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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 Inspection

and ending For the 2009 calendar year, or tax year beginning C Name of organization D Employer identification number Check if applicable USE IRS NORTHWEST SHEET METAL WORKERS Address change label or ORGANIZATIONAL TRUST print o Name change 91-6311527 Doing Business As Initial return Number and street (or P 0 box if mail is not delivered to street address) Room/suite See E Telephone number Specific Termin-18 NORTH LEWIS STREET 110 (360)863 - 8978Instruc-Amende tions 3,678,432. City or town, state or country, and ZIP + 4 G Gross receipts \$ Applica 98272 MONROE, WA H(a) Is this a group return pending F Name and address of principal officer: DWIGHT C. NELSON Yes X No for affiliates? SAME AS C ABOVE H(b) Are all affiliates included? Yes No Tax-exempt status X 501(c) (5) (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ► N/A **H(c)** Group exemption number ▶ Corporation X Trust Association Other > L Year of formation 1989 M State of legal domicile WA K Form of organization Part I Summarv Briefly describe the organization's mission or most significant activities: INDUSTRY ENHANCEMENT Activities & Governance Check this box 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 5 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 4 Total number of employees (Part V, line 2a) 0 6 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 7ь **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) Revenue RECEIVED 3,575,315 3,226,227. Program service revenue (Part VIII, line 2g) 72,296 41,289. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c and 14e) 1 0 2010 11 3,267,516. 3,647,611 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) 2,314,098 2,556,837. Benefits paid to or for members (Part IX, column (A), line'4)*** 479,162 504,960. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 226,952. 355,088 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 3,288,749. 3,148,348. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 499,263 -21,233.Revenue less expenses. Subtract line 18 from line 12 Assets or | **Beginning of Current Year End of Year** 4,331,377 4,481,051. 20 Total assets (Part X, line 16) 4,906. 5,920. 21 Total liabilities (Part X, line 26) Zet Set 4,326,471. 4,475,131. 22 Net assets or fund balances. Subtract line 21 from line 20 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 Designation of preparer (other than officer) is based on all information of which preparer has any knowledge 05/14/10 Sign Signature of office Here DWIGHT C. NELSON, EXECUTIVE DIRECTOR Type or print name and title Check if self-Date Preparer's identifying number (see instructions) Preparer's sanne Essenman Paid 5/5/10 signature employed > Preparer's Firm's name (or MCGOORTY EISENMAN, INC PS EIN ► yours if Use Only 10410 - 19TH AVE SE, STE 102 self-employed). address, and Phone no \triangleright (425)385-3483 EVERETT, WA 98208

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

Pai	t III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission: TO IMPROVE LABOR MANAGEMENT RELATIONSHIPS, JOB SECURITY,
	COMPETITIVENESS, PRODUCTIVITY, ORGANIZATIONAL EFFECTIVENESS AND
	ECONOMIC DEVELOPMENT IN THE SHEET METAL TRADE.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
3	
4	If "Yes," describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
7	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ Including grants of \$) (Revenue \$
	TO ORGANIZE THE UNORGANIZED AND TO MAKE SIGNATORY CONTRACTORS MORE
	COMPETITIVE IN THE MARKET PLACE.
4b	(Code:) (Expenses \$ Including grants of \$) (Revenue \$
4c	(Code:) (Expenses \$ Including grants of \$) (Revenue \$
	Other program services (Describe in Schedule O.)
4d	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses \$
-70	у при

932002 02-04-10 Form **990** (2009)

			res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		<u>X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	_ 5		<u> X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?	i		
	If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.			
•	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? If "Yes," complete Schedule D, Part VII.			
•	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? If "Yes," complete Schedule D, Part VIII.			
•	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? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	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.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	_13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		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? If "Yes," complete Schedule G, Part I	17		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? If "Yes," complete Schedule G, Part II	18		<u> X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			<u></u>
	complete Schedule G, Part III	19		X
20_	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X

Part IV Checklist of Required Schedules (continued)

United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 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 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 X and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule K if "No", go to line 25 24 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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 25 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 26 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 27 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person of uring the year? If "Yes," complete Schedule L, Part II 28 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 IV 29 Did the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV 28 In a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 21 X 22 Did the organization receive more than \$25,000 in non-c				Yes	No
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 27 if "Yes," complete Schedule I, Part I and IIII 22 X X 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 Schedule II. Part I was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No"; po to line 25 Did the organization maintain an escrow account other than a refunding secrow at any time during the year 10 bit the organization maintain an escrow account other than a refunding secrow at any time during the year? Did the organization maintain an escrow account other than a refunding secrow at any time during the year? Did the organization maintain an escrow account other than a refunding secrow at any time during the year? Did the organization maintain an escrow account other than a refunding secrow at any time during the year? Did the organization maintain an escrow account other than a refunding secrow at any time during the year? Did the organization maintain an escrow account other than a refunding secrow at any time during the year? Did the organization and 501(c)(6) and 501(c)(6) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If If yes, "complete Schedule I. Part I b is the organization and the transaction with a disqualified person during the year? If yes, "complete Schedule I. Part II b is the organization and the transaction with a disqualified person during the year? If yes, "complete Schedule I. Part II b is the organization or or other engines to an officer, director, trustee, we employee, highly compensated employee, or disqualified contribution; or a grant selection committee member, or to a person related to such an individual? If "Yes," complete	21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			.,
column (A), line 27 if "Yes," complete Schedule i, Parts I and III 2 Did the organization answer "Yes* to Part IVI, 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 bit 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? If "Yes," answer lines 24b through 24d and complete Schedule J. Did the organization invest any proceeds of tax-exempt bonds beyond a temporary pende exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary pende exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary pende exception? Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization and that it engaged in an excess benefit insascition with a disqualified person outstanding as of the end of the organizations engage in an excess benefit transaction with a disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II I I I I I I I I I I I I I I I I I			21		 _
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. Part IV is 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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any trace-exempt bonds? Did the organization maintain an escrow account other than a refunding secrow at any time during the year? 24a X 24b Did the organization maintain an escrow account other than a refunding secrow at any time during the year? 24d Did the organization maintain an escrow account other than a refunding secrow at any time during the year? 24d Did the organization maintain an escrow account other than a refunding secrow at any time during the year? 24d Did the organization and \$501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person unit and pream of the year? If "Yes," complete Schedule L, Part IV and that the transaction was not be end of the organization's prior Forms 990 or 990 EZ? If "Yes," complete Schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, we will not such an individual? If "Yes," complete Schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employees a schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former	22	· · · · · · · · · · · · · · · · · · ·			v
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Schedule II 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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization as an 'no behalf of' issuer for bonds outstanding as of the year! If "Yes," complete Schedule person outstanding and the year! If "Yes," complete Schedule person outstanding as of the year! If "Yes," complete Schedule person outstanding as of the year! If "Yes," complete Schedule I person is a princy year, and that the transaction has not been reported on any of the organization with a disqualified person in a princy year, and that the transaction has not been reported on any of the organization with a disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II is shown that the year is a person related to such an individual? If "Yes," complete Schedule L, Part IV is nitroctions for applicable filing thresholds, conditions, and exceptions? A nemity of which a current or former officer, director, frustee, or key employee? If "Yes," complete Schedule L, Part IV is an officer, director, frustee, or director, frustee, or layer person that year year year. A nemity of which a cur	23				
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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 b) Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-evempt bonds? d) Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-evempt bonds? d) Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d) Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d) Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d) Did the organization act as an "on behalf of" issuer for bonds outstanding as the section 501(c)(3) and 501(c)(4) organizations. Did the organization with a disqualified person unit and that the transaction was that it engaged in an excess benefit transaction with a disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II E) Was a loan to or by a current or former officer, director, trustee, key employee, substantial contribution, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b) A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule M. D) Did the organization releave more than \$250,000 in non-cash contributions? If "Yes," complete Schedule M. D) Did the organization releave more than \$250,000 in non-cash contributions? If "Yes," complete Schedule M. D) Did the organization releave contributions of art, histonical treasures, or other similar assets, or qualified conservation contribution			23	_ <u>X</u> _	
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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? 24c Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d Sesction 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Sis the organization has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I Seschiologies, Part I Seschiologi					<u> </u>
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Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I., Part I bis the organization wave 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 II 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 III 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 III 26 Was a loan to or by a current or former officer, director, trustee, or direct or individual? If "Yes," complete Schedule L, Part IV 27 X 28 X 28 X 29 X 29 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule III 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule III 30 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule III 31 X 32 Did the organization on controlled entity within the meaning of section 512(b)(13)? 33 If "Yes," complete Schedule R, Part III, III, III, III, III, III, III, II		any tax-exempt bonds?	24c		
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? If "Yes," complete Schedule L, Part I 25b	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u></u>
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-E27 if "Yes," complete Schedule L, Part II 25b 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 III 27b 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? If "Yes," complete Schedule L, Part III 27b A farmly member of a papicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27b A farmly member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27b A farmly member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27b Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 27b Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30b Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31b Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31b 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, Ilin, IV, and V, line I 32b Section 501(c)(3) organizations. Did the organization a contributed entity within the meaning of section 512(b)	25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			1
that the transaction has not been reported on any of the organization's pnor Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I 25b		disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O. 38 X	35	·	<u> </u>		
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If "Yes," complete Schedule R, Part V, line 2 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O. 38 X	36		33		_
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, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O. 38 X			36		1
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O. 38 X	37		55		
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O. 38 X	<i>.</i> ,		27		x
Note. All Form 990 filers are required to complete Schedule O.	38		"		
		·	30	x	
		AQUALITATION OUT INDICATE REQUIRED TO COMPLETE DEFICUEITO.			2000

Form 990 (2009) ORGANIZATIONAL TRUST
Part V Statements Regarding Other IRS Filings and Tax Compliance

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		1			
	U.S. Information Returns. Enter -0- if not applicable	1a				
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	()		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eport	able gamıng			
	(gambling) winnings to prize winners?			1c		
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	2a	4	1		
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	ms?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	ınstru	uctions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	ed by	this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	autho	ority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	unt)?	4a	ļ	X
b	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.			1_		v
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		_	5a	<u> </u>	X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction.		**	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarders Shotter Transaction?	arding	Prohibited			
e.	Tax Shelter Transaction?	h	non-rotion collect	5c		
Va	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to any contributions that were not tax deductible?	ne org	gariization solicit	6a		x
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions.	tions i	or aifte	-00		
-	were not tax deductible?	(10113 (or girts	6ь		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	good	s and services		ĺ .	İ
	provided to the payor?			7a		Х
b	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 w	as red	quired			
	to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	oerso	nal			
	benefit contract?			7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f		
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required			7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0		•	7h	ļ	ļ.
o	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting or	-				
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exc at any time during the year?	ess D	ousiness notaings	8		
9	Sponsoring organizations maintaining donor advised funds.			 •		
a	Did the organization make any taxable distributions under section 4966?			9a	ĺ	
	Did the organization make a distribution to a donor, donor advisor, or related person?			9ь		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		1		
11	Section 501(c)(12) organizations. Enter:			1		
а	Gross income from members or shareholders	11a	<u> </u>	_		
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b		_		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a	ļ <u>.</u>	ļ
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	<u> </u>	<u> </u>	L	
				Earm	agn /	/2000

Form 990 (2009)

91-6311527

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.

<u>Sec</u>	tion A. Governing Body and Management					
					Yes	No
	Enter the number of voting members of the governing body	1a		_8		
b	Enter the number of voting members that are independent	1b		5		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other			
_	officer, director, trustee, or key employee?		-	2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	ct supervision			
_	of officers, directors or trustees, or key employees to a management company or other person?		-	3		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Fo		0 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's asset	ts?		5		X
6	Does the organization have members or stockholders?		•	6		<u> </u>
/a	Does the organization have members, stockholders, or other persons who may elect one or more me	ember	s of the	_		v
.	governing body? Are any decisions of the governing body subject to approved by march an extensive ideas, as at her any attention of the governing body.			7a		$\frac{\mathbf{x}}{\mathbf{x}}$
8	Are any decisions of the governing body subject to approval by members, stockholders, or other per			7b		
0	Did the organization contemporaneously document the meetings held or written actions undertaken by the following:	auring	tne year			
а				0-	х	
	Each committee with authority to act on behalf of the governing body?			8a 8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	اممطم	në ëla n	80		
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	cnea	at the	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re		e Code)			<u>~</u>
	the members of the decision of required in the matter about pointing the required by the members	040110	e 000e.)		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?			10a	.03	X
	If "Yes," does the organization have written policies and procedures governing the activities of such	chapt	ers, affiliates.			
	and branches to ensure their operations are consistent with those of the organization?	-	,,	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before fil	ling th	e form?	11	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	•				
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a	x	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that cou	ıld gıv	e rise			
	to conflicts?			12b	X	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If '	"Yes, "	describe			
	in Schedule O how this is done			12c		<u>X</u>
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 approva	al by ir	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
	The organization's CEO, Executive Director, or top management official			15a		<u>X</u>
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 arrangen	nent v	/ith a		1	17
	taxable entity during the year?			16a		<u>X</u>
D	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eval					
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization with respect to such arrangements?	anızatı	on's	401	1	
300	exempt status with respect to such arrangements? tion C. Disclosure		 	<u> 16b </u>		
<u> 17</u>	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)e only) avait	able for		
. •	public inspection. Indicate how you make these available. Check all that apply.	(501)	onors omy availa	2010 101		
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, co	onflict	of interest police	v. and fina	ncial	
-	statements available to the public.	JIOL	2. m. Groot polic	,, IIIIdi	,viai	
20	State the name, physical address, and telephone number of the person who possesses the books ar	nd rec	ords of the organ	nızation:		
	DWIGHT C. NELSON - (360)863-8978					
	118 NORTH LEWIS STREET, SUITE 110, MONROE, WA 982	72				
				Form	990 (2009)

932006 02-04-10

6

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.

X Check this box if the organization did not compensate any current officer, director, or trustee.

(A)	(B)	(C)		(D)	(F)					
Name and Title	Average	ŀ	Position		Reportable	Reportable	Estimated			
	hours	(c	(check all		that	арр	ly)	compensation	compensation	amount of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
ERIC MARTINSON				 					-	
CO-CHAIRMAN	1.00	Х						0.	0.	0.
PETER FLUETSCH						Г				
CO-CHAIRMAN	1.00	X						0.	0.	0.
JEFF STOWE										-
TRUSTEE	1.00	X						0.	0.	0.
KEITH NEMITZ										
TRUSTEE	1.00	X						0.	0.	0.
DOUG HAPPE										
TRUSTEE	1.00	Х			ŀ			0.	0.	0.
BARON DERR										
TRUSTEE	1.00	Х			<u></u>			0.	0.	0.
AARON BAILEY										
TRUSTEE	1.00	X						0.	0.	0.
DENNIS KASTEL										
TRUSTEE	1.00	X	<u> </u>		<u> </u>	L		0.	0.	0.
JIM REYNOLDS			}		ł					
TRUSTEE	1.00	X				_		0.	0.	0.
DWIGHT NELSON	40.00				ĺ			114 055		44 ==0
EXECUTIVE DIRECTOR	40.00		<u> </u>	<u> </u>		Х		114,277.	0.	41,778.
								_		
				L	<u>L.</u>	<u></u>				

932007 02-04-10

Form 990 (2009)

Par	t VII Section A. Officers, Directors, Tru	ıstees, Key E	mple	уее	es, a	nd l	High	est	Compensated Employ	ees (continued)				
	(A)	(B)			(0	C)			(D)	(E)			(F)	
	Name and title	Average hours	/ /		Pos		n ∶app	sk.A	Reportable compensation	Reportable			timate nount	
		per		leci	aii	Tilat	apr	יעויק ר	from	compensation from related			other	OI .
		week	Individual trustee or director				2		the	organization			pensa	
			28	92 83 83			Highest compensated employee		organization	(W-2/1099-MIS	SC)		om th	
			al frus	Institutional trustee		Key employee	E CO		(W-2/1099-MISC)			_	anızat d relat	
			divide	setuté	Officer	sy em	plest	Former				orga	anızatı	ons
	 		゠	=	L	3	Ŧ 5	- E						
				}										
			\vdash			-	\vdash			<u> </u>				
	· .				<u> </u>	<u> </u>	_	ļ						
							-	┼╌	 					
			ļ	<u> </u>				_						
			 			├	╁╌							
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			1			ļ	ļ	ļ						
								-						
16	Total	L	J	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	114,277.		0.	4	1,7	78.
2	Total number of individuals (including but n	ot limited to the	nose	liste	ed al	bov	e) wi	ho re	· · · · · · · · · · · · · · · · · · ·				- , ,	70.
	compensation from the organization													1
												<u></u>	Yes	No
3	Did the organization list any former officer,			, ke	y em	olqr	yee,	or h	nighest compensated er	nployee on				v
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su			Smp.	ener	ation	an/	4 0+1	her compensation from	the organization		3		X
•	and related organizations greater than \$15									the organization		4	X	ĺ
5	Did any person listed on line 1a receive or a									ices rendered to				
	the organization? If "Yes," complete Sched	ule J for such	pers	on								5		X
	tion B. Independent Contractors		_											
1	Complete this table for your five highest co the organization. NONE	mpensated in	depe	ende	ent c	onti	racto	ors t	hat received more than	\$100,000 of com	pens	ation f	rom	
	(A)	· · · · · · · · · · · · · · · · · · ·						Т	(B)	I	-	(0		
	Name and business	address							Description of s	ervices	С	ompe		n
									·····					
								\dashv						
2	Total number of independent contractors (i	ncluding but n	ot l	mıte	d to	tho	se li	sted	d above) who received m	nore than		-		
	\$100,000 in compensation from the organic						0							
_			_	_								C (200	0000

			NIZATIONA	TT TRUST	 	,	91-0311	OZ/ Page 9
Pa	rt VI	Statement of Reve	nue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	е	Membership dues Fundraising events Related organizations Government grants (contributed) All other contributions, gifts, gran	nts, and					
Contrib	_	Similar amounts not included about Noncash contributions included in lines						
0 8	<u> </u>	Total. Add lines 1a-1f		<u> </u>				
Program Service Revenue	2 a b			Business Code 524292		3,226,227.		
S Ž	c							· · ·
ΕŞ				-		 		
25	d							
Š.	ө					<u> </u>		
-	f	All other program service reve	enue					
	9	Total. Add lines 2a-2f		<u> </u>	3,226,227.			
	3	Investment income (including other similar amounts) Income from investment of ta		•	81,767.	81,767.		
	5	Royalties		<u> </u>				
	6 a	Gross Rents	(i) Real	(ii) Personal			·	
	b	Less: rental expenses			_			
	С	Rental income or (loss)						
		Net rental income or (loss)			1			
		Gross amount from sales of	(i) Cooumtion	1				
	/ a		(i) Securities 370,438.	(iı) Other	-{			
		assets other than inventory	370,430		-			
	b	Less: cost or other basis						
		and sales expenses	410,916.					
l	С	Gain or (loss)	-40,478.					
	d	Net gain or (loss)		•	1 -40,478	-40,478.		
enne		Gross income from fundraisin including \$	of					
Other Revenue	b	contributions reported on line Part IV, line 18 Less: direct expenses	e 1c). See a b		-			
0		Net income or (loss) from fund	draising events	•				
		Gross income from gaming a	•					
	-	Part IV, line 19	а					
	h	Less: direct expenses	b					
					-			
		Net income or (loss) from gan			<u> </u>			······································
	10 a	Gross sales of inventory, less						
- 1		and allowances	а		1			
- 1	b	Less: cost of goods sold	. b	L	_			
1	c	Net income or (loss) from sale	es of inventory	<u> </u>				
į	_	Miscellaneous Revenu	Je	Business Code				
ſ	11 a							
	ь							
	c				<u> </u>	 		
	بر	All other revenue			 			
	u -	Total. Add lines 11a-11d				1		······································
	40				3 267 516	3,267,516.	0.	0.
93200	12 9	Total revenue. See instructions			012011310.	2120112100	0.	
93200 02-04	-10							Form 990 (2009)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must 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				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16			1 1 / 11 hapthrase	
4	Benefits paid to or for members	2,556,837.			
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	324,195.	 		
8	Pension plan contributions (include section 401(k)	·			
-	and section 403(b) employer contributions)	58,542.			
9	Other employee benefits	95,676.			
10	Payroll taxes	26,547.			
11	Fees for services (non-employees):	20,02.0			
	. ` ' ' '				
a		8,276.			.,
b	F	18,597.			
C	F	10,397.			
d					
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	<u></u>	04 005			
12	Advertising and promotion	84,995.			
13	Office expenses	12,650.			
14	Information technology	2,839.			
15	Royalties				
16	Occupancy	26,840.			
17	Travel				
81	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,040.			
20	Interest		<u> </u>		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,199.			
23	Insurance	14,501.			
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	MDATATAIC AND DESIGN COMEN [22,838.			
b	AUTOMOTIVE EXPENSES	11,012.			
c	TELEPHONE	9,676.			
d	TRUSTEE EXPENSES	6,793.			
e	INSPECTION EXPENSES	696.		·	
_		0,00		 	
f	All other expenses Add lines 1 through 24f	3,288,749.			
25 26	Total functional expenses. Add lines 1 through 24f	3,200,143.			
26	Joint costs. Check here I I I 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				Form 990 (200

Form 990 (2009)
Part X Balance Sheet

			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	250.	1	250.
	2	Savings and temporary cash investments	2,680,777.	2	2,852,087.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key	······································		*****
		employees, and highest compensated employees. Complete Part II			
		of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
		Part II of Schedule L		6	
S	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	· · · · · · · · · · · · · · · · · · ·
¥	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
	ь	basis. Complete Part Vi of Schedule D Less: accumulated depreciation 10a 32,407. 18,935.	15,967.	10c	13,472.
	11	Investments - publicly traded securities	1,632,783.	11	13,472. 1,613,642.
	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	1,600.	15	1,600.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	4,331,377.	16	4,481,051.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
Sa	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ਊ	22	Payables to current and former officers, directors, trustees, key employees,			
Liabilities		highest compensated employees, and disqualified persons. Complete Part II			
		of Schedule L	<u> </u>	22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D	4,906.	25	5,920.
	26	Total liabilities. Add lines 17 through 25	4,906.	26	5,920.
		Organizations that follow SFAS 117, check here X and complete			
Net Assets or Fund Balances		lines 27 through 29, and lines 33 and 34.			
au	27	Unrestricted net assets	4,326,471.	27	4,475,131.
Ba	28	Temporarily restricted net assets		28	
ב	29	Permanently restricted net assets		29	······································
Ţ		Organizations that do not follow SFAS 117, check here and			
ō		complete lines 30 through 34.			
set	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ğ	32	Retained earnings, endowment, accumulated income, or other funds	A 226 A71	32	A A75 101
_	33	Total net assets or fund balances	4,326,471.	33	4,475,131.
	34	Total liabilities and net assets/fund balances	4,331,377.	34	4,481,051.

Form **990** (2009)

			Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			•
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			İ
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
ь	Were the organization's financial statements audited by an independent accountant?	2b	Х	
С	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?	2c	X	Í
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			l
	consolidated basis, separate basis, or both:			ĺ
	X Separate basis Consolidated basis Both consolidated and separate basis			ĺ
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			ĺ
	Act and OMB Circular A-133?	3a		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.	3ь		ĺ

Schedule D

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

2009 Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

NORTHWEST SHEET METAL WORKERS ORGANIZATIONAL TRUST

Employer identification number 91-6311527

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) 3 Aggregate 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 Yes are the organization's property, subject to the organization's exclusive legal control? 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? Part It | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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 2b b Total acreage restricted by conservation easements 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 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ 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)? In Part XIV, 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" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, 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 (i) Revenues included in 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 relating to these items: a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2009

Pai	t 順 Organizations Maintaining C	collections of A	rt, His	torical Tr	easures, c	or Oth	er Si	milar A	Asse	ts (conti	nued)	
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following that	it are a s	signific	cant use	of its	collection	n item	s
	(check all that apply):											
а	Public exhibition	ď	· 🖳	Loan or exc	hange progra	ams						
b	Scholarly research	e	,	Other								
C	Preservation for future generations											
4	Provide a description of the organization's co	ollections and explai	n how tl	hey further t	he organizati	on's exe	empt p	ourpose	ın Par	XIV.		
5	During the year, did the organization solicit o	r receive donations	of art, h	istorical trea	sures, or oth	er sımıla	ır asse	ets				
	to be sold to raise funds rather than to be ma	aintained as part of t	the orga	nization's co	ollection?					Yes		No
Pa	Escrow and Custodial Arran reported an amount on Form 990, Par		ete if org	ganization ai	nswered "Yes	s" to Foi	m 99	0, Part I\	/, line	9, or		
1a	Is the organization an agent, trustee, custod	an or other intermed	dary for	contribution	ns or other as	sets no	t ınclu	ded				
	on Form 990, Part X?									Yes		No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing	table:								
										Amount		
c	Beginning balance						Γ	1c				
d	Additions during the year					_		1d				
е	Distributions during the year						Γ	1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?			_		-		Yes		No
b	If "Yes," explain the arrangement in Part XIV.											
Par	t V Endowment Funds. Complete r	f the organization ar	swered	"Yes" to Fo	rm 990, Part	IV, line	10.	-				
		(a) Current year	(b) F	nor year	(c) Two year	rs back	(d) TI	ree years	back	(e) Four	years	back
1a	Beginning of year balance			.,								
b	Contributions											
c	Net investment earnings, gains, and losses						-					
d	Grants or scholarships											
е	Other expenditures for facilities											
	and programs											
f	Administrative expenses											
g	End of year balance										717 1111	
2	Provide the estimated percentage of the year	r end balance held a	as:									
а	Board designated or quasi-endowment		%									
b	Permanent endowment ►	%	_									
С	Term endowment ▶	 %										
3a	Are there endowment funds not in the posse	ssion of the organization	ation tha	at are held a	nd administe	red for t	the or	ganızatıc	n			
	by:									ſ	Yes	No
	(i) unrelated organizations									3a(ī)		
	(ii) related organizations									3a(ii)		
ь	if "Yes" to 3a(ii), are the related organizations	s listed as required o	n Sche	dule R?						3b		
4	Describe in Part XIV the intended uses of the	organization's endo	wment	funds.								
Par	t VI Investments - Land, Building	s, and Equipme	ent. Se	e Form 990	, Part X, line	10.						
	Description of investment	(a) Cost or o basis (investr			or other (other)		ccum	ulated ation		(d) Bool	value	•
1a	Land											
ь	Buildings									•		
C	Leasehold improvements								1			
d	Equipment			3	2,407.		18	,935	•	1:	3,4	72.
_	Other .											
	. Add lines 1a through 1e. (Column (d) must e	gual Form 990. Part	X. colur	nn (B), line 1					\top	1:	3,4	72.
			,	,_,,								

Schedule D (Form 990) 2009

NORTHWEST S Schedule D (Form 990) 2009 ORGANIZATIO	SHEET METAL W	ORKERS	91-6311527 Page
Part VII Investments - Other Securities. Se		12	31-0311327 Fage
(a) Description of security or category (including name of security)	(b) Book value	(c)	Method of valuation: r end-of-year market value
Financial derivatives			
Closely-held equity interests			
Other			
	<u></u>		
	_	_	
Total. (Col (b) must equal Form 990, Part X, col (B) line 12)	l,		
Part VIII Investments - Program Related. S	ee Form 990, Part X, line		
(a) Description of investment type	(b) Book value		Method of valuation: r end-of-year market value
<u> </u>			
	-		
			
Total (Cal (b) must savet form 000 Part V and (R) line 40)	 -		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13) ► Part IX Other Assets. See Form 990, Part X, line	15		
	Description		(b) Book value
(4)	Восопрасы		(b) Book Value
		<u>.</u> .	
	 		
The state of the s	<u>-</u>		
	 		
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 15.)		>
Part X Other Liabilities. See Form 990, Part X,	line 25.		
1. (a) Description of liability		(b) Amount	
Federal income taxes			
PAYROLL WITHHOLDINGS		5,920.	
	_		
	1	1	

5,920. Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) 2. FIN 48 Footnote. In Part XIV, 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. 932053 02-01-10

Sche	dule D (Form 990) 2009 ORGANIZATIONAL TRUST		_		91-	63115 <u>27</u> Pa	ge 4
Pa	TXI Reconciliation of Change in Net Assets from Form 990 to	Audite	d Finan	cial State	emen		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1		3,267,51	6.
2	Total expenses (Form 990, Part IX, column (A), line 25)			2		3,288,74	19.
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3		-21,23	
4	Net unrealized gains (losses) on investments			4		169,89	93.
5	Donated services and use of facilities			5			
6	Investment expenses			6			
7	Prior period adjustments			7			
8	Other (Describe in Part XIV.)			8			
9	Total adjustments (net). Add lines 4 through 8		-	9		169,89	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 an		<u></u>	10		148,66	<u>. 0</u>
Pa	t XII Reconciliation of Revenue per Audited Financial Stateme	ents Wi	th Rever	iue per F	leturr		
1	Total revenue, gains, and other support per audited financial statements				1	3,437,40	<u> 9.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:						
а	Net unrealized gains on investments	2a	16	9,893.	4 1		
b	Donated services and use of facilities	2b			- 1		
С	Recoveries of prior year grants	2c			- 1		
d	Other (Describe in Part XIV.)	2d			1	160.00	
е	Add lines 2a through 2d				2e	169,89	<u> </u>
3	Subtract line 2e from line 1				3	3,267,51	<u>.6.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			- 1		
Ь	Other (Describe in Part XIV.)	4b			- 1		^
c	Add lines 4a and 4b				4c	2 267 51	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		ide France		5	3,267,51	<u>. o .</u>
	* XIII Reconciliation of Expenses per Audited Financial Statem	ents w	itn Expe	nses per			
1	Total expenses and losses per audited financial statements		•		1	3,288,74	٠,
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1					
a	Donated services and use of facilities	2a			-		
D	Prior year adjustments	2b			- 1		
C	Other losses	2c		·	- 1		
d	Other (Describe in Part XIV.)	2d			1 . 1		0.
e	Add lines 2a through 2d				2e	3,288,74	
3	Subtract line 2e from line 1				3	3,200,14	19.
*	Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	1 4-1			. 1		
а Ь	Other (Describe in Part XIV.)	4a			1 1		
•	Add lines 4a and 4b	4b			1 4- 1		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		-		4c	3,288,74	19.
	* XIV Supplemental Information				1 3 1	3/200/13	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II a 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp						art
							-
					Sched	lule D (Form 990) 2	2009

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047
2009
Open to Public

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990. ► See separate instructions.

NORTHWEST SHEET METAL WORKERS ORGANIZATIONAL TRUST

Employer identification number 91-6311527

Pa	art I Questions Regarding Compensation			
		•	Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use	1		
	Travel for companions Payments for business use of personal residence	İ		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		<u> </u>
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply.			
	Compensation committee X Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		
b	Any related organization?	5b		************
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7	L	<u> </u>
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	}		
	ınıtıal contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Populations ageting 52 4059 6/->2		1	ı

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

Schedule J (Form 990) 2009

91-6311527

Page 2

ORGANIZATIONAL TRUST

Schedule J (Form 990) 2009

Part # Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

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

Note. The sum of columns (B)(I)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(0)	(D)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(I)-(D)	reported in prior Form 990 or Form 990-EZ
DWIGHT NELSON	€ €	114,277.			30,935.	10,843.	156,055.	
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Schedule J (Form 990) 2009

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Name of the organization NORTHWEST SHEET METAL WORKERS ORGANIZATIONAL TRUST

Employer identification number 91-6311527

Part I Excess Benefit									/ line 40)h	··-	
Complete if the organ	nization ansv	vered "Yes	on Form	<u>990, Ράπ Ιν,</u>	iine 25a oi	r 250, or For	m 990-E	z, Pan	v, line 40		(c) Con	ected?
(a) Name of disc	qualified pers	son			(b) [Description of	of transa	iction			Yes	No
		•									1.00	
				_						-		
						•						
						-						
2 Enter the amount of tax imposection 49583 Enter the amount of tax, if an		J	J	•		s during the	year un	der	▶ \$ ▶ \$			
Part II Loans to and/or	From Int	erested	Persons	s.								
Complete if the organ			on Form	990, Part IV,	line 26, or	Form 990-E	Z, Part \	/, line 38		-ul	ı	
(a) Name of interested		to or from		nal principal mount	(d) Bala	ance due		(e) In default? (f) Approved by board or				ritten
person and purpose	the organ	1	الم ا	mount					comn	nttee?		ment?
	То	From					Yes	No	Yes	No	Yes	No
			 									
			-				 			 		
							ļ					
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			<u> </u>							<u> </u>		
 Total				▶ s				L	-	J	 	L
Part III Grants or Assist		_		ed Person			I		£	***************************************	£	
Complete if the organ		vered "Yes										
(a) Name of interested p	person		(b) Relat	ionship betwo	een interes ganization		and			nount an assistar	d type o	T
SUNSET AIR		זמית	JSTEE		<u> </u>	ENTITY		1.70			Y 19	0513
EMERALD AIRE			JSTEE			ENTITY				Y 98		
NEMITZ SHEET META	T.		JSTEE			ENTITY					Y 50	
THE CHILD INDIN			JOIDE	CONTINO	111111		-	+ • •		DUID	1 50	
								1				_
			-					_		-		
Part IV Business Transa	actions In	volving	nterest	ed Person	ıs.							
Complete if the organ	nization ansv	vered "Yes	on Form	990. Part IV.	line 28a, 2	28b, or 28c.						
(a) Name of interested p		(b)	Relationsh	nip between ind the organiz	nterested	(c) Amo transa			Descript transact			aring of ation's ues?
											Yes	No
											1	
												
			_									

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

Schedule L (Form 990 or 990-EZ) 2009

SCHEDULE O

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

NORTHWEST SHEET METAL WORKERS ORGANIZATIONAL TRUST

Employer identification number 91-6311527

FORM 990, PART VI, SECTION B, LINE 11: FORM 990 WAS CIRCULATED VIA EMAIL
TO THE ORGANIZATION'S OFFICERS BEFORE FILING. THEY WERE GIVEN AN
OPPORTUNITY TO VOICE ANY CHANGES TO THE FORM 990.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING
DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE NOT
AVAILABLE TO THE GENERAL PUBLIC AS THE ORGANIZATION IS NOT A 501(C)(3)
ORGANIZATION.
FORM 990, PART XI, LINE 2C:
NO CHANGES WERE MADE TO THE TRUST'S AUDIT OVERSIGHT OR AUDITOR
SELECTION PROCESS.