
24a	···			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c				
	to defease any tax-exempt bonds?	24c		
d		24d		
25a				
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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	İ		
	990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?	ļ		
	If "Yes," complete Schedule L, Part III	27	1	х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	ī.Gi		微泛
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV .	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30	<u> </u>	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	ł		l
	Part I	31	ļ	Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	1		<u>-</u> _
	Schedule N, Part II	32	<u> </u>	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? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,		ĺ	
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete		1	
20	Schedule R, Part V, line 2	35	-	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	1 00		1
27	organization? If "Yes," complete Schedule R, Part V, line 2	36	<del> </del>	├
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? If "Yes," complete Schedule R,	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	31	<del> </del>	-
50	19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38		x
	101 Total 7 iii 1 orini 000 more are required to complete concedere C		1	

If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Statements Regarding Other IRS Filings and Tax Compliance Y<u>es</u> No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable 1c gaming (gambling) winnings to prize winners? 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 this return (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year covered by 3a this return? If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 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)? If "Yes," enter the name of the foreign country b See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the X organization solicit any contributions that were not tax deductible? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7e benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? 9a Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a а 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 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

12a

74-2525929 Form 990 (2009) WESTERN ENERGY WORKERS, S1978

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.

Sec	tion A. Governing Body and Management			
<u> </u>	Con A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body		*£ 1.7%	30 01
b	Enter the number of voting members that are independent  1b		34. A	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	4.4	3 12	
-	any other officer, director, trustee, or key employee?	2	4 Triestary	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 organizational documents since the prior Form 990 was filed?	4		x
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		<u>x</u>
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		x
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	14. A. A.		1. F.
	the year by the following	1965		
а	The governing body?	8a	Х	
ь	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
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal			
Rev	renue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		<u>X</u>
þ	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	<u> </u>	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	1		3.
	form?	11		X
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990	10-	**	X
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	ł	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120	<u> </u>	
	describe in Schedule O how this is done	12c	ļ i	
13	Does the organization have a written whistleblower policy?	13		x
14	Does 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	3 6 S	3 36 6	376
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		F. W.	
а	The organization's CEO, Executive Director, or top management official	15a		
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)		traty, n	101-4
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		1	أتستأ
	with a taxable entity during the year?	16a	L	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate		- 10	351
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	35.0	Eci.	1 1 m
	the organization's exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
20	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.			
	organization F			

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

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. Use Schedule J-2 if additional space is needed.

- 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. 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

(A) Name and Title	(B) Average	Pos	tion (	(C checl		hat a	oplv)	<b>(D)</b> Reportable	<b>(E)</b> Reportable	(F) Estimated
Name and The	hours per week	or director	Institutional trustee	Officer		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
ROY MOYER PRESIDENT								0	0	
ROBERT JENSEN VICE PRESIDE								0	0	
MARIO MCKEEVER REC. SEC.								0	0	
SUSAN NICHOLS SEC. TREAS.		1						0	0	
<b>550.</b> 110115.										
				-	-					
•		<u> </u>								
									-	
				T	T					

(A)	(B)			((	C)			(D)	(E) Reportable	(F) Estimated
Name and Title  ➤	Average hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Heportable compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
•										
			ļ —							
		_								
	1	+	ļ							
	<u> </u>	+								
						-				
•										
					<u> </u>					
Total     Total number of individuals (				thos	se lis	sted a	abov	e) who received more that	n \$100,000 in	
reportable compensation from  3 Did the organization list any employee on line 1a? If "Yes For any individual listed on line organization and related individual  5 Did any person listed on line services rendered to the org	former officer, of a complete Schone 1a, is the suit organizations git 1a receive or a contraction? If "Yeanization? If "Yeanization?	directo nedule m of re reater ccrue	r or i J fo eport than	r suc table 1 \$15 pens	ch in con 60,00 satio	dividi npen: 00? If n froi	ual satio f "Ye m an	on and other compensation s," complete Schedule J for any unrelated organization f	n from or such	Yes 3 4 5
Complete this table for your compensation from the organical control of the compensation from the organical control of the control of th	five highest com	npensa	ated	ınde	pen	dent	cont	ractors that received more	e than \$100,000 of	
	(A) nd business address	_						Descr	(B) aption of services	(C) Compensa
							-			
							_		· · · · · · · · · · · · · · · · · · ·	

n 990	(2009) WESTERN ENERGY WORKERS,	S1978	74-2525929		Page 9
rt VI	<u></u>				
in the second		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
b c d e	Federated campaigns  Membership dues  Fundraising events  Related organizations  Government grants (contributions)  1a  1b  1c  1c  1d  1d				
	All other contributions, grifts, grants, and similar amounts not included above  Noncash contributions included in lines 1a-1f  \$				
_	Total. Add lines 1a–1f	Add and Comments and the continues	Common to		
	Busn. Code	e 1, 21 1, 13 8 8 8 1	- 15 2 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	at in the second	不大学的"通行"。"是
2a	DUES AND INITIATIONS	220,508			220,50
b					
C					
d					
е					
f	All other program service revenue			10. 1. 4.1.	a Table and the Sales and the
	Total. Add lines 2a–2f	220,508	46600000000000000000000000000000000000	with that he	<b>社结黑的心理研究</b>
	Investment income (including dividends, interest, and				40.00
	other similar amounts)	10,099			10,09
	Income from investment of tax-exempt bond proceeds				
5	Royalties	75 7368860	10 mg 34 mg/2 mg/2 10 7 17 7	Marian San San San San San San San San San S	1 - 1 1 - 1 - 1 - 1 - 1 - 1 -
	, (i) Real (ii) Personal				
	Gross Rents				
b	Less rental exps				
	Rental inc or (loss)	_Karzersiint			
	Net rental income or (loss)  Gross amount from (1) Securities (1) Other	1. 10 Frode 120	1585 #5 (68) 14.4 /	man y o g i skenje g i g g i g	178 5 20 Carton
	sales of assets (i) Securities (ii) Other				
	other than inventory				
b	Less cost or other		TO PER TE SEL		
	basis & sales exps				
	Gain or (loss)			11 6 ° 6 a	
	Net gain or (loss)		37.894.15.a • 7.7 *		4 * 1 5 5 40
8a	Gross income from fundraising events			10.1000 10.100	
	(not including \$				
	of contributions reported on line 1c)	The state of the state of		· · · · · · · · · · · · · · · · · · ·	Contract Contract
	See Part IV, line 18				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Less direct expenses b			نىڭىنىنىنىنىن سىلىنىدا	، كالتعالم أنك الألكانيانيان
	Net income or (loss) from fundraising events	The second second	* 1179, W 6 1 1	THE REAL POINT SERVING	915 17 1906 Fr 2 1950
9a	Gross income from gaming activities		The state of the s	(1) "注,不会接到	
	See Part IV, line 19 a				
	Less direct expenses b	(4)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	11" A	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Net income or (loss) from gaming activities		1		50 3 53
iva	Gross sales of inventory, less			, , , , , , , , , , , , , , , , , , , ,	
	returns and allowances a	<b>十</b> : 4: 3		1 3 7 6 300	
	Less. cost of goods sold b	<del> </del>			I and the same
С	Net income or (loss) from sales of inventory  Miscellaneous Revenue  Busn. Cod	e		. ,,	1.7
11-		2,574	<u> </u>	<del></del>	2,57
11a	OTHER INCOME	2,3/4	<u>-</u>		2,37
b		<del>                                     </del>		<del>                                     </del>	
, c	All other revenue	<del>                                     </del>	<del>                                     </del>		
d	All other revenue  Total. Add lines 11a–11d	2,574	1 9 2 3 3 A	12 11	
12	•	233,183		<del></del>	<del></del>
12	Total Revenue. See instructions	433,183	<u>-                                    </u>		1 433,101

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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) but are not required to complete columns (B), (C), and (D).

	All other organizations must o	complete column (A) but	are not required to compl		
	not include amounts reported on lines 6b, 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 governments and			生 人名 古 路 港	之子级名·40 、 产品
•	organizations in the U.S. See Part IV, line 21	•		·产生发表。\$1.368	
2	Grants and other assistance to individuals in			-1014 17 107 17 17 17 18 18 18 18 18 18 18 18 18 18 18 18 18	The state of the s
_	the U.S. See Part IV, line 22				September 1
3	Grants and other assistance to governments,				PARAMETER TO A SECTION OF SECTION
·	organizations, and individuals outside the				
	U.S See Part IV, lines 15 and 16				
4	Benefits paid to or for members			1.5. St. 2. 1.	
5	Compensation of current officers, directors,			1,43, 1, 2, 3, 3, 4, 4	, , , , , , , , , , , , , , , , , , ,
3	trustees, and key employees	4,710			
6	Compensation not included above, to disqualified	27720			
0	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	21,935			
7	Other salaries and wages	21,755			
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)				
9	Other employee benefits	E 406			
10	Payroll taxes	5,496			
11	Fees for services (non-employees)				
а	Management				· · · · · · · · · · · · · · · · · · ·
b	Legal	005			
С	Accounting .	825			
d	Lobbying		1. 454 7. 2 mass - 1 mass - 1 consider	The second section is a second se	,
е	Professional fundraising services See Part IV, line 17			<b>海</b> 線 (24年) (24年)	
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				<del>                                     </del>
15	Royalties				
16	Occupancy	13,950			<u></u>
17	Travel .				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				<del> </del>
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates .				
22	Depreciation, depletion, and amortization				
23	Insurance				
		1 36.23. 在15 数次	The state of the s	San Single	議り続かる 名藩
24	Other expenses. Itemize expenses not	[4] · 图 · 图 · 图 · 图 · 图 · 图 · 图 · 图 · 图 ·			
	covered above (Expenses grouped together	[数章]\$P\$二次整数。			<b>网络</b> 森尔尔() 春州
	and labeled miscellaneous may not exceed	[八百八十二]			
	5% of total expenses shown on line 25 below)	1、1000 はは	· *	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
а		75,385			
b	OFFICE AND OTHER OPER. CO	20,768			
c	OFFICE SUPPLIES	15,864			
d	CONTRIBUTIONS, GIFTS AND	5,779			
e	TELEPHONE	2,209			
f	•	,			
25	Total functional expenses. Add lines 1 through 24f	166,921			
26	Joint costs. Check here   ☐ If following  SOP 98-2 Complete this line only if the  organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation				<u></u>
DAA					Form 990 (2009)

Form 990 (2009) Part X **Balance Sheet** (A) (B) Beginning of year End of year 107,095 38,640 1 Cash-non-interest bearing Savings and temporary cash investments 3 Pledges and grants receivable, net Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete 6 Part II of Schedule L Assets 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 5,000 10a other basis Complete Part VI of Schedule D 5,000 5,000 10c b Less: accumulated depreciation 10b 186,957 184,762 11 Investments—publicly traded securities Investments—other securities See Part IV, line 11 12 12 13 13 Investments-program-related See Part IV, line 11 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 230,597 296,857 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D Liabilities 21 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 persons Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities Complete Part X of Schedule D 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ X and **Assets or Fund Balances** complete lines 27 through 29, and lines 33 and 34. 230,597 296,85 27 27 Unrestricted net assets 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 230,597 296,857 Set 33 Total net assets or fund balances 296,857 230,597 Total liabilities and net assets/fund balances

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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

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3b