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## Form

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 2009 Open to Public Inspection

Form 990 (2009

	For the 2009	calendar year, or tax year beginning 07/01/09 and ending 06/30/10	)		
В	Check if applicable			D Employ	er Identification number
	Address change	use IRS Troopers Association			
一	•	label or print or Doing Business As		91-1	L125594
느	Name change	type Number and street (or P O box if mail is not delivered to street address)	Room/suite		ne number
	Initial return	See 200 Union Ave., Suite 200		•	-704-7530
	Termination	Specific Instruc- City or town, state or country, and ZIP + 4		G Gross receip	
	Amended return	tions Olympia WA 98501			· · · · · · · · · · · · · · · · · · ·
H	Application pendi	E Name and address of proposal afficer		H(a) Is this a	group return for
ш	Application pendi			affiliates	
				H(b) Are all at included:	filiates Yes No
					ttach a list (see instructions)
ī	Tax-exempt s	tatus <b>X</b> 501(c) ( <b>5</b> ) <b>◄</b> (insert no ) 4947(a)(1) or 527			
<u>J_</u>	Website <sup>.</sup> ▶			H(c) Group ex	cemption number
K	Type of organiza	stion X Corporation Trust Association Other L Y	ear of formation	N	State of legal domicile
P	art i	Summary			
	1 Briefly	y describe the organization's mission or most significant activities			
o	Co	llective bargaining for members			
ů.					
Ë	Ì				
<u>≈</u> 2 §	2 Chec	k this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25%	of its net assets		
0.8	3 Numb	per of voting members of the governing body (Part VI, line 1a)		3	
es	4 Numb	per of independent voting members of the governing body (Part VI, line 1b)		4	
JUN 07 2018 Activities & Governance	5 Total	number of employees (Part V, line 2a)		5	
Act.	6 Total	number of volunteers (estimate if necessary)		6	
<b>\$</b>	7a Total	gross unrelated business revenue from Part VIII, column (S) ine 13 ED		7a	351,360
	b Net u	nrelated business taxable income from Form 990-T, interaction of the same of t		7b	89,785
SCANNED Revenue		ributions and grants (Part VIII, line 1h) ram service revenue (Part VIII, line 2g)	Prior Year		Current Year
₩ e	1	ributions and grants (Part VIII, line 1h) ram service revenue (Part VIII, line 2g)		677	040 750
多点	1	ram service revenue (Part VIII, line 2g) 🚡 📅 觉		,287	940,758
<b>જી</b> ફે	I	tment income (Part VIII, column (A), lines 3, 4, and 7d)		.,607	13,990
<u>ښ</u> -	ı	revenue (Part VIII, column (A), lines 5, 6d, 8d, 9c, 10 and 11 tel		,547	370,961
		revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,734	1,118	1,325,709
	1	ts and similar amounts paid (Part IX, column (A), lines 1–3)			
	1	fits paid to or for members (Part IX, column (A), line 4)	F13	3,208	314,768
es	1	les, other compensation, employee benefits (Part IX, column (A), lines 5–10)	513	7,208	314,700
enses	1	ssional fundraising fees (Part IX, column (A), line 11e)	<del></del>		
Exp	1	fundraising expenses (Part IX, column (D), line 25) > 265,048	1,206	930	933,407
_	1	r expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	1,720		1,248,175
	l .	expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		980	77,534
5.8	19 Reve	nue less expenses Subtract line 18 from line 12	Beginning of Curre		End of Year
ets	20 Total	assets (Part X, line 16)	1,222		1,299,718
Ass	21 Total	liabilities (Part X, line 26)			
Net Assets or	22 Net a	ssets or fund balances Subtract line 21 from line 20	1,222	,184	1,299,718
	art II	Signature Block			
	T	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules an	d statements, and t	o the best of	ny knowledge
		and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all inform			
Sig	an l	In Ce			
He		Signature of officer		Date	
_		MCBANGRO		<	5/12/11
		Type or print name and title			<del></del>
		Preparer's Date	Check if		Preparer's identifying number
Pa		signature	self- employe	ed 🕨 🗌	(see instructions) P00065450
	eparer's	G. Scott Smerdon	1	EIN ▶	91-2093767
Us	e Only	f self-employed), 1338 Commerce Ave Ste 301		Phone	
		address, and ZIP+4 Longview, WA 98632-3726			360-501-6000
Ma	y the IRS dis	scuss this return with the preparer shown above? (see instructions)			Yes No

## Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

0-11	1		
Collective	pargaining	IOT	members

Collective bargaining	for members		
the prior Form 990 or 990-EZ?  If "Yes," describe these new services on  3 Did the organization cease conducting, of services?  If "Yes," describe these changes on School Describe the exempt purpose achievement Section 501(c)(3) and 501(c)(4) organizations to others, the total expenses,  4a (Code ) (Expenses \$  The objective of the administer a collections	r make significant changes in how it conducts, any pedule O ents for each of the organization's three largest progrations and section 4947(a)(1) trusts are required to reand revenue, if any, for each program service report  886,496 including grants of \$ Association is to negotia ve bargaining agreement w	rogram  am services by expenses sport the amount of grants and ed  ) (Revenue \$  te &  rith the	Yes X No
working conditions of  4b (Code ) (Expenses \$	nd to work for the better members.  Including grants of \$	) (Revenue \$	)
4c (Code ) (Expenses \$	ıncludıng grants of \$	) (Revenue \$	)
4d Other program services (Describe in Sc (Expenses \$ 4e Total program service expenses ▶	nedule O) including grants of \$ 886,496	) (Revenue \$	)

				Yes	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		X
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		l		
	candidates for public office? If "Yes," complete Schedule C, Part I		3		<u>x</u>
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		_X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have		İ		
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"				v
-	complete Schedule D, Part I		6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		_		x
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"		7_		
0	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,"		ł		
	complete Schedule D, Part IV		9		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or		<u> </u>		
-	quasi-endowments? 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,				
	VII, 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 167 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 related 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				
40	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
12Δ	Was the organization included in consolidated, independent audited financial statements for the tax year?	Yes No	'-		
120	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	12A X	1		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	1-1	13	•	х
14a	Did the organization maintain an office, employees, or agents outside of the United States?		14a		Х
b					
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I		14b		Х
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	ļ <u> </u>	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	<del> </del>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?				v
~~	If "Yes," complete Schedule G, Part III		19	<del>                                     </del>	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	<u></u>		, 000	(2009)
			ron	11 330	(2009)

Form 990 (2009) Washington State Patrol
Part IV Checklist of Required Schedules (continued)

		-	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			x
23	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	22		
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		
	\$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		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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	<u>'</u>		
	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		X
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?			
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	-	ı	v
a	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	204		x
	Schedule L, Part IV  An entity of which a current or former officer, director, trustee, or key employee of the organization (or a	28b		
С	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		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
•	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		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,			
	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	ŀ		
	Schedule R, Part V, line 2	35		<u> </u>
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,			7.
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			v
	19? Note. All Form 990 filers are required to complete Schedule O	38	- 990	X
		E		, 2000N

	Test Statements Regarding Strict Into I mings and Tax Somphance			1	ſ
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1 1		Yes	No
·u	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	-		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and report				
·	gaming (gambling) winnings to prize winners?	abic	1c	•	x
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1 1			
	Statements, filed for the calendar year ending with or within the year covered by this return	2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see				
	instructions)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered b	у			
	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	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other auti	nority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	cial			
	account)?		4a		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 Bar	nk			
	and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	۱۶	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regards	ng			
	Prohibited Tax Shelter Transaction?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				
	organization solicit any contributions that were not tax deductible?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	or			
_	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).	ui			
а		as	-		
_	and services provided to the payor?		7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		7b		
С	required to file Form 8282?		7 <sub>C</sub>		
а	If "Yes," indicate the number of Forms 8282 filed during the year	7d	10		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a pers		<del>-</del> [		
U	benefit contract?	Onai	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract	>	7f		
g	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-C as				-
	required?		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting				
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring				
	organization, have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter	l 1			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter	11			
а	Gross income from members or shareholders	11a	_		ŧ
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them )	11b	<b></b>   ,		-
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10	l I	12a	-	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		990	(2000

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
1a	Enter the number of voting members of the governing body	1a			1
b	Enter the number of voting members that are independent	1b			1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with				1
	any other officer, director, trustee, or key employee?		2	<u> </u>	X
3	Did the organization delegate control over management duties customanly performed by or under the direct		l		
	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 file	1?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		_5	_	X
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?		7	a	X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7	ь	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		F		
	the year by the following		ŧ		1
а	The governing body?		8	a X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?		8	b X	T
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 In	ternal			
Rev	enue Code.)				
				Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		10	a	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,				$\top$
	affiliates, and branches to ensure their operations are consistent with those of the organization?		10	ь	ł
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the				1
	form?		1	1	X
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990				1
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		1:	2a	X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give				
_	rise to conflicts?		1:	ь	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"				$\vdash$
•	describe in Schedule O how this is done		12	,_	
13	Does the organization have a written whistleblower policy?		1		x
14	Does the organization have a written document retention and destruction policy?		1		X
15	Did the process for determining compensation of the following persons include a review and approval by		<u> </u>	<del>-</del>	1
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		[		1
а	The organization's CEO, Executive Director, or top management official		1!	اد	x_
b	Other officers or key employees of the organization		19		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)		<u>                                     </u>	-	+
16a					1
100	with a taxable entity during the year?		10	.	x
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate		<u> </u>	oa	1-
b	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard		ŀ		ŧ
			1,		1
500	the organization's exempt status with respect to such arrangements?			ן סו	<u> </u>
	tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ▶ WA			<del></del>	
17	ziet die otatio train virial ziet, or and to train ziet die ziet d	di A			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s or	ny)			
	available for public inspection. Indicate how you make these available. Check all that apply				
4-	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 intere	st			
	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 ▶ Major Bambino 200 Union Ave. Sui				
_0	Lympia WA 985	ΩŢ			

# 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

Check this box if the organization (A)	(B)			(C)	)			(D)	(E)	(F)
Name and Title	Average hours per week	ndividual trustee or director	institutional trustee				ਨੂੰ Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Washington State	Patrol-	ei	mb	ırs	e					
Reimbursement								82,952	0	0
Jon Berends										
Director	10.00	X			_			11,720	0	0
Aaron Bidewell										
Director	10.00	X			_			11,720	0	0
Don Bohart										
Director	10.00	X			_			11,720	0	0
Mike Cheek			li							
Director	10.00	X		_	_			11,720	0	0
Patrick Ditter		1								
Director	10.00	X			_	_		11,720	0	0
Dale Lathan										
Director	10.00	X			_			11,720	0	0
Jon Martin					ĺ					
Director	10.00	X		_	_			11,720	0	0
Jeffrey Sevigney				1	ĺ					
Director	10.00	X			_			11,720	0	0
Herbert Slemp				İ						
Director	10.00	X			_	_		11,720	0	0
Candy Warren		1								
Director	10.00	X		_	_			11,720	0	0
Pete Cozzitorto		1								
Director	10.00	X		_	_	_		10,959	0	0
Wilhelmina Boxhoo	1	1								
Director	10.00	X	$\sqcup$		$\dashv$	_		760	0	0
Tom Pillow						ı			_	
President	40.00	↓	$\sqcup$	X	_			21,975	0	0
Major Bambino									_	_
Secretary/Treasurer	15.00	↓	$\sqcup$	X	_	_		18,313	0	0
Mark Soper		1								_
Vice President	15.00	↓	$  \downarrow  $	X	_	_		17,690	0	0
Ray Moss	1			_						_
Past VP	15.00	<u> </u>		X				623	0	0

		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest	Former	compensation from the	compensation from related organizations		nount of other	
						yee	Highest compensated employee	,	organization (W-2/1099-MISC)	(W-2/1099-MISC)	fr orga and	pensation om the anization d related inizations	
											~		
<del></del>													
									070 470				
	ber of individuals (inc				ose I	ısted	abo	ve)	270,472 who received more than \$1	•	<u></u>	<del></del>	
employee	on line 1a? If "Yes," o	complete Schedu	le J	for s	uch i	ndıvı	dual		e, or highest compensated			Yes	No X
the organ individual 5 Did any p	ization and related org	ganizations great i receive or accru	er th	an \$ mpe	150,0 nsati	000? on fi	If "Y	es," any ι	complete Schedule J for su unrelated organization for			5	x
Section B. Inc	lependent Contracto	rs							tors that received more tha	n \$100,000 of		<u> </u>	
compens	ation from the organization from the organization	ation (A) business address							Descrip	(B) tion of services		(C) Compens	ation
<del></del>		·····											
													<del></del>
				•									
	nber of independent con n \$100,000 in compen	*	_				to th	ose	listed above) who received			0 orm <b>99</b> (	

Pa	irt V	III Stater	nent 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
र र	1a	Federated can	npaigns	1a			,,			9,4,9,9,9,9,1
u au	h h	Membership d		1b			İ			
₽ξ	ءَ ا	Fundraising ev		1c						
ifts	٦	Related organi		1d						
%,E	٦	_		1e		<del></del>				
Sir	e	•		10			1			
ξĘ	'	All other contribution and similar amounts					İ			
풀				_1f						
Ser	g		ns included in lines 1a-1	lf	\$					
	h	Total. Add line	es 1a–1f			, <b>•</b>				
<u>n</u>						Busn. Code				
Program Service Revenue Contributions, gifts, grants	2a	Members	hip dues				940,758	940,758		
ě,	b									
<u>Ö</u>	С									
Se	d									
ЩE	e									
g	f	f All other program service revenue								
<u>~</u>	g					<b>&gt;</b>	940,758		1, 7, 7, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	
	3	Investment inc	ome (including d	ividend	ls, interes	t, and				
		other similar amounts)				▶	13,990			13,990
	4	Income from in	vestment of tax-	exemp	t bond pro	oceeds 🕨	ï			
	5	Royalties				▶ [		-		
			(ı) Real		(II) F	Personal				······································
	6a	Gross Rents								
	b	Less rental exps								
	C	Rental inc or (loss)								
	d	Net rental inco	me or (loss)			▶	Ī	i	Ī	
		Gross amount from	(i) Securities	1	(11)	Other				
		sales of assets	(7)		(					
	ь	other than inventory Less cost or other						1		
	b									
	_	basis & sales exps			<del> </del>					
		Gain or (loss)				$\overline{}$	1			
	d	Net gain or (los		. 1		<b>•</b>				
ne	8a		om fundraising even	its						
		(not including \$								
Other Reven			eported on line 1c)						1	
e.		See Part IV, line		а						
퉏		Less direct ex		þ			<b>‡</b>		1	
_			(loss) from fundr	- 1	events	<b>•</b>		:	7	
	9a		m gaming activities	3						
		See Part IV, line		а						
		Less direct ex		b						
	ļ .		(loss) from gamı	ng acti	vities	<b>&gt;</b> _				
	10a	Gross sales of	inventory, less							
		returns and all	owances	а			I			
	b	Less cost of g	oods sold	ь						
	С	Net income or	(loss) from sales	of inve	entory	>				
		Misc	ellaneous Revenue			Busn. Code			<del></del>	
	11a	Magazıne	advertising			541800	351,360		351,360	
	b		ips/other in	come			19,601	19,601		
	С		•							· · · · · · · · · · · · · · · · · · ·
	d	All other reven	ue							· · · ·
	е	Total. Add line	s 11a–11d			<b>&gt;</b>	370,961			······································
	12	Total Revenue	e. See instruction	ıs		▶	1,325,709	960,359	351,360	13,990

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).

	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,			1	
	organizations, and individuals outside the			1	
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	270,472	216,378	54,094	
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	15,004		15,004	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	29,292	23,434	5,858	
11	Fees for services (non-employees)				
а	Management				
b	Legal	204,180	204,180		
С	Accounting	14,775		14,775	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses	24,881	24,881		
14	Information technology	6,000	6,000		
15	Royalties				
16	Occupancy	6,900		6,900	. "
17	Travel				,
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		1		
19	Conferences, conventions, and meetings	139,634	139,634		
20	Interest	•			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	0	0		
23	Insurance	49,916	49,916		
24	Other expenses Itemize expenses not	1		1	
	covered above (Expenses grouped together	1		1	
	and labeled miscellaneous may not exceed	1		<b>!</b>	
	5% of total expenses shown on line 25 below )	1		#	
а	Magazine expenses	260,575	<u> </u>		260,575
b	Lobbying	80,843	80,843		
c	Benevolence	52,027	52,027		<del> </del>
d	Charitable contributions	23,901	23,901		****
e	Awards	20,603	20,603		<u> </u>
f	All other expenses	49,172	44,699		4,473
25	Total functional expenses. Add lines 1 through 24f	1,248,175	886,496	96,631	265,048
26					
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation				

Part	X Balance Sheet							
			(A) Beginning of year		(B) End of year			
1	Cash—non-interest bearing		312,549	1	157,529			
2	Savings and temporary cash investments		824,718	2	1,057,272			
3	Pledges and grants receivable, net			3	,			
4	Accounts receivable, net			4				
5	Receivables from current and former officers, directors, to	rustees, key						
	employees, and highest compensated employees. Comp	lete Part II of			İ			
	Schedule L			5				
6	Receivables from other disqualified persons (as defined in	under section			_			
1	4958(f)(1)) and persons described in section 4958(c)(3)(l							
	Part II of Schedule L			6				
Assets 8	Notes and loans receivable, net			7				
8   8	Inventories for sale or use		"""	8				
و انک	Prepaid expenses and deferred charges			9				
10	a Land, buildings, and equipment cost or	1						
	other basis Complete Part VI of Schedule D	10a 84,91°	7		i L			
	b Less accumulated depreciation	10b	84,917	10c	84,917			
11		100		11	04,517			
12	•		12					
13	·			13				
14	, <u> </u>			14				
15	•			15				
16	·		1,222,184		1,299,718			
17		)	1,222,104	16 17	1,299,110			
18	,		18					
19	Grants payable Deferred revenue			19	<del></del>			
(0) 24		Cahadula D		20				
Liabilities 52	Escrow or custodial account liability Complete Part IV of			21				
₩ 22	•	*						
ia.	employees, highest compensated employees, and disqua	airied						
-	persons Complete Part II of Schedule L			22				
23				23				
24	. ,	nies		24				
25	Other liabilities Complete Part X of Schedule D			25				
26	Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117, check here ▶	7		26				
Balances 27	_	<u>n</u> and						
Ĕ	complete lines 27 through 29, and lines 33 and 34.		1,222,184	27	1,299,718			
<u>e</u> 27		Unrestricted net assets						
m 28	•	Femporarily restricted net assets  Permanently restricted net assets  Organizations that do not follow SFAS 117, check here ▶						
29								
正	_							
٥	and complete lines 30 through 34.							
\$ 30	•			30				
8 31	3, 1 3, 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			31				
Net Assets or Fund 30 31 33 34		other funds	1 600 101	32				
<u>후</u> 33			1,222,184	33	1,299,718			
<b>Z</b> 34	Total liabilities and net assets/fund balances		1,222,184	34	1,299,718			

Form **990** (2009)

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

Form 990 (2009)

### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

## 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.

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number Washington State Patrol Troopers Association 91-1125594 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the 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 Aggregate contributions to (during year) 2 3 Aggregate grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 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? 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 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 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 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 Yes 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 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 these items (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 Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Sche	dule D (Form 990) 2009 Washingtor	<u> State</u>	Patrol		91-11	25594	Page <b>2</b>							
Pa	rt III Organizations Maintaining (	Collections	of Art, Hi	storical Treasu	ires, or Other S	imilar Assets	(continued)							
3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)													
а	Public exhibition	d	Loan or	exchange program	IS									
b	Scholarly research	9	Other											
С	Preservation for future generations		_			· <del></del> -								
4	Provide a description of the organization's collect Part XIV	ctions and expl	ain how they	further the organiz	ation's exempt purpo	se in								
5	During the year, did the organization solicit or reassets to be sold to raise funds rather than to be	eceive donation e maintained as	s of art, histo	orical treasures, or o	other similar		Yes No							
Pa	rt IV Escrow and Custodial Arrar	ngements.	Complete	if the organiza		Yes" to Form 9								
	IV, line 9, or reported an amount on Form 990, Part X, line 21													
1a	1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not													
	included on Form 990, Part X?						∐ Yes ∐ No							
b	If "Yes," explain the arrangement in Part XIV an	d complete the	following tab	ole										
							Amount							
С	Beginning balance					1c								
d	Additions during the year					1d								
е	Distributions during the year					1e								
f	Ending balance					1f								
2a	Did the organization include an amount on Form	n 990. Part X. li	ne 21?				Yes No							
	If "Yes," explain the arrangement in Part XIV	, ,												
	Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.													
		(d) Three years bac	ck (e) Four years back											
1a	Reginning of year balance													
		ginning of year balance												
	Contributions													
С	Net investment earnings, gains,													
		nd losses												
	Grants or scholarships			<del></del>										
9	Other expenditures for facilities	ŀ												
	and programs													
f	Administrative expenses			· · · · · · · · · · · · · · · · · · ·										
g	End of year balance	L			[ <u></u> _									
2	Provide the estimated percentage of the year er	nd balance held	d as											
а	Board designated or quasi-endowment ▶	%												
b	Permanent endowment ▶ %													
С	Term endowment ▶ %													
	Are there endowment funds not in the possession	on of the organ	zation that a	re held and admini	stered for the									
	organization by						Yes No							
	(i) unrelated organizations						3a(i)							
	(ii) related organizations						3a(ii)							
	If "Yes" to 3a(ii), are the related organizations lis	stad as require	d on Schodu	lo P2			3b							
_		•					<u> </u>							
4	Describe in Part XIV the intended uses of the or rt VI Investments—Land, Buildin				Part X line 10	<u> </u>	<del></del>							
	······	T					(d) Book value							
	Description of investment	(a) Cost or o		(b) Cost or oth basis (other)	''	cumulated eciation	(d) Book value							
	· · · · · · · · · · · · · · · · · · ·	(investi		Dasis (Ottier)	, depr		·							
	Land				· <del>  </del>		<del></del>							
	Buildings	<b>_</b>												
С	Leasehold improvements			ļ										
d	Equipment													
е	Other		_	84	,917		84,917							
Total	. Add lines 1a through 1e (Column (d) must equ	al Form 990, P	art X, columi	n (B), line 10(c) ) _		<b></b>	84,917							

Schedule D (Form 990) 2009 Washingto	n State Patro	1	91-1125594	Page 3
Part VII Investments—Other Securi				
(a) Description of security or categ		(b) Book value	(c) Method of valuation	ı
(including name of security)			Cost or end-of-year market	value
Financial derivatives	-			-
Closely-held equity interests				
Other				
		<u> </u>		
		,	100000000000000000000000000000000000000	
		·		
Total. (Column (b) must equal Form 990, Part X, col	(B) line 12 )			
Part VIII Investments—Program Rel		Part X line 13	_t	
(a) Description of investment type		(b) Book value	(c) Method of valuation	
(,, , , , , , , , , , , , , ,		(.,	Cost or end-of-year market	
	<del></del>			
				<del></del>
· · · · · · · · · · · · · · · · · · ·			†	
			<del>                                     </del>	
			<u> </u>	
<del> </del>				
<del></del>				
Total. (Column (b) must equal Form 990, Part X, col	(B) line 13 )			
Part IX Other Assets. See Form 99				
	(a) Description	<del></del>	(b	) Book value
	.,,			
				<del></del>
	<del></del>	<u> </u>		
<del></del>				
			· · ·	
	······································	· · · · · · · · · · · · · · · · · · ·		
Total. (Column (b) must equal Form 990, Part X, col	(B) line 15 )		<b>&gt;</b>	
Part X Other Liabilities. See Form			<u> </u>	
1 (a) Description of liability		(b) Amount		
Federal income taxes			1	
<del></del>	•		1	
			7	
<del></del>			7	
			1	
			7	
			1	
			1	
			1	
			1	
	<del></del>		<u></u>	
Total. (Column (b) must equal Form 990, Part X, col	(B) line 25 )		1	
2 FIN 48 Footpote in Part XIV provide the text of	<del></del>	ation's financial statements	s that reports the	

organization's liability for uncertain tax positions under FIN 48

Sche	dule D (Form 990) 2009 Washington State Patrol		91-1125594	Page <b>4</b>
Pa	art XI Reconciliation of Change in Net Assets from Form 990 to	Audited Fire	nancial Statements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments		4	
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	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			
Pa	art XII Reconciliation of Revenue per Audited Financial Stateme	ents With Re	evenue per Return	
1	Total revenue, gains, and other support per audited financial statements		1 1	<del></del>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1		
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
C	Recoveries of prior year grants	2c		
ď	Other (Describe in Part XIV )	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	) (	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	4.5		
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV.)	4a   4b		
b	Add lines 4a and 4b	_ <del>4</del> b		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		4c	
	art XIII Reconciliation of Expenses per Audited Financial Statem	ents With F	<del></del>	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			,
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIV )	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	] [		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
С	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	
Pa	rt XIV Supplemental Information			
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, line	es 1a and 4, Pa	irt IV, lines 1b	
and 2	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, line	es 2d and 4b A	lso complete	
this p	part to provide any additional information			
				. – – – –
				. – – – –

Sch	edu	ıle C	) (Fc	orm 9	990)	200	9	W	as.	nı:	ng.	to	n i	Sta	<u>at</u>	<b>e</b> :	Pa	tr	01							9	1-	11:	255	94	ł					Ρ	age 5
_P	art	XI	V	Sι	qqı	lem	<u>ien</u>	tal	Info	rm	ng atio	on .	(co	ntin	uec	<u>(</u> t																					
				-																																	
_	_				_	_		_	_	_	_	_	_	_	_	_	_		_	_	_	_	_	_	_	_								_	_		_
_	_	_	_	_		_	_	_	_	_	_		_	_	_	_	_	_		_	_	_	_	_	_	_									_		_
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### **SCHEDULE 0**

(Form 990)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990

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

Washington State Patrol Troopers Association

Employer identification number 91-1125594

Form 990, Part VI, Line 11a - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public