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Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public.

OMB No 1545-0047

▶ Information about Form 990 and its instructions is at www.irs gov/form990

Inspection

Α	For	the 2	013 calendar year, or tax year beginning	and	dending			
В	Chec	ck if licable	C Name of organization	-	<u> </u>	D Employer idea	ntification n	umber
		ddress hange lame	ENTERPRISE WASHINGTON					
Ĺ	cl	hange	Doing Business As			68	<u>-06703</u>	55
L	— re	nitial eturn ermin-	Number and street (or P.O. box if mail is not delivere 1603 116TH AVE NE	ed to street address)	Room/suite		mber 5-313-	0074
Ī	V A	ted mended		or foreign postal code	120	G Gross receipts \$	3 313	412,518.
ř	A	eturn pplica-	City or town, state or province, country, and ZIP BELLEVUE, WA 98004	or foreign postal code			ın rotum	412,510.
	tii	on ending	F Name and address of principal officer MICHA	EL DAVIS		H(a) Is this a grou	· -	Yes X No
			SAME AS C ABOVE	DD DIIVID		H(b) Are all subordina		Yes No
_	Tax	, 0v0m		(insert no.) 4947(a)(1)	or 52	⊣ ``		instructions)
÷			► WWW.ENTERPRISEWASHINGTON		01 02	H(c) Group exem		
			ganization: X Corporation Trust Associ		I Yea	r of formation: 200		
	art		ummary			or formation:	<u> </u>	regar deminence, 1122
_			efly describe the organization's mission or most sign	nificant activities: SEE	SCHED	ULE O.		
Activities 9 Contemporary	월		ony decombe the organization of mester of mest sign	micant activities: <u>===</u>		<u> </u>		
9	<u> </u>	2 Ch	eck this box leck this box lec	ied its operations or dispo	osed of mo	re than 25% of its ne	et assets	
Š			imber of voting members of the governing body (Pai	3	25			
Ċ	5 2		imber of independent voting members of the govern	•			4	25
9	ו מ		tal number of individuals employed in calendar year	- · · · · · · · · · · · · · · · · · · ·			5	4
į	į (tal number of volunteers (estimate if necessary)	,			6	20
ŧ	֓֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓		tal unrelated business revenue from Part VIII, colum	n (C), line 12		i	7a	0.
<	١,		t unrelated business taxable income from Form 990	· · · ·			7b	0.
_	T					Prior Year	Cı	urrent Year
2 (ן מ	B Co	intributions and grants (Part VIII, line 1h)			504,49		412,434.
-{ · · · }	፼ ያ	9 Pro	ogram service revenue (Part VIII, line 2g)			12,00	0.	0.
	<u> </u>	O Inv	restment income (Part VIII, column (A), lines 3, 4, and	d 7d)		11		84.
· •	⁶ 1		her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c			22,00	0.	0.
_	1	2 To	tal revenue - add lines 8 through 11 (must equal Par	t VIII, column (A), line 12)		538,60	6.	412,518.
	1	3 Gr	ants and similar amounts paid (Part.IX, column (A), I	ines 1-3)			0.	0.
	1	1 4 Be	nefits paid to or for members (Part) — column (A), fir laries, other compensation, employee benefits (Part	(£4)			0.	0.
1. 8	ខ្ល 1	1 5 Sa	laries, other compensation, em ployee benefits (P art	IX, column (A), lines 5-10)) <u> </u>	231,74		273,895.
, 8	ੂੰ 1	l6a Pro	ofessional fundraising fees (RatilX, column (A), line	11e) /			0.	0.
	<u> </u>	b To	tal fundraising expenses (Patrix, column (B), line 25	Ñ P [<u>[</u>]	0.			
; , u	ا ا		her expenses (Part IX, column (A), lines 11a 11d, 11		<u> </u>	268,74		163,910.
33	1		tal expenses Add lines 13-j17 (must equal zait vx, c	glumn (A), line 25)	<u> </u>	500,48		437,805.
_	/ 1	19 Re	venue less expenses. Subtract line 18 from line 12-	1		38,12		-25,287.
S Or	Fund Balances				<u> </u>	leginning of Current Y		nd of Year
sset	麗 2		tal assets (Part X, line 16)		_	161,06		123,013.
et A	필 2		tal liabilities (Part X, line 26)		<u> </u>	79		22,470.
2	리 2		t assets or fund balances Subtract line 21 from line Signature Block	20		160,27	0.	100,543.
_	Part		s of perjury, I declare that I have examined this return, incli	uduna aaaamaan una aabadud		monto and to the best	of my knowle	dae and halief it is
			s of perjory, receive that this very other than, officer) is nd complety. Declaration/of properery other than, officer) is				of fifty knowled	aye and bener, it is
ut	Je, co	Jirect, a		based on all information of w	vilicii prepari	er nas any knowledge.		
C :			Signature of officer		-	I Date		
	ign		MICHAEL DAVIS, PRESIDENT	AND CEO				
п	ere		Type or print name and title	THID CHO				
Print/Type preparer's name Preparer's signature , Date Check PTIN								
P	aid	1	ARK T. LONG, CPA	Mas I form		10/12/15		0047630
	repar	_	rm's name THE MYERS ASSOCIAT			Firm's EIN	0.4	1123435
	se On		rm's address 520 PIKE ST, STE 1		•			
			SEATTLE, WA 98101-			Phone no.	(206)6	23-6116
М	ay th	ne IRS	discuss this return with the preparer shown above?	(see instructions)				Yes No
33	2001	10-29-1	3 LHA For Paperwork Reduction Act Notice, s	see the separate instruct	ions.			Form 990 (2013)

Form	990 (2013) ENTERPRISE WASHINGTON	68-0670355	Page 2
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission. SEE SCHEDULE O.	-	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O	Yes	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other revenue, if any, for each program service reported.		
4a	(Code) (Expenses \$)
	ENTERPRISE WASHINGTON EMPOWERS ITS MEMBERS TO EFFECTIVE		
	PUBLIC AFFAIRS AND THE POLITICAL PROCESS. ENTERPRISE WAS		
	PROVIDES ITS BUSINESSES AND ASSOCIATION MEMBERS WITH LEA		
	RESEARCH AND STRATEGIES TO LEVERAGE THEIR POLITICAL RESC		,
	MAXIMIZE THEIR IMPACT UPON THE LEGISLATIVE PROCESS, AND		
	SEEKS TO FOSTER BUSINESS-MINDED LEGISLATURES IN THE STAT	LE OF	
	WASHINGTON.		
4b	(Code) (Expenses \$) (Revenue	ie \$)
		-	
4c	(Code) (Expenses \$ including grants of \$) (Revenu	ue \$	
			
4d	Other program services (Describe in Schedule O.)	· · · · · · · · · · · · · · · · · · ·	
	(Expenses \$ including grants of \$) (Revenue \$)	

4e Total program service expenses ▶

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Form 990 (2013) ENTERPRISE W
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		<u>X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
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	N/	Α
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	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
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		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
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	9		Х
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		X
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	-	X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	446		X
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b	_	
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	,	x
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	110		
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	401		х
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	170		
_	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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
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		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990	(2013)

Form 990 (2013) ENTERPRISE WASHING
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
2 2	Did the organization report more than \$5,000 of grants or 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		х
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	X	
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 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
đ	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	N/	A
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		37/	_
	Schedule L, Part I	25b	N/	<u>A</u>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,		v	
	complete Schedule L, Part II	26	X	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			х
	of any of these persons? If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			P P P P P P P P P P P P P P P P P P P
_	instructions for applicable filing thresholds, conditions, and exceptions):	28a		X
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		$\frac{1}{X}$
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
C	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		-	
00	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
•	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	İ	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X_	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
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	<u> </u>	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization?		 	L
	If "Yes," complete Schedule R, Part V, line 2	36	N/	Α
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	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	L
		E	. uuri	(2013)

ENTERPRISE WASHINGTON 68-0670355 Form 990 (2013) Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming X (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2b b 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) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 3b 4a 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, secunties account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country: 100 See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X 6a any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts X 6b were not tax deductible? N/A 41 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c 7d d If "Yes," indicate the number of Forms 8282 filed during the year X 7e e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? $\overline{\mathbf{x}}$ 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? N/ 7g g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? \overline{N} 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 N/Aلكدولك organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. N/A a Did the organization make any taxable distributions under section 4966? 9a N/A 9b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter 10 N/A a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: N/A a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a N/Ab If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. N/A a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. ž b Enter the amount of reserves the organization is required to maintain by the states in which the

Form **990** (2013)

14a

14b

organization is licensed to issue qualified health plans

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

c Enter the amount of reserves on hand

13b

13c

Form 990 (2013) ENTERPRISE WASHINGTON 68-0670355 Page
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions

	Check if Schedule O contains a response or note to any line in this Part VI			X					
Sec	tion 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 25			×4 ,					
	If there are material differences in voting rights among members of the governing body, or if the governing	1		1:5					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		ŀ						
b	Enter the number of voting members included in line 1a, above, who are independent 1b 25	,	İ	33					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		ļ: 					
	officer, director, trustee, or key employee?	2		X					
3	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?								
4									
5									
6	Did the organization have members or stockholders?	6	X						
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	X						
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		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	X						
	Each committee with authority to act on behalf of the governing body?	8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the								
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)								
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		X					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X						
11a	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?								
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X						
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe								
	in Schedule O how this was done	12c	X						
13	Did the organization have a written whistleblower policy?	13		X					
14	Did the organization have a written document retention and destruction policy?	14	Х						
15	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?	_	1.						
а	The organization's CEO, Executive Director, or top management official	15a	X						
b	Other officers or key employees of the organization	15b	X	ļ					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a								
	taxable entity during the year?	16a	<u> </u>	X					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	l .	1						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			<u> </u>					
	exempt status with respect to such arrangements?	16b	<u> </u>						
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ►WA								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avaılal	ole						
	for public inspection. Indicate how you made these available. Check all that apply.								
	Own website X Another's website X Upon request Other (explain in Schedule O)								
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, ar	nd fina	ncıal						
	statements available to the public during the tax year.								
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	ation:	_						
	MICHAEL DAVIS, PRESIDENT AND CEO - 425-313-0074								
	1603 116TH AVE NE, NO. 120, BELLEVUE, WA 98004								

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

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

(A) Name and Title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				than	one th an	(D) Reportable	(E) Reportable compensation from related	(F) Estimated amount of other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) ANTHONY ANTON DIRECTOR	1.00	x						0.	0.	0.	
(2) BRUCE BECKETT	1.00	┝	-		-	-	├	0.	0.		
DIRECTOR	1.00	X				ł	1	0.	0.	0.	
(3) JIM BLUNDELL	1.00	1	\vdash		_	╁	╁	-			
DIRECTOR		x						0.	0.	0.	
(4) CATHERINE BRAZIL	1.00	<u> </u>	T					<u> </u>			
DIRECTOR		x					ŀ	0.	0.	0.	
(5) DON BRUNELL	1.00										
DIRECTOR	-	X						0.	0.	0.	
(6) ANNE BRYANT	1.00										
DIRECTOR		x						0.	0.	0.	
(7) PATTI CASE	1.00							_	_	_	
DIRECTOR		X				<u> </u>	<u> </u>	0.	0.	0.	
(8) WILLIAM CONNER	1.00	ļ									
DIRECTOR	1	X	ļ				_	0.	0.	0.	
(9) JON DEVANEY	1.00	۱.,	ļ							_	
DIRECTOR	1 00	X	├		_		┡	0.	0.	0.	
(10) BRETT FURELLO	1.00	٠,						0.	0.	0.	
DIRECTOR	1.00	X	┡	-	<u> </u>	-	⊢	0.	0.	<u> </u>	
(11) MAUREEN FRISCH DIRECTOR	1.00	x			ĺ			0.	0.	0.	
(12) JAN GEE	1.00	┝	├	-	┝	├	┢╌	·		- 0.	
DIRECTOR	1.00	x						0.	0.	0.	
(13) JESSICA HARBIN	1.00	1	┢	├	-	╁╌	┢╌	· · · · · ·		.	
DIRECTOR	1.00	\mathbf{x}						0.	0.	0.	
(14) KEN JOHNSON	1.00	 	\vdash			H	H	 			
DIRECTOR		x						0.	0.	0.	
(15) STEPHEN LOEB	1.00	Ť	T	Т	 	1	T	<u> </u>			
DIRECTOR		x					1	0.	0.	0.	
(16) TERESA LOO	1.00				Г	T	T				
DIRECTOR		x						0.	0.	0.	
(17) NINA ODELL	1.00						Γ				
DIRECTOR		X]				1	0.	<u> </u>	0.	

Page 8

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees/	, an	d Hi	ighe	st (Compensated Employe	es (continued)				
(A)	(B)								(F)				
Name and title	Average	Position (do not check more than one					one	Reportable	Reportable		Es	tımate	eď
	hours per	box	, unle	ss pe	erson	is bot	h an	compensation	compensation	İ	am	nount	of
	week		cer an	id a d	irecto	or/trus	tee)	from	from related			other	
	(list any hours for	recto						the	organizations			pensa	
	related	100	ee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC	"		om the anızatı	
	organizations	Individual trustee or director	l trus		8	ubeu		(VV-2/1099-WIISC)			_	d relat	
	below	duat	uton	27	l ogdi	stco	ູ້					ınızatı	
	line)	Indiv	Institutional	Officer	Кеу етріоуее	Highest compensated employee	Former				_		
(18) KIM MARTIN	1.00												
DIRECTOR		X		<u> </u>				0.		0.			0.
(19) STEVE MULLIN	1.00									\Box			
DIRECTOR		X					L	0.		0.			0.
(20) SKIP ROWLEY	1.00												
DIRECTOR		X				L		0.		0.	·		0.
(21) KRISTEN SAWIN	1.00							_		_			_
DIRECTOR		Х	Ш		_			0.		0.			0.
(22) BRUCE SMITH	1.00	:											_
DIRECTOR		Х	L		_	_		0.		0.			0.
(23) ROB STEWART	2.00												_
DIRECTOR	1.20	Х			_	ļ.,		0.		0.			0.
(24) DAVE SWARTLEY	1.00									_			_
DIRECTOR	4 00	Х	Щ		<u> </u>			0.	1	0.			0.
(25) JAN TEAGUE	1.00	,,								ا ۲			_
DIRECTOR PARTY PARTY	30 00	Х	Щ		<u> </u>	ļ		0.		0 •			0.
(26) MICHAEL DAVIS	38.00			37				106 050		ا ۸	2		2.0
PRESIDENT AND CEO	2.00	<u> </u>	Ш	X	L		Ļ_	126,250.		<u>0</u> •		$\frac{4}{4}, \frac{1}{4}$	
1b Sub-total								126,250. 109,165.		0.		$\frac{4}{2}, \frac{1}{3}$	36.
c Total from continuation sheets to Part VI	I, Section A							235,415.		$\frac{0.1}{0.1}$		$\frac{2}{6}, \frac{3}{4}$	
d Total (add lines 1b and 1c)2 Total number of individuals (including but n			link.		<u> </u>							J , 4	40.
compensation from the organization	of limited to tr	iose	iiste	ea ai	DOVE	e) wr	10 r	eceived more than \$100	,000 of reportable				1
compensation from the organization											— Т	Yes	No
3 Did the organization list any former officer,	director or tri	istad	ما د	v er	nnlo	.VAA	or	highest compensated a	mployee on	Г	\dashv		
line 1a? If "Yes," complete Schedule J for s			5, KG	y Ci	пріс	усс,	. 01	riigilest compensated e	Inployee on	l	3	ŀ	Ŷ.
4 For any individual listed on line 1a, is the su			mn	ensa	ation	and	i ot	her compensation from	the organization	┢	" 		
and related organizations greater than \$15									and organization	ĺ	4	x	
5 Did any person listed on line 1a receive or a									dual for services	_	一		
rendered to the organization? If "Yes," com										1	5		X
Section B. Independent Contractors													
1 Complete this table for your five highest co	mpensated inc	depe	ende	nt c	ontr	racto	rs t	that received more than	\$100,000 of comp	ensa	tion f	rom	
the organization. Report compensation for	the calendar y	ear e	endii	ng v	vith	or w	ıthır	n the organization's tax	year				
(A)								(B)			(C		
Name and business	address	NO	DNE	<u> </u>			_	Description of s	ervices		mper	nsatio	n
							4						
	- · · · · - · - · · · · · · · · · · · ·				-		\dashv						
									•				
				-			ᅥ						
							7						
2 Total number of independent contractors (i	ncluding but n	ot li	mite	d to	tho	se lis	stec	d above) who received m	nore than				

\$100,000 of compensation from the organization ► 0
SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2013)

ENTERPRISE WASHINGTON 68-0670355 Form 990 (2013) Page 9 Statement of Revenue Part VIII Check if Schedule O contains a response or note to any line in this Part VIII Revenue excluded from tax under sections 512 - 514 (C) Unrelated Related or Total revenue exempt function business revenue revenue 1 a Federated campaigns 399,400. b Membership dues 1b 1c c Fundraising events 1d d Related organizations e Government grants (contributions) 1e All other contributions, gifts, grants, and 13,034. similar amounts not included above 1f g Noncash contributions included in lines 1a-1f \$ 412,434 h Total. Add lines 1a-1f **Business Code** Program Service Revenue 2 a f All other program service revenue Total. Add lines 2a-2f Investment income (including dividends, interest, and 84 84. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (II) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Revenue including \$ contributions reported on line 1c). See Other / Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 11 a d All other revenue Total. Add lines 11a 11d

Total revenue. See instructions

412,518.

Form 990 (2013) ENTERPRISE WAS Part IX Statement of Functional Expenses

Section	ection 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX										
	not include amounts reported on lines 6b,	(A)	(B) Program service	(C)	(D)						
	Bb, 9b, and 10b of Part VIII	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses						
1	Grants and other assistance to governments and										
	organizations in the United States. See Part IV, line 21										
2	Grants and other assistance to individuals in			Visco Al							
	the United States. See Part IV, line 22				* 👸 - ' ` ` ` ` `						
3	Grants and other assistance to governments,										
	organizations, and individuals outside the			2 8 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2							
	United States See Part IV, lines 15 and 16		·	J. J. S. S. S. S. S. S. S. S. S. S. S. S. S.	3 33						
4	Benefits paid to or for members		·		* 2 824						
5	Compensation of current officers, directors,	226 700									
	trustees, and key employees	236,798.	<u> </u>								
6	Compensation not included above, to disqualified										
	persons (as defined under section 4958(f)(1)) and										
_	persons described in section 4958(c)(3)(B)	16,625.	·	1							
7	Other salaries and wages	10,025.		 							
8	Pension plan accruals and contributions (include										
_	section 401(k) and 403(b) employer contributions)										
9	Other employee benefits	20,472.		-							
10	Payroll taxes	20,472									
11	Fees for services (non-employees):										
	Management Legal	9,868.									
	Accounting	26,153.									
	Lobbying			-							
e	Professional fundraising services. See Part IV, line 17		.: 4:# 9:!5	10000							
f	Investment management fees		201 802 88 2 43 1	7.00							
q	Other. (If line 11g amount exceeds 10% of line 25,										
J	column (A) amount, list line 11g expenses on Sch O.)	54,769.									
12	Advertising and promotion	1,050.									
13	Office expenses	20,463.									
14	Information technology	7,184.									
15	Royalties		_								
16	Occupancy	21,896.									
17	Travel	8,467.									
18	Payments of travel or entertainment expenses	!									
	for any federal, state, or local public officials										
19	Conferences, conventions, and meetings	2,240.	····								
20	Interest										
21	Payments to affiliates	2 252			 						
22	Depreciation, depletion, and amortization	2,352.			<u> </u>						
23	Insurance		X/8° X ** **	/ · / / * * * * * * * * * * * * * * * *	2 8 2 8 3						
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line	. %.									
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)										
а	DIRECT MAIL/E-MEDIA	19,535.	26 x 8 x 4 8 x 4 8 x 4 x 4 x 4 x 4 x 4 x 4	3 * 2 * 4	*						
a h	ANNUAL EVENT EXPENSES	16,688.									
	RELATED ENTITIES REIMB	-26,755.		1							
d		==,,,,,,,,		<u> </u>							
	All other expenses										
25	Total functional expenses. Add lines 1 through 24e	437,805.									
26	Joint costs. Complete this line only if the organization	<u> </u>									
	reported in column (B) joint costs from a combined										
	educational campaign and fundraising solicitation.		1	1							
	Check here If following SOP 98-2 (ASC 958-720)										

Pai	πx	Balance Sneet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	21,831.	1	40,052.
	2	Savings and temporary cash investments	139,237.	2	61,818.
	3	Pledges and grants receivable, net		3	10-030
	4	Accounts receivable, net		4	18,932.
	5	Loans and other receivables from current and former officers, directors,	*		•
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined un			, ,
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contribu	ting \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		,
		employers and sponsoring organizations of section 501(c)(9) voluntary	white we have the second by the		\$ 6 da 4.8
Assets		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
SS	7	Notes and loans receivable, net		7	
•	8	Inventories for sale or use .		8	0 011
	9	Prepaid expenses and deferred charges		9	2,211.
	10a	Land, buildings, and equipment cost or other	₹ 0		•
		basis. Complete Part VI of Schedule D			
		Less: accumulated depreciation 10b		10c	
	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	161 060	15	122 012
	16	Total assets. Add lines 1 through 15 (must equal line 34)	161,068.	16	123,013.
	17	Accounts payable and accrued expenses	3,107.	17	0,943.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees			·**
Ē		key employees, highest compensated employees, and disqualified persons			
Lia		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24 25	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	-2,309.	25	15,527.
	26	Total liabilities. Add lines 17 through 25	798.	26	22,470.
	20		nd ;	1	1.3 4
s,		complete lines 27 through 29, and lines 33 and 34.	· /	``	, · ·
e)Ce	27	Unrestricted net assets	programme of the second	27	and the second of the second o
<u>aa</u>	28	Temporarily restricted net assets		28	
ĕ	29	Permanently restricted net assets		29	
Ĕ	23	Organizations that do not follow SFAS 117 (ASC 958), check here	₹ 7	23	
F		and complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds	0.	30	0.
sse	31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
ţ	32	Retained earnings, endowment, accumulated income, or other funds	160,270.	32	100,543.
Š	33	Total net assets or fund balances	160,270.	33	100,543.
	34	Total liabilities and net assets/fund balances	161,068.	34	123,013.
	1 4.1	. State made and the address rates balantoos			Form 990 (2013)

	990 (2013) ENTERPRISE WASHINGTON	_68-	<u>-0670355</u>	Pa	<u>ge 12</u>	
Pa	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	41	2,5	18.	
2	Total expenses (must equal Part IX, column (A), line 25)	2			05.	
3	Revenue less expenses Subtract line 2 from line 1	3		-25,287		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	16	0,2	70.	
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	- 3	4, 4		
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	10	0,5	43.	
Pa	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII				X	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule		[Yes	No	
22	Were the organization's financial statements compiled or reviewed by an independent accountant?	0.	2a	-	x̄ ¯	
20	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a	<u>-==</u> -		† -	
	separate basis, consolidated basis, or both		ŀ			
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2b	X		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis	,			
	consolidated basis, or both:				,	
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt	,	_		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	<u> </u>	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule (D.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle A u	ıdıt			
	Act and OMB Circular A-133?		3a		Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au			1	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		<u> </u>	

Form **990** (2013)

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

➤ See separate instructions. ➤ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

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

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

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) organiza	ations: Complete Part III.			
Nan	ne of organization			Emple	oyer identification number
		RISE WASHINGTON			68-0670355
Pa	art I-A Complete if the or	ganization is exempt und	der section 501(c) o	or is a section 527 o	rganization.
2	Provide a description of the organi Political expenditures Volunteer hours	zation's direct and indirect politi	cal campaign activities in		
Pa	art I-B Complete if the or	ganization is exempt und	der section 501(c)(3).	
	Enter the amount of any excise tax			▶ \$	
	Enter the amount of any excise tax	•		▶\$	
	If the organization incurred a section				Yes No
	a Was a correction made?		•		Yes No
t	o If "Yes," describe in Part IV.			,	
Pa	art I-C Complete if the or	ganization is exempt und	der section 501(c), o	except section 501(c)(3).
1	Enter the amount directly expende	ed by the filing organization for se	ection 527 exempt function	on activities >\$	
2	Enter the amount of the filing organ	nization's funds contributed to o	ther organizations for sec	tion 527	
	exempt function activities			▶ \$	
3	Total exempt function expenditure	s. Add lines 1 and 2. Enter here	and on Form 1120-POL,		
	line 17b			▶\$	
	Did the filing organization file Form Enter the names, addresses and e made payments For each organiza contributions received that were p political action committee (PAC) If	mployer identification number (E ation listed, enter the amount pa romptly and directly delivered to	id from the filing organiza a separate political organ	tion's funds. Also enter th nization, such as a separa	e amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
JO	BSPAC	BELLEVUE, WA 98004	26-2349466	0.	2,500.

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

SEE PART IV FOR CONTINUATION

Schedule C (Form 990 or 990-EZ) 2013

LHA

Schedule C (Form 990 or 990-EZ) 2013	ENTERPRISE	WASHINGTON		68-0	670355 Page 2
Part II-A Complete if the or	ganization is ex	empt under section	on 501(c)(3) and fi	led Form 5768	
(election under sec	ction 501(h)).				
A Check ▶ ☐ If the filing organiza	ation belongs to an a	iffiliated group (and list i	n Part IV each affiliated	group member's nam	ne, address, EIN,
	are of excess lobbyin		·		
B Check ▶ if the filing organiza	ation checked box A	and "limited control" pr	ovisions apply.		
Lim	its on Lobbying Exp	nenditures		(a) Filing	(b) Affiliated group
		ounts paid or incurred	.)	organization's	totals
				totals	
1a Total lobbying expenditures to infl	luence public opinio	n (grass roots lobbying)			
b Total lobbying expenditures to infl	luence a legislative b	ody (direct lobbying)			
c Total lobbying expenditures (add	lines 1a and 1b)				
d Other exempt purpose expenditure	res				
 Total exempt purpose expenditure 	es (add lines 1c and	1d)			
f Lobbying nontaxable amount. Ent	er the amount from	the following table in bo	th columns.		
If the amount on line 1e, column (a)	or (b) is: The le	obbying nontaxable am	ount is:	, ,	4 10
Not over \$500,000	20%	of the amount on line 1e	•	MARK DELLA	
Over \$500,000 but not over \$1,00	0,000 \$100,	000 plus 15% of the ex	cess over \$500,000		
Over \$1,000,000 but not over \$1,5	500,000 \$175,	000 plus 10% of the ex	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000 \$225,	000 plus 5% of the exce	ess over \$1,500,000.	14 Ki 14	l "Alleri
Over \$17,000,000	\$1,00	0,000.			
g Grassroots nontaxable amount (er	nter 25% of line 1f)				
h Subtract line 1g from line 1a. If zei	·				
Subtract line 1f from line 1c. If zer					
j If there is an amount other than ze	ero on either line 1h	or line 1i, did the organiz	ation file Form 4720	_	
reporting section 4911 tax for this	year?			L	Yes No
		veraging Period Under	` '		
		section 501(h) election the instructions for line			
				age 4. <i>)</i>	
	Lobbying Exp	enditures During 4-Ye	ar Averaging Period		
Calendar year	(a) 2010	/b) 2011	(=) 2012	(4) 2012	(a) T-+-1
(or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
	 				
2a Labburg pantavahla amaust					
2a Lobbying nontaxable amount	# 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1	31.	84 X v /	*;	
 b Lobbying ceiling amount (150% of line 2a, column(e)) 				·	
(130% of lifte 2a, coldifit(e))	* * * * * * * * * * * * * * * * * * * *	(1 %) (h	. * * * * * * * * * * * * * * * * * * *		
- Total labburas averageturas					
c Total lobbying expenditures					
d Graceroote pontavable amount					
d Grassroots nontaxable amount e Grassroots ceiling amount	1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, f (* * , \$ (*)		
(150% of line 2d, column (e))		and the state of t			
(100% of line 2d, coldifilitie))	, '% #,	· · · · · · · · · · · · · · · · · · ·	* * * * * * * * * * * * * * * * * * * *	1	
f Grassroots lobbying expenditures					
CADCIOCIO IODO JING CADCINGITUIES	1		1	I	L

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013 ENTERPRISE WASHINGTON 68-067035 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(8	a)	(t))
of the lobbying activity	Yes	No	Amo	
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	,	**************************************		4
 a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? 			***	÷.
c Media advertisements?				
d Mailings to members, legislators, or the public?			_	
Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes?	-			
5				
g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	<u> </u>			
Other activities?				
j Total Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			1	, ,
b If "Yes," enter the amount of any tax incurred under section 4912			*	`
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912		,		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	 			
Part III-A Complete if the organization is exempt under section 501(c)(4), so 501(c)(6).	ection 501(c)	(5), or se	ection	
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		Х
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		X
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answer answered "Yes." 1 Dues, assessments and similar amounts from members	ered "No," Ol	R (b) Par		ne 3, is
 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of p 	nolitical	<u> </u>		,
expenses for which the section 527(f) tax was paid).	Jontioui			
a Current year		2a		
b Carryover from last year		2b		-
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due	26	3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying				
expenditure next year?		4		
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
Part IV Supplemental Information				
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated	group list); Part I	I-A, line 2, a	ınd Part II-E	I, line 1.
Also, complete this part for any additional information.				
PART I-C CONTINUATION FOR INCOMPLETE NAME/ADDRESS	INFORMAT	ION:		
JOBSPAC		<u></u>	_ _	
1603 116TH AVE NE, STE 120 BELLEVUE, WA 98004				
			 	

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.us.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

ENTERPRISE WASHINGTON

Employer identification number 68-0670355

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, Iin		·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds
	are the organization's property, subject to the organization's	-	Yes No
6	Did the organization inform all grantees, donors, and donor a	•	
	for charitable purposes and not for the benefit of the donor of		_
	impermissible private benefit?	, , , , , , , , , , , , , , , , , , , ,	Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Pa	
1	Purpose(s) of conservation easements held by the organizat	**	
	Preservation of land for public use (e.g., recreation or e		orically important land area
	Protection of natural habitat	Preservation of a certif	•
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form o	of a conservation easement on the last
	day of the tax year.		
	•		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c
	Number of conservation easements included in (c) acquired	` '	re
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	
	year▶		
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		ring the year
7	Amount of expenses incurred in monitoring, inspecting, and	_	
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?	, , ,	Yes No
9	In Part XIII, describe how the organization reports conservati	ion easements in its revenue and expense	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza		
	conservation easements.		•
Pai	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Ot	her Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue statem	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public ext	hibition, education, or research in furtheran	ice of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	ibes these items	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e		
	relating to these items	•	•
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial	
	the following amounts required to be reported under SFAS 1		<u> </u>
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		\$
	•		·

		<u>ISE WASHIN</u>						<u>68-06</u>			age 2
Par	t III Organizations Maintaining C	ollections of A	rt, His	torical Tr	easures, c	or Oth	<u>er Sim</u>	ilar Asse	ts(contil	าued)	
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following tha	it are a s	significar	nt use of its	collectio	n item	ıs
	(check all that apply):										
а	Public exhibition	C	: <u> </u>	Loan or exc	hange progra	ams					
b	Scholarly research	6	, 🗀	Other				<u> </u>			
C	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ın how th	ney further t	he organizati	on's exe	empt pui	pose in Pa	rt XIII.		
5	During the year, did the organization solicit of	r receive donations	of art, h	stoncal trea	sures, or oth	er sımıla	ır assets		_	_	_
	to be sold to raise funds rather than to be m								Yes		<u>No</u>
Par	t IV Escrow and Custodial Arran		ete if the	organizatio	n answered '	"Yes" to	Form 9	90, Part IV,	line 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod	ian or other interme	diary for	contribution	s or other as	sets no	t include	ed	_		٦.
	on Form 990, Part X?								_ Yes		J No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table:							
									Amoun	<u>t </u>	
	Beginning balance						1c				
	Additions during the year						1d				
_	Distributions during the year						1e				
f O-	Ending balance	000 David V line	. 010				1f		Yes	\neg	No
	Did the organization include an amount on F	•			provided in I	Dark VIII			_ res		
Par	t V Endowment Funds. Complete in										
	Eridovinion: Landor Complete	(a) Current year		Prior year	(c) Two year			e years back	(e) Four	vears	back
1a	Beginning of year balance	(a) Current year	(5)	noi yeai	(6) 1110 300	D Dudit	(u) ime	o your o buon	1 (6) . 55.	you.o	5251
	Contributions								 		
	Net investment earnings, gains, and losses							•	t		-
d	Grants or scholarships										
	Other expenditures for facilities										
_	and programs										
f	Administrative expenses										
g	End of year balance	-									
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	g, column (a	a)) held as:						
а	Board designated or quasi-endowment		%								
b	Permanent endowment >	%									
c	Temporarily restricted endowment ▶	%									
	The percentages in lines 2a, 2b, and 2c should	uld equal 100%.									
За	Are there endowment funds not in the posse	ession of the organiz	ation th	at are held a	ınd admınıste	ered for	the orga	nızatıon	ī		
	pà.									Yes	No
	(i) unrelated organizations								3a(i)		_
	(ii) related organizations								3a(ii)		_
þ	If "Yes" to 3a(II), are the related organization	•							3b		l
4	Describe in Part XIII the intended uses of the		owment	funds							
Pai	t VI Land, Buildings, and Equipn						,				
	Complete if the organization answere			i –							
	Description of property	(a) Cost or on the basis (investigation)			or other (other)		ccumul:	1	(d) Boo	k valu	е
		Dasis (invest	ment)	Dasis	(otrier)	ue-	preciati	-			
	Land			 				-			
	Buildings	-		 							
c C	Leasehold improvements			 				 -			
d	• •		· · · · ·								
_	Other I. Add lines 1a through 1e (Column (d) must e	equal Form 990 Part	t X colu	mn (R) line 1	10(c).)						0.
	in the most ta an eagin to to land to the		, , , , , , , , , , , , , ,	···· <u>1-7, 11:10 </u>	-17/7						

Schedule D (Form 990) 2013

Schedule D (Form 990) 2013 ENTERPRISE	E WASHINGTON		68-0670355 Page:
Part VII Investments - Other Securities.			
Complete if the organization answered "Ye	es" to Form 990, Part IV, line	11b. See Form 990, Part X, line	12.
(a) Description of security or category (including name of security	y) (b) Book value	(c) Method of valuation: 0	Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
<u>(F)</u>		-	
(G)			.
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		<u> </u>	· · · · · · · · · · · · · · · · · · ·
Part VIII Investments - Program Related.			40
Complete if the organization answered "Ye (a) Description of investment	(b) Book value		e 13 Cost or end-of-year market value
	(b) Book value	(c) Method of Valdation: C	oost of end-or-year market value
(1)	-		
(2)			
(3)			
(5)			
(6)		· · ·	
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	>	*	
Part IX Other Assets.	· · · · · · · · · · · · · · · · · · ·		
Complete if the organization answered "Ye	es" to Form 990, Part IV, line	11d See Form 990, Part X, line	e 15
	(a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)		<u> </u>	
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities.		· · · · · · · · · · · · · · · · · · ·	>
Complete if the organization answered "Ye	es" to Form 990, Part IV, line		t X, line 25
1. (a) Description of liability		(b) Book value **	
(1) Federal income taxes		, ,	**
(2) DUE TO RELATED ENTITY	,	15,527.	
(3)			
(4)		·	
(5)			
(6)		· · · · · · · · · · · · · · · · · · ·	* * * * * * * * * * * * * * * * * * * *

15,527. Total. (Column (b) must equal Form 990, Part X, col (B) line 25) \blacktriangleright 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

(8) (9)

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990. ➤ See separate instructions.

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

Open to Public Inspection

Name of the organization

ENTERPRISE WASHINGTON

Employer identification number 68-0670355

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,		<i>5</i> *	
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use		*,	
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees		uniform.	
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
		ν,		
b	If any of the boxes on 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 directors,			
_	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		-
	trustices, and officers, including the OLO/Exceditive birector, regarding the items officered in the fat:			
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
٠				
	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. X Compensation committee X Written employment contract	3,3	4.	
				l '
				ν,
	Form 990 of other organizations X Approval by the board or compensation committee			•
		. 43	,	
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing	18		
	organization or a related organization.		x	
а	Receive a severance payment or change-of-control payment?	4a		
þ	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			'
		1 St.	,	
	Only section 501(c)(3) and 501(c)(4) organizations 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 compensation			•
	contingent on the revenues of:			
а	The organization?	5a		
b	Any related organization?	5b	_	<u> </u>
	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		
b	Any related organization?	6b		
	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	١.		
	not described in lines 5 and 6? If "Yes," describe in Part III	7		<u> </u>
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	[I
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2013

68-0670355

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)(1-(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.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
(A) Name and Title	_!	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(D)·(I)(B)	reported as deferred in prior Form 990
(1) MICHAEL DAVIS	Ξ	106,250.	20,000.	0.	2,813.	21,323.	150,386.	0
PRESIDENT AND CEO	€	0	0	0	0	0	0	
	Ξ							
	€							
	Ξ							
	(ii)							
	(1)							
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332112 09-13-13				30			Sched	Schedule J (Form 990) 2013

68-0670355

Schedule J (Form 990) 2013 ENTERPRISE WASHINGTON	68-0670355	Page 3.
rmation))))
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.	his part for any additional information.	
PART I, LINE 3:		
CEO AND SENIOR STAFF COMPENSATION IS DETERMINED BY THE BOARD		
IN CONSULTATION WITH A PROFESSIONAL RECRUITER AND DOCUMENTED IN A WRITTEN		
CONTRACT.		
PART I, LINE 4A:		
DURING 2013 THE FORMER PRESIDENT AND CEO, ERIN MCCALLUM,		
RECEIVED A SEVERANCE PACKAGE TOTALING \$36,923.		

31

Schedule J (Form 990) 2013

SCHEDULE O

(Form 990 or 990-EZ)

Name of the organization

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 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No 1545-0047 Open to Public Inspection

ENTERPRISE WASHINGTON

Employer identification number 68-0670355

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ENTERPRISE WASHINGTON EMPOWERS ITS MEMBERS TO EFFECTIVELY ENGAGE IN
PUBLIC AFFAIRS AND THE POLITICAL PROCESS. ENTERPRISE WASHINGTON
PROVIDES ITS BUSINESSES AND ASSOCIATION MEMBERS WITH LEADING-EDGE
RESEARCH AND STRATEGIES TO LEVERAGE THEIR POLITICAL RESOURCES AND
MAXIMIZE THEIR IMPACT UPON THE LEGISLATIVE PROCESS, AND IT ACTIVELY
SEEKS TO FOSTER BUSINESS-MINDED LEGISLATURES IN THE STATE OF
WASHINGTON.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ENTERPRISE WASHINGTON EMPOWERS ITS MEMBERS TO EFFECTIVELY ENGAGE IN
PUBLIC AFFAIRS AND THE POLITICAL PROCESS. ENTERPRISE WASHINGTON
PROVIDES ITS BUSINESSES AND ASSOCIATION MEMBERS WITH LEADING-EDGE
RESEARCH AND STRATEGIES TO LEVERAGE THEIR POLITICAL RESOURCES AND
MAXIMIZE THEIR IMPACT UPON THE LEGISLATIVE PROCESS, AND IT ACTIVELY
SEEKS TO FOSTER BUSINESS-MINDED LEGISLATURES IN THE STATE OF
WASHINGTON.
FORM 990, PART VI, SECTION A, LINE 6:
ENTERPRISE WASHINGTON IS A MEMBERSHIP ORGANIZATION OPEN TO ALL
THOSE WHO WISH TO SUPPORT ITS MISSION.
FORM 990, PART VI, SECTION A, LINE 7A:
THE MEMBERS OF ENTERPRISE WASHINGTON ELECT THE BOARD AT THE
ANNUAL MEETING.

Name of the organization ENTERPRISE WASHINGTON	Employer identification number 68-0670355
FORM 990, PART VI, SECTION B, LINE 11:	
THE BOARD REVIEWED THE AMENDED FORM 990 BEFORE IT WAS FIL	ED.
FORM 990, PART VI, SECTION B, LINE 12C:	
OFFICERS AND DIRECTORS ARE REQUIRED TO DISCLOSE CONFLICTS	OF
INTEREST AT LEAST ANNUALLY.	
FORM 990, PART VI, SECTION B, LINE 15:	
CEO AND SENIOR STAFF COMPENSATION IS DETERMINED BY THE BOX	ARD
IN CONSULTATION WITH A PROFESSIONAL RECRUITER.	
FORM 990, PART VI, SECTION C, LINE 19:	
GOVERNING DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUI	EST.
FORM 990, PART IX, LINE 11G, OTHER FEES:	
RESEARCH	19,472.
FIELD WORKERS	35,297.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	54,769.
FORM 990, PART XII, LINE 2C:	
IN 2014, THE ORGANIZATION'S BOARD ENGAGED AN INDEPENDENT	
AUDITOR TO PERFORM AN INITIAL AUDIT OF THE 2013 AND 2014	FINANCIAL
STATEMENTS, WHICH WERE PREPARED ON THE 990 BASIS OF ACCOUNT	NTING.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

► See separate instructions.

2013

Open to Public Inspection

Employer identification number 68-0670355 Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990 Part I ? Identification of Disregarded Entities Complete If the organization answered "Yes" on Form 990, Part IV, line 33 ENTERPRISE WASHINGTON Name of the organization

(a)	(q)	(2)	(p)	(e)	(j)
Name, address, and EIN (if applicable)	Primary activity	Legal domicile (state or	Total income	End-of-year assets	Direct controlling
of disregarded entity		foreign country)			eniny
toward for the first and the following the following and the following and the following the following and the following the fol	and another and and and another and		Support No and Min	or orom to one bod to	otol tox oxomet

Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Part II

oontrolled entity?
Direct controlling entity
Public charity status (if section 501(c)(3))
Exempt Code section
Legal domicile (state or foreign country)
Primary activity SUPPORT EFFORTS TO ELECT BUSINESS-MINDED CANDIDATES
Name, address, and EIN of related organization JOBSPAC - 26-2349466 1603 116TH AVE NE, STE 120

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

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Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

General or Percentage managing ownership Schedule R (Form 990) 2013 Yes Section 512(b)(13) controlled entity? Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. 3 Percentage ownership Yes No 3 Ξ Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets Disproportionate Yes allocations? Ξ Share of total income Share of end-of-year assets <u>6</u> Type of entity (C corp, S corp, or trust) <u>e</u> Share of total income (d)
Direct controlling
entity Predominant income (related, unrelated, excluded from tax under sections 512-514) **e** Legal domicile (state or foreign country) (d)
| Direct controlling entity Primary activity Legal domicile (state or foreign country) Primary activity <u>e</u> Name, address, and EIN of related organization Name, address, and EIN of related organization <u>a</u> 332162 09-12-13 Part IV

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Part V. Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes No	ŝ
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ns with one or more r	elated organizations listec	I in Parts II-IV?		** **
a Receipt of (i) interest (ii) annurties (iii) royalties or (iv) rent from a controlled entity				1a	×
 b Gift, grant, or capital contribution to related organization(s) 				1p	×
c Gift, grant, or capital contribution from related organization(s)				10	×
d Loans or loan guarantees to or for related organization(s)				1d	×
e Loans or loan guarantees by related organization(s)				1e	×
f Dividends from related organization(s)				+	×
g Sale of assets to related organization(s)				₽	×
				2 =	×
i Exchange of assets with related organization(s)				i i=	×
j Lease of facilities, equipment, or other assets to related organization(s)				;=	×
(a) months and the second of t					`>
	anization(s)			×	4
	ariizatiori(s)			+	>
m Performance of services or membership or rundraising solicitations by related organization(s)	anization(s)			E ;	4
	(8)			+	
 Sharing of paid employees with related organization(s) 				۲ ۲	
				* ***********************************	Charge C
				د م	
q Reimbursement paid by related organization(s) for expenses				1q X	1
r Other transfer of cash or property to related organization(s)				**************************************	×
				18	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete the	nis line, including covered	relationships and transaction thresholds		
ĺ	(g)	(c)	(P)		
Name of related organization	Transaction type (a-s)	Amount involved	Method of determining amount involved	olved	
(E)		: 1			
(3)				İ	
(4)					
(5)					
•					
(9)	3.6			!	
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Part VI: Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

that was not a related organization See instructions regarding exclusion for certain investment partnerships	structions regarding exclusion	Sion for certain inve	estment partnersnips	}				;		
(e)	(q)		(a)	(e)	E		Ξ	(E)	3 	¥ .
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	redominant income part (related, unrelated, 50 excluded from tax	6 partners sec 501(c)(3) 01057	Share of total	Share of end-of-year	Dispropor tionate allocations?	amount in box 20 managing ownership	General or managing partner?	Percentage ownership
		country)	under section 512-514) Ye	Yes No	ıncome	assets	Yes No	(Form 1065)	Yes No	
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Part VII Supplemental Information	
Provide additional information for responses to questions on Schedule R (see instructions)	
	
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