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-om **990**

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

2011

Open to Public Inspection

| <u>A</u> | For the | 2011 cale | ndar year, or tax year beginning , 2011, and endir | <u> </u> | | , 20 | | | | | | | | |
|--|--------------|---|--|-----------------|----------------------------------|--------------------------------|--|--|--|--|--|--|--|--|
| В | Check if | applicable | C Name of organization Committee For Downtown Yakima | | D Employer identification number | | | | | | | | | |
| | Address | change | Doing Business As | | 20-2578831 | | | | | | | | | |
| Õ | Name ch | - | Number and street (or P O box if mail is not delivered to street address) Room/su | E Telephor | ne number | | | | | | | | | |
| 一 | Initial reti | • | Post Office Box 881 | | | 509-225-2485 | | | | | | | | |
| 亓 | Terminat | | City or town, state or country, and ZIP + 4 | | | | | | | | | | | |
| \exists | Amended | | Yakima, WA 98907-0881 | | G Gross re | ceipts \$ 278,576.48 | | | | | | | | |
| \exists | | | F Name and address of principal officer James E. Stickel, President | H(a) Is this a | | or affiliates? Yes Vo | | | | | | | | |
| سبا | тфриоди | on ponong | 1507 Cedar Lane, Selah, WA 98942 | | | cluded? Yes No | | | | | | | | |
| | Tay-ever | npt status | ☐ 501(c)(3) | | | list (see instructions) | | | | | | | | |
| <u>'</u> | Website: | | w.downtownyakima.com | H(c) Group | exemption | number ▶ | | | | | | | | |
| ĸ | | | Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formal | | | of legal domicile WA | | | | | | | | |
| _ | art I | Summ | | | 1 | | | | | | | | | |
| | | | escribe the organization's mission or most significant activities: To en | courage and | strenathe | n the revitalization and | | | | | | | | |
| | ' | - | health of the urban core of Yakıma, Washington | | | | | | | | | | | |
| 8 | 1 | Original rollar of the disert out of Familia, redshington | | | | | | | | | | | | |
| Activities & Governance | İ | | | | | | | | | | | | | |
| /eri | | Chook th | is box ▶☐ if the organization discontinued its operations or disposed | of more than | 25% of | te nat accate | | | | | | | | |
| Ô | | | of voting members of the governing body (Part VI, line 1a) | | 3 | 15 | | | | | | | | |
| ď | | | | | 4 | 15 | | | | | | | | |
| ijes | | | of independent voting members of the governing body (Part VI, line 1b) | | 5 | 12 | | | | | | | | |
| Ξ | | | mber of individuals employed in calendar year 2011 (Part V, line 2a) | | \longrightarrow | | | | | | | | | |
| Act | | | mber of volunteers (estimate if necessary) | | 6 | 27 | | | | | | | | |
| | | | elated business revenue from Part VIII, column (C), line 12 | | 7a | 0.00 | | | | | | | | |
| _ | <u> </u> | Net unre | lated business taxable income from Form 990-T, line 34 | | 7b | 0.00 Current Year | | | | | | | | |
| | | _ | | Prior Ye | | | | | | | | | | |
| Revenue | 8 | | tions and grants (Part VIII, line 1h) | | 330,791 | 274,098 | | | | | | | | |
| | 9 | - | service revenue (Part VIII, line 2g) | | 0.00 | 0 | | | | | | | | |
| <u></u> | 10 | | ent income (Part VIII, column (A), lines 3, 4, and 7d) | | 0.00 | 0 | | | | | | | | |
| ш. | 11 | Other rev | venue (Part VIII) Equipm (A) chines 5, 6d, 8c, 9c, 10c, and 11e) | | (2,843) (1,135 | | | | | | | | | |
| | 12 | | enue add lines 8 through 11 (must equal Part VIII, column (A), line 12) | | 327,948 | 272,963 | | | | | | | | |
| | 13 | | nd sımıtar amounts paid (Part IX, coldinn (A), lines 1–3) | | 0 | 0 | | | | | | | | |
| | 14 | Benefits | paid to or members (Rank, column (A), line 4) [| | 0 | 0 | | | | | | | | |
| ŝ | 15 | Salaries, | other compensation, employee benefits (Part IX, column (A), lines 5–10) | | 227,146 | 174,852 | | | | | | | | |
| Expenses | 16a | Profession | onal fundraişing fees (Part IX, column (A), line 11e) | | 0 | 0 | | | | | | | | |
| 9 | b | Total fun | draising expenses (Part IX, column (D), line 25) ▶ | | | | | | | | | | | |
| ш | 17 | Other ex | penses (Part IX, column (A), lines 11a-11d, 11f-24e) | | 97,636 | 83,114 | | | | | | | | |
| | 18 | Total exp | penses. Add lines 13-17 (must equal Part IX, column (A), line 25) . [| | 324,782 | 259,976 | | | | | | | | |
| | 19 | Revenue | less expenses. Subtract line 18 from line 12 | | 3,166 | 12,987 | | | | | | | | |
| 5 6 | | | | Beginning of Cu | rrent Year | End of Year | | | | | | | | |
| lanc | 20 | Total ass | sets (Part X, line 16) | | 51,206 | 51,496 | | | | | | | | |
| A88 | 21 | Total liat | ollities (Part X, line 26) | , | 12,697 | 0 | | | | | | | | |
| Net Assets Fund Balanc | 22 | Net asse | ts or fund balances. Subtract line 21 from line 20 | | 38,509 | 51,496 | | | | | | | | |
| | art II | Signa | ture Block | | | | | | | | | | | |
| Ur | nder pena | ties of perju | iry, I declare that I have examined this return, including accompanying schedules and state | ments, and to t | ne best of n | ny knowledge and belief, it is | | | | | | | | |
| tru | ie, correct | , and comp | lete Declaration of preparer (other than officer) is based on all information of which prepare | r has any knowl | edge | | | | | | | | | |
| | | | John A Toule | | | | | | | | | | | |
| Sign Here | | Sign | ature of officer | Da | te / | | | | | | | | | |
| | | | JOHD A BAULE TREASURER | | 5k | ?/12 | | | | | | | | |
| | | Тур | e or print name and title | | | 7 | | | | | | | | |
| _ | | Print/Ty | pe preparer's name Preparer's signature D. | ate | Charle F | T of PTIN | | | | | | | | |
| | aid | _ | | | Check [self-emp | | | | | | | | | |
| | epare | | name ► | Firm | n's EIN ▶ | | | | | | | | | |
| US | se Onl | y | | | ne no | <u> </u> | | | | | | | | |
| Firm's address ► Phone no May the IRS discuss this return with the preparer shown above? (see instructions) | | | | | | | | | | | | | | |
| _ | | | | No 11282Y | | Yes No Form 990 (2011) | | | | | | | | |
| | p~ | | ···································· | | | (24.4) | | | | | | | | |

| 0 00 | . 555 (251.) | | | rage 🚣 |
|------|---|---------------------------------------|---|----------------|
| Part | | | | |
| | Check if Schedule O contains a respons | nse to any question in this Part I | <u>M</u> | <u> 🗆</u> |
| 1 | | | | |
| | To encourage and strengthen the revitalization | and ongoing health of the urban co | re of the city of Yakima, Washington | ••••• |
| | | , | | ************** |
| | | | | |
| 2 | Did the organization undertake any significan | program services during the ves | ar which were not listed on the | |
| - | prior Form 990 or 990-EZ? | | | res ☑ No |
| | If "Yes," describe these new services on Sche | | | C3 E 110 |
| 3 | | | ow it conducts, any program | |
| | services? | | | res ☑ No |
| | If "Yes," describe these changes on Schedule | · O | _ | _ |
| 4 | Describe the organization's program service | accomplishments for each of its | three largest program services, as n | neasured by |
| | expenses. Section 501(c)(3) and 501(c)(4) or | | | amount of |
| | grants and allocations to others, the total exp | enses, and revenue, if any, for eac | ch program service reported. | |
| | • | | | |
| 4a | a (Code:) (Expenses \$ | including grants of \$ |) (Revenue \$ |) |
| | | | | |
| | Clean, Safe, & Parking Lot Program Under cor | | | |
| | by property and business owners in the downto | | | |
| | curb gutters, removes graffiti, monitors city-ow | | | |
| | common downtown infrastructure daily. During | | t" maintenance workers also look for s | igns of |
| | illegal activity and notify the city police departm | ent when necessary. | | |
| | | | | |
| | | | | |
| | | | | |
| | | , | | |
| | | | | |
| 4b | b (Code:) (Expenses \$ | including grants of \$ |) (Revenue \$ | |
| | | | | / |
| | Flowers & Plantings CDY plants and maintain | s 317 hanging flower baskets, all str | reet level flower and shrub beds, corne | er concrete |
| | planters, and pocket green spaces in the city's | | | |
| | | | | |
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| | | | •••••• | |
| | | | *************************************** | |
| 4- | a (Cada) \(\(\text{Expanses \$\frac{\pi}{2} \) | upoluding grapts of ¢ | \/Peyenue \$ | |
| 4c | c (Code:) (Expenses \$ | including grants of \$ |) (Hevenue \$ |) |
| | Downtown Revitalization & Event Coordination | CDV helps husiness owners with | advice on marketing, building and sign | n desian |
| | and whatever is requested to improve the busin | | | |
| | people to the area, sponsors a First Friday even | | | |
| | to assist and support all downtown planning an | | | |
| | | | | |
| | | | ••••••••••• | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 4d | | | | |
| | (Expenses \$ including grants | of \$) (Revenue \$ |) | |
| 4e | e Total program service expenses > | | | |

| Part | IV Checklist of Required Schedules | | | Page |
|------|---|--------|-------------|----------|
| 4 | le the exceptation described in section 501/oV2) or 4047/oV1) (other than a private foundation)? If "Vos." | | 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 | | / |
| | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 2 | | 1 |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I </i> | 3 | | 1 |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> | 4 | | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | 1 |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | | |
| 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 | | 1 |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | 8 | | 1 |
| 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 | | √ |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | 1 |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable. | : 1 Ag | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI | 11a | ✓ | |
| b | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | 1 |
| С | 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 | 11c | | 1 |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | 1 |
| | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | | ✓ |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X. | 11f | | / |
| 12 a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII | 12a | | 1 |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional | 12b | | 1 |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | 1 |
| 14 a | | 14a | <u> </u> | ✓_ |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV | 14b | | / |
| 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, Parts II and IV. | 15 | | 1 |
| 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, Parts III and IV | 16 | | 1 |
| 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 (see instructions) | 17 | | 1 |
| 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 | | 1 |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III | 19 | | 1 |
| 20 a | | 20a | | 1 |
| ь | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | L |

| rarı | Checklist of Required Schedules (Continued) | - | | |
|----------|---|------------|-----|----------|
| 21 | Did the organization report more than \$5,000 of grants and other assistance to any government or organization | | Yes | No |
| | in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | | 1 |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | 1 |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J | 23 | | ✓ |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25 | 24a | | ✓ |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24b 24c | | |
| d 25a | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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 | 24d 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 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 | | √ |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | √ |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| a b | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a 28b | | √ |
| С | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | ~ |
| 29 30 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M | 29 30 | | √ |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | ✓ |
| 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 | | ✓ |
| 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 | | ✓ |
| 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 | | ✓ |
| 35a b | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a 35b | | √ |
| 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? <i>If</i> "Yes," <i>complete Schedule R</i> , <i>Part VI</i> | 37 | | <u> </u> |
| 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 | ✓ | |

| Part | V Statements Regarding Other IRS Filings and Tax Compliance | | | |
|----------|---|----------|-----|-------------|
| | Check if Schedule O contains a response to any question in this Part V | <u> </u> | | |
| | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | | | |
| · | reportable gaming (gambling) winnings to prize winners? | 1c | 1 | |
| 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 12 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . | 2b | ✓ | <u> </u> |
| 0- | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | | |
| За b | Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | 3a 3b | | ✓ |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority | 30 | | |
| | over, a financial account in a foreign country (such as a bank account, securities account, or other financial | | | |
| | account)? | 4a | | ✓ |
| b | If "Yes," enter the name of the foreign country: ▶ | | | |
| _ | See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5b 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | 30 | | |
| | organization solicit any contributions that were not tax deductible? | 6a | | ✓ |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or | | | |
| _ | gifts were not tax deductible? | 6b | | |
| 7 a | Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods | | | |
| - | and services provided to the payor? | 7a | | <u> </u> |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | _ |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | | | |
| _ | required to file Form 8282? | 7c | | ✓ |
| d e | If "Yes," indicate the number of Forms 8282 filed during the year | 7e | | _ |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 76 7f | | ✓ |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | √ |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 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? | | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | 8 | | |
| 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: | 1 | | |
| a | Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| ь 11 | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b] Section 501(c)(12) organizations. Enter: | | | |
| а | Gross income from members or shareholders | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources | | | |
| | against amounts due or received from them.) | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b | 12a | | , |
| ь 13 | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | |
| | Note. See the instructions for additional information the organization must report on Schedule O. | | | 1 |
| þ | Enter the amount of reserves the organization is required to maintain by the states in which | | | |
| _ | the organization is licensed to issue qualified health plans | | | |
| с 14а | Enter the amount of reserves on hand | 14a | | 1 |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. | 14b | | |
| | | | 990 | (2011) |

| Form 99 | 90 (2011) | | 1 | Page 6 |
|-------------------|---|-------------|----------|---------------|
| Part | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response to any question in this Part VI | See ins | struct | ions. |
| Secti | ion A. Governing Body and Management | | | <u> </u> |
| | | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | | | |
| ь 2 | Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | 2 | | ✓ |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? . | 3 | | √ |
| 4 5 6 7a | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets?. Did the organization have members or stockholders? | 4 5 6 | | ✓ ✓ ✓ |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | 7b | | ✓ |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | |
| а | The governing body? | 8a | ✓_ | |
| 9 | Each committee with authority to act on behalf of the governing body? | 8b 9 | ✓ | <u>,</u> |
| Secti | on B. Policies (This Section B requests information about policies not required by the Internal Rever | | ode.) | <u> </u> |
| | | | Yes | No |
| 10a b | Did the organization have local chapters, branches, or affiliates? | 10a 10b | | ✓ |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | ✓ | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | | |
| 12a b | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a 12b | √ | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done | 12c | | 1 |
| 13 | Did the organization have a written whistleblower policy? | 13 | | √ |
| 14 15 | Did the organization have a written document retention and destruction policy? | 14 | | / |
| а | The organization's CEO, Executive Director, or top management official | 15a | | 1 |
| | Other officers or key employees of the organization | 15b | | 1 |
| 16a | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement | | | |
| b | with a taxable entity during the year? | 16a | | ✓ |
| | participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? | 16b | | |
| Secti | on C. Disclosure | | | |
| 17 18 | List the states with which a copy of this Form 990 is required to be filed ► None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply. | 1 501(| c)(3)s | only) |
| 19 | Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year. | ıf ıntei | rest p | olicy, |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records organization: ► John A Baule, Treasurer, 2105 Tieton Drive, Yakima, WA 98902 509-248-0747 | of the | • | |

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|----|---|---|---|
| ۲a | a | e | • |

| Form | aan | (201 | 1 |
|------|-----|------|---|
| | | | |

| 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.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers, key employees, highest compensated employees; and former such persons.

| Check this box if neither the organization no | r any relate | d org | anız | atıo | n c | ompe | nsa | ited any curren | t officer, directo | r, or trustee. |
|---|------------------------------|--------------------------------|-----------------------|---------|--------------|------------------------------|--------|-----------------|--------------------|-----------------------------|
| | | | | ((| C) | | | | | |
| (A) | (B) | | | Pos | ition | | | (D) | (E) | (F) |
| Name and Title | 1 | | | | | e than o | | Reportable | Reportable | Estimated |
| Name and Title | Average hours per | | | | | is both | | | compensation from | |
| | week | | | | | or/trus | | from | related | other |
| | (describe | 일 | nst | Officer | ₹ | 35 | Former | the | organizations | compensation |
| | hours for | i d | 로 | cer | g | j g g | ₹ | organization | (W-2/1099-MISC) | from the |
| | related | [[[[| ğ | | 호 | 8 2 | ~ | (W-2/1099-MISC) | | organization and related |
| | organizations in Schedule |) ž | <u>a</u> | | Key employee | Ē | | • | | organizations |
| | 0) | Individual trustee or director | Institutional trustee | | ۱ " | ens ens | | | | 3 |
| | | • | 8 | | | Highest compensated employee | | | | |
| | ···· | - | | | | | | | | |
| (1) James Stickel, President | | | | | | ļ | | İ | | |
| | 10 | ✓ | | 1 | | | | 0 | 0 | 0 |
| (2) Douglas Picatti, Vice-President | | | | | | | | | | |
| | 10 | ✓ | | ✓ | | ĺ | | 0 | 0 | 0 |
| (3) John A Baule, Treasurer | | | | | | | | | | |
| | 15 | ✓ | | ✓ | | | | 0 | O | 0 |
| (4) Victor DeLong, Trustee | | | | | Г | | П | 1 | | |
| | 5 | ✓ | | | | | | o | 0 | o |
| (5) Chris Malland, Trustee | | | | | | | 1 | | | ······ |
| | 5 | 1 | | | | | | о | o | 0 |
| (6) Elizabeth McGree, Trustee | | | | | | | | | | |
| | 5 | 1 | | | | | | o | 0 | 0 |
| (7) John Cooper, Trustee | | | | | | | | | | |
| | 5 | 1 | | | l | | | 0 | 0 | 0 |
| (8) Larry Hull, Trustee | | | | | | | | | _ | |
| unini pungnai ang ang ang ang ang ang ang ang ang ang | 5 | 1 | | | | | | 0 | 0 | 0 |
| (9) Craig Rath, Trustee | | | | | | | | | | |
| *************************************** | 5 | ✓ | | | | ĺ | 1 | . o | o | 0 |
| (10) Jack Cannon, Trustee | | | | | | | | | | |
| ······································ | 5 | 1 | | | | | | o | 0 | o |
| (11) Mike McMurray, Trustee | <u> </u> | | | | | | Г | <u> </u> | | |
| X | 5 | 1 | | | ŀ | | | o | o | 0 |
| (12) Joe Mann, Trustee | | | | - | П | | | | | |
| \\ | 5 | 1 | | ŀ | | | | 0 | 0 | 0 |
| (13) Roger Wilson, Trustee | | | | | Г | | | | | |
| | 5 | 1 | | | 1 | | | 0 | o | o |
| (14) Katherine Goodson, Trustee | ļ | | | | | | | | | |
| | 5 | ✓ | | 1 | | | | o | o | o |
| | | | • | | _ | | | | | |

| Part | Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) | | | | | | | | | | | | | |
|---------|---|--------------------------|-----------------------------------|-----------------------|---------|--------------|------------------------------|----------|------------------|----------------------|---------------|----------|---------------------|--------------------|
| | | | | | - | C) | | | | | | | | |
| | (A) | (B) | (40.0 | ot ch | | ntion | e than o | nna. | (D) | (E) | | (| (F) | |
| | Name and title | Average hours per | | | | | is both | | Reportable | Reportable | | | mated | |
| | | | office | er and | dad | irect | or/trus | ÷ | compensation | compensation related | from | | ount of ther | |
| | | week (describe | 유급 | lng: | Officer | <u>\$</u> | ᆲ | Former | the | organization | ıs | | ensation | |
| | | hours for | mg Kg | ŝ | cer | Key employee | 등 항 | T mer | organization | (W-2/1099-MI | SC) | | n the | |
| | | related organizations | 호호 | on a | 1 | 흥 | 88 | | (W-2/1099-MISC) | | | - | nization related | |
| | | ın Schedule | Individual trustee or director | ŧ | i | ee | npe | | | | - 1 | organ | ızatıons | |
| | | O) | 8 | Institutional trustee | l | | Highest compensated employee | | | | | | | |
| | | | | Ĺ | | | 8. | | | | | ···· | | |
| (15) Kr | isteen Wade, Trustee | | ١. | | | | ŀ | | | ł | | | | |
| | | 5 | / | | L | | <u> </u> | _ | 0 | | 씍 | | | 0 |
| (16) | | - | | | | | | | | | | | | |
| | | | | <u> </u> | L | | _ | _ | | | \rightarrow | | | |
| (17) | | - | | | | | | | | | | | | |
| (4.0) | | | | | | | | ├— | | | | | | |
| (18) | | | | | | | | | | | | | | |
| (4.0) | | | <u> </u> | _ | | <u> </u> | | - | | | \dashv | | | |
| (19) | | 1 | | | | İ | | | | | | | | |
| (20) | | | | | | \vdash | | ┢ | | | \dashv | | | |
| (20) | | 1 | | | | | | | 1 | | - 1 | | | |
| (21) | | <u> </u> | l — | | | | - | | | | \dashv | | | |
| 3=:/ | | | | | | | | | | | | | | |
| (22) | | | | | | | | \vdash | | | \dashv | | | |
| 3 | | 1 | | | | | | | | | | | | |
| (23) | | | | | | | | | | | \neg | | | |
| | | 1 | | | | | | | | | - 1 | | | |
| (24) | | | | | | | | | | | | | | |
| | | | | | | | | | | | 1 | | | |
| (25) | | | | | | | | | | | | | | |
| | | <u> </u> | <u> </u> | <u> </u> | L | | <u> </u> | <u> </u> | | ļ <u>.</u> | | | | |
| 1b | Sub-total | | | | | | | | 0 | ļ | 0 | | | 0 |
| С | Total from continuation sheets to Part | | | | | | | | | ļ | -⊦ | | | |
| d | Total (add lines 1b and 1c) | | | | | | _ | <u> </u> | 0 | <u> </u> | 0 | | | 0 |
| 2 | Total number of individuals (including but | | | ose | list | ed : | above | e) w | ho received m | ore than \$10 | 0,00 | 0 of | | |
| | reportable compensation from the organi | zation ► 0 | 1 | | | | | | | | | | | |
| _ | District the second of the second of | C | | | | | 1 | | | | | | Yes I | No , |
| 3 | Did the organization list any former of employee on line 1a? If "Yes," complete to | | | | | | | | | | | h | | |
| | • • | | | | | | | | | | | 3 | -+ | <u>/</u> |
| 4 | For any individual listed on line 1a, is the | | | | | | | | | | | | ļ. | |
| | organization and related organizations individual | | | | | | | | | | | | | |
| _ | Did any person listed on line 1a receive of | | | | | | | | | | | 4 | | <u>/</u> |
| 5 | for services rendered to the organization | | | | | | | | | | | 5 | | نــــا / |
| Saction | on B. Independent Contractors | 100, 0 | , c, , , _D , | | | | | | Jack Parasi. | | | | L. | <u> </u> |
| 1 | Complete this table for your five highest | compensat | ed inc | | end | ent | contr | acto | ors that receive | ed more than | \$10 | n nnn of | | |
| • | compensation from the organization. Rep | | | | | | | | | | | | | : |
| | year. | p. | | | | | | ·· , | , | | | J | | |
| | (A) | | | | | | | | (B) | T | | (C) | | |
| | Name and business add | ress | | | | | | | Description of s | ervices | | Compens | ation | |
| NONE | | | | | | | | | | | | | | |
| | | | | _ | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 2 | Total number of independent contractor | | | | | | |) th | | ove) who | | | | |
| | received more than \$100,000 of compens | sation from | trie o | ruar | ııza | นอท | _ | | 0 | | | | | |

| Part | VIII | Statement of Revenue | | | | | |
|--|--------|---|--------------------|----------------------|--|---|---|
| ; | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
| ts ts | 1a | Federated campaigns 1a | 1 | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | ь | Membership dues 1b | | | | | |
| S, G | С | Fundraising events 1c | | | | | |
| ar / | d | Related organizations 1d | | | | | |
| s, C | е | Government grants (contributions) 1e | | | | | |
| tion r Si | f | All other contributions, gifts, grants, | | | | | |
| the st | | and similar amounts not included above 1f | 274,098 | | | | |
| d o | g | Noncash contributions included in lines 1a-1f. \$ | | | | | |
| 9 E | h | Total. Add lines 1a-1f | | 274,098 | | | |
| Program Service Revenue | | | Business Code | | | | |
| eve | 2a | ••••• | ļ | | | | |
| e B | b | | | | | | |
| Nic | C . | | | | | ··· | |
| Se | d | *************************************** | | | | | |
| ran | e | All other program convectors | | | | | |
| rog | f g | All other program service revenue Total. Add lines 2a–2f | | | | | |
| | 3 | Investment income (including divi | dends, interest. | | | | |
| | | and other similar amounts) | | | | | |
| | 4 | Income from investment of tax-exempt | oond proceeds | | | | |
| | 5 | Royalties | | | | | |
| | | (i) Real | (II) Personal | | | | |
| | 6a | Gross rents | | | | | |
| | b | Less: rental expenses | | | : | | |
| | С | Rental income or (loss) | <u> </u> | | | | |
| | d | \ | | | | | |
| ود | 7a | Gross amount from sales of assets other than inventory (i) Securities | (ii) Other | | | | |
| | b | Less. cost or other basis and sales expenses | | | | | |
| | | · | + | | | | |
| | d | Gain or (loss) | | | | | |
| • | " | Net gail of (loss) | | | | | |
| enne | 8a | Gross income from fundraising | | | | | |
| | | events (not including \$ | | | | | |
| Œ | | of contributions reported on line 1c). See Part IV, line 18 | | | | | - |
| Other Re | | | a 4,479 b 5,614 | | | | i |
| δ | | Less: direct expenses | | (1,135) | | | |
| | | Gross income from gaming activities. | | (1,133) | | | |
| | Ju | See Part IV, line 19 | | | | | |
| | ь | | b | | | | |
| | | Net income or (loss) from gaming ac | | | | | |
| | 10a | Gross sales of inventory, less | | | | | |
| | | returns and allowances | a | | | | |
| | b | Less: cost of goods sold | b | | | | |
| | С | Net income or (loss) from sales of in | | | | | |
| | | Miscellaneous Revenue | Business Code | | | | |
| | 11a | | | | | | |
| | Ь | | | | | | |
| | C | All other recipies | | | | | |
| | d | All other revenue | | | | | - |
| | 12 | Total revenue. See instructions | | 272,963 | 272,963 | 0 | 0 |

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).

| | Check if Schedule O contains a respon | se to any question | n this Part IX | | |
|------------------------|--|--------------------|-----------------|------------------|--|
| Do no | t include amounts reported on lines 6b, 7b, | (A) | (B) | (C) | <u> </u> |
| | , and 10b of Part VIII. | Total expenses | Program service | Management and | Fundraising |
| | · | | expenses | general expenses | expenses |
| 1 | Grants and other assistance to governments and | | | | |
| | organizations in the United States. See Part IV, line 21 | | | | |
| 2 | Grants and other assistance to individuals in the United States. See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 | | | | |
| | | | | | |
| 4 5 | Benefits paid to or for members 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 | 142,066 | 103,605 | 38,461 | |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | 14,251 | 9,982 | 4.269 | · · · · · · · · · · · · · · · · · · · |
| 10 | Payroll taxes | 18,535 | 14,041 | 4,494 | |
| 11 | Fees for services (non-employees): | 10,555 | 14,041 | 1,101 | |
| | Management | | | | |
| a b | Legal | | | | |
| | • | 3,600 | | 3,600 | · · · · · · · · · · · · · · · · · · · |
| C | Accounting | 3,000 | | 3,000 | |
| d | Professional fundraising services See Part IV, line 17 | | | | |
| e f | Investment management fees | | | | · |
| | Other | . + | | | ······································ |
| . g | Advertising and promotion | 7,635 | 5,090 | 2,545 | |
| 12 13 | | 5,914 | 3,924 | 1,990 | |
| | Office expenses | 883 | 3,924 | 442 | |
| 14 15 | Information technology | 003 | 441 | 442 | |
| 16 | Royalties | 9,457 | | 9,457 | |
| | Occupancy | 9,437 | | 5,437 | |
| 17 18 | Travel | | | | |
| 19 | Conferences, conventions, and meetings . | 2,159 | | 2,159 | · · · · · · · · · · · · · · · · · · · |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization . | | | | |
| 23 | Insurance | 2,832 | | 2,832 | |
| 24 | Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| _ | Equipment Purchase | 7,019 | 7,019 | | · · · · · · · · · · · · · · · · · · · |
| a | Equipment Fuel, Repair, & Storage | 7,019 | 7,019 | - | |
| b | Flowers & Planters | 26,185 | 26,185 | | , , <u>, , , </u> |
| ۲ د | Outdoor Clean & Safe Supplies | 12,193 | 12,193 | | |
| d | | 12,193 | 12,193 | | |
| 9 25 | All other expenses | 250.076 | 100 727 | 70.240 | |
| <u>25</u> <u>26</u> | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720) | 259,976 | 189,727 | 70,249 | |

| | art X | Balance Sheet | | | |
|-----------------------------|----------|---|--|-----|--|
| | <u> </u> | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash—non-interest-bearing | 1,146 | 1 | 2,186 |
| | 2 | Savings and temporary cash investments | | 2 | |
| | 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 | |
| S | 6 | Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) | | 6 | |
| Assets | 7 | Notes and loans receivable, net | | 7 | |
| As | 8 | Inventories for sale or use | | 8 | |
| | 9 | Prepaid expenses and deferred charges | | 9 | |
| | 10a | Land, buildings, and equipment: cost or | - | | 1 |
| | | other basis. Complete Part VI of Schedule D 10a 50,810 | | | |
| | b | Less: accumulated depreciation 10b 1,500 | 50,060 | 10c | 49,310 |
| | 11 | Investments—publicly traded securities | · | 11 | |
| | 12 | Investments—other securities. See Part IV, line 11 | | 12 | ······································ |
| | 13 | Investments—program-related. See Part IV, line 11 | | 13 | |
| | 14 | Intangible assets | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | 15 | |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 51,206 | 16 | 51,496 |
| | 17 | Accounts payable and accrued expenses | | 17 | |
| | 18 | Grants payable | · | 18 | |
| | 19 | Deferred revenue | | 19 | |
| | 20 | Tax-exempt bond liabilities | | 20 | |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D . | | 21 | |
| Liabilities | 22 | Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. | | | |
| Ē | | Complete Part II of Schedule L | | 22 | |
| ا <u>تا</u> | 23 | Secured mortgages and notes payable to unrelated third parties | 9,375 | 23 | |
| _ | 24 | Unsecured notes and loans payable to unrelated third parties | 3,373 | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third | | | |
| | 25 | parties, and other liabilities not included on lines 17-24). Complete Part X | 3,322 | | |
| | | of Schedule D | 0,022 | 25 | |
| | 26 | Total liabilities. Add lines 17 through 25 | 12,697 | 26 | |
| | | Organizations that follow SFAS 117, check here ▶ □ and complete | 12,001 | | |
| es | | lines 27 through 29, and lines 33 and 34. | | | |
| Ĕ | 27 | Unrestricted net assets | 38,509 | 27 | 51,496 |
| Net Assets or Fund Balances | 28 | Temporarily restricted net assets | · · · · · · · · · · · · · · · · · · · | 28 | |
| | 29 | Permanently restricted net assets | ···- | 29 | · · · · · · · · · · · · · · · · · · · |
| | | Organizations that do not follow SFAS 117, check here ▶ □ and | | | |
| 7 | | complete lines 30 through 34. | | | |
| 13 | 30 | Capital stock or trust principal, or current funds | | 30 | |
| Se | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| ¥ | 32 | Retained earnings, endowment, accumulated income, or other funds . | | 32 | |
| 乡 | 33 | Total net assets or fund balances | 38,509 | 33 | 51,496 |
| | 34 | Total liabilities and net assets/fund balances | 51,206 | 34 | 51,496 |

| orm 9 | 90 (2011) | | | Pa | age 12 |
|--------------|---|--------------|----------|----------|---------------|
| Par | XI Reconciliation of Net Assets | | | | |
| | Check if Schedule O contains a response to any question in this Part XI | <u></u> | <u></u> | <u> </u> | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | 27 | 2.963 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | | 9,976 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | | | 2,987 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . | 4 | | 3 | 8,509 |
| 5 | Other changes in net assets or fund balances (explain in Schedule O) | 5 | | | 0 |
| 6 | Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) | 6 | | 5 | 1,496 |
| Part | XII Financial Statements and Reporting | | | | _ |
| | Check if Schedule O contains a response to any question in this Part XII | <u> </u> | <u></u> | | |
| 1 | Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O. | plain in | | Yes | No |
| 2a b c | Were the organization's financial statements compiled or reviewed by an independent accountant? Were the organization's financial statements audited by an independent accountant? If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o of the audit, review, or compilation of its financial statements and selection of an independent accountant? | versight | 2a 2b | | 1 |
| | If the organization changed either its oversight process or selection process during the tax year, ex Schedule O. | | | | |
| d | If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the yellissued on a separate basis, consolidated basis, or both: | ar were | | | |
| | ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | | <u> </u> | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133? | forth in | 3a | | 1 |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a | _ | 3b | | |

Form **990** (2011)

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Part IV, line 6, 7, 8, 9, 10

Attach to Form

Employer identification number

| Comr | nittee For Downtown Yakima | 20-2578831 |
|------|---|--|
| Pai | Organizations Maintaining Donor Advised Funds or Other Similar F | unds or Accounts. Complete if the |
| | organization answered "Yes" to Form 990, Part IV, line 6. | - |
| | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | |
| 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 are the organization's property, subject to the organization's exclusive legal cor | itrol? 🔲 Yes 🔲 No |
| 6 | Did the organization inform all grantees, donors, and donor advisors in writing that g | rant funds can be used |
| | only for charitable purposes and not for the benefit of the donor or donor advisor, o | |
| | conferring impermissible private benefit? | · · · · · · · · · · Yes 🗌 No |
| Par | Conservation Easements. Complete if the organization answered "Yes | s" to Form 990, Part IV, line 7. |
| 1 | Purpose(s) of conservation easements held by the organization (check all that apply). | |
| | Preservation of land for public use (e.g., recreation or education) Preservation | of an historically important land area |
| | ☐ Protection of natural habitat ☐ Preservation | of a certified historic structure |
| | ☐ Preservation of open space | |
| 2 | Complete lines 2a through 2d if the organization held a qualified conservation contribu | ition in the form of a conservation |
| | easement on the last day of the tax year. | |
| | | Held at the End of the Tax Year |
| а | Total number of conservation easements | 2a |
| b | Total acreage restricted by conservation easements | 2b |
| С | Number of conservation easements on a certified historic structure included in (a) . | |
| d | Number of conservation easements included in (c) acquired after 8/17/06, and no | |
| | historic structure listed in the National Register | <u> </u> |
| 3 | Number of conservation easements modified, transferred, released, extinguished, or to | erminated by the organization during the |
| | tax year ▶ | |
| 4 | Number of states where property subject to conservation easement is located ▶ | |
| 5 | Does the organization have a written policy regarding the periodic monitoring, i | |
| _ | violations, and enforcement of the conservation easements it holds? | |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation | on easements during the year |
| _ | | |
| 7 | Amount of expenses incurred in monitoring, inspecting, and enforcing conservation ea • \$ | sements during the year |
| • | | f |
| 8 | Does each conservation easement reported on line 2(d) above satisfy the requirement (i) and section 170(h)(4)(B)(ii)? | · · · · · · · · — — — |
| _ | | · · · · · · · · · · · · · · · · No |
| 9 | In Part XIV, describe how the organization reports conservation easements in its reverbalance sheet, and include, if applicable, the text of the footnote to the organization's | |
| | organization's accounting for conservation easements. | miancial statements that describes the |
| Pari | | or Other Similar Accets |
| rai | Complete if the organization answered "Yes" to Form 990, Part IV, line 8 | |
| 12 | If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in | |
| ıa | works of art, historical treasures, or other similar assets held for public exhibition, | |
| | public service, provide, in Part XIV, the text of the footnote to its financial statements t | |
| ь | If the organization elected, as permitted under SFAS 116 (ASC 958), to report in it | |
| • | works of art, historical treasures, or other similar assets held for public exhibition, | |
| | 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 similarity | |
| _ | following amounts required to be reported under SFAS 116 (ASC 958) relating to these | |
| а | Revenues included in Form 990, Part VIII, line 1 | |
| | Assets included in Form 990, Part X | |

| 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection terms (check all that apply): a □ Public exhibition | Part | Organizations Maintaining | Collections o | f Art, His | torical | Treasures, | or O | ther Similar As | sets (continued) |
|--|--------|---|--------------------|--------------|------------|----------------|----------|----------------------|--|
| b | 3 | | | other reco | rds, chec | k any of the | e follo | wing that are a s | significant use of its |
| b | а | ☐ Public exhibition | | d | ☐ Loan | or exchang | e prog | rams | |
| c | b | ☐ Scholarly research | | е | ☐ Othe | r | | | • |
| SIV Source the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization? Bescrive and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Ia is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? In the organization and agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X V. In the organization and the arrangement in Part XIV and complete the following table: C. Beginning balance. C. Beginning balance. C. Beginning balance and the arrangement in Part XIV. Part V. Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Times years back (e) Four years back (e | С | ☐ Preservation for future generations | s | | | | | | |
| Souring the year, did the organization solicitor receive donations of art, instorical treasures, or other similar assets to be sold to rase funds rather than to be maintained as part of the organization is collection? Yes No Fart IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is its negroup and an an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If I'ves, "explain the arrangement in Part XIV and complete the following table: Beginning balance | 4 | · · · · · · · · · · · · · · · · · · · | tion's collections | and expl | aın how t | hey further | the org | ganization's exe | mpt purpose in Part |
| Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? | 5 | | | | | | | | |
| line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV and complete the following table: C Beginning balance d Additions during the year e Distributions during the year f Ending balance 2b Did the organization include an amount on Form 990, Part X, line 21? b Did the organization include an amount on Form 990, Part X, line 21? Find the organization include an amount on Form 990, Part X, line 21? Find the organization include an amount on Form 990, Part X, line 21? Find organization include an amount on Form 990, Part X, line 21? For the organization include an amount on Form 990, Part X, line 21? For the organization include an amount on Form 990, Part X, line 21? For the organization of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance b Permanent endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations | Dord | | | | | | | | |
| 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? | rait | | • | • | _ | janization | 2115VVC | ieu ies lori | Jilli 990, Fait IV, |
| included on Form 990, Part X? Yes No | 12 | ls the organization an agent trustee | custodian or o | ther interr | nediany f | or contribute | one o | other assets n | ot . |
| c Beginning balance | Id | included on Form 990, Part X? | | | | | | | |
| c Beginning balance | b | If "Yes," explain the arrangement in P | art XIV and comp | olete the f | ollowing t | able: | | Ι Δ | mount |
| d Additions during the year e Distributions during the year f Ending balance | _ | Paginning balance | | | | | 1 | | |
| Distributions during the year 1 | _ | | | | | | — | | |
| f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? | | | | | | | - | + | |
| Did the organization include an amount on Form 990, Part X, line 21? | | | | | | | | _ | |
| b If "Yes," explain the arrangement in Part XIV. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years | | | | | | | | | |
| Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (d) Three years back (d) Three years back (d) Three years back (d) Three years back (d) Three years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (e) Four years back (d) Three years back (e) Four years | | • | • | Part X, Ilne | 217 . | | | | ☐ Yes ☐ No |
| (a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back be Contributions b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Description of property (a) Cost or other basis (nivestment) (other) Description of property (a) Cost or other basis (c) Accumulated depreciation by Buildings c Leasehold improvements b Buildings c Leasehold improvements d Equipment 50,810 1,450 49,310 | | | | : | | "V" +- [| O | OO Dort IV line | 10 |
| Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations 3a(ii) 3a(ii) 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (c) Accumulated depreciation (d) Book value depreciation (d) Book value depreciation (d) Book value depreciation (d) Book value (d) Book value (d) Buildings t Land b Buildings c Leasehold improvements d Equipment 50,810 1,450 49,310 | Par | Endowment runds. Compr | | | | | | | |
| b Contributions c Net investment earnings, gains, and losses d Grants or scholarships Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment ### Permanent endowment ### ### ### ### ### ### ### ### ### ## | | 5 | (a) Current year | (6) Pr | or year | (c) Two years | S Dack | (u) Tiffee years bac | (e) Four years back |
| c Net investment earnings, gains, and losses | _ | | | | | | | | |
| d Grants or scholarships | | | | | | | | | |
| d Grants or scholarships e Other expenditures for facilities and programs | С | | | | | ŀ | | | |
| e Other expenditures for facilities and programs | | | | | | | | | |
| f Administrative expenses | | · | | | | | | | |
| g End of year balance | е | | | | | | | | |
| Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment ▶ % Permanent endowment ▶ % Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations . 3a(ii) (ii) related organizations . 3a(ii) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . 3b 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation (d) Book value (nivestment) (other) (other) (other) (d) Book value (d) Book value (d) Book value (d) Book value (d) Book value (d) Equipment . 50,810 1,450 49,310 e) Other | f | Administrative expenses | | | | | | | |
| a Board designated or quasi-endowment b Permanent endowment c Temporarily restricted endowment methods he percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations 15 ff "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 25 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation (d) Book value (d) Book value (d) Book value (d) Book value (d) Book value (d) Book value (d) Equipment 50,810 1,450 49,310 60ther 1 49,310 1,450 | g | End of year balance | | | | | | | |
| b Permanent endowment % c Temporarily restricted endowment % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations | 2 | Provide the estimated percentage of t | the current year e | end baland | e (line 1g | , column (a) |) held | as: | |
| b Permanent endowment % c Temporarily restricted endowment % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations | а | Board designated or quasi-endowme | nt ▶ | % | | | | | |
| Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations 3a(ii) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (other) (other) (d) Book value (d) Book value teasehold improvements c Leasehold improvements d Equipment 50,810 1,450 49,310 | b | Permanent endowment ▶ | % | | | | | | |
| Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations | С | | | | | | | | |
| organization by: (i) unrelated organizations | | The percentages in lines 2a, 2b, and 2 | 2c should equal 1 | 100%. | | | | | |
| (i) unrelated organizations | 3a | Are there endowment funds not in the | e possession of | the organ | zation the | at are held a | and ad | ministered for th | ne |
| (ii) related organizations | | organization by: | | | | | | | Yes No |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value b Buildings c Leasehold improvements d Equipment Other Other | | (i) unrelated organizations | | | | | | | 3a(i) |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value b Buildings c Leasehold improvements d Equipment Other Other | | | | | | | | | 3a(ii) |
| Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (other) (a) Equipment (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value | b | If "Yes" to 3a(ii), are the related organ | izations listed as | required (| on Sched | ule R? . | | | 3b |
| Description of property (a) Cost or other basis (other) (investment) (investment) (investment) (investment) (other) (c) Accumulated depreciation (d) Book value (d) Book value (e) Book value (f) Book value (f) Book value (investment) (invest | 4 | Describe in Part XIV the intended use | s of the organiza | tion's end | owment f | unds. | | | |
| (investment) (other) depreciation 1a Land b Buildings c Leasehold improvements d Equipment 50,810 1,450 49,310 e Other | Part | VI Land, Buildings, and Equip | oment. See For | m 990, P | art X, lin | e 10. | | | <u>. </u> |
| b Buildings | | Description of property | | | 1 ' ' | | | | (d) Book value |
| b Buildings | 1a | Land | | | | | | | |
| c Leasehold improvements d Equipment 50,810 1,450 49,310 e Other | | | | | | | | | |
| d Equipment | | • | | | <u> </u> | • | | | |
| e Other | | · | | | <u> </u> | 50,810 | | 1,450 | 49,310 |
| | | Out | | | † | | | | |
| | Total. | | nust equal Form | 990, Part | X, columr | n (B), line 10 | (c).) | • | · · · · · · · · · · · · · · · · · · · |

| Part VII | Investments - Other Securities | s. See Form 990, Part X, | line 12. | |
|--------------------------|---|-----------------------------|--|------------------------|
| (6 | a) Description of security or category (including name of security) | (b) Book value | (c) Method of val Cost or end-of-year n | |
| (1) Financia | I derivatives | | | |
| | held equity interests | | | |
| (3) Other | | | | · |
| (A) | | | | |
| (B) | *************************************** | | | |
| (C) (D) | | _ | | |
| (E) | | • | + | . *** |
| (F) | | | | |
| (G) | *************************************** | • | | |
| (H) | | | | |
| (l) | | | | |
| | (b) must equal Form 990, Part X, col. (B) line 12.) | | | |
| Part VIII | Investments-Program Relate | | , line 13. | |
| | (a) Description of investment type | (b) Book value | (c) Method of va Cost or end-of-year n | |
| (1) | · | | | |
| (2) | | | <u> </u> | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | _ | |
| (6) | | | - | |
| <u>(7)</u> _(8) | | | | |
| (9) | · | | | |
| (10) | | | | |
| | (b) must equal Form 990, Part X, col. (B) line 13) 🕨 | | | |
| Part IX | Other Assets. See Form 990, Page 1990, Page | art X, line 15. | | |
| | <u> </u> | (a) Description | | (b) Book value |
| (1) | | | | |
| (2) | · · · · · · · · · · · · · · · · · · · | | | |
| (3) | | | | |
| (4) | · · · · · · · · · · · · · · · · · · · | | | |
| <u>(5)</u> <u>(6)</u> | | | | |
| (7) | | | | |
| (8) | | | · · · · · · · · · · · · · · · · · · · | |
| (9) | | | ···· | . |
| (10) | | | | ·" . |
| | ımn (b) must equal Form 990, Part X, c | | | |
| Part X | Other Liabilities. See Form 990 | | | |
| 1. | (a) Description of liability | (b) Book value | | |
| | income taxes | | 1 | |
| (2) | | | 1 | |
| (3) | | | 4 | |
| (4) | | | 4 | |
| (5) | | ļ | - | |
| (7) | *************************************** | | 1 | |
| (8) | | | 1 | |
| (9) | · · · · · · · · · · · · · · · · · · · | | 1 | |
| (10) | ······································ | <u> </u> | 1 | |
| (11) | | | 1 | |
| | (b) must equal Form 990, Part X, col (B) line 25.) | <u> </u> | 1 | |
| 2. FIN 48 (A | SC 740) Footnote. In Part XIV, provide | the text of the footnote to | the organization's financial states | nents that reports the |
| organization | n's liability for uncertain tax positions (| under FIN 48 (ASC 740). | | |

| Schedu | le D (Form 990) 2011 | | F | Page 4 |
|--------|--|---|--|---------------|
| Par | XI Reconciliation of Change in Net Assets from Form 990 to A | udited Financial Stater | nents | |
| 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 | | 10 | |
| | XII Reconciliation of Revenue per Audited Financial Statements. | | | |
| | | | F . 1 | |
| 1 | Total revenue, gains, and other support per audited financial statements | | 1 | |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | 1 - 1 | | |
| a | Net unrealized gains on investments | 2a | [· · · ·] | |
| b | Donated services and use of facilities | | _ [, `] | |
| С | Recoveries of prior year grants | | _ '` - | |
| 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 VIII, line 12, but not on line 1: | | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | | | |
| b | Other (Describe in Part XIV.) | 4b | <u> </u> | |
| С | Add lines 4a and 4b | | 4c | |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line | 12.) | 5 | |
| Part | XIII Reconciliation of Expenses per Audited Financial Statem | ents With Expenses | per Return | |
| 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: | | ANTE OF THE PROPERTY OF THE PR | |
| а | Donated services and use of facilities | 2a | ا مِنْ الْمُ | |
| b | Prior year adjustments | | [[] | |
| C | Other losses | | | |
| d | Other (Describe in Part XIV.) | | - * | |
| e | Add lines 2a through 2d | | | |
| 3 | Subtract line 2e from line 1 | | 3 | |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | ı | | |
| - | Investment expenses not included on Form 990, Part VIII, line 7b | 10 | | |
| a | · | 4a | ┥, | |
| b | Other (Describe in Part XIV.) | 4b | | |
| _C | Add lines 4a and 4b | | 4c | |
| 5 | | e 10.) | 5 | |
| Part | | | | |
| Part V | lete this part to provide the descriptions required for Part II, lines 3, 5, and , line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, dditional information. | | | |
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Schedule D (Form 990) 2011

| Schedule D (For | m 990) 2011 | Page 5 |
|-----------------|---|--------|
| Part XIV | Supplemental Information (continued) | |
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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Committee For Downtown Yakima

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

20-2578831

| meeting, where it is compared with the monthly financial reports presented at the monthly meetings throughout the fiscal year. Assuming no discrepancies are found, the treasurer is then authorized to submit the report as well as make an official duplicate copy for the CDY permanent files. All financial records are open to review at any time. Part VI. Line 19 All financial records, conflict of interest policy, board minutes, and governing documents are available upon request through the CDY office or the Corporate Treasurer. Notification of such availability is on the organizational website and is in organizational promotional materials. | Part VI, Line 11b Form 990 is prepared by the corporate treasurer. It is then presented and discussed at the subsequent Board of Trustees |
|---|---|
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