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Return of Organization Exempt From Income Tax

OMB No 1545-0047 2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

2011, and ending For the 2011 calendar year, or tax year beginning 20 Name of organization WESTERN ORGTANIZATION OF REOURCE COUNCILS D Employer identification number Check if applicable 45-0356819 Doing Business As Address change Room/suite Number and street (or P O box if mail is not delivered to street address) E Telephone number Name change 220 S. 27TH STREET 406-252-9672 Initial return City or town, state or country, and ZIP + 4 Terminated BILLINGS, MT 59101 1,228,521 G Gross receipts \$ Amended return F Name and address of principal officer PATRICK SWEENEY H(a) Is this a group return for affiliates? Yes No Application pending " SAME AS C ABOVE" H(b) Are all affiliates included? Yes No If "No." attach a list (see instructions) **☑** 501(c) (501(c)(3)) ◀ (insert no) ☐ 4947(a)(1) or Tax-exempt status WWW.WORC.ORG H(c) Group exemption number ▶ Website: ▶ L Year of formation 1979 M State of legal domicile Part I Summary Briefly describe the organization's mission or most significant activities: COORDINATED THE MULTI-STATE COMPAIGNS OF COMMUNITY ORGANIZING GROUPS IN SEVEN STATES ON FOSSIL FUEL ENERGY DEVELOPMENT, RENEWABLE ENERGY Activities & Governance PRODUCTION, GENETICALLY MODIFIED CROPS, LOCAL FOODS AND FAMILY AGRICULTURE ISSUES, AND PROVIDED LEADERSHIP DEVELOPMENT AND TRAINING ACTIVITIES FOR INDIVIDUAL MEMBER-LEADERS. Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a). 3 14 Number of independent voting members of the governing body (Part VI, line 1b) 4 14 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 16 6 500 Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 0 **Current Year** Contributions and grants (Part VIII, line 1h). 996,340 1,202,396 8 12,097 9 Program service revenue (Part VIII, line 2g) 25.905 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 10 140 220 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,008,577 1,228,521 12 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 729,263 719,537 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D); line 25)=▶ 367,158 Other expenses (Part IX, column (A), lines 11a-11d, (12-24e) 17/ 293,323 17 Total expenses, Add lines 13-17 (must equal Part IX, column (A), line 25 1,022,586 1,086,695 18 Revenue less expenses. Subtract line 18 from line 12 (14.009)141.826 19 Beginning of Current Year End of Year 162,105 20 Total assets (Part X, line 16) 951,000 21 Total liabilities (Part X, line 26) . 34,295 37,055 22 Net assets or fund balances. Subtract line 2 127.810 913,945 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (eriner man officer) is based on all information of which preparer has any knowledge Sign Date

N

Here

Paid

Preparer

Use Only

STROM & ASSOCIATES, P.C.

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

PO BOX 1980, BILLINGS, MT 59103

Type or print name and title

Print/Type preparer's name

PAUL STROM

Firm's address ▶

Date

Check ___ ıf

self-employed

Firm's EIN ▶

Phone no

P00622429

√ Yes
☐ No Form **990** (2011

20-5592100

406-252-2765

caue birector

art	Checklist of Required Schedules		V	
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	Yes	No V
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	√	
4	candidates for public office? If "Yes," complete Schedule C, Part I	3		V
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	✓	
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		1
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		1
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, VIII, IX, or X as applicable.			,
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	1	
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		✓
	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 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 .	11e 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	√	
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		7
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		✓
14 a		14a		1
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	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		

Part	Checklist of Required Schedules (continued)			,
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization 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	-	/
04-		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	_	1
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		1
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		1
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		1
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		\
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
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		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		√
0.4	conservation contributions? If "Yes," complete Schedule M	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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		1
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	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	1	
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	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 "Yes," complete Schedule R</i> ,			
	Part VI	37		✓
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	✓	
		Forn	990	(2011)

Part				
	Check if Schedule O contains a response to any question in this Part V	• •	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 2			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
2a	reportable gaming (gambling) winnings to prize winners?	1c	✓	
20	Statements, filed for the calendar year ending with or within the year covered by this return 2a 16			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	<i>_</i>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓_
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i> At any time during the calendar year, did the organization have an interest in, or a signature or other authority	_3b_		
4a	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? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		1
b	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	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	✓	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
7	gifts were not tax deductible?	6b	_	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		1
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?	_		,
d	If "Yes," indicate the number of Forms 8282 filed during the year	7c		✓
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		/
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		√
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	7h		/
•	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.			<u> </u>
a	Did the organization make any taxable distributions under section 4966?	9a 9b		-
ь 10	Section 501(c)(7) organizations. Enter:	90		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			i
11	Section 501(c)(12) organizations. Enter:			ŀ
a b	Gross income from members or shareholders			
	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?	12a		
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note. See the instructions for additional information the organization must report on Schedule O.	ısa		
b	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			
C	Enter the amount of reserves on hand	44-		
14a b	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		✓
	11 100, has it mod a 1 ontil 120 to report those payments in 140, provide an explanation in ochedule O		n 990	(2011)

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. Check if Schedule O contains a response to any question in this Part VI	See ins	structi	ions.
Section	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 14	,		
	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.			
b 2	Enter the number of voting members included in line 1a, above, who are independent . Line 14 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
3	any other officer, director, trustee, or key employee?	2	✓	
4	supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	3		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓
6 7a	Did the organization have members or stockholders?	7a	1	
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	1	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a 8b	√	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at		•	
041	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	- d - 1	✓
Section	on B. Policies (This Section B requests information about policies not required by the Internal Rever	iue C	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	1	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	<u> </u>	1
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	✓	
b	Other officers or key employees of the organization	15b		✓
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	1		
-	with a taxable entity during the year?	16a		✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its 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	100		
17 18	List the states with which a copy of this Form 990 is required to be filed ► NONE REQUIRED 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.	n 501(c)(3)s	only)
19	Own website Another's website I Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict and financial statements available to the public during the tax year.	of inter	est p	olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: FILEEN HANCHETT 220 S. 27TH ST. SUITE B. BILLINGS. MT 59101 (406) 252-9672	of the)	

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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and
	Independent Contractors
	Check if Schedule O contains a response to any question in this Part VII

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.

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☐ Check this box if neither the organization nor	any relate	d orga	<u>aniz</u>	atio	n c	ompe	nsa	ted any currer	t officer, director	r, or trustee.
				(0	C)					
(A)	(B)	l		Pos				(D)	(E)	(F)
Name and Title	Average hours per week	box, office	unles er and	s pe lad	rson	than on the street of the stre	an tee)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Patrick Sweeney, Regional Director	50	✓		~				67,304		10,925
(2) Eileen Hanchett, Comptroller	40	1		✓			_	46,058		2,303
(3) Lana Sangmeister, Chair	11	1		✓						
(4) Verle Reinicke, Vice-Chair	1	✓		>		, ;				
(5) Peter Maille, Secretary-Treasurer	1	1		\						
(6) James Buchholz, Director	1	1								
(7) Nancy Hartenhoff-Crooks, Director	1	1								
(8) K.C. Duerig, Director	1	1								
(9) Julia Page, Director	1	1								
(10) Steve Bartell, Director	1	1							·	
(11) Bernie Barlow, Director	1	1								
(12) Bob LeResche, Director	1	1								
(13) Monica Wiltanen, Director	1	1								
(14) Claudette Konola, Director	1	1								

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees	s, ar	nd F	lighe	st C	ompensated E	mployees (continu	ed)	
					•	C)			İ				
	(A)		(do n	ot ch		ition more	than e	one	(D)	(E)		(F	7)
	Name and title	Average					is both		Reportable	Reportab		Estim	
		hours per week	office	r and		irect	or/trus	tee)	compensation from	compensation related	ı from	amou oth	
		(describe	유급	lng:	Officer	<u>\$</u>	흶품	ρ	the	organization		comper	
		hours for	Individual trustee or director	토	cer	Key employee	ploy	Former	organization	(W-2/1099-N	(ISC)	from	
		related organizations	or La	Š		[등	8 8		(W-2/1099-MISC)			organi and re	
		in Schedule	ST	\$		yee	履			-		organiz	
		O)	e e	Institutional trustee			Highest compensated employee						
				æ			<u> </u>						
(15)													
(16)									1				
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(05)											-		
(25)		-											
	Sub-total	<u> </u>	l	L i	L	L	L		113,362		+		13,228
	Total from continuation sheets to Part								110,302				13,220
d	Total (add lines 1b and 1c)								113,362				13,228
2	Total number of individuals (including but							2) W		ore than \$1	00 000	of	10,220
_	reportable compensation from the organi			1036	, IIS	eu i	above	<i>5)</i> W	no received in	ore man pr	00,000	OI .	
										<i>-</i>		1	res No
3	Did the organization list any former of	ficer, direc	tor, c	r tr	uste	eе,	key e	emp	oloyee, or high	est compe	nsated		
	employee on line 1a? If "Yes," complete											3	√
4	For any individual listed on line 1a, is the	sum of re	portal	ble d	con	nper	nsatio	n a	nd other comp	ensation from	om the		
	organization and related organizations												
	individual	· · · ·										4	√
5	Did any person listed on line 1a receive of	r accrue co	ompe	nsat	tion	froi	m any	un/	related organiz	ation or ind	lividual		
	for services rendered to the organization	? If "Yes," c	ompl	ete	Sch	nedu	ıle J 1	for s	such person			5	√
Section	on B. Independent Contractors												
1	Complete this table for your five highest	compensat	ed inc	depe	end	ent	contr	acto	ors that receive	ed more tha	n \$100	,000 of	
	compensation from the organization. Rep	ort compe	nsatio	on fo	or th	пе с	alend	lar y	ear ending wit	h or within t	the orga	anizatior	ı's tax
	year.								-				
	(A)							Γ	(B)			(C)	
	Name and business add	ress							Description of s	ervices		Compensat	ion
N/A													
								$oxed{oxed}$					
								_					
								<u>L_</u>		- ,	<u></u>		
2	Total number of independent contractor							o th		ove) who			
	received more than \$100,000 of compens	sation from	ıne o	rqar	ııza	แดก			0	11			

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
ıts ıts	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b	17,190				
	С	Fundraising events 1c					
ar/	d	Related organizations 1d	1,100,200				
s, C	е	Government grants (contributions) 1e					
ion S	f	All other contributions, gifts, grants,	·				
the the		and similar amounts not included above 1f	85,006				
E O	g	Noncash contributions included in lines 1a-1f: \$					
a Co	h	Total. Add lines 1a-1f	🕨	1,202,396			
			Business Code				
Ven	2a	FEES FOR SERVICE	900099	25,905	25,905		
æ	b			-		•	
ice	С						
Sen.	d				-		
Ē	е						
Program Service Revenue	f	All other program service revenue .					
ž	g	Total. Add lines 2a-2f	•	25,905			
	3	Investment income (including divide					
		and other similar amounts)		220			
	4	Income from investment of tax-exempt bor					
	5	Royalties					
		(i) Real	(ii) Personal	•			
	6a	Gross rents					
	b	Less: rental expenses					
	С	Rental income or (loss)					ļ
•	_d	1					
	7a	Gross amount from sales of (i) Securities	(II) Other				
		assets other than inventory					
	b	Less. cost or other basis and sales expenses .	1				
		0-1					
	d d	Net gain or (loss)	▶				
	"	Thet gain or (loss)					
E	8a	Gross income from fundraising					
evenue		events (not including \$					
		of contributions reported on line 1c).					
E.		See Part IV, line 18 a					
Other	ь	Less: direct expenses b					
O		Net income or (loss) from fundraising e	events ►				
		Gross income from gaming activities.					
		See Part IV, line 19 a					
	b	Less: direct expenses b					
	С	Net income or (loss) from gaming activ	rities 🕨				
	10a	Gross sales of inventory, less				.,	
		returns and allowances a					
		Less: cost of goods sold b					
	С	Net income or (loss) from sales of inve					
		Miscellaneous Revenue	Business Code				
	11a						
	b						
	С						
	d	All other revenue					
		Total Add lines 11a-11d		4 000 551			
	12	Total revenue. See instructions	🕨	1,228,521	ŀ		

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 respons	se to any question i			<u> </u>
	t include amounts reported on lines 6b, 7b, , 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 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	113,362	94,491	2,267	13,604
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	449,732	386,770	8,995	53,967
8	Pension plan accruals and contributions (include				•
	section 401(k) and 403(b) employer contributions)	27,575	23,715	552	3,308
9	Other employee benefits	77,038	66,253	1,541	9,244
10	Payroll taxes	51,830	44,573	1,037	6,220
11	Fees for services (non-employees):			.,	*,
·· a	Management				
b	Legal	90		90	-
c	Accounting	2,400		2,400	
d	Lobbying	2,100		2,.00	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
	Other		1	+	
g 12	Advertising and promotion		+	+	
13	Office expenses	26,993	23,214	540	3,239
14	Information technology	20,333	23,214	340	3,233
15					
16	Royalties	68,237	58,684	1,365	8,188
	Occupancy	39,339	33,832	787	4,720
17 18	Travel	39,339	33,632	767	4,720
19	Conferences, conventions, and meetings .	42,748	42,748	 	-
20	Interest	.2,, .0	,,		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	22,395	19,260	448	2,687
23	Insurance	3,790	3,260	530	
24	Other expenses. Itemize expenses not covered	5,700	0,200		
24	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.)	<u> </u>			
а	CURRENT ISSUE CAMPAIGN	43,639	43,639		
b	VOTER PARTICIPATION	18,829	18,289		
C	PRINTING & PUBLICATION	9,874	8,492	197	1,185
d	ORGANIZING & PROGRAM EXPENSE	89,364	89,364		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
e	All other expenses				· · · · · · · · · · · · · · · · · · ·
25	Total functional expenses. Add lines 1 through 24e	1,086,695	959,584	20,749	106,362
26	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 if following SOP 98-2 (ASC 958-720)	.,,555,650	333,004	20,,40	150,502

Pari		Balance Sheet			Page II
,			(A) Beginning of year		(B) End of year
	1 (Cash-non-interest-bearing	16,582	1	90,546
		Savings and temporary cash investments	134,027	2	226,796
		Pledges and grants receivable, net		3	
		Accounts receivable, net	6,396	4	6,644
		Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
'		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
υ		employees' beneficiary organizations (see instructions)		6	
Assets		Notes and loans receivable, net		7	
AS		Inventories for sale or use		8	
		Prepaid expenses and deferred charges		9	<u>.</u>
		Land, buildings, and equipment: cost or			
'		other basis. Complete Part VI of Schedule D 10a 744,833			
		Less: accumulated depreciation 10b 117,819	5,100	10c	627,014
1		Investments—publicly traded securities		11	
1		Investments—other securities. See Part IV, line 11		12	
1		Investments—program-related. See Part IV, line 11		13	
		Intangible assets		14	
1		Other assets. See Part IV, line 11		15	
		Total assets. Add lines 1 through 15 (must equal line 34)	162,105		951,000
-		Accounts payable and accrued expenses		17	
		Grants payable		18	
- 1		Deferred revenue		19	
1 -		Tax-exempt bond liabilities		20	
2		Escrow or custodial account liability. Complete Part IV of Schedule D		21	
		Payables to current and former officers, directors, trustees, key			
ije		employees, highest compensated employees, and disqualified persons.			
Liabilities		Complete Part II of Schedule L		22	
当 ₂	:3	Secured mortgages and notes payable to unrelated third parties		23	
4		Unsecured notes and loans payable to unrelated third parties		24	
2		Other liabilities (including federal income tax, payables to related third			
-		parties, and other liabilities not included on lines 17-24). Complete Part X	34,295		37,055
		of Schedule D		25	
2	26	Total liabilities. Add lines 17 through 25	34,295	26	37,055
		Organizations that follow SFAS 117, check here ▶ ☑ and complete			
Se		lines 27 through 29, and lines 33 and 34.			
E 2	27	Unrestricted net assets	127,810	27	913,945
<u>교</u> 2	28	Temporarily restricted net assets		28_	
ছু 2		Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ► ☐ and complete lines 30 through 34.			
छ । उ	30	Capital stock or trust principal, or current funds		30	
8 3		Paid-ın or capital surplus, or land, building, or equipment fund		31	
¥ 3		Retained earnings, endowment, accumulated income, or other funds .		32	
कृ उ		Total net assets or fund balances	127,810	33	913,945
		Total liabilities and net assets/fund balances	162,105	34	951,000
					Form 990 (2011)

		Pa	ge 12
			<u> </u>
			8,521
		1,08	6,695
		14	1,826
		12	7,810
_		64	4,309
		91	3,945
		Yes	No
	2a		1
Γ	2h	1	

Form 990 (2011)

Part XI Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI . . . Total revenue (must equal Part VIII, column (A), line 12) 2 2 3 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, **Financial Statements and Reporting** Check if Schedule O contains a response to any question in this Part XII If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a 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 oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis As a result of a federal award, was the organization required to undergo an audit or audits as set forth in За 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 3b

Form 990 (2011)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations. Complete Part I-A only.

	_	to Form 990, Part IV, line 4, or Form			
• Se	ction 501(c)(3) organizations	that have filed Form 5768 (election und	ler section 501(h))· 0	Complete Part II-A Do not co	mplete Part II-B
• Se	ction 501(c)(3) organizations	that have NOT filed Form 5768 (electio	n under section 501	(h)). Complete Part II-B Do r	not complete Part II-A
If the o	rganization answered "Yes	" to Form 990, Part IV, line 5 (Proxy 1	Tax) or Form 990-E	Z, Part V, line 35c (Proxy Ta	ax), then
• Se	ction 501(c)(4), (5), or (6) orga	nizations Complete Part III			
Name o	of organization			Employer ider	ntification number
WEST	ERN ORGANIZATION OF RI	ESOURCE COUNCILS			45-0356819
Part	-A Complete if the	e organization is exempt und	er section 501(c) or is a section 527 of	organization.
1		the organization's direct and indire			
2	•				;
3	•				
_					
Part	Complete if the	e organization is exempt und	er section 501(c)(3).	
1		excise tax incurred by the organiza	<u>.</u>	• • •	}
2		excise tax incurred by organization			
3		ed a section 4955 tax, did it file For			
4a	_		-		Yes No
b	If "Yes," describe in Part				
Part		e organization is exempt und	er section 501(c), except section 501	(c)(3).
1		ly expended by the filing organiz			
				· · · · · · · · · · · · · · · · · · ·	
2		filing organization's funds contrib			
		vities			
3		expenditures. Add lines 1 and 2.			
		·			
4		n file Form 1120-POL for this year			Yes No
5		ses and employer identification nur			
•		ents For each organization listed.			
		ontributions received that were pro-			
	as a separate segregated	fund or a political action committee	e (PAC). If additio	nal space is needed, prov	ide information in Part IV.
				1	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds If none, enter -0-	promptly and directly
					delivered to a separate political organization If
					none, enter -0-
(1)					
(2)				<u> </u>	
(2)			· ·		
(3)					
(4)					
(5)				c	
···				-	
(6)		ļ			

Door	2
Page	

Pa	ort II-A Complete if the organization section 501(h)).	n is exempt i	under section 50	01(c)(3) and file	d Form 5768 (ele	ction under		
	Check ► ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).							
В	Check ▶ ☐ if the filing organization ch			rol" provisions a	ipply.			
		bying Expendit			(a) Filing	(b) Affiliated		
	(The term "expenditures" n		·		organization's totals	group totals		
•	Ia Total lobbying expenditures to influence	public opinion	(grass roots lobby	ing)				
	b Total lobbying expenditures to influence	e a legislative be	ody (direct lobbying	3)				
	c Total lobbying expenditures (add lines	a and 1b) .						
	d Other exempt purpose expenditures .							
	e Total exempt purpose expenditures (ad							
	f Lobbying nontaxable amount. Enter columns.	the amount f	rom the following	table in both				
	If the amount on line 1e, column (a) or (b) is	: The lobbying	nontaxable amoun	t is:				
	Not over \$500,000	20% of the ar	mount on line 1e					
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	s 15% of the excess	over \$500,000				
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000				
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	s 5% of the excess o	ver \$1,500,000.				
	Over \$17,000,000	\$1,000,000						
	g Grassroots nontaxable amount (enter 2	5% of line 1f)						
	h Subtract line 1g from line 1a. If zero or	ess, enter -0-						
	i Subtract line 1f from line 1c. If zero or le							
	j If there is an amount other than zero reporting section 4911 tax for this year		1h or line 1, did	_		Yes No		
4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)					•			
_	Lobbyin	g Expenditures	During 4-Year A	veraging Period	 			
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total		
:	2a Lobbying nontaxable amount							
	b Lobbying ceiling amount (150% of line 2a, column (e))							
	c Total lobbying expenditures							
	d Grassroots nontaxable amount							
	e Grassroots ceiling amount (150% of line 2d, column (e))							
	f Grassroots lobbying expenditures							

	(election under section 501(h)).	1:	a)		(b)	
	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description lobbying activity.	Yes	Ė	A	mount	<u> </u>
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			1		
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?		ļ			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?		ļ	ļ		
j	Total. Add lines 1c through 1i		ļ	ļ <u>.</u>		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			ļ		
b	If "Yes," enter the amount of any tax incurred under section 4912					_,
c d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 . If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<u></u>	<u> </u>			
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), c	or se	ction		
_	501(c)(6).					NI-
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	✓	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		✓
3 Part	Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)			3		V
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Ol answered "Yes."				ine 3	, is
1 2	Dues, assessments and similar amounts from members	of	1			
а	Current year		2a	1		
b	Carryover from last year		2b			
c	Total	i	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb	the				
	and political expenditure next year?		4	1		
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Parl						
	lete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5;	Part II	I-A; a	nd Part	II-B,	line
1. Also	o, complete this part for any additional information.					
-						
				• • • • • • • • • • • • • • • • • • •		
	,					
						•
						

	m 990 or 990-EZ) 2011	Page 4
Part IV	Supplemental Information (continued)	
		·
		-
		·
	,	
	,	

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► 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.

Open to Public Inspection ▶ Attach to Form 990. ▶ See separate instructions. Employer identification number

WEST	ERN ORGANIZATION OF RESOURCE COUNCIL		45-0356819
Par		or Advised Funds or Other Similar Fu	inds or Accounts. Complete if the
	organization answered "Yes" to F		
		(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		
	funds are the organization's property, subje		- -
6	Did the organization inform all grantees, do	onors, and donor advisors in writing that gr	ant funds can be used
	only for charitable purposes and not for th		
	conferring impermissible private benefit?		Yes . No
		plete if the organization answered "Yes	to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held		-f
		recreation or education) Preservation	- · · · · · · · · · · · · · · · · · · ·
	Protection of natural habitat	☐ Preservation	of a certified historic structure
•	 Preservation of open space Complete lines 2a through 2d if the organiz. 	ation held a qualified conseniation contribut	tion in the form of a conservation
2	easement on the last day of the tax year.	ation field a qualified conservation contribu-	tion in the form of a conservation
	casemont on the last day of the tax your.		Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation ea		
C	Number of conservation easements on a ce		
ď	Number of conservation easements include		
_	historic structure listed in the National Regis	, , ,	
3	Number of conservation easements modifie		
	tax year ▶		, ,
4	Number of states where property subject to	conservation easement is located	
5	Does the organization have a written po		nspection, handling of
	violations, and enforcement of the conserva	ation easements it holds?	· · · · · · 🗋 Yes 🗌 No
6	Staff and volunteer hours devoted to monite	oring, 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
	▶ \$		
8	Does each conservation easement reported		
	(i) and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization r		
	balance sheet, and include, if applicable, the		inancial statements that describes the
Dord	organization's accounting for conservation	ections of Art, Historical Treasures, o	or Other Similar Assets
Part		wered "Yes" to Form 990, Part IV, line 8	
10	If the organization elected, as permitted ur		
ıa	works of art, historical treasures, or other		
	public service, provide, in Part XIV, the text		
b	If the organization elected, as permitted u		
-	works of art, historical treasures, or other	similar assets held for public exhibition, of	
	public service, provide the following amoun		
	(i) Revenues included in Form 990, Part VII	II, line 1	> \$
_	(ii) Assets included in Form 990, Part X .		· · · · ► \$
2	If the organization received or held works		
	following amounts required to be reported to		
a	Revenues included in Form 990, Part VIII, III		
Ð	Assets included in Form 990, Part X		- 3

Р	age	. 2

Part	III Organizations Maintaining	Colle	ections of	Art, His	torical T	reasures,	or Ot	her Similar A	ssets (continued)
3	Using the organization's acquisition, collection items (check all that apply):		sion, and ot	her reco	rds, chec	k any of the	follov	ving that are a	significant use of its
а	☐ Public exhibition					or exchange			
b	☐ Scholarly research			е	Other	r			
С	☐ Preservation for future generations	3							. 5.
4	Provide a description of the organizat XIV.	tion's	collections a	and expla	ain how ti	hey further t	the org	janization's exe	mpt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather								
Part									
	line 9, or reported an amoun								· · · · · · · · · · · · · · · · · · ·
1a	Is the organization an agent, trustee,	, custo	odian or oth	er intern	nediary fo	or contributi	ons or	other assets n	ot
	included on Form 990, Part X?								
b	If "Yes," explain the arrangement in Pa	art XI\	and comple	ete the fo	ollowing to	able:			
								F	Amount
С	Beginning balance						10		
d	Additions during the year						1d	<u> </u>	
е	Distributions during the year .						1e		
f	Ending balance						1f		
2a	Did the organization include an amount	nt on I	Form 990, P	art X, line	21? .				🗌 Yes 🗌 No
b	If "Yes," explain the arrangement in P	art XI\	<i>1</i>						
Par	V Endowment Funds. Compl					"Yes" to F	<u>orm 9</u>	90, Part IV, lin	
		(a) (Current year	(b) Pri	or year	(c) Two years	s back	(d) Three years bac	ck (e) Four years back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and								
	losses					ļ			
d	Grants or scholarships								
е	Other expenditures for facilities and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of t	the cu	rrent year er	nd baland	e (line 1g	g, column (a)) held	as:	
а	Board designated or quasi-endowme	nt ▶		%					
b	Permanent endowment ▶	%						·	/
С	Temporarily restricted endowment ▶								
	The percentages in lines 2a, 2b, and 2								
За	Are there endowment funds not in th	-	session of th	ne organi	zation the	at are held a	and ad	ministered for t	
	organization by:								Yes No
	(i) unrelated organizations						• •		3a(i)
_	(ii) related organizations						•		3a(ii)
b	If "Yes" to 3a(ii), are the related organ						• •		3b
4	Describe in Part XIV the intended use VI Land, Buildings, and Equipment								
Pari		Jinen					/-\	A a a composite at	(d) Dealeratus
	Description of property		(a) Cost or of (investment)		1 ' '	or other basis other)		Accumulated epreciation	(d) Book value
1a	Land					13,318			13,318
b	Buildings				1	709,615		96,819	612,796
С	Leasehold improvements				ļ				
d	Equipment				ļ	21,900		21,000	9,000
<u>e</u>	Other	•			<u> </u>	(D) (1			
Total.	Add lines 1a through 1e. (Column (d) r	nust e	equal Form 9	90, Part .	X, columi	n (B), line 10	(c).)	▶	627,014

Part VII Investments—Other Securities	See Form 990, Part X, I	ine 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)		_	
(C)			
(D)			
(E)			
(F)			
(G) (H)			
(l)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	_		<u>i</u>
Part VIII Investments—Program Relate	d. See Form 990, Part X.	line 13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			₁
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets. See Form 990, Part IX	art Y June 15	<u></u>	
	(a) Description	(b) Book value	
			-
<u>(1)</u> (2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, o		<u> ▶ </u>	
Part X Other Liabilities. See Form 990		· 	
1. (a) Description of liability	(b) Book value	_	
(1) Federal income taxes			
(2) PAYROLL TAXES PAYABLE	11,267		
(3) COMPENSATED ABSCENCES	25,788	4	
(4) (5)	-		
(6)			
(7)	 		
(8)		-	
(9)	-	1	
(10)		1	
(11)		1	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	37,055	1	į
2. FIN 48 (ASC 740) Footnote. In Part XIV, provide	e the text of the footnote to	the organization's financial statements that reports the	he
organization's liability for uncertain tax positions i	under FIN 48 (ASC 740).		

Pane	4

Part	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Staten	nents	S
1	Total revenue (Form 990, Part VIII, column (A), line 12)	_ 1	1,228,521
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,086,695
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	141,826
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	644,309
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	644,309
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	786,135
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue pe	r Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	1,228,521
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		1
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV.)		
е	Add lines 2a through 2d	20	9
3	Subtract line 2e from line 1	3	1,228,521
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 . 4a		
b	Other (Describe in Part XIV.)		
С	Add lines 4a and 4b	40	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p	<u>er F</u>	Return
1	Total expenses and losses per audited financial statements	1	1,086,695
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a		
b	Prior year adjustments		
С	Other losses	_	
d	Other (Describe in Part XIV)	_	
е	Add lines 2a through 2d	20	
3	Subtract line 2e from line 1	3	1,086,695
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.)	_	
C	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	1,086,695
Part	XIV Supplemental Information		
Comp	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;	Part	IV, lines 1b and 2b;
	/, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also cor	npiet	e this part to provide
any a	dditional information.		
	•••••		
	······································		
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Schedule D (Fo	rm 990) 2011	Page 5
Part XIV	Supplemental Information (continued)	
		·
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SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization 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.

WESTERN ORGANIZATION OF RESOURCE COUNCILS	45-0356819
Form 990, Part VI, Line 7a - Election of Members and Their Rights	
WORC is a regional network of seven grassroots community organizations that include 10,000 members	ers and 45 local chapters. A 14-member
board of directors governs WORC. Each member group elects two representatives to the WORC Board	rd of Directors.
Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members	
Although all decisions of the Board are not subject to approval by organization members, all issues p	ertaining to policy and policy changes
must be approved by organization members.	
Form 990, Part VI, Line 11b - Organization's Process Used to Review Form 990	
Authorized officers, board members, comptroller, and additional staff work with legal council to review	# Form 990
Authorized officers, board members, compitoner, and additional staff work with regal council to review	W 1 01111 330
Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy	
WORC's conflict of interest policy requires each director, officer, and key employee to disclose annua	ally any financial interests that could
give rise to a conflict of interest. The Board of Directors, or a committee of the Board, determines wh	ether any proposed transaction creates
a conflict of interest, and if so, reviews the transaction Any person with a conflict of interest may an	swer questions and provide information
to the Board or committee, but may not participate in the Board's or committee's deliberation about or	r vote on the proposed transaction.
	······
Form 990, Part VI, Line 15a - Compensation Process for Top Official	
The Board of Directors reviews and approves all salaries.	
Form 990, Part VI, Section C, Line 19 - Public Disclosure of Governing Documents	
The organization responds to information requests in full compliance with Federal and State laws.	
Form 990, Part XI, Line 5, - Other Changes in Net Assets	
WORC shares the building it occupies with another organization. Both organizations raised funds for	and participated in the purchase and
renovation of their office building. When the building was renovated all of its cost and the associated	I loans were all recorded in the name

schedule O (Form 990 or 990-EZ) (2011)	Page Z
lame of the organization WESTERN ORGANIZATION OF RESOURCE COUNCILS	Employer identification number 45-0356819
of the other organization. In 2011 the organizations signed an agreement to show the cost of the land, bu	ıldıng, and the related depreciation
as a split ownership of 50% WORC and 50% the other organization. WORC shows a \$644,308 pror period	
transfer.	
	·····

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

WESTERN ORGANIZATION OF RESOURCE COUNCILS

Partl

OMB No 1545-0047

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

Related Organizations and Unrelated Partnerships

▶ See separate instructions. ▶ Attach to Form 990.

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

Open to Public Employer identification number Inspection 201

45-0356819

(g) Section 512(b)(13) controlled entity? Š (f) Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Yes (f)
Direct controlling entity (e) End-of-year assets WORC WORC 11a WORC (e)
Public charity status
(if section 501(c)(3)) (d) Total income (d) Exempt Code section 527 501(c)(3) 527 (c)
Legal domicile (state
or foreign country) (c)
Legal domicile (state or foreign country) Primary activity Ξ ξ ξ ē (b) Primary activity **EDUCATION** QSLPO QSLPO (2) WORC PAC d/b/a SOUTH DAKOTA RURAL VOTERS PAC (a)
Name, address, and EIN of disregarded entity (3) WORC COLORADO RURAL VOTERS PAC 26-3217277 (a)
Name, address, and EIN of related organization 26-2411139, 220 S. 27TH ST. BILLINGS, MT 59101 (1) WORC EDUCATION PROJECT 84-1123481 220 S. 27TH ST, BILLINGS, MT 59101 220 S. 27TH ST., BILLINGS, MT 59101 **4** Part II ₹ © 9 <u>©</u> 9 E 2 ල Ξ

Schedule R (Form 990) 2011

Cat No 50135Y

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

(h) Percentage (k) Percentage ownership ownership Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) end-of-year assets General or managing partner? å (g) Share of Yes (i)
Code V—UBI
amount in box 20 of
Schedule K-1
(Form 1065) (f) Share of total income Type of entity (C corp, S corp, or trust) (h)
Disproportionate
allocations? å Yes (g) Share of end-of-(d) Direct controlling entity (f) Share of total псоте (c) Legal domicile (state or foreign country) (e)
Predominant
income (related,
unrelated,
excluded from tax under sections 512-514) Primary activity (d)

Direct controlling entity (c)
Legal
domicite
(state or
foreign (a)
Name, address, and EIN of related organization (b) Primary activity (a) Name, address, and EIN (3) related organization Part III Part IV E € 9 Ξ 8 ල 9 9 € 2 ව € <u>0</u>

Schedule R (Form 990) 2011

	a, or 36.)
	s 34, 35, 35
	is (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)
	to Form 990
	red "Yes"
	tion answe
	he organiza
	omplete if t
	nizations (Co
	ted Organi
	With Rela
90) 2011	ansactions
dule R (Form 9	rt V Tra
Sche	Pa

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II—IV?	organizations listed in	Parts II–IV?	Yes No
			at .
b Gift, grant, or capital contribution to related organization(s)			- 10 10 10 10 10 10 10 10 10 10 10 10 10
			1d 🗸
e Loans or loan guarantees by related organization(s)			a
f Sale of assets to related organization(s)			1f /
g Purchase of assets from related organization(s)			. 1g 🗸
h Exchange of assets with related organization(s)			두
i Lease of facilities, equipment, or other assets to related organization(s)			>
i Lease of facilities, equipment, or other assets from related organization(s)	•		-
			*
			=
_) I
n Sharing of paid employees with related organization(s)			> =
o Reimbursement paid to related organization(s) for expenses			10
p Reimbursement paid by related organization(s) for expenses			1p /
			, , , , , , , , , , , , , , , , , , ,
 d Outer transfer of cash or property from related organization(s) r Other transfer of cash or property from related organization(s) 			A
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	including covered re	lationships and trans	saction thresholds.
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
WORC EDUCATION PROJECT			
(1)	C,M,N	1,100,200	1,100,200 ACTUAL TRANSFER
(2)			!
(2)			
(4)			
(5)			
(9)			
		Schec	Schedule R (Form 990) 2011

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.) Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or cross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) (b) (c) (d) (e) (f) (g)	a	(0)	(D)	©	6	(6)	Ξ	0	3	3
Name, address, and EIN of entity	Primary activity	nıcıle oreıgn y)	0	Are all partners section 501(c)(3) organizations?	Sh total	of year is	Disproportionate allocations?	Code amount of Sch (Forr	Pa mar	Per
			section 512-514)	Yes No			Yes No		Yes No	
(1)										
(2)										
(3)										
(4)	,									
(5)							<u> </u>			
(9)									-	
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