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DLN: 93493168001843

Department of the Treasury

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)

2012

OMB No 1545-0047

Open to Public

Internal	Revenue S	Service	► The organization may have	to use a copy of this ret	turn to satisfy st	ate repo	rting requiren	nents	Inspection
A Fo	r the 2	012 cal	endar year, or tax year beginnin	g 01-01-2012 , 2012, a	and ending 12-31	L-2012			
	eck if ap Iress cha		C Name of organization ENERGY TRUST OF OREGON INC					•	ntification number
_	ne chan	_	Doing Business As				93-1	313663)
Init	ıal returr	n	Number and street (or P O box if n	naıl ıs not delivered to street	address) Room/sur	te	E Teleph	one numl	ber
Ter	mınated		421 SW OAK STREET NO 300				(503)) 493-8	888
☐ Am	ended re	eturn	City or town, state or country, and PORTLAND, OR 97204	ZIP + 4	•		(303)	, 155 0	
☐ App	lication	pending			<u></u>				146,491,880
			F Name and address of print MARGIE HARRIS	ncipai officer			s this a group ffiliates?	return	for
			421 SWOAK STREET NO 3 PORTLAND, OR 97204	300					
			TORTEAND, OR 37204						ded?
I Ta	x-exemp	ot status	▼ 501(c)(3)	(insert no)	or 🛭 527	1	i NO, attaci	i a iist	(see ilistructions)
J W	ebsite:	. ► ww	W ENERGYTRUST ORG			H(c)	Group exemp	tion nun	nber 🟲
K Form	n of ora	anization	Corporation Trust Association	on C Other ►	I	l Year	of formation 20	002 M	State of legal domicile OF
	rt I		mary	oner P		L rear	or formation 20	702 11	State of legal dofficile of
			escribe the organization's mission	on or most significant ac	ctivities				
	E	NERGY	TRUST PROVIDES COMPREH	IENSIVE, SUSTAINABL		ICIENCY	, CONSERV	NOITA	AND RENEWABLE
a)	<u>E</u>	NERGY	SOLUTIONS TO THOSE WE S	SERVE					
≧	-								
Ē	_								
Governance	2 C	heck th	ııs box দ if the organization di	scontinued its operation	ns or disposed o	f more th	an 25% of its	net as:	sets
									•
Activities &	l		of voting members of the govern					3	13
Ě	l		of independent voting members					4	13
Ę	l		mber of individuals employed in					6	105
Q.	l		mber of volunteers (estimate if r related business revenue from P					7a	13
			lated business taxable income f					7a 7b	
		ec ame	iatea basiness taxable income i	10111101111100011,1111100	<u> </u>		Prior Year	 	Current Year
	8	Contri	butions and grants (Part VIII, li	ne 1h)				140	
ell.	8 9		butions and grants (Part VIII, li m service revenue (Part VIII, li				133,085,	140	146,235,452
evenue	-	Progra		ıne 2g)				0	146,235,452 0
Revenue	9	Progra Invest	m service revenue (Part VIII, I	n (A), lines 3, 4, and 7d			133,085,	0	146,235,452 0 -611,819
Revenue	9 10	Progra Invest Other Total r	m service revenue (Part VIII, l ment income (Part VIII, columi revenue (Part VIII, column (A), revenue—add lines 8 through 11	ne 2g) n (A), lines 3, 4, and 7d , lines 5, 6d, 8c, 9c, 10c . (must equal Part VIII,) c, and 11e) column (A), line		133,085,	0 050	146,235,452 0 -611,819 3,055
Revenue	9 10 11 12	Progra Invest Other Total r 12) .	m service revenue (Part VIII, li ment income (Part VIII, columi revenue (Part VIII, column (A), revenue—add lines 8 through 11	ne 2g)			133,085,	0 050 0	146,235,452 0 -611,819 3,055 145,626,688
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	9 10 11 12	Progra Invest Other Total r 12) . Grants Benefit	m service revenue (Part VIII, Inment income (Part VIII, column revenue (Part VIII, column (A), revenue—add lines 8 through 11	ine 2g)			133,085,	0 050 0 190 0	146,235,452 0 -611,819 3,055 145,626,688 0
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	9 10 11 12 13 14 15 16a b 17 18	Progra Invest Other Total r 12) . Grants Benefi Salarie 5-10) Profes Total ful Other Total e	m service revenue (Part VIII, Inment income (Part VIII, column (A), revenue—add lines 8 through 11 and similar amounts paid (Part its paid to or for members (Part it	ine 2g)			133,085, 194, 133,279, 7,527, 132,118, 139,646,	0 050 0 190 0 0 629 0	146,235,452 0 -611,819 3,055 145,626,688 0 0 8,178,984 0 146,431,368 154,610,352
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Use Only

Firm's address ► 805 SW BROADWAY 1200

PORTLAND, OR 97205

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

Phone no (503) 242-1447

✓ Yes No

Form	990 (2012)	Page 2
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III	.
1	Briefly describe the organization's mission	
	GY TRUST PROVIDES COMPREHENSIVE, SUSTAINABLE ENERGY EFFICIENCY, CONSERVATION AND RENEWA TIONS TO THOSE WE SERVE SEE SCHEDULE O FOR ENERGY TRUST'S FULL BACKGROUND, MISSION AND GO	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	Yes 🔽 No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	Yes ✓ 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 mea: expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations the total expenses, and revenue, if any, for each program service reported	
4a	(Code) (Expenses \$ 128,359,243 including grants of \$) (Revenue \$ EFFICIENCY PROGRAMSSEE SCHEDULE O FOR INFORMATION ON ENERGY EFFICIENCY PROGRAMS EFFICIENCY PROGRAMS BRING ENERGY SA)
	OPPORTUNITIES TO RESIDENTIAL, COMMERCIAL AND INDUSTRIAL CUSTOMERS THROUGHOUT OREGON, AND TO RESIDENTIAL AND COMMERCE PARTS OF SW WASHINGTON STATE IN 2012, ELECTRIC EFFICIENCY PROJECTS SAVED 52 9 AWAY OF ELECTRIC TO VER 20 PROJECTS COMPLETED IN 2012 SAVED DAY OF THE COMPLETE IN 2012 SAVED AND THE WIDE RANGE OF BUSINESSES IN EXISTING ON SOME AND AND THE WIDE RANGE OF BUSINESSES IN EXISTING BUDDINGS OFFERS INCENTIVES FOR IMPROVEMENTS INCLUDING SIGNATURE. SIGNATURE OF THE WIDE RANGE OF BUSINESSES IN EXISTING BUDDINGS OFFERS INCENTIVES FOR IMPROVEMENTS INCLUDING SIGNATION, HAVE, COMPLETED AND THE	11 GAS EFFICIENCY JILLDINGS HELPING ICTION OF TECHNICAL COLS, BOILERS, SOLAR MPROVEMENTS ILITATION AND POST- S BEGAN IN 2003 AND INANCIAL AND CCT FLUORESCENT CENTIVES FOR D WAS IMPLEMENTED D EQUIPMENT TO UILLDINGS NG ASSISTANCE AND A APPROACHES SAVE ENERGY IN RGY DESIGN AND RETAIL SPACES, OSTS OF EARNING HOMES RACTORS AND CASH JIPMENT THE RFORMANCE E HOMEOWNERS THE REVIEWS SENDING QUARTERLY IN INITIATIVE SEED TO NW NATURAL TION SERVICES REATING HOMEBUYER ITING EPS IS AN RS NEW HOMES SITION TO BUILDERS, CTURED HOMES BY ERATORS, FREEZERS, LANGE A LIGHT, TO THEIR CLIENTS, OFFERED TO NW VATION, FOR TECHNICAL ND PRACTICES DF OPPORTUNITIES TO THE PROGRAM UOUSLY IMPROVE ALLIANCE NEEA IS A ENERGY TRUST AIR TO FILL A HAN 100 NORTHWEST RATE INNOVATION JINDER CONTRACT TO
4b	(Code) (Expenses \$ 21,804,072 including grants of \$) (Revenue \$ RENEWABLES PROGRAMSSEE SCHEDULE O FOR INFORMATION ON RENEWABLES PROGRAMS RENEWABLES PROGRAMS BRING ENERGY GENER OPPORTUNITIES TO RESIDENTIAL AND BUSINESS CUSTOMERS THROUGHOUT OREGON IN 2012, RENEWABLE ENERGY PROJECTS ACHIEVED GENERATION, 3 4 TIMES HIGHER THAN 2011 A RECORD 3 3 AWM CAME FROM SOLAR ELECTRIC THIS PROGRAM HOMEOWNERS, BUSINESSES AND GOVERNMENTS SUPPLEMENT THEIR ELECTRICITY NEEDS WITH ON-SITE SOLAR GENERATION THE PROGRAM INCENTIVES FOR NET-METERED SOLAR ELECTRIC INSTALLATIONS, EDUCATES CONSUMERS ABOUT SOLAR PURCHASING AND FINANCING OPT HIGH-QUALITY INSTALLATIONS THROUGH DESIGN REVIEW AND VERIFICATION WHEN ADDITIONAL FUNDS ARE AVAILABLE, THE PROGRAM ALS CUSTOM, LARGE-SCALE SOLAR PROJECTS THE PROGRAM AIMS TO DEVELOP A LONG-TERM, STABLE MARKET FOR SOLAR IN OREGON BY BUIL AWARENESS, SPONSORING TECHNICAL TRAINING FOR THE TRADES AND SUPPORTING STATE AND LOCAL EFFORTS TO REDUCE COSTS AND S PERMITTING PRACTICES FOR SOLAR SOLAR ELECTRIC BEGAN IN 2003 AND IS MANAGED INTERNALLY BIOPOWER THE BIOPOWER PROGRAM INCENTIVES, COST-SHARED GRANTS FOR FEASIBILITY STUDIES, TECHNICAL ASSISTANCE AND OTHER SUPPORT FOR PROJECTS THAT GENER FROM ORGANIC RESIDUES ELIGIBLE FUELS INCLUDE BIOGAS FROM SEWAGE TREATMENT FACILITIES, FOOD PROCESSING AND AGRICULTURE FRACTION OF MUNICIPAL SOLID WASTE, SOLID ORGANIC FUELS FROM MILL WASTE, FOREST AND FIELD RESIDUES, AND URBAN WOOD WAST DEDICATED ENERGY CROPS AVAILABLE ON A RENEWABLE BASIS THE GOAL OF THE PROGRAM IS TO EXPAND ENERGY TRUST'S PORTFOLIO OF AND TO IMPROVE MARKET CONDITIONS FOR THE DEVELOPMENT OF THESE PROJECTS BIOPOWER BEGAN IN 2005 AND IS MANAGED INTERNA RENEWABLES THIS PROGRAM PROVIDES SUPPORT FOR RENEWABLE ENERGY PROJECTS BIOPOWER BEGAN IN 2005 AND IS MANAGED INTERNA RENEWABLES THIS PROGRAM PROVIDES SUPPORT FOR RENEWABLE ENERGY PROJECTS BIOPOWER BEGAN IN 2005 AND IS MANAGED INTERNA RENEWABLES THE PROGRAM PROVIDES CUSTOM INCENTIVES FOR PROJECTS WITH GENERATING CAPACCTITES OF 20 MEGAN STANDARD INCENTIVE PROGRAM F	M HELPS M PROVIDES CASH IONS AND ENSURES GO SUPPORTS DING CONSUMER TREAMLINE PROVIDES FINANCIAL ATE ELECTRIC POWER E, AND THE ORGANIC E BIOPOWER PROJECTS ALLY OTHER POWER AND JATTS OR LESS AND A TER A THOROUGH, IVES ARE PAID UPON DEVELOPMENT SOURCE EVELOPMENT THE
4c	(Code) (Expenses \$ 1,806,628 including grants of \$) (Revenue \$ COMMUNICATIONS AND OUTREACH THE COMMUNICATIONS AND OUTREACH PROGRAM SUPPORTS GENERAL AND CROSS-PROGRAM OUTREACH AND PROGRAM STAKEHOLDERS, COORDINATES PROGRAM MESSAGE AND IMAGE, AND OVERSEES CUSTOMER SERVICE, WEB SITE DEVELOPME CREATIVE SERVICES IN SUPPORT OF OVERALL EFFICIENCY AND RENEWABLE PROGRAM GOALS	

Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

151,060,043

4e Total program service expenses ►

151,969,943

Part TV	Check	dist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
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? If "Yes," complete Schedule C, Part II	4		No
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		No
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 1	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, 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^{\square}	9		No
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		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, 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	Yes	
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		No
C	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		Νo
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part $\chi^{f G}$	11e	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
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 and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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		No
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		No
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		No
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		No
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		No
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
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	Yes	
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
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		No
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		Νo
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
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		No
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			
		28a		Νo
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	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		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
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		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Νo
b	If 'Yes' to line 35a, 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		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	Yes	

-	Statements Regarding Other 1RS Fillings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 1,167		103	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
•	gaming (gambling) winnings to prize winners?	1c	Yes	
3	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			
)	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		N
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		IN
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
	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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	- 5с - 6а		N
•	organization solicit any contributions that were not tax deductible as charitable contributions?			11
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	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		N
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		Ν
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	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?			
	Sponsoring organizations maintaining donor advised funds.	8		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make any taxable distributions under section 49667	9a 9b		
	Section 501(c)(7) organizations. Enter	30		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
1	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14a		IN

Form 990 (2012) Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section 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			
	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	Enter the number of voting members included in line 1a, above, who are independent			
2	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		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? $$.	5		Νo
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
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		N o
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
		_		
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	_		e.)
	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ue Cod Yes	e.) No
10a	Did the organization have local chapters, branches, or affiliates?	_		e.)
10a b	Did the organization have local chapters, branches, or affiliates?	evenu		e.) No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	evenu 10a		e.) No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	e.) No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	e.) No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	e.) No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	e.) No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	e.) No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes	e.) No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	e.) No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	e.) No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	e.) No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	e.) No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official O ther officers or key employees of the organization 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 with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	e.) No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization 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 with a	10a 10b 11a 12a 12b 12c 13 14 15a	Yes Yes Yes Yes Yes Yes Yes	No No

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed ▶OR
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►SUSANNE MEYER SAMPLE CFO 421 SWOAK STREET SUITE 300 PORTLAND, OR (503) 493-8888

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, or 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 nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations	
(1) JOHN REYNOLDS	10 00	х		х				0	0	C	
PRESIDENT (2) PERPIS MEGUIN											
(2) DEBBIE KITCHIN VICE PRESIDENT	5 00	х		х				0	0	C	
(3) RICK APPLEGATE	3 00										
SECRETARY		х		х				0	0	C	
(4) DAN ENLOE	4 00										
		х		Х				0	0	C	
TREASURER (5) JOE BENETTI	3 00										
•		х						0	0	C	
BOARD MEMBER (6) JULIE BRANDIS	3 00										
	3 00	х						0	0	C	
BOARD MEMBER	1.00				_						
(7) KEN CANON	4 00	×						0	0	C	
BOARD MEMBER											
(8) JASON EISDORFER	4 00	×						0	0	C	
BOARD MEMBER											
(9) ROGER HAMILTON	3 00	x						0	0	O	
BOARD MEMBER		_ ^						Ů	0		
(10) MARK KENDALL	3 00							0	0	O	
BOARD MEMBER		X						U	0	·	
(11) JEFF KING	3 00							_	_		
BOARD MEMBER		X						0	0	C	
(12) ALAN MEYER	4 00										
BOARD MEMBER		X						0	0	C	
(13) ANNE ROOT	2 00										
BOARD MEMBER		X						0	0	C	
(14) DAVE SLAVENSKY	3 00				\vdash						
BOARD MEMBER		х						0	0	C	
(15) MARGIE HARRIS	40 00			\vdash	\vdash						
,	10 00			х				175,288	0	18,543	
EXECUTIVE DIRECTOR (16) SUSANNE MEYER SAMPLE	40 00			_	\vdash						
	40 00			х				144,250	0	10,257	
CHIEF FINANCIAL OFFICER					\vdash						
(17) PETER WEST	40 00					x		137,525	0	26,717	
ENERGY PROGRAMS DIRECTOR											

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours per week (list any hours for related	more pers	than on is	one bot rect	note boo	chec x, unle n offic rustee	ess er)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	Estim amount comper from	nated of other nsation the
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organi and re organiz	lated
(18)	STEVE LACEY	40 00					x		133,793			22,793
	CTOR OF OPERATIONS FRED GORDON	40 00							•		<u> </u>	·
` '	CTOR OF PLANNING & EVALUATION	40 00					x		130,065			26,332
	JOHN VOLKMAN	40 00										
GENE	RAL COUNSEL						×		133,079	'		21,687
(21)	OLIVER KESTING	40 00					х		116,040			25,712
BUSI	NESS SECTOR LEAD						<u> </u>		110,010			25,712
		+									1	
											<u> </u>	
1b	Sub-Total						-					
С	Total from continuation sheets to Par	t VII, Section A					.					
d	Total (add lines 1b and 1c)				•		<u> </u>		970,040	0		152,041
2	Total number of individuals (including \$100,000 of reportable compensation				ed a	bove	e) who	rec	eived more than			
											Yes	No
3	Did the organization list any former off on line 1a? If "Yes," complete Schedule			e, key	y en	nplo	yee, o	r hıg	hest compensate			
4	For any individual listed on line 1a, is t			omne	· anca	tion	and a	the	r compensation fr	om the	<u> </u>	No
-	organization and related organizations									om me		
	individual		•	•	•	•	•	•		• • • 4	Yes	
5	Did any person listed on line 1a receiv services rendered to the organization?									ndividual for		No
S	ection B. Independent Contract	ors										
1	Complete this table for your five higher compensation from the organization R	st compensated										-
		(A)					,			(B)	(0	:)
PORT	Name and LAND ENERGY CONSERVATION INC 100 SW MAIN	business address NST STE 1600 PORT	LAND OI	R 9720)4				PROGRAM DELIV	on of services /ERY	Comper 13	nsation 3,931,693
CONS	SERVATION SERVICES GROUP INC 208 SW 5TH S	T STE 700 PORTLAN	D OR 97	204					PROGRAM DELIN	ERY & COMPUTER		,403,653
	HEED MARTIN SERVICES INC 620 SW 5TH AVE S								PROGRAM DELIN			,711,125
	THWEST ENERGY EFFICIENCY ALLIANCE 529 SW ADE ENERGY INC 19 E CHERRY ST WALLA WALLA		ORTLAND	OR 9	7204	-			PROGRAM DELIN			3,082,493 2,872,769

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization \blacktriangleright 79

Part V		Statement of Revenue				rage 3
		Check if Schedule O contains a response to any question	in this Part VIII .		<u> </u>	<u> </u>
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
0 L	1a	Federated campaigns 1a				
ant	ь	Membership dues 1b				
, Grants Amounts	С	Fundraising events 1c				
ffs, or A	d	Related organizations 1d				
, Gi	e	Government grants (contributions) 1e 146,204,937				
ons Sir		All other contributions, gifts, grants, and 1f 30,515	.			-
Contributions, Giffs, Grants and Other Similar Amounts	•	similar amounts not included above				
g it	g	Noncash contributions included in lines 1a-1f \$.			
Cont and	h	Total. Add lines 1a-1f	146,235,452			
		Business Code				
Program Serwce Revenue	2a		1			
E E	ь					
93	С					
er w	d					
Ē	е					
ogra	f	All other program service revenue				
ΔŤ	g	Total. Add lines 2a-2f				
	3	Investment income (including dividends, interest,	133,373			133,373
	4	and other similar amounts)				
	5	Royalties				
		(ı) Real (ıı) Personal				
	6a	Gross rents	_			
	b	Less rental expenses				
	С	Rental income or (loss)				
	d	Net rental income or (loss)				
		(i) Securities (ii) Other Gross amount	- 1			
	7a	from sales of 120,000 assets other				
		than inventory				
	b	Less cost or other basis and 865,192	2			
	С	sales expenses Gain or (loss) -745,192	2			
	d	Net gain or (loss)	-745,192			-745,192
enne	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c)				
Other Revenue		See Part IV, line 18				
the	Ь	Less direct expenses b]			
0	c	Net income or (loss) from fundraising events 🛌				
	9a	Gross income from gaming activities See Part IV, line 19				
		a]			
	Ь	Less direct expenses b	4			
	C 10a	Net income or (loss) from gaming activities	 			
	TOa	Gross sales of inventory, less returns and allowances .]			
		a	1			
		Less cost of goods sold b	1 1			
	├ -	Net income or (loss) from sales of inventory	-			
	11a	CONSULTING REVENUE 900099	3,055			3,055
	ь	O HOUSE THO NEVEROL	<u> </u>			
	c					
	d	All other revenue				
	e	Total. Add lines 11a-11d	3,055			
	12	Total revenue. See Instructions		0	(-608,764
			1 .5,520,550	v		1 550,707

		tatement of Functional Expenses				
ectio	n 501(c))(3) and 501(c)(4) organizations must complete all columns All	other organizati	ons must comp	ete column (A)	
	Che	eck if Schedule O contains a response to any question in this Pa	rt IX			<u> </u>
		amounts reported on lines 6b, 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1		and other assistance to governments and organizations nited States See Part IV, line 21				
2		and other assistance to individuals in the States See Part IV, line 22				
3	organıza	and other assistance to governments, itions, and individuals outside the United See Part IV, lines 15 and 16				
4	Benefits	paid to or for members				
5		sation of current officers, directors, trustees, and ployees	348,338		348,338	
6	(as defin	sation not included above, to disqualified persons ned under section 4958(f)(1)) and persons ed in section 4958(c)(3)(B)				
7	Othersa	alaries and wages	5,920,188	4,764,458	1,155,730	
8		plan accruals and contributions (include section 401(k)	360,686	300,386	60,300	
9	O ther er	mployee benefits	1,007,448	791,904	215,544	
10	Payroll t	taxes	542,324	419,708	122,616	
11		services (non-employees)				
а	Manager	ment				
ь			27,622		27,622	
c	Account	ting	47,495		47,495	
d	Lobbying	g	·			
e		onal fundraising services See Part IV, line 17				
f		nent management fees				
g	Other (I	fline 11g amount exceeds 10% of line 25, (A) amount, list line 11g expenses on				
		eO)	5,573,243	5,238,310	334,933	
12		sing and promotion	1,585,006	1,585,006		
13		xpenses	80,750	65,422	15,328	
14	Informat	tion technology	271,882	238,546	33,336	
15	Royaltıe	s				
16	Occupai	ncy	426,605	307,481	119,124	
17	Travel		96,940	67,147	29,793	
18		ts of travel or entertainment expenses for any federal, r local public officials				
19	Confere	nces, conventions, and meetings	79,518	37,552	41,966	
20	Interest		5,030		5,030	
21	Paymen	ts to affiliates				
22	Deprecia	ation, depletion, and amortization	114,654	84,332	30,322	
23	Insuran	ce	62,814	45,274	17,540	
24	mıscella	xpenses Itemize expenses not covered above (List ineous expenses in line 24e If line 24e amount exceeds 10% 5, column (A) amount, list line 24e expenses on Schedule O)				
а	INCENT	i i i i i i i i i i i i i i i i i i i	91,294,586	91,294,586		
ь		AM MGMT & DELIVERY	45,666,608	45,666,608		
c		NG & EVALUATION	383,864	380,192	3,672	
d		MER SERVICE MGMT	284,182	284,182	-,2	
_		r expenses	430,569	398,849	31,720	
25		nctional expenses. Add lines 1 through 24e	154,610,352	151,969,943	2,640,409	(
26	Joint cos reported education	sts. Complete this line only if the organization I in column (B) joint costs from a combined onal campaign and fundraising solicitation Check I if following SOP 98-2 (ASC 958-720)	134,010,332	131,703,343	2,040,409	

Part X Balance Sheet

- (-	't X	Check if Schedule O contains a response to any question in this Part X .				
				(A)		(B)
		Cash was interest basins	+	Beginning of year 300	_	End of year 300
	1	Cash—non-interest-bearing		74,066,666		64,468,001
	2	Savings and temporary cash investments	-	74,000,000	2	64,466,001
	3	Pledges and grants receivable, net		7.500	3	
	4	Accounts receivable, net		7,599	4	123,795
	5	Loans and other receivables from current and former officers, directors, truemployees, and highest compensated employees. Complete Part II of Schedule L			5	
its	6	Loans and other receivables from other disqualified persons (as defined una 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing and sponsoring organizations of section $501(c)(9)$ voluntary employees' be organizations (see instructions) Complete Part II of Schedule L	employers		6	
Assets	7	Notes and loans receivable, net			7	
У Д			- F		8	
	8	Inventories for sale or use		2,732,426		2 274 942
	9	Prepaid expenses and deferred charges	•	2,732,420	9	2,374,843
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a	2,235,435			
	b	Less accumulated depreciation	1,183,098	1,825,317	10c	1,052,337
	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		363,797	15	473,830
	16	Total assets. Add lines 1 through 15 (must equal line 34)		78,996,105	16	68,493,106
	17	Accounts payable and accrued expenses		24,299,799	17	22,488,317
	18	Grants payable			18	
	19	Deferred revenue	,		19	
	20	Tax-exempt bond liabilities			20	_
ر م	21	Escrow or custodial account liability Complete Part IV of Schedule D .			21	_
Liabilities	22	Loans and other payables to current and former officers, directors, trustees key employees, highest compensated employees, and disqualified				
졅		persons Complete Part II of Schedule L			22	
ï	23	Secured mortgages and notes payable to unrelated third parties	-		23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third par and other liabilities not included on lines 17-24) Complete Part X of Scheo	ties,			
		D		31,090	25	323,237
	26	Total liabilities. Add lines 17 through 25		24,330,889	26	22,811,554
s e S		Organizations that follow SFAS 117 (ASC 958), check here ▶ and comp lines 27 through 29, and lines 33 and 34.	lete			
an	27	Unrestricted net assets		54,665,216	27	45,681,552
_ တ	28	Temporarily restricted net assets	ľ		28	
<u> </u>	29	Permanently restricted net assets	ľ		29	
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ an complete lines 30 through 34.	d			
<u></u>	30	Capital stock or trust principal, or current funds	.		30	
Ę,	31	Paid-in or capital surplus, or land, building or equipment fund	•		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds	•		32	
1 ₩	33	Total net assets or fund balances	ŀ	54,665,216	33	45,681,552
Š	34	Total liabilities and net assets/fund balances	-	78,996,105	34	68,493,106
	J-4	i otal napinties and net assets/lunu palantes		10,990,100		56,493,106

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		145,6	526,688
2	Total expenses (must equal Part IX, column (A), line 25)	2		154,6	510,352
3	Revenue less expenses Subtract line 2 from line 1	3		-8,9	83,664
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			565,216
5	Net unrealized gains (losses) on investments	5		•	
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		45,6	81,552
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. $ abla$
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	arate			
	▼ Separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	it of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n			
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	require	3b		

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As Filed Data -

DLN: 93493168001843

Employer identification number

OMB No 1545-0047

t

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

ENERGY TRUST OF OREGON INC

Department of the Treasury Internal Revenue Service

Public Charity Status and Public 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. ▶ See separate instructions.

2012

Open to Public Inspection

									93-13136		
	rt I			blic Charity Sta			•			<u>ıstructior</u>	ıs.
The	organı	zatıon ıs	not a privat	e foundation becaus	eitis (Forl	ınes 1 throu	ıgh 11, check	only one b	ox)		
1	Γ	A churc	ch, conventi	on of churches, or a	ssociation of	churches d	escribed in s e	ection 170(b)(1)(A)(i).		
2	Γ	A scho	school described in section 170(b)(1)(A)(ii). (Attach Schedule E)								
3	Γ	A hosp	ıtal or a coo	perative hospital se	rvice organiz	ation descr	ıbed ın sectio	n 170(b)(1)(A)(iii).		
4	Γ	A medi	cal researcl	n organization operat	ted ın conjun	ction with a	hospital desc	cribed in se	ction 170(b)(1)(A)(iii).	Enter the
				ty, and state							
5	Г	Anorga	anızatıon op	erated for the benefi	t of a college	or universi	ty owned or o	perated by	a government	:al unit des	scribed in
		sect ion	170(b)(1)(A)(iv). (Complete P	art II)						
6	Γ	A feder	al, state, or	local government or	government	al unit desc	rıbed ın secti	on 170(b)(1)(A)(v).		
7	✓	An orga	anızatıon tha	at normally receives	a substantia	l part of its	support from	a governm	ental unit or fr	om the ge	neral public
8	Г			on 170(b)(1)(A)(vi). described in sectior			nplete Part II	:)			
9	Г		-	at normally receives			-	-	butions, meml	bership fe	es, and gross
	·	_		ities related to its ex					·	-	-
		· ·		oss investment inco	•	=					
				janızatıon after June						,	
10	Г	•	,	ganized and operated	•			•	•		
11	, -	_		ganized and operated						o carry ou	t the nurnoses of
	,			ly supported organiz							
				bes the type of supp							
		a [Type I	b	∏ Туре II	I - Function	ally integrate	d d	Type III - No	n-function	nally integrated
е	Γ	,	_	ox, I certify that the	-		,		, ,		•
				on managers and ot	her than one	or more pub	olicly support	ed organiza	tions describe	ed in secti	on 509(a)(1) or
f			1509(a)(2)	received a written de	etermination	from the IR	S that it is a	Tyne I Tyr	e II or Tyne	III sunno	rting organization
•			this box	received a written a	ccerimination	monn the 110	S that it is a	1 9 0 2 7 1 9 5	7C 11, 01 1 ypc	тт зарро	
g				2006, has the organi	zation accep	ted any gift	or contributi	on from any	of the		,
			ng persons?								
				irectly or indirectly o	•		•	persons de	scribed in (ii)		Yes No
				governing body of th		_	n?				lg(i)
		(ii) A fa	amily memb	er of a person descr	bed in (i) ab	ove?					g(ii)
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) :	above?			11	g(iii)
h		Provide	the follown	ng information about	the supporte	ed organizat	ion(s)				
•	i) Nam		(ii) EIN	(iii) Type of	(iv) Is t		(v) Did you	•	(vi) Is t		(vii) A mount of
	suppor			organization	organizati		the organiz		organizati		monetary
OI	rganiza	ation		(described on lines 1- 9 above	col (i) list your gove		ın col (i) o suppor	•	col (i) org		support
				or IRC section	docume	_	заррог		liii the o	J .	
				(see							
				instructions))	Yes	No	Yes	No	Yes	No	\dashv
					103	110	1.03	130	1.03	113	
										 	+
							1		1		

supported organization

instructions

Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do 77,570,232 91,303,373 124,930,851 133,085,140 146,235,452 573,125,048 not include any "unusual grants ") 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 77,570,232 91,303,373 124,930,851 133,085,140 146,235,452 573,125,048 Total. Add lines 1 through 3 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) Public support. Subtract line 5 573,125,048 from line 4 Section B. Total Support Calendar year (or fiscal year (d) 2011 (e) 2012 (a) 2008 **(b)** 2009 (c) 2010 (f) Total beginning in) 🟲 77,570,232 133,085,140 Amounts from line 4 91,303,373 124,930,851 146,235,452 573,125,048 Gross income from interest, dividends, payments received on securities loans, rents, 1,766,864 588,192 417,905 194,050 133,373 3,100,384 rovalties and income from sımılar sources 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 3,055 3,055 capital assets (Explain in Part IV) 11 Total support (Add lines 7 576,228,487 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 99 460 % Public support percentage for 2011 Schedule A, Part II, line 14 15 98 760 % 16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ►V and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2012. 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 b 10%-facts-and-circumstances test - 2011. 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

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (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 fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 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						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	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)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, 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

Schedule A (Form 990 or 990-EZ) 2012

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DLN: 93493168001843

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

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.

Open to Public Inspection

CITIC	F Attacli to For	ili 330. F See separate ilistructions.		Inspection
	me of the organization ERGY TRUST OF OREGON INC		Emp	oloyer identification number
				1313663
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990		unds	or Accounts. Complete if the
		(a) Donor advised funds		(b) Funds and other accounts
L	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 advisor funds are the organization's property, subject to the or	-	nor adv	rsed ┌ Yes ┌ No
5	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the benef	- -		er purpose
_	conferring impermissible private benefit?			☐ Yes ☐ No
Pa	rt II Conservation Easements. Complete if		to Forn	n 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat	or education)		ically important land area d historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a	a qualified conservation contribution in t	the forr	n of a conservation
	easement on the last day of the tax year			Held at the End of the Year
а	Total number of conservation easements		2a	neid at the Elid Of the Year
a b	Total acreage restricted by conservation easements		2b	
c	Number of conservation easements on a certified histo	oric structure included in (a)	2c	
d	Number of conservation easements included in (c) acc	, ,	<u> </u>	
	historic structure listed in the National Register		2d	
3	Number of conservation easements modified, transfer	red, released, extinguished, or terminate	ed by th	ne organization during
	the tax year 🗠			
4	Number of states where property subject to conservat	ion easement is located ►		
5	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, han	dling of	f violations, and Yes No
5	Staff and volunteer hours devoted to monitoring, inspe	ecting, and enforcing conservation easer	ments o	during the year
				n Albania and
7	Amount of expenses incurred in monitoring, inspecting \$\blue \$	g, and enforcing conservation easement	s durin	g the year
3	Does each conservation easement reported on line 2(and section $170(h)(4)(B)(H)$?	d) above satisfy the requirements of sec	ction 1	70(h)(4)(B)(ı)
9	In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easeme	e footnote to the organization's financia		
Pa I	rt IIII Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Treasures, 'es" to Form 990, Part IV, line 8.	or Ot	her Similar Assets.
La	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide, in Part XIII, the text of the footnote t	ets held for public exhibition, education,	or rese	earch in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide the following amounts relating to thes	ets held for public exhibition, education,		
	(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, histor			'
	following amounts required to be reported under SFAS	116 (ASC 958) relating to these items		
а	Revenues included in Form 990, Part VIII, line 1			► \$

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	<u>llections of Ar</u>	t, HIS	stori	cai i	<u>reasu</u>	res, or O	tne	r Similar As	sets (co	ontinued)
3	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other reco	rds, cl	heck	any of	the foll	owing that a	re a	significant use	of its	
а	Public exhibition		d	Γ	Loan	or excl	hange progr	ams			
b	Scholarly research		e	Г	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	ollections and expl	aın ho	w the	y furth	er the c	rganızatıon	's ex	empt purpose	ın	
5	During the year, did the organization solicit o									_	_
	assets to be sold to raise funds rather than t									┌ Yes	No
Par	t IV Escrow and Custodial Arrange Part IV, line 9, or reported an am						n answered	л "Y	es" to Form S	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?		•				or other ass	etsı	not	┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	e follo	wing	able		_				
									Ar	nount	
С	Beginning balance							1 c			
d	Additions during the year							1d			
e	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, Iır	ne 21?)						┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	e expla	anatı	on has	been p	rovided in P	art >	KIII		Γ
Pa	rt V Endowment Funds. Complete	f the organizatio	n ans	swer	ed "Ye	s" to I	Form 990,	Par	t IV, line 10.		
_		(a)Current year	(b)Prior	year	b (c) Tv	wo years back	(d)	Three years back	(e)Four y	ears back
1a	Beginning of year balance							-			
b	Contributions							\vdash			
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end balan	ice (lir	ne 1 g	, colun	nn (a)) l	held as	•	•		
а	Board designated or guasi-endowment 🕨										
ь	Permanent endowment -										
С	Temporarily restricted endowment ►										
	The percentages in lines 2a, 2b, and 2c show	ıld equal 100%									
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	zatıon	that	are hel	d and a	dmınıstered	l for	the	Yes	No
	(i) unrelated organizations								3a	(i)	
	(ii) related organizations								<u> </u> 3a(<u> </u>
	If "Yes" to 3a(II), are the related organization							٠	3	b	
4 Par	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipme					10					
I GI	Description of property	THE SECTION S.	50, 10	(a) Cost o	r other	(b)Cost or o		(c) Accumulated	(d) Bo	ook value
				bas	is (inve	stment)	basıs (othe	r)	depreciation		
1a	Land										
Ь	Buildings										
c	Leasehold improvements						287	,385	47,89	97	239,488
d I	Equipment						1,948	,050	1,135,20	01	812,849
e	Other										
	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colu	ımn (B), line	10(c).)			🛌		1,052,337

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	2.	
(a) Description of security or category	(b)Book value	(c) Method of valuation	
(including name of security)		Cost or end-of-year market value	
(1)Financial derivatives			
(2)Closely-held equity interests Other			
Other			
- 1 (0)	-		
	o Form 000 Part V June	12	
Part VIII Investments—Program Related. Se (a) Description of investment type	(b) Book value	(c) Method of valuation	
(a) Beschption of investment type	(B) Book Value	Cost or end-of-year market value	
	_		
Part IX Other Assets. See Form 990, Part X, col (B) line 13)	no 15		
(a) Descri		(b) Book value	
(2) 2 3 3 3 3	F-1-11	(=,====================================	
		<u> </u>	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1:			
Part X Other Liabilities. See Form 990, Part 3	(b) Book value		
	(B) Book value		
Federal income taxes			
DEFERRED RENT	323,237		
	<u> </u>		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	323,237		
2 Fin 48 (ΔSC 740) Footnote In Part XIII provide the te	•	nization's financial statements that reports the	

	,		
Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue	oer R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	146,371,880
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		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII).............2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	146,371,880
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 XIII) 4b -745,192		
c	Add lines 4a and 4b	4c	-745,192
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	145,626,688
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	Return
1	Total expenses and losses per audited financial statements	1	155,355,544
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	745,192
3	Subtract line 2e from line 1	3	154,610,352
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 XIII)............. 4b		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	154,610,352

Part XIII Supplemental Information

Complete 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, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	FIN 48 (ASC 740) FOOTNOTE - ENERGY TRUST RECOGNIZES THE TAX BENEFIT FROM UNCERTAIN TAX POSITIONS ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITIONS WILL BE SUSTAINED ON EXAMINATION BY THE TAX AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION THE TAX BENEFIT IS MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT ENERGY TRUST RECOGNIZES INTEREST AND PENALTIES RELATED TO INCOME TAX MATTERS, IF ANY, IN ADMINISTRATIVE EXPENSE ENERGY TRUST HAD NO UNRECOGNIZED TAX BENEFITS AT DECEMBER 31, 2012 OR 2011 NO INTEREST AND PENALTIES WERE ACCRUED FOR THE YEARS ENDED DECEMBER 31, 2012 OR 2011 ENERGY TRUST FILES AN EXEMPT ORGANIZATION RETURN IN THE US FEDERAL JURISDICTION AND WITH THE OREGON CHARITIES DIVISION AND IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY TAXING AUTHORITIES FOR YEARS BEFORE 2009 FOR ITS FEDERAL AND STATE FILINGS
PART XI, LINE 4B - OTHER ADJUSTMENTS		LOSS ON DISPOSAL OF ASSETS NETTED WITH EXPENSES ON FINANCIAL STATEMENTS -745,192
PART XII, LINE 2D - OTHER ADJUSTMENTS		LOSS ON DISPOSAL OF ASSETS NETTED WITH EXPENSES ON FINANCIAL STATEMENTS 745,192

DLN: 93493168001843

OMB No 1545-0047

Open to Public

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

Compensation Information

► Attach to Form 990. ► See separate instructions.

Inspection

Name of the organization ENERGY TRUST OF OREGON INC **Employer identification number**

93-1313663

Pa	Questions Regarding Compensation			
			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			ĺ
	First-class or charter travel Housing allowance or residence for personal use			1
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,			
	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			1
	organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	_			
	Compensation committee			
	Form 990 of other organizations Approval by the board or compensation committee			
	,,,,,,,			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	4a	ļ	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	<u> </u>
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			1
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			1
	compensation contingent on the revenues of			
а	The organization?	5a		No
b	Any related organization?	5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of			
а	The organization?	6a		No
b	Any related organization?	6b		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			ĺ
	ın Part III	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)MARGIE HARRIS EXECUTIVE DIRECTOR	(i) (ii)		0	24,294	10,111	8,432	193,831	0
(2)SUSANNE MEYER SAMPLE CHIEF FINANCIAL OFFICER	(i) (ii)		200	8,600	8,690 0	1,567 0	154,507	0
(3)PETER WEST ENERGY PROGRAMS DIRECTOR	(i) (ii)		200	22,437	8,424	18,293	164,242	0
(4)STEVE LACEY DIRECTOR OF OPERATIONS	(i) (ii)		200	5,000	8,292 0	14,501	156,586	0
(5)FRED GORDON DIRECTOR OF PLANNING & EVALUATION	(i) (ii)	126,979 0	200	2,886 0	8,089 0	18,243	156,397 0 0	0
(6)JOHN VOLKMAN GENERAL COUNSEL	(i) (ii)		200 0	0	8,066	13,621	154,766	, 0

Schedule J (Form 990) 2012

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Identifier	Return Reference	Explanation
	·	ENERGY TRUST SPONSORS A NON-QUALIFED DEFERRED COMPENSATION PLAN FOR SELECTED EMPLOYEES CONTRIBUTIONS TO THE PLAN WERE MADE DURING THE TAX YEAR FOR THE FOLLOWING LISTED PERSONS MARGIE HARRIS 17,000 SUSANNE MEYER SAMPLE 5,000 FRED GORDON 2,886 STEVE LACEY 5,000 PETER WEST 22,437

Schedule J (Form 990) 2012

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization ENERGY TRUST OF OREGON INC **Employer identification number**

93-1313663

	<u> </u>	
ldentifier	Return Reference	Explanation
ORGANIZATION MISSION STATEMENT	FORM 990, PART III, LINE 1, BACKGROUND, MISSION AND GOALS	A BACKGROUND SINCE MARCH 2002, ENERGY TRUST HAS INVESTED PUBLIC PURPOSE FUNDS FROM UTILITY CUSTOMERS TO HELP OREGONIANS BISHETTI FROM ENERGY-EFFICIENCY IMPROVOEMENTS AND RENEWABLE ENERGY GENERATION WE ARE FUNDED BY AND RROVIDE SERVICES TO OREGON CUSTOMERS OF PORTILAND GENERAL ELECTRIC, PACIFIC POWER, INVINATURAL AND CASCADE NATURAL GAS, AND TO NW NATURAL CUSTOMERS IN SOUTHWEST WASHINGTON AN INDEPENDENT 501(C)(3) NONPROFIT ORGANIZATION, ENERGY TRUST SERVES THE RESIDENTIAL CUSTOMERS AND MOST COMMERCIAL AND INDUSTRIAL CUSTOMERS OF OUR AFFILIATED UTILITIES WE OFFER TECHNICAL AND OTHER ASSISTANCE AND FINANCIAL INCENTIVES, HELPING CUSTOMERS DERIVE DIRECT BENEFITS FROM CLEAN ENERGY INVESTMENTS FOUR OF OUR EIGHT PROGRAMS ARE MANAGED INTERNALLY, WHILE FOUR, TWO EACH IN THE RESIDENTIAL AND THE COMMERCIAL EFFICIENCY PROGRAMS, ARE COMPETITIVELY BID AND MANAGED BY CONTRACTORS FOR MOST PROGRAMS, ENERGY TRUST SERVICES ARE PROVIDED BY SPECIALIZED LOCAL BUSINESSES LINKED IN A NETWORK OF MORE THAN 2,400 TRADE ALLY CONTRACTORS, OTHER ALLIED PROFESSIONALS AND PARTICIPATING RETAILERS FROM THROUGHOUT THE STATE OUR WORK IS SHAPED BY TWO ADVISORY COUNCILS COMPRISED OF STAKEHOLDERS AND IS LED BY AN INDEPENDENT, DIVERSE BOARD OF DIRECTORS WHOSE MEMBERS VOLUNITIEST THEIR TIME AND EXPERTISE VIA CONTRACT WITH THE OREGON PUBLIC UTILITY COMMISSION, WE COMPLY WITH MINIMUM PERFORMANCE MEASURES, REPORTING AND OTHER REQUIREMENTS IT ESTABLISHES TO GUIDE OUR OPERATIONS AND RESULTS OUR INCLUSIVE AND TRANSPARENT APPROACH INCLUDES OPEN MEETINGS AND PUBLISHED AGENDAS, MINUTES, EVALUATIONS, BUDGETS AND FINANCIAL STATEMENTS EACH YEARS AS PART OF DEVELOPING THE NEXT YEAR SUDGET AND ACTION PLAN, WE ESTABLISH GOALS FOR ELECTRIC AND NATURAL GAS ENERGY SAVINGS AND FOR RENEWABLE ENERGY GENERATION THESE GOALS ARE EXPRESSED AS A RANGE BOUNDED BY A CONSERVATIVE GOAL AND A STRETCH GOAL FOR OVERALL ENERGY FEFTICIENCY AND RENEWABLE GENERATION RESULTS AND FOR SPECIFIC PROGRAMS OUR GOALS ALIGN WITH THE INTEGRATED RESOURCE PLANS, OR RES, ESTABLISHED BY EACH OF OUR COL

Identifier	Return Reference	Explanation
	VI, SECTION B,	THE FORM 990 FINANCIAL INFORMATION IS DEVELOPED BY ACCOUNTING PERSONNEL AND REVIEWED BY THE CFO THE REST OF THE CONTENT IS PROVIDED BY THE CFO AND IS REVIEWED IN FULL WHEN A DRAFT IS AVAILABLE FROM OUTSIDE ACCOUNTANTS A COPY OF THE DRAFT FORM 990 IS DISTRIBUTED TO THE ENTIRE BOARD OF DIRECTORS FOR THEIR REVIEW AND DISCUSSION BEFORE FILING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	ANNUALLY, ALL DIRECTORS AND MANAGEMENT TEAM MEMBERS DISCLOSE IN WRITING TO THE PRESIDENT, THE OTHER DIRECTORS AND THE OPUC (OREGON PUBLIC UTILITY COMMISSION), ON SUCH FORMS AND IN SUCH FORMATS ESTABLISHED BY THE DIRECTORS AND THE OPUC, ANY RELATIONSHIPS THAT MAY BE DEEMED A "DIRECT OR INDIRECT CONFLICT OF INTEREST," AS DEFINED IN OUR CONFLICT OF INTEREST POLICY AND AS MAY BE AMENDED AND INTERPRETED FROM TIME TO TIME ANY SUCH DISCLOSURE SHALL BE DULY RECORDED IN THE MINUTES IF THE MEMBER MAKES FULL DISCLOSURE OF THE NATURE AND DETAILS OF THE CONFLICT, THE MEMBER MAY THEREAFTER ENGAGE IN ANY DISCUSSION ON THE MATTER AND MAY VOTE, UNLESS THE BOARD OF DIRECTORS BELIEVES THAT THE NATURE AND EXTENT OF THE CONFLICT OF INTEREST WARRANTS THE DIRECTOR'S EXCLUSION FROM EITHER OR BOTH THE DISCUSSION AND VOTE. IF THE MEMBER DOES NOT MAKE FULL DISCLOSURE, HE OR SHE THEREAFTER MUST LEAVE THE MEETING ROOM DURING ANY DISCUSSION OR VOTE ON THE MATTER. THE ORGANIZATION ENSURES THAT EACH DIRECTOR AND EMPLOYEE HAS FILED A DISCLOSURE FORM ANNUALLY. ANY DIRECTOR WHO FAILS TO COMPLY WITH DISCLOSURE REQUIREMENTS MAY BE REMOVED BY THE OREGON PUBLIC UTILITY COMMISSION.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	COMPETITIVE ADVANTAGE IN ATTRACTING AND RETAINING EXTRAORDINARILY TALBITED INDIVIDUALS BILERGY TRUST BYOURAGES AND REWARDS HIGH-PERFORMING INDIVIDUALS WHO EXCE. IN THEIR ROSITION AND INTERPROPERTY OF THE COMPANY SOLOCES TO KEEP THE COMPENSATION PROGRAM TARGETED TO THE MRRKET TREND. THE COMPENSATION COMMITTEE ANNUALLY REVIEWS THE COMPENSATION PROGRAM TRAGETED TO THE MRRKET TREND. THE COMPENSATION COMMITTEE ANNUALLY REVIEWS THE COMPENSATION PROGRAM TO THE MRRKET TREND. THE COMPENSATION COMMITTEE ANNUALLY REVIEWS THE COMPENSATION PROGRAM MEDICAL PROPERTY AND ADVANCE AND THE WINDIGHT ANNUALLY REVIEWS THE COMPENSATION PROGRAM MEDICAL PROPERTY AND ADVANCE AND THE WINDIGHT ANNUALLY REVIEWS THE COMPENSATION FOR COMPENSATION FOR COMPENSATION FOR COMPENSATION FOR THE COMPENSATION FOR THE POSITION AND THE POSITION SHAPPING THE COMPENSATION FOR THE POSITION SHAPPING THE COMPENSATION FOR EMPLOY BE'S POSITION SHOUTH TO THE APPROPRIATE SALARY GRADE BASE COMPENSATION FOR EMPLOY BE'S POSITION SHOUTH THE MARKET AVERSAGE. DID DESCRIPTIONS MILESTEE KEPT CURRENT TO TRILLY REFLIEST THE LEVEL OF RESPONSIBILITY AND ACCURATE REQUIREMENTS OF EVERY POSITION THE PRIMARY RESPONSIBILITY FOR IT HIS RESTS WITH THE MANAGET PLOED BESCRIPTIONS SHOULD BE REVIEWED AT LEAST ANNUALLY, TYP CALLY, TO THE THE CET SHAPPING THE MANAGETS FOR DESCRIPTIONS SHOULD BE REVIEWED AT LEAST ANNUALLY, TYP CALLY, THE CET THE EMPLOY BE THE DEVELOPMENT AND ANIATION FOR AND ANIATION FOR ANY ANY THE CHARGE THE ANIATION FOR CAMPENS THE COMPENSATION FOR CAMPENSATION FOR CAMPENS THE COMPENSATION FOR CAMPENS THE COMPENSATION FOR CAMPENSATION FOR CAMPENSATION FOR CAMPENSATION FOR CAMPENS THE COMPENSATION FOR CAMPENSATION FOR
		DIRECTORS OF ENERGY TRUST ANNUALLY APPOINTS AN E

FORM 990, PART VI, SECTION B, LINE 15 XECUTIVE DIRECTOR REVIEW COMMITTEE, WHO ARE CHARGED WITH THE RESPONSIBILITY OF REVIEWING THE PERFORMANCE OF THE EXECUTIVE DIRECTOR AND RECOMMENDING ANY MERIT INCREASE. THIS COMMITT EE IS COMPOSED ENTIRELY OF INDIVIDUALS WHO DO NOT HAVE A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT WHEN THE EXECUTIVE DIRECTOR REVIEW COMMITTEE IS CONSIDER ING COMPENSATION TO THE EXECUTIVE DIRECTOR, IT ALSO RELIES ON THE COMPENSATION IN QUESTION THE EXECUTIVE DIRECTOR REVIEW COMMITTEE WORK COMPENSATION TO THE EXECUTIVE DIRECTOR REVIEW COMMITTEE WIST DOCUMENT HOW IT REACHED ITS DECISIONS, INCLUDING THE DATA UPON WHICH IT RELIED WRITTEN OR ELECTRONIC RECORDS OF THE COMPENSATION THAT WAS APPROVED AND WHO VOTED ON IT, 3 THE COMPARABILITY DATA OBTAINED AND RELIED UPON AND HOW THE DATA WERE OBTAINED, 4 ANY ACTIONS TAKEN WITH RESPECT TO CONSIDERATION OF THE COMPENS ATION BY ANY ONE WHO IS OTHERWISE A MEMBER OF THE EXECUTIVE DIRECTOR REVIEW COMMITTEE BUT W HO HAD A CONFLICT OF INTEREST WITH RESPECT TO THE DECISION ON THE COMPENSATION RESULTS OF THE PERFORMANCE EVALUATION ARE DISCUSSED BY THE EXECUTIVE DIRECTOR REVIEW COMMITTEE AND A RE REVIEWED AT EXECUTIVE SESSION OF THE BOARD TO MAINTAIN CONFIDENTIALITY MERIT INCREASES FOR THE EXECUTIVE DIRECTOR ARE APPROVED BY RESOLUTION OF THE FULL BOARD AND TYPICALLY TAKE EFFECT ON JANUARY 1ST	ldentifier	Return Reference	Explanation
1 1		PART VI, SECTION B,	PERFORMANCE OF THE EXECUTIVE DIRECTOR AND RECOMMENDING ANY MERIT INCREASE. THIS COMMITT EE IS COMPOSED ENTIRELY OF INDIVIDUALS WHO DO NOT HAVE A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT. WHEN THE EXECUTIVE DIRECTOR REVIEW COMMITTEE IS CONSIDER ING COMPENSATION TO THE EXECUTIVE DIRECTOR, IT ALSO RELIES ON THE COMPARABILITY DATA DESCRIBED ABOVE THAT DEMONSTRATES THE FAIR MARKET VALUE OF THE COMPENSATION IN QUESTION. THE EX ECUTIVE DIRECTOR REVIEW COMMITTEE MUST DOCUMENT HOW IT REACHED ITS DECISIONS, INCLUDING THE DATA UPON WHICH IT RELIED. WRITTEN OR ELECTRONIC RECORDS OF THE COMMITTEE WILL NOTE. 1. THE TERMS OF THE COMPENSATION AND THE DATE IT WAS APPROVED, 2. THE MEMBERS OF THE EXECUTIVE DIRECTOR REVIEW COMMITTEE WHO WERE PRESENT DURING THE DEBATE ON THE COMPENSATION THAT WAS A APPROVED AND WHO VOTED ON IT, 3. THE COMPARABILITY DATA OBTAINED AND RELIED UPON AND HOW THE DATA WERE OBTAINED, 4. ANY ACTIONS TAKEN WITH RESPECT TO CONSIDERATION OF THE COMPENSATION BY ANY ONE WHO IS OTHERWISE A MEMBER OF THE EXECUTIVE DIRECTOR REVIEW COMMITTEE BUT WHO HAD A CONFLICT OF INTEREST WITH RESPECT TO THE DECISION ON THE COMPENSATION RESULTS OF THE PERFORMANCE EVALUATION ARE DISCUSSED BY THE EXECUTIVE DIRECTOR REVIEW COMMITTEE AND A RE REVIEWED AT EXECUTIVE SESSION OF THE BOARD TO MAINTAIN CONFIDENTIALITY. MERIT INCREASES FOR THE EXECUTIVE DIRECTOR ARE APPROVED BY RESOLUTION OF THE FULL BOARD AND TYPICALLY TAKE EFFECT ON JANUARY.

Identifie	r Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	ENERGY TRUST MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST AND ON ITS WEBSITE. WWW ENERGYTRUST ORG