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Return of Organization Exempt From Income Tax

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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.

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

Open to Public Inspection

_	FOR THE 2		endar year, or tax year beginning , 2013, and ending	1		, 20	
В	Check if ap	plicable	C Name of organization Willamette Valley Law Project		D Empl	loyer identification r	number
	Address cl		Doing Business As			93-0687718	
	Name chai	-	Number and street (or P O box if mail is not delivered to street address) Room/suit	te	E Telep	hone number	
	Initial retur	n	300 Young St.			503-781-1132	
	Terminated	i	City or town, state or province, country, and ZIP or foreign postal code				
	Amended	return	Woodburn, OR 97071		G Gross	s receipts \$	280,730
	Application			H(a) Is this a c	roup return	for subordinates? Ye	
			901 8th Ave., #705, Seattle, WA 98104			ates included? Te	
	Tax-exemp	nt status	✓ 501(c)(3)			ch a list. (see instructi	
j	Website:			H(c) Group	exempti	ion number ▶	
ĸ			✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formation			ate of legal domicile	OR
	art I	Summ		1377	1		<u> </u>
			escribe the organization's mission or most significant activities: Research	ch and educ	ation re	egarding issues a	end
ø			is affecting low-income persons working in agriculture and related sectors.			30.0	
Activities & Governance	ی ا	Ondidon	is directing low-income persons working in agriculture and related sectors.				
Ê	2 0	heck th	is box ▶ ☐ if the organization discontinued its operations or disposed o	f more than	25%	of its not assets	
8			of voting members of the governing body (Part VI, line 1a)	i illole tilal	3	1	•
	E .		of independent voting members of the governing body (Part VI, line 1b)		4	 -	4
es			mber of individuals employed in calendar year 2013 (Part V, line 2a)		5		4
Š	1		/ -		6		0
늏			mber of volunteers (estimate if necessary)		<u> </u>		200
•			related business revenue from Part VIII, column (C), line 12		78		0
-	b N	iet unre	lated business taxable income from Form 990-T, line 34	Prior Y	7t	Current Y	0
<i>y,)</i>	, ,		A (D - A VIII C - 4 L)	PHOI 1			
<u>`</u>			tions and grants (Rart VIII, line 1h)		834,85	59	277,424
Revenue C			service revenue (Part VIII, line 2g)				
E			ent income (Part VIII, column (A); lines 3, 4, and 7d)		1,36		2,276
Ţ	11 0	other rev	ventue (Parx XIII, 2co) uran (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,13	32	1,030
- P			enue add lines 8 through 11 Must equal Part VIII, column (A), line 12)		837,35	51	280,730
	13 6	arants a	nd similar amounts paid (Part IX, column (A), lines 1-3) paid to or for members (Part IX, column (A), line 4)		174,66	65	130,370
	14 E						
Expenses (15 S		other compensation, employee benefits (Part IX, column (A), lines 5-10)				
Z.	16a F	rofessio	onal fundraising fees (Part IX, column (A), line 11e)				
Ę	b T		draising expenses (Part IX, column (D), line 25) ▶	*		<i>"</i>	
- · · · ·	17		penses (Part IX, column (A), lines 11a-11d, 11f-24e)		285,84	42	293,842
			penses. Add lines 13-17 (must equal Part IX, column (A), line 25)		460,50	07	424,212
	19 F	Revenue	less expenses. Subtract line 18 from line 12		376,84		(143,482)
5 8	ĝ		E	Beginning of C	ırrent Ye	ar End of Y	ear
Net Assets	20 T	otal ass	sets (Part X, line 16)		1,563,18	82	1,419,700
₹.	21 T	otal liab	oilities (Part X, line 26)				
Ž	22 1	let asse	ts or fund balances. Subtract line 21 from line 20		1,563,18	82	1,419,700
Р	art II	Signat	ture Block				
			py I declare that I have examined this return, including accompanying schedules and stater			of my knowledge an	d belief, it is
tru	ie, correct, a	and comp	ete Declaration of preparer (other than officer) is based on all information of which preparer	has any know	ledge.		
		N _/			01/	W/14	
Si	gn	Spgn	ature of officer	Da	ıte /	7	
He	ere	\ _/·	MENN THAMPIS, PRESIDENT				
		Type	or print name and title		-		
P۶	aid	Print/Ty	pe preparer's name Preparer's signature Da	te	Chec	k 🗍 if PTIN	
	eparer					employed	
	se Only	Firm's n	name ►	Firr	n's EIN I	-	
U	e Only		address ▶		ne no		
Ma	y the IRS		s this return with the preparer shown above? (see instructions)			🗆 Ye	s 🗌 No
_			· · · · · · · · · · · · · · · · · · ·	o 11282Y			990 (2013)
			,				, /

Part			
1	Briefly describe the organization's n	s a response or note to any line in this Part III .	
-	•	sues and conditions affecting low-income persons wor	king in agriculture and related sectors.
2		significant program services during the year which	
3		acting, or make significant changes in how it co	
		0.1.1.0	· · · · · · · · · Yes 🗹 No
4	If "Yes," describe these changes on Describe the organization's program	n Schedule O. In service accomplishments for each of its three la	rgest program services, as measured b
	expenses. Section 501(c)(3) and 50	11(c)(4) organizations are required to report the amount, for each program service reported.	
4a	and attacked achieves	including grants of \$	
4b	(Code:) (Expenses \$	including grants of \$	_) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
			·····
4d	Other program services (Describe in (Expenses \$ includi	n Schedule O.) ing grants of \$) (Revenue \$	
4e	Total program service expenses	ing grants or ψ / (Nevenue ψ	

Part I	V 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	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	✓_	<u></u>
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		✓_
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	✓	<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			l
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	_		
_	Part III	5		├
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I			1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6_		+
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		/
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	- '-		 •
U	complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a	۳		+
J	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	ا ا		\vdash
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ļ	١,,
	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,"	ļ	»·	
==	complete Schedule D, Part VI	11a	1	L_
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	<u> </u>	1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	<u> </u>	✓
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets		1	_
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	ļ	√
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	 -	1
T	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)2 if "Yes " complete Schedule D. Part Y.			,
10 -	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		/
128	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	100		1
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	12a		
U	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	 	1
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	1	V
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	- 144		†
_	fundraising, business, investment, and program service activities outside the United States, or aggregate	ļ		
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
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		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	L	✓
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	<u></u>	✓
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		✓
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	<u> </u>	/
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	L	L _

Part	Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		Yes	No
22	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	√	
23	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
20	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
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		1
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		1
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	24d		1
b	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a 25b	-	1
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, complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
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):	,	4	
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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	35b 36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R</i> ,			
38	Part VI	37		1
	19? Note. All Form 990 filers are required to complete Schedule O	38	1	<u> </u>

Part				
	Check if Schedule O contains a response or note to any line in this Part V	·	Yes	No
10	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		res	NO
าa b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	1	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	*		
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0	1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	-	1
	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?	3a		1
þ	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, securities account, or other financial			
	account)?	4a		1
b	If "Yes," enter the name of the foreign country:			*
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c		V
c 6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	30		<u> </u>
Ju	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			Ť
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	, k, i		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		,	
	and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			١.
	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			1
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?. If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	1	\ <u> </u>
g h	If the organization received a contribution of qualified intellectual property, did the organization file 1 of 1000 as required:	7h	7	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	3,-	_	
-	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	说 。	, ,	
	organization, have excess business holdings at any time during the year?	8	h	✓
9	Sponsoring organizations maintaining donor advised funds.		2 %	
а	Did the organization make any taxable distributions under section 4966?	9a		1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		✓
10	Section 501(c)(7) organizations. Enter:	} < -		-
a	Initiation fees and capital contributions included on Part VIII, line 12	4		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]	, . (m.,		١.
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders	1	Ŷ	`
a b	Gross income from other sources (Do not net amounts due or paid to other sources	X Y		
_	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	, <u></u>	**	-
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1.		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	1
	Note. See the instructions for additional information the organization must report on Schedule O.	2,0		Π
b	Enter the amount of reserves the organization is required to maintain by the states in which	**,	-	
	the organization is licensed to issue qualified health plans] ,	1	
С	Enter the amount of reserves on hand	 		_
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓
h	If "Ves " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		1

Part \	Governance, Management, and Disclosure For each "Yes" response to lines 2 th	rough 7b below,	and i	or a	"No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change				
Casti	Check if Schedule O contains a response or note to any line in this Part VI		<u>· · · </u>		<u> </u>
Secu	on A. Governing Body and Management			Yes	No
12	Enter the number of voting members of the governing body at the end of the tax year	1a 4			
Iu	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	1b 4			
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		✓
3	Did the organization delegate control over management duties customarily performed by or				
	supervision of officers, directors, or trustees, or key employees to a management company or oth		3		✓_
4	Did the organization make any significant changes to its governing documents since the prior Form 9		4		✓
5	Did the organization become aware during the year of a significant diversion of the organization	on's assets?.	5		✓
6	Did the organization have members or stockholders?		6		✓
7a	Did the organization have members, stockholders, or other persons who had the power to one or more members of the governing body?		_		,
	one or more members of the governing body?		7a		✓
b	stockholders, or persons other than the governing body?	• •	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions up		70		
Ü	the year by the following:	idertaken danng			,
а	The governing body?		8a	1	
b	Each committee with authority to act on behalf of the governing body?		8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cann	ot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule (9		✓
Secti	on B. Policies (This Section B requests information about policies not required by the	ne Internal Reven	ue C	ode.)	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		✓_
b	If "Yes," did the organization have written policies and procedures governing the activities of				
4.4	affiliates, and branches to ensure their operations are consistent with the organization's exen		10b		<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of this Form 990 to all members of its governing body before the copy of t		11a	1	
b 40=	Describe in Schedule O the process, if any, used by the organization to review this Form 990	•	12a	-,	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	ve rise to conflicts?	12a 12b		
Ь			120	.	
С	Did the organization regularly and consistently monitor and enforce compliance with the describe in Schedule O how this was done.	policy: II res,	12c	1	
13	Did the organization have a written whistleblower policy?		13	1	
14	Did the organization have a written document retention and destruction policy?		14	1	
15	Did the process for determining compensation of the following persons include a review		*	,	
	independent persons, comparability data, and contemporaneous substantiation of the deliberatio				
а	The organization's CEO, Executive Director, or top management official		15a		✓
b	Other officers or key employees of the organization		15b		✓
	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 sim	nilar arrangement			-
_	with a taxable entity during the year?		16a	ļ	✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization		•		
	participation in joint venture arrangements under applicable federal tax law, and take steps organization's exempt status with respect to such arrangements?		ا م	-	
Secti	organization's exempt status with respect to such arrangements?	· · · · · ·	16b	l	L
<u>3ecu</u>	List the states with which a copy of this Form 990 is required to be filed ► Oregon				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990,	and 990-T (Section	501	(C)(3)e	OnkA
	available for public inspection. Indicate how you made these available. Check all that apply.	aa 000-1 (0601101	. 55 1	(3)(3)3	, orny)
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in So	chedule (O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing docum		erest	policy	v. and
	financial statements available to the public during the tax year.	,		,	, ,
20	State the name, physical address, and telephone number of the person who possesses the b	ooks and records	of the	9	
	organization: ► Larry Kleinman, 300 Young St., Woodburn, OR 97071		,		

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

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

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

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

☐ Check this box if neither the organization ne	or any relate	d org	aniz	atic	on c	ompe	nsa	ted any currer	nt officer, directo	r, or trustee.
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office or directo	unles er an	Pos neck ss pe	erson	e than the is both or/trus: employee	n an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Glenn Harris, President	.5			1				0	0	0
(2) Eli Jimenez, Vice President	.25			/				0		
(3) Marina Espinoza, Secretary-Treasurer	.25			/				0		
(4) Monica Smith, Board member (board service ended October 2012)	.25			İ			/	0		
(5) Theresa L. Wright, Board member	.25	1						0		
(6)	-							<u>_</u>		
(7)				-						
(8)				_						
(9)										
(10)	-									
(11)	-						-			
(12)		-								
(13)	-									
(14)	-									

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mplo <u>y</u>	<u>ees</u>	, ar	id H	ighes	it C	ompensated E	mployees (d	continued)
•	•				_ (C	-					
	. (A)	(B)	(do n	ot ch	Posi		than c	ne	(D)	(E)	(F)
	Name and title	Average	box, ι	ınles	s pe	rson	ıs both	an	Reportable	Reportable compensation	
		hours per week (list any	office	_		recto	or/trust	ee)	compensation from	related	other
		hours for	Indi or c	Institutional	Officer	Key employee	emp High	ξ	the	organizatio	
		related	direc	ut	cer	епт (hest	Former	organization	(W-2/1099-M	IISC) from the organization
		organizations below dotted	or all	ona		ιplo	8 8		(W-2/1099-MISC)		and related
		line)	Individual trustee or director	tru		yee	npe				organizations
			8	trustee			Highest compensated employee				
				,			8.				
(15)		 									
(16)											
(17)								<u> </u>			
					_			_			
(18)											
(19)											
(20)				_				_		-	
(21)				-	-		<u> </u>	 		,	
		†					<u></u>			<u></u>	
(22)		 	ł								
(23)											
(24)											
(05)				_	ļ	_		<u> </u>			
(25)											
1b	Sub-total							ightharpoons			
C	Total from continuation sheets to Part	VII, Section	n A								
d	Total (add lines 1b and 1c)							<u> </u>	<u> </u>	<u> </u>	
2	Total number of individuals (including bu reportable compensation from the organ		d to th	nose	e lis	ted	abov	e) w	vho received m	ore than \$1	00,000 of
											Yes No
3	Did the organization list any former of employee on line 1a? If "Yes," complete							emp	ployee, or higi	nest compe	ensated 3
	•									 	
4	For any individual listed on line 1a, is the organization and related organizations	e sum of re	poπa	DIE 150	CON	npe	nsauc F "Vo	on e	and other comp complete Sci	pensauon n hodulo I fo	
	individual	greater tr	an p	150	,000);	1 16	:S,	complete 30	ledule o ic	4
5	Did any person listed on line 1a receive of	 or accrile c	 omne	nea	tion	fro	man	r	related organi	zation or inc	
5	for services rendered to the organization										
Section	on B. Independent Contractors		.								
1	Complete this table for your five highest										
	compensation from the organization. Revear.	port compe	ensati	on f	or t	he c	alend	dar	year ending wi	th or within	the organization's tax
	(A)	<u> </u>						Τ	(B)	-	(C)
Dinoso	Name and business add s y Campesinos Unidos del Noroeste	aress						50	Description of eschedule, Pt.		Compensation 220,546
	Young St., Woodburn, OR 97071			_					o somedule, r ti	, ,, ,,	220,341
								F			
								+	·		
2	Total number of independent contractor received more than \$100,000 of compen							o tl	hose listed ab	ove) who	

Form **990** (2013)

Part	VIII	Check if Schedule O contains a response or note to	o any line in this	Part VIII		🗆
	•	, , ,	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ifts, Grants ir Amounts	1a b c	Federated campaigns 1a Membership dues 1b Fundraising events 1c Related organizations 1d	^ 4	* * *	**************************************	
Contributions, Giffs, Grants and Other Similar Amounts	e f	Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f: \$		\$ ¥	**************************************	, i
a Co	h	Total. Add lines 1a–1f ▶	277,424		/67 %	3
Program Service Revenue	2a b c	Business Code			3	τ2
rogram (e f g	All other program service revenue . Total. Add lines 2a–2f		* *	,	\$.m.c
	3	Investment income (including dividends, interest, and other similar amounts)	2,276			2,276
	5	Royalties	* *			
	6a b	Gross rents Less: rental expenses Rental income or (loss)				
	d 7a b	Net rental income or (loss)		* * * * * * * * * * * * * * * * * * * *		
	c	and sales expenses . Gain or (loss)	* 5,			»,
Other Revenue	8a					,
	b c 9a	Less: direct expenses b Net income or (loss) from fundraising events . Gross income from gaming activities. See Part IV, line 19	· · ·			2 t
	b c 10a	Less: direct expenses b Net income or (loss) from gaming activities ▶ Gross sales of inventory, less				A 1/2
	b c	returns and allowances a Less: cost of goods sold b Net income or (loss) from sales of inventory ▶				à
	11a b	Miscellaneous Revenue Business Code utility reimbursements & misc.	1,030	25° a	. 44 5 1	1,030
	d e	All other revenue	1,030	4.^	, * *	~
	12	Total revenue. See instructions ▶	280,370			3.306

rom 99					Fage 10
	IX Statement of Functional Expenses				
Sectio	n 501(c)(3) and 501(c)(4) organizations must con	plete all columns. A	III other organization	s must complete co	lumn (A).
	Check if Schedule O contains a respon	se or note to any lir	ne in this Part IX .		
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	130,370	130,370		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 10 11	Other employee benefits				
a b c d	Management		^ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Set to a set	
e f g	Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	245,111			
12 13 14	Advertising and promotion	8		8	
15 16 17	Royalties	20,505		20,505	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings . Interest	10		10	
21 22 23	Payments to affiliates	23,204 3,342		23,204 3,342	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column				
а	(A) amount, list line 24e expenses on Schedule O.) fees & misc.	1,662	500	1,162	* * *
b		1,002	300	.,102	
d	All other expenses				
25	All other expenses Total functional expenses. Add lines 1 through 24e	424,212	375,981	48,231	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720) if the only if the organization in the organization is the organization of the organization in the organization is the organization in the organization is the organization of the organization in the organization in the organization is the organization of the organization is the organization reported in column (B) joint costs from a combined educational campaign and fundamental camp				

Р	art X	Balance Sheet			·					
		Check if Schedule O contains a response or	note	to any line in this Pa	ırt X					
					(A) Beginning of year		(B) End of year			
	1	Cash - non-interest-bearing			182,981	1	156,120			
	2	Savings and temporary cash investments			798.480	2	627,196			
	3	Pledges and grants receivable, net				3				
	4	Accounts receivable, net				4				
	5	Loans and other receivables from current and trustees, key employees, and highest co-Complete Part II of Schedule L		* * 5)					
ts	6	Loans and other receivables from other disqualified pers 4958(f)(1)), persons described in section 4958(c)(3)(B), an sponsoring organizations of section 501(c)(9) volun organizations (see instructions). Complete Part II of Sche	nd con tary	tributing employers and employees' beneficiary		, * - 6	* * 1			
Assets	7	Notes and loans receivable, net				7				
As	8	Inventories for sale or use				8				
	9	Prepaid expenses and deferred charges				9				
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a							
	ь	Less: accumulated depreciation	10b		116,381	10c	636,384			
	11		Ь		110,301	11	030,384			
	12	Investments—other securities. See Part IV, line 1				12				
	13	Investments—program-related. See Part IV, line				13				
	14	Intangible assets				14				
	15	Other assets. See Part IV, line 11			465,340		"			
	16	Total assets. Add lines 1 through 15 (must equa			1,563,182		1,419,700			
	17	Accounts payable and accrued expenses			1,500,102	17	1,413,700			
	18	Grants payable		18						
	19	Deferred revenue	Deferred revenue							
	20	Tax-exempt bond liabilities				19 20				
	21	Escrow or custodial account liability. Complete F				21				
S)	22	Loans and other payables to current and for			S JONES WIND	Win.	2) 4 · · · ·			
Liabilities		trustees, key employees, highest compen								
豆		disqualified persons. Complete Part II of Schedu				22	Main 1 state 1			
Ë	23	Secured mortgages and notes payable to unrela	ted th	nird parties		23				
	24	Unsecured notes and loans payable to unrelated				24				
į	25	Other liabilities (including federal income tax, parties, and other liabilities not included on lines of Schedule D	payat 17-2	oles to related third (4). Complete Part X		25				
	26	Total liabilities. Add lines 17 through 25			0	26	0			
l sea		Organizations that follow SFAS 117 (ASC 958) complete lines 27 through 29, and lines 33 and	, che	ck here ▶ ☐ and		*				
a	27	Unrestricted net assets			SHE WAS AND A STATE OF THE STAT	27				
Ba	28	Temporarily restricted net assets				28				
פַ	29	Permanently restricted net assets				29	-			
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 95 complete lines 30 through 34.	8), ch	eck here ▶ 🔲 and						
its	30	Capital stock or trust principal, or current funds				30	The state of the s			
SSE	31	Paid-in or capital surplus, or land, building, or ed	uipm	ent fund		31				
Ļ	32	Retained earnings, endowment, accumulated inc				32				
Ne	33	Total net assets or fund balances				33				
	34	Total liabilities and net assets/fund balances .			1,563,182	34	1,419,700			
							Form 990 (2013)			

_	4	•
Page		4

Part :					
Cit C					_
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>	<u> </u>	
	Total revenue (must equal Part VIII, column (A), line 12)	1		28	0,730
	Total expenses (must equal Part IX, column (A), line 25)	2		42	<u>4,212</u>
	Revenue less expenses. Subtract line 2 from line 1	3		(143	3,482 <u>)</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,56	<u>3,182</u>
5	Net unrealized gains (losses) on investments	5			<u>-</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
	Prior period adjustments	8			
	Other changes in net assets or fund balances (explain in Schedule O)	9			
	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		1,41	9,700
art 2	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	<u> </u>	·;	
				Yes	No
	Accounting method used to prepare the Form 990: Cash Cash Counting Countin			ì.	,
	If the organization changed its method of accounting from a prior year or checked "Other," exp	olain in		,	
	Schedule O.		(A)		
	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		✓_
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	iled or	Ŋ.		
	reviewed on a separate basis, consolidated basis, or both:		ا مورون الم		
	Separate basis Consolidated basis Both consolidated and separate basis		اکننگا		_ :
	Were the organization's financial statements audited by an independent accountant?		2b		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	d on a	- 10 m	* ' *	
	separate basis, consolidated basis, or both:			2.73	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				*
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov		1		
	of the audit, review, or compilation of its financial statements and selection of an independent account	ntant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, exp	olain in		**	
	Schedule O.		2.2		
	As a result of a federal award, was the organization required to undergo an audit or audits as set to	forth in			
	the Single Audit Act and OMB Circular A-133?		3a		✓
	If "Yes," did the organization undergo the required audit or audits? If the organization did not under				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such at	ıdits.	3b		
•			Forr	ո 990	(2013)

SCHEDULE A (Form 990 or 990-EZ)

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.

2013

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name	of the organization						-	inployer ide				
	mette Valley Law Pro	oject	it. Ctatus (All avec		must se	nmploto	thic part	· See in	93-068			
Par			rity Status (All organ						Structio	113.		
1 ne c	organization is not a	ention of church	tion because it is: (For nes, or association of	churches	describe	d in sect	ion 170/k	502., 5)(1)(A)(i)	_			
2			170(b)(1)(A)(ii). (Attac					-7(-7(-7(-7	-			
3			spital service organiza			ection 1	70(b)(1)(<i>/</i>	A)(iii).				
4	A medical rese	arch organizations, city, and state	on operated in conjuncts:	ction with	a hospita	al describ	ed in sec	tion 170				
5		n operated for t	the benefit of a collect plete Part II.)	ge or univ	ersity ov	vned or o	perated	by a gov	ernment	al unit d	describ	ed in
6 7	An organization	n that normally	nment or governmenta receives a substantia (A)(vi). (Complete Par	I part of i	scribed in its suppo	section rt from a	170(b)(1) governm	(A)(v). nental un	it or from	n the ge	eneral p	ublic
8	☐ A community t	rust described i	n section 170(b)(1)(A)	(vi). (Con	nplete Pa	rt II.)						
9	receipts from support from	activities related gross investme	receives: (1) more that if to its exempt functi nt income and unrel fter June 30, 1975. Se	ions-sub ated bus	oject to c siness tax	ertain ex cable inc	ceptions ome (les	, and (2) s sectior	no more	than 3	131/₃%	of its
10	☐ An organization	n organized and	operated exclusively	to test fo	r public s	afety. Se	e sectio i	n 509(a)(4	4).			
11 e	purposes of o 509(a)(3). Checa Type I	ne or more pub ck the box that on b Type his box, I certify andation manage	nd operated exclusive of solicly supported organizes the type of solic line. Type III c Type III that the organization ers and other than one	nizations (supportin I–Function is not con	described g organiz nally integ ntrolled d	d in secti cation and grated irectly or	on 509(a d complet d)(1) or se te lines 1 「ype III-N y by one	ection 509 1e throug Ion-funct or more	9(a)(2). S gh 11h. iionally i disquali	See se ntegrat fied pe	ction ed rsons
f	If the organiza		a written determination	on from t	he IRS t	hat it is	a Type	I, Type I	I, or Typ	oe III su 	ipportir	ng 🖂
g	o:	17, 2006, has t	he organization accep	pted any	gift or co	ontributio	n from a	ny of the	•			
	(i) A person v (iii) below,	vho directly or i	ndirectly controls, eitlody of the supported o	her alone organizati	or togeti	her with	persons (described	in (ii) aı	nd 11g	Yes (i)	No
	(ii) A family me	ember of a pers	on described in (i) abo	ove?						11g	(ii)	
	(iii) A 35% cor	trolled entity of	a person described in	ı (i) or (ii) a	above? .					11g(iii)	<u>l</u>
h	Provide the fol	lowing informat	ion about the support	ed organi	zation(s).						·	
(i)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	in col. (i) lis	organization sted in your document?	the organ	ou notify nization in of your port?	organizat (i) organi	s the ion in col. zed in the S?			onetary
				Yes	No	Yes	No	Yes	No			
(A)												
(B)												
(C)						-		}				
(D)												
(E)											-	
Tota	1	·	, ,	, ,					*		-	

Part II 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.)

	on A. Public Support					1 2212	
Calend	lar year (or fiscal year beginning in) ▶ │	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		440 400	504 204	024 050	277,424	2,527,442
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	461,490	449,468	504,201	834,859	211,424	2,321,442
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	461,490	449,468	504,201	834,859	277,424	2,527,442
5	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)		* '	> *.		. \$3,	969,036
6	Public support. Subtract line 5 from line 4.	,	·š ' \$ } ·	\$ > 4.	< : \$ 🔅		1,558,406
Section	on B. Total Support		<u> </u>				
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	461,490	449,468	504,201	834,859	277,424	2,527,442
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	13,597	7,088	4,828	1,360	2,276	29,149
9	Net income from unrelated business activities, whether or not the business is regularly carried on	10,007	7,000	1,020	.,,,,,,	,	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	9,262	1,173	830	1,132		13,427
11	Total support. Add lines 7 through 10	L	<u>ا ُ ْ ْ ْ ْ ْ ْ ْ ْ ْ ْ ْ ْ ْ ْ ْ ْ ْ ْ </u>	* }			2,570,018
12	Gross receipts from related activities, etc					12	= F01/a\/0\
13	First five years. If the Form 990 is for the organization, check this box and stop he	re					
	on C. Computation of Public Support					1 - 2 1	- 0/
14	Public support percentage for 2013 (line					14	61 %
15	Public support percentage from 2012 Sci					15	56 %
16a	331/3% support test—2013. If the organi						
	box and stop here. The organization qua						
b	331/3% support test—2012. If the organ check this box and stop here. The organ	ization qualifie	s as a publicly	supported org	ganization .		. ▶ 🗆
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part IV how the organization meets the "torganization	ets the "facts- facts-and-circu	and-circumsta umstances" tes	nces" test, ch st. The organiz	eck this box ar ation qualifies	nd stop here. E as a publicly s	Explain in
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organization in Part IV how the organization in supported organization	tion meets the neets the "fact 	e "facts-and-ci s-and-circums 	rcumstances" tances" test.	test, check the character the organization	his box and st on qualifies as a	op here. a publicly . ► □
18	Private foundation. If the organization d instructions						. ▶ 🗆

Schedu	le A (Form 990 or 990-EZ) 2013						Page 3
Part	Support Schedule for Organiza (Complete only if you checked th If the organization fails to qualify	e box on line	e 9 of Part I or	r if the organi	zation failed	to qualify und	ler Part II.
Secti	on A. Public Support	didoi tilo to	313 113134 2316	ov, piedee ee	,,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						_
2	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						<u> </u>
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)	. > *	*****				
Sect	ion B. Total Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						

Calen	dar year (or iiscai year begiiiiiiiiy iii) 🚩 [(a) 2009	(0) 2010	(6) 2011	(4) 2012	(0) 2010	(i) i otai
9	Amounts from line 6						L
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	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.)						
14	First five years. If the Form 990 is for the organization, check this box and stop her				n, or fifth tax y		

Section C. Computation of Public Support Percentage

15	Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%					
16	Public support percentage from 2012 Schedule A, Part III, line 15	16	%					
Secti	ection D. Computation of Investment Income Percentage							
17	Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%					
18	Investment income percentage from 2012 Schedule A, Part III, line 17	18	%					

19a	331/3% support tests -2013. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line
	17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization . • 🕨 🔲
b	331/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and

line 18 is not more than 331/3%, 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 20

Part IV	Page 4 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
,	
	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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.

Inspection

 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) organizations: Complete Part III. Name of organization 93-0687718 Willamette Valley Law Project Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV. 1 2 3 Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . . 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No No Yes b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function 2 Enter the amount of the filing organization's funds contributed to other organizations for section Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, 3 . Yes 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing 5 organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (b) Address (c) EIN (d) Amount paid from (e) Amount of political (a) Name filing organization's contributions received and funds If none, enter -0promptly and directly delivered to a separate political organization If none, enter -0-(1)(2)(3)(4)(5)(6)

	section 501(h)).	is exempt under section 501(c)(3) and filed		
A (ongs to an affiliated group (and list in Part IV e ses, and share of excess lobbying expenditur		up member's
В	Check 🕨 🗌 if the filing organization che	ecked box A and "limited control" provisions a	pply.	
	Limits on Lobb	ying Expenditures	(a) Filing	(b) Affiliated
	(The term "expenditures" me	eans amounts paid or incurred.)	organization's totals	group totals
18	Total lobbying expenditures to influence	public opinion (grass roots lobbying)	10,000	
1	Total lobbying expenditures to influence	a legislative body (direct lobbying)	4,000	
•	Total lobbying expenditures (add lines 1a	and 1b)	14,000	
	Other exempt purpose expenditures .		266,370	
	Total exempt purpose expenditures (add	lines 1c and 1d)	280,730	
1		he amount from the following table in both		
	columns.		56,146	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	٧,	*
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000]	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
	Grassroots nontaxable amount (enter 25	% of line 1f)	14,038	
ļ	Subtract line 1g from line 1a. If zero or le	ss, enter -0	0	
i	Subtract line 1f from line 1c. If zero or les			
i	If there is an amount other than zero reporting section 4911 tax for this year?	on either line 1h or line 1i, did the organization	file Form 4720	Yes No
	(Some organizations that ma	ar Averaging Period Under Section 501(h) de a section 501(h) election do not have to com See the instructions for lines 2a through 2f on pa		

	Lobbyi	ng Expenditures D	uring 4-Year Av	eraging Period		
	Calendar year (or fiscal year beginning ın)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount	68,038	73,932	92,101	56,146	290,217
b	Lobbying ceiling amount (150% of line 2a, column (e))		•		\$	435,326
С	Total lobbying expenditures	20,000	15,000	10,000	14,000	59,000
d	Grassroots nontaxable amount	17,009	18,483	23,025	14,038	72,555
е	Grassroots ceiling amount (150% of line 2d, column (e))	, t 4	,	* ' . ' .		
f	Grassroots lobbying expenditures	15,000	10,000	8,000	10,000	43,000

Schedule C (Form 990 or 990-EZ) 2013

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	5768	}	
For o	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(6	a)		(b)	
	iption of the lobbying activity.	Yes	No	-	mount	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:		,			
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?	L				
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?		1			
i	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	i c mur			
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 .	14.0				
ď	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	2789-2	1, =			;
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5).	or se	ction		<u> </u>
	501(c)(6).	-/\-//				
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	_		1	+-	† –
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	+	$\vdash \vdash$
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	+	╁┈╴
Part						<u> </u>
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes."					3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amoun political expenses for which the section 527(f) tax was paid).	ts of				
а	Current year		2a			
b	Carryover from last year		2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lob	of the				<u>-</u>
	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Par						
Provid	le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gi -B, line 1. Also, complete this part for any additional information.	oup lis	st); Pa	rt II-A,	line 2;	; and

chedule C (For	m 990 or 990-EZ) 2013	Page 4
Part IV	Supplemental Information (continued)	
	,	
	<u>, </u>	

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection Employer identification number

	ette Valley Law Project		93-0687718
Par		or Advised Funds or Other Similar Fu	
	Complete if the organization answ	vered "Yes" to Form 990, Part IV, line 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year) .		
3	Aggregate grants from (during year)	ļ	
4	Aggregate value at end of year		hold in donor advisord
5	Did the organization inform all donors and funds are the organization's property, subjections are the organization of the control of the cont		
e			
6	Did the organization inform all grantees, do only for charitable purposes and not for the		
	conferring impermissible private benefit?		
Par	Conservation Easements.		· · · · · · · · · · · · · · · · · · ·
, , Gi	-	vered "Yes" to Form 990, Part IV, line 7	,
1	Purpose(s) of conservation easements held		•
•	Preservation of land for public use (e.g.,		of an historically important land area
	Protection of natural habitat	·	of a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organiza	ition held a qualified conservation contribu	tion in the form of a conservation
	easement on the last day of the tax year.	·	🐉 Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation eas	sements	2b
C	Number of conservation easements on a ce	rtified historic structure included in (a)	2c
d	Number of conservation easements include	led in (c) acquired after 8/17/06, and no	ot on a
	historic structure listed in the National Regis	ter	· · 2d
3	Number of conservation easements modifie	d, transferred, released, extinguished, or te	erminated by the organization during the
	tax year ►		
4	Number of states where property subject to		
5	Does the organization have a written po		
	violations, and enforcement of the conserva		
6	Staff and volunteer hours devoted to monitor	ring, inspecting, and enforcing conservation	on easements during the year
_		to the second of	A. al. San Ale
7	Amount of expenses incurred in monitoring, \$\blacktriangleright*	inspecting, and enforcing conservation ea	sements during the year
8	Does each conservation easement reported	on line 2(d) above satisfy the requirements	of coation 170(h)(4)(P)
0	(i) and section 170(h)(4)(B)(ii)?		
۵	In Part XIII, describe how the organization re		
9	balance sheet, and include, if applicable, the		
	organization's accounting for conservation		manda statements that describes the
Pari		ections of Art, Historical Treasures, o	or Other Similar Assets
		vered "Yes" to Form 990, Part IV, line 8	
1a	If the organization elected, as permitted un		
	works of art, historical treasures, or other		
	public service, provide, in Part XIII, the text	of the footnote to its financial statements the	nat describes these items.
b	If the organization elected, as permitted u	nder SFAS 116 (ASC 958), to report in it	s revenue statement and balance sheet
	works of art, historical treasures, or other		
	public service, provide the following amount	s relating to these items:	
	(i) Revenues included in Form 990, Part VIII	, line 1	> \$
	(ii) Assets included in Form 990, Part X .		> \$
2	If the organization received or held works	of art, historical treasures, or other simil	ar assets for financial gain, provide the
	following amounts required to be reported u		
а	Revenues included in Form 990, Part VIII, lin	ne 1	> \$
<u>b</u>	Assets included in Form 990, Part X	<u> </u>	_

Part	III Organizations Maintaining	Collections of A	Art, Hist	orical Trea	asures, c	or Other Sin	nilar Ass	ets (continue	<u>ed)</u>
3	Using the organization's acquisition, collection items (check all that apply):	accession, and oth	ner record	ds, check ar	ny of the	following that	t are a sig	nificant use o	if its
а	☐ Public exhibition		d [☐ Loan or €	exchange	programs			
b	Scholarly research		e [Other					_
C	□ Preservation for future generations	3							
4	Provide a description of the organizat XIII.								Part
5	During the year, did the organization assets to be sold to raise funds rather	than to be mainta							No
Part	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form								
	990, Part X, line 21.								
1a	Is the organization an agent, trustee included on Form 990, Part X?							☐ Yes ☐	No
b	If "Yes," explain the arrangement in P	art XIII and comple	ete the fol	lowing table	:		Am	ount	
С	Beginning balance					1c	· · · ·		
d	Additions during the year					1d			
e	Distributions during the year					1e		-	
f	Ending balance					1f			
2a	Did the organization include an amou							☐ Yes ☐	No
b	If "Yes," explain the arrangement in P	art XIII. Check here	e if the ex	planation ha	as been p	rovided in Pa	rt XIII .	🗆	
	b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII								
	Complete if the organization	answered "Yes"	' to Forn						
		(a) Current year	(b) Pric	r year (c) Two years	back (d) Three	years back	(e) Four years b	ack
1a	Beginning of year balance		-						
b	Contributions								
С	Net investment earnings, gains, and losses								
d	Grants or scholarships								
e	Other expenditures for facilities and								
	programs		i						
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of	the current vear en	d balanc	e (line 1g, co	olumn (a))	held as:			
а	Board designated or quasi-endowme	nt ▶	%	` .	. "				
b	Permanent endowment ▶	%							
C	Temporarily restricted endowment ▶								
_	The percentages in lines 2a, 2b, and 2		0%.						
За	Are there endowment funds not in th			zation that a	re held a	nd administer	red for the	1	
	organization by:	•	•						No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(ii), are the related organ							3b	
4	Describe in Part XIII the intended use							<u> </u>	
Part	******					_			
	Complete if the organization	n answered "Yes"	" to Forr	n 990, Part	IV, line	11a. See Fo	rm 990, F	art X, line 10).
	Description of property	(a) Cost or ot (investm		(b) Cost or ot (other		(c) Accumula depreciation		(d) Book value	
	Land		95,000				.25 7	95	5,000
b	Buildings		601,340	· · · · -					1,340
c	Leasehold improvements		23,072						3,072
d	Equipment		0,00						
e	Other								
	Add lines 1a through 1e. (Column (d) I		90. Part)	(, column (B). line 10((c).)		719	9,412

Part VII	Investments – Other Securities. Complete if the organization answered	l "Voo" to Foi	000 Port IV lin	o 11h See Form	990 Part Y line 12
	(a) Description of security or category	Tes lo For	(b) Book value		hod of valuation
•	(including name of security)		(b) Book Value		-of-year market value
(1) Financial	derivatives				
	neld equity interests				
(3) Other					
(A)			<u> </u>	ļ	
(B)					
(C)				 	
(D)					
(E)					
(F)			· 		
(G) (H)					
	(b) must equal Form 990, Part X, col. (B) line 12.) ▶				
Part VIII	Investments – Program Related.				
r art vin	Complete if the organization answered	d "Yes" to Fo	rm 990, Part IV, lir	ne 11c. See Form	990, Part X, line 13.
···	(a) Description of investment		(b) Book value	(c) Me	thod of valuation I-of-year market value
(1)				 	
(2)					
(3)				-	
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	(b) must equal Form 990, Part X, col. (B) line 13.) ▶				/ */*
Part IX	Other Assets.				000 D 11/1 45
	Complete if the organization answered		rm 990, Part IV, lii	ne 11d. See Form	
	(a) Descri	ription			(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					<u> </u>
(6)				 	
(7)					
(8)		· · · · · · · · · · · · · · · · · · ·	···		
Total. (Colu	ımn (b) must equal Form 990, Part X, col. (B)	line 15.)		. >	
Part X	Other Liabilities.				<u> </u>
	Complete if the organization answered line 25.	d "Yes" to Fo	rm 990, Part IV, li	ne 11e or 11f. See	e Form 990, Part X,
1.	(a) Description of liability	(b) Book value			
	ncome taxes	(-,	· * * *		
(2)		· · -	·		
(3)					
(4)	······································		1 (2)		***
(5)					\$
(6)			* **		*, ** ,
(7)			*		» »
(8)			·		**
(9)					Ma 94
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 25) ▶			A STANK A PAGE	* * * * * * * * * * * * * * * * * * *
	or uncertain tax positions. In Part XIII, provide the				
	's liability for uncertain tax positions under FIN 4				

Part	- · · · · · · · · · · · · · · · · · · ·		Return.
	`Complete if the organization answered "Yes" to Form 990, F		<u> </u>
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		À
а	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	4
C	Recoveries of prior year grants	2c	4 .1
d	Other (Describe in Part XIII.)		_
	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	4
b	Other (Describe in Part XIII.)	_4b	┥╻┪
_	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		
Part	Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" to Form 990, I		er neturn.
1	Total expenses and losses per audited financial statements		1
2	Donated services and use of facilities	2a	
a	Prior year adjustments	2b	-
b	Other losses	2c 2c	┪ 1
c d	Other (Describe in Part XIII.)		-
e	Add lines 2a through 2d		- _{2e}
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	· · · · · · · ·
b	Other (Describe in Part XIII.)		7 1
С	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lir	ne 18.)	5
	XIII Supplemental Information.		
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an		
2; Par	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to provide any additional i	information.
		.,,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

Schedule D (Fo	orm 990) 2013	Page 5
Part XIII	Supplemental Information (continued)	
	•	

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

1545-0047	13
OMB No	80

Open to Public

Inspection

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, ° □ fiscal spon. & gen. supp. (h) Purpose of grant or assistance general, proj. support general, proj. support **Employer identification number** 5 0 general support general support ✓ Yes 93-0687718 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (e) Amount of non- (f) Method of valuation cash assistance (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (d) Amount of cash 20,250 9,485 7,815 47,975 34,845 grant . Enter total number of other organizations listed in the line 1 table (c) IRC section the selection criteria used to award the grants or assistance? if applicable General Information on Grants and Assistance 501-c-3 501-c-3 501-c-3 501-c-3 501-c-3 45-2771253 93-0992858 65-1203900 93-1055994 61-1590160 (D) EIN (3) Salem-Keizer Coalition for Equal 356 Young St., Woodburn, OR 97071 (4) Farmworker Housing Dev. Corp. 700 NE Marion St., Salem, OR 97301 1 (a) Name and address of organization (1) CAPACES Leadership Institute 1274 5th St., Woodburn, OR 97071 (2) Mano a Mano Family Center 2921 Saddle Club SE, Salem, OR P.O. Box 4290, Salem, OR 97302 Willamette Valley Law Project or government Name of the organization (5) Causa Part I Part II 9 N 8 9 <u>6</u> Ξ (12) <u>®</u>

Schedule I (Form 990) (2013)

Cat No 50055P

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

Schedule I (Form	-orm 990) (2013)
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	Part III can be dimicated if additional space is peopled

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
,						
-						
2						
က						
4						
r2						
9						
7						
Part IV	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	the information re	equired in Part I, lin	e 2, Part III, column	(b), and any other additi-	onal information.

WVLP has verified the tax exempt status of each funding recipient and aproved the grants based either on a memorandum of agreement or a written proposal describing the purposes.

The WVLP director and board receive reports on funded activities and projects.

Schedule I (Form 990) (2013)

SCHEDULE 0 (Form 990 or 990-EZ)

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.

Open to Public Inspection

OMB No 1545-0047

Internal Revenue Service

▶ Attach to Form 990 or 990-EZ. Department of the Treasury ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization **Employer identification number**

willamette Valley Law Project	93-008//18
990 Pt. VI, #3: Larry Kleinman provides financial management and board administration services withou	ıt charge
990 Pt. VI, #8b: The organization has no committees	
990 Pt. VI, #11b: The board reviewed hard copies of the 990 and schedules before filing occurred.	
990 Pt. VI, #12c: At each board meeting, the board chair requests that board members and the organiza	tion director declare any conflicts
990 Pt. VI, #15: No compensation is paid.	
990 Pt. VI, #19: The indicated documents are available for public inspection at the organization's offices	during regular business hours.
During 2013, no such requests were made.	

Willamette Valley Law Project

93-0687718

Schedule in Support of Part III: Page 1 of 4

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<u>Exempt purpose:</u> Research and education regarding issues and conditions affecting low-income persons working in agriculture and related sectors.

A. Program services provided by independent contractors

Education and Research Activities on Farmworker Labor and Environmental Rights

Concerning federal or state statutory rights and guarantees afforded or denied to agricultural workers in the areas of wages, working conditions, employment relations, organization and free assembly and expression, as well as government policies and practices in enforcing these rights and guarantees:

- 1. Conduct legal research.
- 2. Draft alternative statutory or regulatory language.
- 3. Survey awareness of and interest in labor rights issues among agencies, organizations and individuals.
- 4. Present information and analysis on farm labor rights issues to interested groups and individuals.
- 5. Survey farmworker to document conditions related to and determine prevailing attitudes on farm labor rights issues.
- 6. Assemble documentation and data on specific agricultural chemicals used in Oregon.
- 7. Document instances of chemical exposure to humans and the resulting effects.
- 8. Survey awareness of and interest in pesticide issues among agencies, organizations and individuals.
- 9. Present information and analysis on pesticide issues to interested groups and individuals.
- 10. Identify and enlist the participation of medical professionals in addressing pesticide exposures and issues.
- 11. Identify and pursue appropriate courses of action to limit or eliminate damage to humans or the environment caused by agricultural chemicals.

Amount allocated: \$41,869.00

Education and Research Activities on Immigrants' Rights

- 1. Establishment and operation (open to the public) of a "popular" archives containing materials relating to immigrants and the institutions they affect or in which they participate.
- 2. Education and training for community organizations and their memberships on issues relating to immigrants.
- 3. Development and provision of educational classes for immigrants on topics of interest including U.S. citizenship.
- 4. Facilitating expressions of immigrants' concerns to wider audiences, including media and decision-makers.

Amount allocated: \$70,000.00

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Community-based mass communication

- 1. Support noncommercial and educational program development for low-power radio broadcast in multiple languages, addressing diverse interests and audience sectors in the Latino community;
- 2. Research and develop effective strategies for volunteer programmer recruitment, training, supervision and evaluation;
- 3. Research and develop effective strategies and methods for audience outreach, input and assessment;
- 4. Support technical assistance and provide general support for noncommercial radio operation. Amount allocated: \$75,000.00

Cultural Heritage Education and Participation

- 1. Research and preparation of materials on the contribution of Latino leaders to U.S. society and the promotion of human rights;
- 2. Organization of community-based and public school-based activities which promote recognition of Latino heroes and their legacies;
- 3. Collaboration with public school districts and staff on development and testing of innovative strategies for increasing student, teacher and parent awareness of and respect for the contributions of Latino heroes;
- 4. Monitoring and providing relevant information about public policy affecting these and related matters;
- 5. Leadership development and governance training which equips community members engaged in these activities to effectively administer, direct, and evaluate their efforts.

Amount allocated: \$24,565.00

"CAPACES Leadership Institute" Development

Conduct fundraising, building development and program develop activities to establish the CAPACES Leadership Institute (see below, p. 3).

Amount allocated: \$33,677.00

Summary of Contracted Program Services:

Total Contract Services	\$245,111.00
CAPACES Leadership Development	33,677.00
Total Research and Education Activities	\$211,434.00
Latino Cultural Heritage	24,565.00
Community Based Mass Communication	75,000.00
Immigrants' Rights	70,000.00
Farmworker Labor Rights	\$41,869.00

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B. Support grant and fiscal sponsorship:

General support grants were made to these 501(c)(3) organizations to increase their capacity and promote more productive community service through collaboration.

<u>Farmworker Housing Development Corporation</u>. Builds and manages farmworker housing with farmworker participation and offers related programs.

Amount granted: \$9,485.00

<u>CAUSA</u>: Conducts public education and advocacy to promote understand of and support for immigrants' rights and immigrants' contributions to society, civic engagement, as well as the effects of demographic trends on immigrant communities and on society as a whole.

Amount granted: \$7,815.00

Mano a Mano Family Center: Provides basic services to Salem's Latino community and organizes on key community issues, including a wide variety of cultural and educational classes, plus information and referral and food bank support. The organization sponsors projects which develop Latino youth leadership, promote respect for immigrants' rights and contributions to society, and build information technology literacy and communication capacity.

Amount granted: \$34,845.00

<u>Salem-Keizer Coalition for Equality</u>. The Coalition promotes educational accountability and equity in the Salem-Keizer School District and its programs serving low-income and minority children. The Coalition has raised awareness about the achievement gap in Oregon public education between students of color and student from the dominant culture and seeks innovative strategies to close the gap. The Coalition's programs uniting Latino, African-American and Marshallese parents.

Amount granted: \$20,250.00

<u>CAPACES Leadership Institute</u>. The Institute conducts leadership skill and communications capacity trainings, capacity building assessment and support for non-profit, community-based organizations serving primarily the Latino communities and other under-served communities in the Northern and Mid-Willamette Valley, as well as engaging and educating the public, generally, and funders and civic leaders, in particular, about leadership development in underserved communities.

Amount fiscally sponsored and re-granted: \$47,975.00

National Partnership for New Americans. NPNA is a collaborative of a dozen 501(c)(3) organizations nationwide promotion citizenship and building capacities of those organizations to offer naturalization services in under-served communities.

Amount re-granted: \$5,000.00

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Mujeres Progresistas Luchadoras. MLP organizes, educates and trains farmworker women regarding issues that affect them, including matters of health, family relationships, fair treatment in the workplace, as well as offering orientation and practicum on management of economic micro-enterprises.

Amount re-granted: \$5,000.00