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SCHEDULE A (Form 890 or 890-EZ)

Department of the Treesury

Public Charity Status and Fublic Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► 8ee separate instructions.

OMB No. 1545-0047 20

Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number WESTERN ORGANIZATION OF RESOURCE COUNCILS EDUCATION PROJECT 84-1123481 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i), A school described in section 170(b)(1)(A)(II). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(IV). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a 🗹 Type I b Type II c Type III-Functionally integrated d ☐ Type III-Other e 🖸 By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons. other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1). or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and No (ill) below, the governing body of the supported organization? 119(1) (ii) A family member of a person described in (i) above? 11g(ii) (III) A 35% controlled entity of a person described in (i) or (ii) above? . 11g(W) Provide the following information about the supported organization(s). (i) Name of supported (n) EIN (EI) Type of organization (Iv) is the organization (v) Did you notify MI is the (vii) Amount of organization the organization in (described on lines 1-8 in col. (1) listed in your organization in col. BUDDON above or IRC section governing document? col. (1) of your (f) organized in the (see instructions)) BUDDON? US 2 Yes No Yes No Yes No (A) WORC 45-0358819 501(c)(4) 1,100,200 **(B)** (C) (D) (E)

Schedule A (Form 990 or 990-EZ) 2011

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Part	(Complete only if you checked the Part III. If the organization fails to	ne box on line	5, 7, or 8 of	Part I or if th	e organizatio	n failed to qua		
Sect	on A. Public Support							
Caler	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				·			
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
6	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4.					a von von Horney Haard beg Japan Statistischer Beginner		
	on B. Total Support				· · · · · · · · · · · · · · · · · · ·			
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total	
7	Amounts from line 4				ļ			
8	Gross Income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income, Do not include gain or loss from the sale of capital assets (Explain in Part IV.)							
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activities, etc. (see instructions)							
13	First five years. If the Form 990 is for th	•	· ·		•		` '': '	
	organization, check this box and stop her			<u> </u>	·	· · · · ·	<u>···▶□</u>	
	on C. Computation of Public Suppor					1		
14	Public support percentage for 2011 (line 6		•			15	<u>%</u>	
15 16e	Public support percentage from 2010 Sch 331/s% support test—2011. If the organiz						heck this	
þ	box and stop here. The organization qualifies as a publicly supported organization							
17a	10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.							
ь	10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization							
18	Private foundation. If the organization did	d not check a	box on line 13	, 16a, 16b, 17	a, or 17b, chec		see	
	instructions		• • • •				0 000 570 0014	

Paga 3 Schedule A (Form 990 or 990-EZ) 2011 Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization falls to qualify under the tests listed below, please complete Part II.) Section A. Public Support (a) 2007 (c) 2009 (d) 2010 (e) 2011 (f) Total Calendar year (or fiscal year beginning in) (b) 2008 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . . Gross receipts from activities that are not an unrelated trade or business under section 513 revenues levied for organization's benefit and either paid to or expended on its behalf . . . The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5. . . . 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from Section B. Total Support (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total Calendar year (or fiscal year beginning in) Amounts from line 6 10a Gross income from Interest, dividends, payments received on securities loans, rents. royaltles and income from similar sources . b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) ▶ □ Section C. Computation of Public Support Percentage Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f) % Public support percentage from 2010 Schedule A, Part III, line 15 % 16 Section D. Computation of Investment Income Percentage Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f) . . . 17 %∑ Investment Income percentage from 2010 Schedule A, Part III, line 17 18 331x3% support tests - 2011. If the organization did not check the box on line 14, and line 15 is more than 331x3%, and line 17 is not more than 331/a%, check this box and stop here. The organization qualifies as a publicly supported organization . 🕨 🔲 b 331/3% support tests -2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331,2%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See						
	instructions).						
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