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047₹80 . Form · 9

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.

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

OMB No 1545-0047 2013 Open to Public

		Information about Form 990 and its instructions is at www.irs			i inspection	
<u>A</u>	For the 2013 c	alendar year, or tax year beginning $04/01/13$, and ending $03/31/2$	14			
В	Check if applicable	C Name of organization PORTLAND REGIONAL EDUCATIONAL		D Employer identification number		
	Address change	TELECOMMUNICATIONS CORPORATION	ļ			
		Doing Business As VOQAL PORTLAND		84-	1360071	
ᆜ	Name change	Number and street (or P O box if mail is not delivered to street address)	Room/suite		ne number	
	Initial return			-	-532-2852	
\Box	Terminated	P.O. BOX 6060		303	-332-2632	
닏	reminated	City or town, state or province, country, and ZIP or foreign postal code				
	Amended return	BOULDER CO 80306-6060		G Gross rece	pts \$ 1,017,482	
	Application pending	F Name and address of principal officer			bordinates? Yes X No	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	JOHN SCHWARTZ	H(a) Is this a grou	ip return for su	bordinates? Yes X No	
		P.O. BOX 6060	H(b) Are all subo	rdinates includ	led? Yes No	
		BOULDER CO 80306-6060	If "No,"	attach a list (s	see instructions)	
	Tax-exempt status	501(c)(3) X 501(c) (4) ◄ (insert no) 4947(a)(1) or 527				
<u> </u>		WW.PRETC.ORG	┥、		_	
<u> </u>			H(c) Group exem		<u> </u>	
K	Form of organization		Year of formation 1	983	M State of legal domicile OR	
		ımmary				
	1 Briefly de	scribe the organization's mission or most significant activities				
Ф	SEE	SCHEDULE O				
5						
Z E						
		🗂 🚜				
1500	2 Check thi	s box $ ightharpoonup$ if the organization discontinued its operations or disposed of more than 25%	of its net assets		_	
%	3 Number of	of voting members of the governing body (Part VI, line 1a)		3	5	
€s	4 Number of	of independent voting members of the governing body (Part VI, line 1b)		4	4	
話	5 Total num	iber of individuals employed in calendar year 2013 (Part V, line 2a)		5	0	
िंड	6 Total num	ber of volunteers (estimate if necessary)		6	0	
1 In Carlotties & Governance	7a Total unre	elated business revenue from Part VIII, column (C), line 12		7a	2,366	
<u></u>	h Noturali				2,300	
	b Net unrei	ated business taxable income from Form 990-T, line 34	Prior Year	7b	Current Year	
6	R Comtributi	and aroute (Dart VIII line 4h)	FIIOI Teas	0	Ourient rear	
re≪	6 Contributi	ons and grants (Part VIII, line 1h)		 		
∜107 ऐ Revenue	9 Program	service revenue (Part VIII, line 2g)		,110	29,719	
₩.	10 Investmen	nt income (Part VIII, column (A), lines 3, 4, and 7d)		,257	-334,146	
	11 Other rev	enue (Part VIII, column (A), lines 5, 6d, 8c=9c=10c-and=11e)		756	328,385	
	12 Total reve	enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	418	3,123	23,958	
		id similar amounts paid (Part IX, column (A), lines 1–3)	24	1,696	113,200	
	14 Benefits r	paid to or for members (Part IX 👸 umn (A) (line 4) () 2016	0	0		
	15 Salaries	other compensation, employee benefits (Part IX, column (A), lines, 5–10)	130	776	104,794	
enses				0	0	
en	Tod Floressio	nal fundraising fees (Part IX, column (A), line 11e) Iraising expenses (Part IX, column (D)/line 25) 0		- 1		
Exp			100		100.00	
- ш	11 Outlot exp	enses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,912	127,887	
	18 Total exp	enses Add lines 13–17 (must equal Part IX, column (A), line 25)		3,384	345,881	
		less expenses Subtract line 18 from line 12		1,739	-321,923	
t Assets or	3		Beginning of Curr		End of Year	
Sets	20 Total ass	ets (Part X, line 16)	3,473	3,645	3,844,110	
× ×	21 Total liabi	lities (Part X, line 26)	91	.,483	30,568	
E.	- 1	s or fund balances Subtract line 21 from line 20	3,382	2,162	3,813,542	
F		gnature Block	·····			
		erjury, I declare that I have examined this return, including accompanying schedules and statements	and to the best of	my knowdod	ge and helief it is	
		mple <u>te. Declaration of preparer (other than officer) is based on all information of which preparer has</u>		my knowied	ge and belief, it is	
	1 1		,		J. Lui	
٠.	-			/6	<i>711119</i>	
Sig	9·' [gnature of officer		Date	•	
He	re	ADAM MILLER SECRE	TARY			
_		ype or pnnt name and title				
	Pnnt/Type	preparer's name Pregaler's signature 0	Date	Check	ıf PTIN	
Pai	d ROBERT	E. FABRY, CPA ROBERT EL SALBY, CPA	- 11/13/	14 self-emp	loyed P00757821	
Pre	narer	DATEDLE AND COMPANY D.C.			84-0817888	
	e Only	7887 E BELLEVIEW AVE STE 700	Fir	m's EIN ▶	04 001/000	
	·				202-750.0000	
_	Firm's add		Ph	one no	303-759-0089	
		sthis return with the preparer shown above? (see instructions)	<u> </u>		X Yes No	
For DAA		ction Act Notice, see the separate instructions			Form 990 (2013)	

181,662

DAA

4e Total program service expenses ▶

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,"	ŀ		
_	complete Schedule A	1_		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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		
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,	l _		77
_	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	ا م ا		v
7	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
	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,"			x
9	complete Schedule D, Part III	8		
3	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	ا ا		x
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted	9		
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		<u> </u>
•	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,"	İ	1	•
u	complete Schedule D, Part VI	11a	x	
h	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	110		
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	<u> </u>		
•	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	x	
d				-
	reported in 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
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
2a	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? If "Yes," and if			
_	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
5	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		X
6	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		Х
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on		ļ	
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<u> </u>
8	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		<u>X</u>
9	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>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a_		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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 19 If "Yes," complete Schedule I, Parts I and II	21	X	
22	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		_X_
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	İ		
	employees? If "Yes," complete Schedule J	23		<u> </u>
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		<u> </u>
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
¢	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		
	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			17
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
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?			7.7
	If "Yes," complete Schedule L, Part I	25b		<u> </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			w
	disqualified persons? If so, complete Schedule L, Part II	26		<u> </u>
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			x
-0	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		1	
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	20-	1	X
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		
Þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		x
_	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		<u> </u>
С	was an officer, director, trustee, or direct owner? If "Yes," complete Schedule L, Part IV	28c	x	
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 contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
•	Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	Ť		
_	complete Schedule N, Part II	32		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, Parts 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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37	Х	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		1	·
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	
			000	

С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		
	required to file Form 8282?	7c	
d	If "Yes," indicate the number of Forms 8282 filed during the year		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		
	organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
а	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter		
а	Initiation fees and capital contributions included on Part VIII, line 12		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter		
а	Gross income from members or shareholders		

If "Yes," did the organization notify the donor of the value of the goods or services provided?

Gross income from other sources (Do not net amounts due or paid to other sources

If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Is the organization licensed to issue qualified health plans in more than one state?

Section 501(c)(29) qualified nonprofit health insurance issuers.

Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

against amounts due or received from them)

12a

13

DAA

7b

12a

13a

11a

11b

12b

Form 990 (2013) PORTLAND REGIONAL EDUCATIONAL 84-1360071 Page 6 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 Section A. Governing Body and Management Yes No 5 Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 1b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 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? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint X one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section 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 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 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b 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 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 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? X The organization's CEO, Executive Director, or top management official 15a X 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 similar arrangement with a taxable entity during the year? X 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure NONE 17 List the states with which a copy of this Form 990 is required to be filed > Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply Own website 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, 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 books and records of the HAZEL J. BOLSOVER 655 SOUTH SUNSET STREET, SUITE A organization >

303-532-2852

CO 80501

LONGMONT

84-1360071

Page **7**

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

X

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 nor any related organizations compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for	of	x, unle	Pos check ess pe nd a d	rson : irecto	than on s both a r/trustee	ın e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individuat trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	,	organization and related organizations
(1) JOHN SCHWARTZ										
	3.20								_	
DIRECTOR & PRESIDENT	0.00	X		X		\sqcup		9,711	0	3,233
(2) ALICE ELLIS GAUT										
	1.00									
DIRECTOR & EXEC V.P.	0.00	X	╙	X	<u> </u>	$\sqcup \downarrow$		0	0	0
(3) THOMAS HARTMANN						1				
	1.00							_	_	_
DIRECTOR	0.00	X	<u> </u>	_	<u> </u>	 		0	0	0
(4) DYLAN HYDES	1 00									
	1.00							_	_	
DIRECTOR	0.00	X				┝		0	0	0
(5) CARL WOLFSON	1 00									
DIDECTOR.	1.00 0.00	$ \mathbf{x} $						o	- 0	o
DIRECTOR (6) HAZEL BOLSOVER	0.00	1			_	╁			<u> </u>	<u> </u>
(6) HAZEL BOLSOVER	5.40									
DUCTNESS MANAGED	0.00				x			9,664	o	1,691
BUSINESS MANAGER (7) PATRICIA DWYER	0.00	+	┢		^	\vdash		9,004	<u> </u>	1,091
(I) PAIRICIA DWIER	6.00									
CFO	0.00			x		1 1		8,294	o	1,629
(8) ADAM MILLER	0.00	+		^	_	1 1		0,234		1,023
(0) ADAM MILLEN	4.10									
SECRETARY	0.00			x				7,962	o	2,307
(9)	0.00	+-				1 1		,,,,,,,		2/00/
(3)		1								
	•									
(10)										
(11)		<u> </u>								
DAA		<u> </u>								Form 990 (2013

Pa	rt VII Section A. Officers	, Directors, Tru	stee	s, Ke	y Er	nplo	yees	s, ar	nd Highest Compensated	Employees (continued)				
(A) Name and title		(B) (C) Average hours per (do not check more than week box, unless person is bot officer and a director/trus hours for					s both	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	co	(F) Estimated amount of other compensation from the		
		nours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-211039-MISC)	o a	organiza and rela rganiza	ation ated	
(12)														
(13)	-													
(14)	<u></u>													
(15)						 								. —
(16)	-													
						-								
(17)														
(18)														
(19)														
	Sub-total	<u></u>	L	l	l		L	▶	35,631				8,	860
c d	Total from continuation shee Total (add lines 1b and 1c)	ets to Part VII, S	ectio	on A				>	35,631					860
2	Total number of individuals (increportable compensation from			to th	ose	liste	d abo	ve)		00,000 in				
3	Did the organization list any for				ıstee	e ke	v em	nlov	ee or highest compensated			\dashv	Yes	No
4	employee on line 1a? If "Yes," For any individual listed on line	complete Schedu	ıle J	for s	uch i	ndıv	ıdual				.	3	,	X
	organization and related organ											4		х
5	Did any person listed on line 1a for services rendered to the org									dividual		5		х
Sect	on B. Independent Contracto	rs										<u> </u>		
1	Complete this table for your five compensation from the organization	ation Report cor							r year ending with or within t	he organization's tax year				
	Name and	(A) business address						ļ	Descrip	(B) tion of services		Cor	(C) mpensat	tion
	· · · · · · · · · · · · · · · · · · ·													
	Total number of independent of	ontractors (includ	lina l	out n	ot lin		to th	ose	listed above) who					
DAA	received more than \$100,000 c								,	0		For	m 990	0 (2013)

Pa	rt V		nent of Reve		tains a r	esponse o	r note to any line i	n 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
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f		ues rents zations (contributions) is, gifts, grants, not included above ins included in lines 1a-	1a 1b 1c 1d 1e 1f	\$					
	2a b	Total. Add line	S 1a-1f	Œ		Busn. Code 900099	29,719	29,719		
Program Service Revenue	c d e f	All other progra	am service reven	ue		•	29,719			
	3	Investment inc	ome (including d			t, ▶	68,560			68,560
	5 6a b	5 Royalties (i) Real (ii) 6a Gross rents b Less rental exps				Personal	360,658			360,658
	d 7a b	7a Gross amount from sales of assets other than inventory 590 , 818			Other					
9		basis & sales exps Gain or (loss) Net gain or (los Gross income fro	993 , -402 , ss) om fundraising even	706		•	-402,706			-402,706
Other Revenue		See Part IV, line Less direct ex		a b	events	-				
	9a b	Gross income from See Part IV, line Less direct ex	om gaming activities 19	s. a b						
	10a b	Gross sales of returns and all Less cost of g	inventory, less owances oods sold	a b						
	11a	K-1 EBS S	(loss) from sales cellaneous Revenue UPPORT SERVI SPEECH MEDIA	CES,	LLC	Busn Code 561000 512000	2,737 -371		2,737 -371	
	c d e		E CITIZEN, L ue			517919 517000	-34,639 -32,273	-34,639		
	12		. See instruction	s		•	23,958	-4,920	2,366	26,512

Form 990 (2013)

Form 990 (2013)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) (C) (D) (A) Total expenses Do not include amounts reported on lines 6b, Program service 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and 113,200 113,200 organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 50,894 50,894 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 18,677 12,766 31.443 7 Other salanes and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 13,474 2,802 10,672 Other employee benefits 8,983 1,867 7.116 10 Payroll taxes Fees for services (non-employees) Management 1,316 1,316 **b** Legal 2,700 2,700 c Accounting d Lobbying Professional fundraising services See Part IV, line 17 13,102 13,102 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column 10,980 17,802 6,822 (A) amount, list line 11g expenses on Schedule O) 751 751 Advertising and promotion 121 21,586 21,465 13 Office expenses 4,994 4,994 Information technology 14 6,199 6,199 Royalties 15 7,531 7,531 16 Occupancy 26,777 4,403 22,374 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 267 267 22 Depreciation, depletion, and amortization 5,641 641 23 Insurance 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 O) 15,153 15,153 TOWER RENT AND STORAGE 1,454 DUES AND SUBSCRIPTIONS 1,454 Ь 1,124 1,033 91 TELEPHONE AND INTERNET c 941 941 LICENSE, PERMITS AND FEES d 521 549 28 All other expenses 345,881 181,662 164,219 0 Total functional expenses Add lines 1 through 24e 25 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 ▶ following SOP 98-2 (ASC 958-720)

Form 990 (2013)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 244,770 96,165 Cash-non-interest bearing 515,565 2 545,602 Savings and temporary cash investments Pledges and grants receivable, net 18,066 20,352 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 5 Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Notes and loans receivable, net 7 8 Inventories for sale or use 1,131 10,859 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 96,781 10a other basis Complete Part VI of Schedule D 96,781 267 10b b Less: accumulated depreciation 10c 2,169,437 2,615,123 Investments—publicly traded securities 11 Investments-other securities See Part IV, line 11 12 514,681 565,737 Investments—program-related See Part IV, line 11 13 13 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11 3,473,645 3,844,110 16 Total assets. Add lines 1 through 15 (must equal line 34) 45,353 30,568 17 17 Accounts payable and accrued expenses 18 18 Grants payable 46,130 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties 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 25 91,483 30,568 26 Total liabilities. Add lines 17 through 25 X and Organizations that follow SFAS 117 (ASC 958), check here **Net Assets or Fund Balances** complete lines 27 through 29, and lines 33 and 34. 3,382,162 3,813,542 27 Unrestricted net assets 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 3,382,162 3,813,542 3,844,110 33 Total net assets or fund balances 3,473,645 Total liabilities and net assets/fund balances

Forn	n 990 (2013) PORTLAND REGIONAL EDUCATIONAL 84-1360071			P	age 12
Pa	art 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		23,	958
2	Total expenses (must equal Part IX, column (A), line 25)	2		345,	881
3	Revenue less expenses. Subtract line 2 from line 1	3	_	321,	923
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,	382,	162
5	Net unrealized gains (losses) on investments	5		728,	321
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8		24,	982
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	3,	<u>813,</u>	542
Pa	art XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				1
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				1
	Schedule O				1
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both				1
	Separate basis Consolidated basis Both consolidated and separate basis				1
b	Were the organization's financial statements audited by an independent accountant?		_ 2t		x
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both				1
	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				Ĭ
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		20	:	
	If the organization changed either its oversight process or selection process during the tax year, explain in				1
	Schedule O				1
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a	1	x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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.irs.qov/form990.

OMB No 1545-0047 2013

Open to Public Inspection

Name	of the organization		Employer Identification number	
_	ORTLAND REGIONAL EDUCATIONAL			
_T	ELECOMMUNICATIONS CORPORATION		84-1360071	
P	Organizations Maintaining Donor Advised Fur Complete if the organization answered "Yes" to F		ccounts.	
		(a) Donor advised funds	(b) Funds and other acco	ounts
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 t	he assets held in donor advised		
	funds are the organization's property, subject to the organization's exclusive	ive legal control?	_ Y	res 🗌 No
6	Did the organization inform all grantees, donors, and donor advisors in w	riting that grant funds can be used	-	
	only for charitable purposes and not for the benefit of the donor or donor	advisor, or for any other purpose	_	
	conferring impermissible private benefit?			res No
P	art II Conservation Easements.			
	Complete if the organization answered "Yes" to F	orm 990, Part IV, line 7.		
1	Purpose(s) of conservation easements held by the organization (check a	ll that apply)		
	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically imp	ortant land area	
	Protection of natural habitat	Preservation of a certified historic	structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conserve	ation contribution in the form of a conserva	tion	
	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	
C	Number of conservation easements on a certified historic structure include	led ın (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	S, and not on a		
	historic structure listed in the National Register		2d	
3	Number of conservation easements modified, transferred, released, extir	nguished, or terminated by the organization	nduring the	
	tax year ▶			
4	Number of states where property subject to conservation easement is local	cated >		
5	Does the organization have a written policy regarding the periodic monitor	ring, inspection, handling of		
	violations, and enforcement of the conservation easements it holds?		Y	′es 🔃 No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing	g conservation easements during the year	•	
	>			
7	Amount of expenses incurred in monitoring, inspecting, and enforcing co	nservation easements during the year		
	▶ \$			
8	Does each conservation easement reported on line 2(d) above satisfy the	e requirements of section 170(h)(4)(B)		<u></u>
	(i) and section 170(h)(4)(B)(ii)?		Y	′es ∐ No
9	In Part XIII, describe how the organization reports conservation easemer	·		
	balance sheet, and include, if applicable, the text of the footnote to the or	ganization's financial statements that desc	ribes the	
_	organization's accounting for conservation easements.	Historiaal Tassassas as Other 6	Nttl A	
Pi	Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to F		Similar Assets.	
		<u>-</u>		
та	If the organization elected, as permitted under SFAS 116 (ASC 958), not	· · · · · · · · · · · · · · · · · · ·		
	works of art, historical treasures, or other similar assets held for public ex- public service, provide, in Part XIII, the text of the footnote to its financial		nice of	
L	•			
מ	If the organization elected, as permitted under SFAS 116 (ASC 958), to reverte of art, historical transpires, or other similar assets held for public of			
	works of art, historical treasures, or other similar assets held for public expulse seques, provide the following amounts relating to those stoms	dibidon, education, of research in furthera	IICE OI	
	public service, provide the following amounts relating to these items.		•	
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$	
^	(ii) Assets included in Form 990, Part X	the second second for 5	> \$	
2	If the organization received or held works of art, historical treasures, or o		e tne	
	following amounts required to be reported under SFAS 116 (ASC 958) re	lating to these items:	. .	
a	Revenues included in Form 990, Part VIII, line 1		▶ \$	
h			- 6	

Sche	edule D (Form 990) 2013 PORTLAND	REGIONAL	EDUCATIONAL		84-1360071	Page 2		
Pa	art III Organizations Maintaini	ng Collections o	f Art, Historical Tr	easures, o	r Other Similar Asse			
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records	, check any of the follow	ring that are a	significant use of its			
а	Public exhibition	d 🗍	Loan or exchange prog	grams				
b	Scholarly research	e 🗀	Other					
С	Preservation for future generations							
4	Provide a description of the organization's of	collections and explain	how they further the org	anization's ex	empt purpose in Part			
	XIII		,					
5	During the year, did the organization solicit	or receive donations o	f art, historical treasures	or other simi	lar			
	assets to be sold to raise funds rather than					Yes No		
Pa	Part IV Escrow and Custodial Arrangements.							
	Complete if the organization	_	s" to Form 990, Par	t IV, line 9,	or reported an amou	nt on Form		
	990, Part X, line 21.		,	, ,	•			
	Is the organization an agent, trustee, custoo	lian or other intermedi	arv for contributions or o	ther assets no	ot			
	included on Form 990, Part X?		,			Yes No		
b		I and complete the foll	owing table:					
		, , , , , , , , , , , , , , , , , , ,				Amount		
С	Beginning balance				1c	-		
ď	Additions during the year				1d			
	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on f	Form 990 Part X line	21?		<u></u>	Yes No		
	If "Yes," explain the arrangement in Part XII			ided in Part XI	II			
	ert V Endowment Funds.		р		<u></u>			
	Complete if the organization	on answered "Yes	" to Form 990. Par	t IV. line 10				
		(a) Current year	(b) Pnor year	(c) Two year		ack (e) Four years back		
1a	Beginning of year balance	,,,	<u> </u>			1,,,,		
ь	Contributions							
-	Net investment earnings, gains, and							
_	losses			Ì				
d	Grants or scholarships							
	Other expenditures for facilities and		 			-		
Ī	programs							
f	Administrative expenses							
a	End of year balance							
2	Provide the estimated percentage of the cui	rent vear end balance	(line 1g. column (a)) he	ld as:				
a		%	((2))					
ь	Permanent endowment ▶ %							
С	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2c sho	ould equal 100%.						
3a	Are there endowment funds not in the posse	•	tion that are held and ad	ministered for	the			
	organization by	J				Yes No		
	(i) unrelated organizations					3a(ı)		
	(ii) related organizations					3a(ii)		
b	If "Yes" to 3a(ii), are the related organization	ns listed as required or	n Schedule R?			3b		
4	Describe in Part XIII the intended uses of th	•						
Pa	ert VI Land, Buildings, and Equ							
	Complete if the organization		s" to Form 990, Part	t IV. line 11	a. See Form 990. Pa	rt X. line 10.		
	Description of property	(a) Cost or other			(c) Accumulated	(d) Book value		
	•	(investmen	''		depreciation			
	Land							
	Buildings							
	Leasehold improvements							
	Equipment			96,781	96,781			
	Other			,				
	I. Add lines 1a through 1e (Column (d) must	equal Form 990. Part	X, column (B), line 10(c)	1)	•			
		,		-				

Schedule D (Form 990) 2013 PORTLAND REGIONAL EDU	JCATIONAL	84-1360071	Page 3
Part VII Investments—Other Securities.			
Complete if the organization answered "Yes" to	Form 990, Part IV, line	11b. See Form 990, Pa	rt X, line 12.
(a) Description of security or category	(b) Book value	(c) Method of	
(including name of security)		Cost or end-of-yea	r market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			· · · · · · · · · · · · · · · · · · ·
(F)			
(G)			
(H) Tatal (Caluma (h) must asset Form 2000, Book V, and (B) line 12.)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ► Part VIII Investments—Program Related.			
Complete if the organization answered "Yes" to	Form 000 Part IV line	11c Soc Form 000 Pa	rt Y line 13
(a) Description of investment	(b) Book value	(c) Method of	
(a) Description of investment	(b) book value	Cost or end-of-year	
(1) INDEPENDENT SPECTRUM, LLC	433,286		
(1) INDEPENDENT SPECTRUM, LLC (2) EBS SUPPORT SERVICES, LLC	71,854		
(3) FREE SPEECH MEDIA, LLC	56,748		
(4) MOBILE CITIZEN, LLC	3,849		
(5) PUBLIC TV LLC	7,010	COST	
(6)			
(7)	-		
(8)			. ,
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶	565,737	, ,	
Part IX Other Assets.			•
Complete if the organization answered "Yes" to	Form 990, Part IV, line	11d. See Form 990, Pa	rt X, line 15.
(a) Description			(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)	<u> </u>	.,	
(9)			 .
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)		<u> </u>	•
Part X Other Liabilities.	E 000 D 111/1	44 4460 5. 0	00 D 1V
Complete if the organization answered "Yes" to	Form 990, Part IV, line	11e or 11f. See Form 9	90, Part X,
line 25.		······································	
1. (a) Description of liability	(b) Book value		
(1) Federal income taxes	 		
(2)			
(3)			
(4)			
(5)	_		
(6)	_		
(7)			
(8)			
(9) Total (Column (h) must equal Form 200, Bort V, ed. (B) line 25.)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	note to the comment and f	and alabamasta that	
2. Liability for uncertain tax positions. In Part XIII, provide the text of the footi	-		
organization's liability for uncertain tax positions under FIN 48 (ASC 740). Ch	eck nere ii the text of the footh	iote nas been provided in Part	AIII .

4b

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental Information

Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b

e Add lines 2a through 2d

Subtract line 2e from line 1

b Other (Describe in Part XIII)c Add lines 4a and 4b

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b, Part V, line 4; Part X, line

2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional information

2e

3

4c

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Open to Public

2013

OMB No 1545-0047

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

PORTLAND REGIONAL EDUCATIONAL

Inspection

Employer identification number

X Yes 84-1360071 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States TELECOMMUNICATIONS CORPORATION General Information on Grants and Assistance the selection criteria used to award the grants or assistance? Part II Part

ž

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

Part IV, line 21, for any recipient that received more than	received more t	nan \$5,0	\$5,000. Part II can be duplicated it additional space is needed	duplicated if addit	ional space is n	eeded.	
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) READING RESULTS					,		
221 NW 2ND ST. #210F							SERVICE EXPANSION
PORTLAND OR 97209	20-1760894	501C4	15,000				
(2) PUBLIC COMMUNICATORS, INC.							
P.O. BOX 44099							CORE SUPPORT
DENVER CO 80201-4099	51-0173482	501C3	18,750				
(3) OREGON PROGRESSIVE FUND							
209 SW OAK ST., FIFTH FLOOR							VOTER COLLABORATION
PORTLAND OR 97204	61-1491180	501C4	15,000				
(4) CAUSA OREGON							
700 MARION ST NE							REFERENDUM CAMPAIGN
SALEM OR 97301	61-1590160	501C3	20,000				
(5) MOMENTUM ALLIANCE							
1631 NE BROADWAY, #453							LEVERAGING MOMENTUM
PORTLAND OR 97232	45-4176224	501C3	18,000				
(6) THE NEW PROGRESSIVE NETWORK							
333 SE 2ND AVE.							ENGAGING ELECTORATE
PORTLAND OR 97214	32-0073649	501C4	10,000				
(2)							
(8)							
(6)							
2 Enter total number of section 501(c)(3) and government organizations listed in the	organizations listed	In the line	e line 1 table				m ▲
	e 1 table						· "

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2013)

	I,	· .	ĺ	1	ı	I
Page 2		(e) Method of valuation (book, (f) Description of non-cash assistance FMV, appraisal, other)				
	on answered "Yes" to Form	(e) Method of valuation (book, FMV, appraisal, other)				
84-1360071	olete if the organizatio	(d) Amount of non-cash assistance				
	Jnited States. Comp	(c) Amount of cash grant				
IONAL EDUCATI	Individuals in the Lonal space is needed	(b) Number of recipients				
Schedule I (Form 990) (2013) PORTLAND REGIONAL EDUCATIONAL	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 duplicated if additional space is needed.	(a) Type of grant or assistance				
Schedule	Part III		-	2	3	4

PART IV - ADDITIONAL INFORMATION

Part IV

SCHEDULE I, PART I, LINE 2: PROCEDURES FOR MONITORING THE USE OF GRANT

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

FUNDS IN THE U.S.

STAFF MEMBERS OR CONTRACT CONSULTANTS; AND IF THERE IS ANY DISCREPANCY, THE USUALLY REQUIRE THE GRANTEE TO SUBMIT, IN DETAIL, HOW THEY USED THE FUNDS IN A NARRATIVE OF THE WORK. THE REPORTS ARE THEN REVIEWED BY ONE OR MORE IN THE CASE OF APPLICANTS WITH WHOM THE ORGANIZATION HAS A FORMAL GRANT AGREEMENT, THE AGREEMENT OUTLINES WHEN THE PAYMENTS ARE TO BE MADE AND FINAL PAYMENT WOULD NOT BE MADE UNTIL THE PROBLEM HAS BEEN CORRECTED.

047260 SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b

Attach to Form 990 or Form 990-EZ.

► See separate instructions.

OMB No 1545-0047

Name of the organization

PORTLAND REGIONAL EDUCATIONAL TELECOMMUNICATIONS CORPORATION

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

Employer identification number

84-1360071

Part I		ons (section 501(c)(3) and section 501(c)(4) organizated "Yes" on Form 990, Part IV, line 25a or 25b, or Fo			
		(b) Relationship between disqualified person and		(d) Co	rrected?
1	(a) Name of disqualified person	organization	(c) Description of transaction	Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958

Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Lo or from	n the	(e) Onginal principal amount	(f) Balance due	(g) in	default?	by bo	proved ard or nittee?	(i) W agree	Intten Intent
			То	From			Yes	No	Yes	No	Yes	No
						•		1				İ
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Part III **Grants or Assistance Benefiting Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
)				
2)				<u> </u>
3)				
4)				
5)				
5)				
7)				
B)				
9)				
0)				

047280

Schedule L (Fo	orm 990 or	990-F7	1 2013

Part IV Business Transactions Involving Interested Persons	Part IV	Business	Transactions	Involving	Interested	Persons
--	---------	----------	---------------------	-----------	------------	----------------

Complete if the organization	answered "Yes" on For	m 990. Part IV. line 2	28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the	(c) Amount of transaction	(d) Description of transaction	of	hanng org nues?
	organization			Yes	No
(1) EBS SUPPORT SERVICES, LLC	KEY EMPLOYEES	132,949	REIMBURSEMENT		X
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE L, PART V - ADDITIONAL INFORMATION

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

- (A) NAME OF PERSON: EBS SUPPORT SERVICES, LLC DBA VOQAL
- (D) DESCRIPTION OF TRANSACTION: REIMBURSEMENT FOR SHARED COSTS

EBS SUPPORT SERVICES LLC IS OWNED BY FIVE MEMBERS WHICH ARE ALL NONPROFIT ORGANIZATIONS. PRETC IS A MEMBER OF EBS SUPPORT SERVICES LLC AND HAS A 17.33% INTEREST. EBS SUPPORT SERVICES WAS CREATED FOR THE PURPOSE OF LEASING PERSONNEL AND PROVIDING SHARED ADMINISTRATIVE SERVICES TO ITS MEMBERS. THE APPOINTED MANAGER OF EBS SUPPORT SERVICES IS THE PRESIDENT/CEO OF PRETC. FOUR KEY EMPLOYEES OF EBS SUPPORT SERVICES DEVOTE PART OF THEIR TIME TO PRETC BUSINESS: JOHN SCHWARTZ, ADAM MILLER, PATRICIA DWYER, AND HAZEL BOLSOVER. PRETC REIMBURSES EBS SUPPORT SERVICES FOR THE COST OF THE LEASED PERSONNEL, INCLUDING KEY EMPLOYEES. THE AMOUNT LISTED ABOVE INCLUDES ALL COMPENSATION AND BENEFITS PAID TO THESE KEY EMPLOYEES ON BEHALF OF PRETC. THE AMOUNT LISTED ABOVE ALSO INCLUDES SALARY AND BENEFITS FOR OTHER SHARED EMPLOYEES AS WELL AS REIMBURSEMENT FOR SUCH ITEMS AS SHARED OFFICE SPACE, EQUIPMENT, AND OTHER OPERATING EXPENSES.

TOTAL AMOUNT PAID TO EBS SUPPORT SERVICES: \$132,949

	(a) Name of interested person	(b) Relationship between	(c) Amount of	(d) Description of transaction	(e) S	Shanng oro
		interested person and the organization	transaction			org nues?
		organization			Yes	No
(1)	<u> </u>					╁
(2)					_	
(<u>4)</u>					_	
(5)						1
(6)						
(7)						╙
(8)					_	<u> </u>
(3) (4) (5) (6) (7) (8) (9)						 —
Part V	Supplemental Information					Щ
Pail V	Provide additional information for respons	es to questions on Schedule L (se	e instructions)			
P	ERSONNEL COSTS		82,337			
P	AYROLL TAXES AND BENEF	ITS	22,457			
0'	THER OPERATING EXPENSE	s	20,624			
RI	ENT		7,531			
		· -				
		···				
					-	
		 		· · · · · · · · · · · · · · · · · · ·		

SCHEDULE O (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.

► Attach to Form 990 or 990-EZ.

Department of the Treasury Internal Revenue Service

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

Open to Public

OMB No 1545-0047

Name of the organization

PORTLAND REGIONAL EDUCATIONAL TELECOMMUNICATIONS CORPORATION

Employer identification number

84-1360071

FORM 990 - ORGANIZATION'S MISSION

THE CORPORATION IS ORGANIZED AND WILL BE OPERATED EXCLUSIVELY FOR

"CHARITABLE, SCIENTIFIC AND EDUCATION" AND "SOCIAL WELFARE" PURPOSES WITHIN

THE MEANING OF SECTIONS 501(C)(3) AND 501(C)(4), RESPECTIVELY, OR THE

INTERNAL REVENUE CODE. TO THIS END, THE NONPROFIT SHALL UNDERTAKE

ACTIVITIES TO:

SUPPORT THE PROVISION OF QUALITY AND DIVERSE INSTRUCTIONAL MEDIA CONTENT
AND CAPABILITIES TO EDUCATORS AND STUDENTS, INCLUDING, BUT NOT LIMITED TO,
DATA SERVICES AND INSTRUCTIONAL VIDEO;

FOSTER OPEN, HONEST AND OUTSPOKEN MEDIA THAT HELP USERS TO BE A POPULAR DEMOCRATIC CHECK ON BOTH GOVERNMENT POWER AND CONCENTRATED PRIVATE PRIVILEGE;

EXPAND THE DISSEMINATION OF MEDIA, AND POINTS OF VIEW CARRIED BY THEM, THAT OFFER DISSENTING, ALTERNATIVE, OR CRITICALLY CONSTRUCTIVE INFORMATION AND CONCEPTS TO THE MARKETPLACE OF IDEAS IN BOTH LOCAL AND GLOBAL CONTEXTS;

ENGAGE IN ADDITIONAL SOCIAL WELFARE, CHARITABLE, SCIENTIFIC, AND/OR EDUCATIONAL ACTIVITIES AS ARE CONSISTENT WITH OPERATIONS THAT MAY BE UNDERTAKEN BY ORGANIZATIONS DESCRIBED IN, AND THUS EXEMPT FROM TAXATION UNDER, SECTION 501(C)(4) OF THE INTERNAL REVENUE CODE, AS NOW ENACTED OR HEREAFTER AMENDED.

Employer identification number

84-1360071

PORTLAND REGIONAL EDUCATIONAL

MARKETPLACE OF IDEAS IN BOTH LOCAL AND GLOBAL CONTEXTS.

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT

THE ORGANIZATION THROUGH ITS INVESTMENT IN AN UNRELATED ORGANIZATION

TAXABLE AS A PARTNERSHIP UNDERTOOK ACTIVITIES TO EXPAND THE DISSEMINATION

OF MEDIA, AND POINTS OF VIEW CARRIED BY THEM, THAT OFFER DISSENTING,

ALTERNATIVE, OR CRITICALLY CONSTRUCTIVE INFORMATION AND CONCEPTS TO THE

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS
THE PRESIDENT OF THE CORPORATION MAY DESIGNATE UP TO TWO DIRECTORS.

FORM 990, PART VI, LINE 8B - DOCUMENTATION BY COMMITTEE EXPLANATION
THE ORGANIZATION DOES NOT HAVE A COMMITTEE WITH AUTHORITY TO ACT ON BEHALF
OF THE GOVERNING BODY.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

THE 990 IS REVIEWED BY THE ORGANIZATION'S ACCOUNTANTS, BUSINESS MANAGER,

CFO, AND AT LEAST ONE CORPORATE OFFICER. ADDITIONALLY THE FORM IS PRESENTED

TO THE BOARD MEMBERS BEFORE IT IS FILED.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

EACH RESPONSIBLE PERSON WHO IS A DIRECTOR OR OFFICER HAS A DUTY TO DISCLOSE

TO THE BOARD (OR TO ANY COMMITTEE OF THE BOARD THAT IS CONSIDERING A

DECISION TO WHICH THE CONFLICT APPLIED) THE MATERIAL FACTS OF ANY PROPOSED

TRANSACTION OR ACTION OF THE ORGANIZATION IN WHICH SUCH RESPONSIBLE PERSON

HAS ANY CONFLICTS. EACH RESPONSIBLE PERSON WHO IS A STAFF MEMBER, HAS A

DUTY TO DISCLOSE TO THE BUSINESS MANAGER OF THE ORGANIZATION AND HIS/HER

IMMEDIATE SUPERVISOR THE MATERIAL FACTS OF ANY PROPOSED TRANSACTION OF THE

Employer identification number

PORTLAND REGIONAL EDUCATIONAL

84-1360071

ORGANIZATION IN WHICH SUCH A PERSON HAS ANY CONFLICT. IMPLEMENTATION OF THE CONFLICT OF INTEREST POLICY RELIES ON SUCH DISCLOSURE. A RESPONSIBLE PERSON WHO FAILS TO FOLLOW THE PROTOCOLS ESTABLISHED IN THE CONFLICT OF INTEREST POLICY SHALL BE SUBJECTED TO MEANINGFUL DISCIPLINARY ACTION BY THE BOARD OF DIRECTORS UP TO AND INCLUDING REMOVAL FROM THE BOARD OR THEIR POSITION WITHIN THE ORGANIZATION.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

ALL SERVICES PERFORMED ARE FROM SHARED EMPLOYEES OF A MANAGEMENT COMPANY.

THE MANAGEMENT COMPANY HAS AN OVERSIGHT COMMITTEE MADE UP OF BOARD MEMBERS

OF NOT-FOR-PROFIT ORGANIZATIONS THAT IT SERVES. THIS OVERSIGHT COMMITTEE

HAS BEEN CHARGED BY THE NOT-FOR-PROFIT ORGANIZATION BOARDS TO

OVERSEE PERSONNEL MATTERS INCLUDING EXECUTIVE AND STAFF COMPENSATION. STAFF

PREPARED A SALARY BENCHMARKING REPORT FOR ALL STAFF POSITIONS THAT

DESCRIBED EACH POSITION AND COMPARED IT TO A STATE NONPROFIT ORGANIZATION'S

2013 SALARY SURVEY. TOP POSITIONS WERE ALSO COMPARED TO DATA IN GUIDESTAR'S

COMPENSATION REPORT RELEASED IN SEPTEMBER 2013. IN ADDITION THE CEO SALARY

WAS COMPARED TO SALARY INFORMATION FROM SIMILAR ORGANIZATION' FORM 990 FOR

THE LAST THREE YEARS. THIS REPORT AND SUPPORTING DOCUMENTATION WAS REVIEWED

IN DEPTH BY THE OVERSIGHT COMMITTEE WHICH SUMMARIZED ITS REVIEW TO ALL OF

THE BOARDS.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS SEE THE EXPLANATION SHOWN FOR FORM 990, PART VI, LINE 15A.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF

Employer identification number

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INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART VII - RELATED ORGANIZATIONS

FORM 990, PART VII, SECTION A

EBS SUPPORT SERVICES, LLC (D/B/A VOQAL) IS OWNED BY FIVE MEMBERS WHICH ARE ALL NONPROFIT ORGANIZATIONS. PRETC IS A MEMBER OF VOQAL AND HAS A 17.33% INTEREST. VOQAL WAS CREATED FOR THE PURPOSE OF LEASING PERSONNEL AND PROVIDING SHARED ADMINISTRATIVE SERVICES TO ITS MEMBERS. CERTAIN DIRECTORS AND OFFICERS, INCLUDING THE ONES LISTED ABOVE IN PART VII, SECTION A, WORK WITH VOQAL TO PROVIDE THEIR SERVICES TO VOQAL'S MEMBERS AND OTHER COMPANIES THE MEMBERS JOINTLY OWN. PRETC REIMBURSES VOQAL FOR THE PERSONNEL COST OF THE DIRECTORS AND OFFICERS. THE AMOUNTS LISTED ABOVE INCLUDES COMPENSATION PAID TO THESE DIRECTORS AND OFFICERS.

▶ Attach to Form 990. PORTLAND REGIONAL EDUCATIONAL Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE R (Form 990)

2013 OMB No 1545-0047

Open to Public inspection

Employer identification number

84-1360071

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ See separate instructions.

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

(f) Direct controlling entity 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. (e) End-of-year assets Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (d) Total income (c) Legal domicile (state or foreign country) (b) Pnmary activity TELECOMMUNICATIONS CORPORATION (a) Name, address, and EIN (if applicable) of disregarded entity Part II Part Ξ 3 3 ₹ (5)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state	(d) Exempt Code section	(e) Public charity status	<u> </u>	(g) Section 512(b)(13) controlled entity?	(b)(13) entity?
		or foreign country)		(if section 501(c)(3))	entity	Yes	N _o
(1)							
(2)							
(3)							
(4)							
(5)							

Schedule R (Form 990) 2013

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

(k)
Percentage , ownership Page 2, Schedule R (Form 990) 2013 (I) Section 512(b)(13) controlled ž (I) General or managing partner? Yes 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. 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 Percentage ownership Ξ (i)
Code V—UBI
amount in box 20
of Schedule K-1
(Form 1065) end-of-year assets Share of (h) Dispro-portionate alloc ? Yes 9 (g) Share of end-of-year assets Share of total псоте (f) Share of total income (C corp, S corp, Type of entity or trust) Predominant income (related, unrelated, excluded from tax under sections 512-514) Direct controlling entity ਉ • 84-1360071 (d)
Direct controlling Legal domicile foreign country) (state or (c)
Legal
domicile
(state or
foreign Schedule R (Form 990) 2013 PORTLAND REGIONAL EDUCATIONAL Primary activity Primary activity 9 Name, address, and EIN of related organization Name, address, and EIN of related organization Part III Part IV M lΞ | ହ <u>ල</u> 3 E (2) |ල **₹**

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Schedule R (Form 990) 2013 PORTLAND REGIONAL EDUCATIONAL

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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	swered "Yes" on For	m 990, Part IV, line 3	34, 35b, or 36.		,	
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes No	امرا
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?	ited organizations listed ii	n Parts II–IV?				1
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		
b Gift, grant, or capital contribution to related organization(s)				1b		Ì
c Gift, grant, or capital contribution from related organization(s)				10		1
d Loans or loan quarantees to or for related organization(s)				1d		l
				4		1
				2	-	ŧ
f Dividends from related organization(s)				7	-	
g Sale of assets to related organization(s)				19		l
				두		l
i Exchange of assets with related organization(s)				ï		ı
j Lease of facilities, equipment, or other assets to related organization(s)				Ė		
k Lease of facilities, equipment, or other assets from related organization(s)				¥	1	- 1
l Performance of services or membership or fundraising solicitations for related organization(s)				=		- 1
m Performance of services or membership or fundraising solicitations by related organization(s)				£		- 1
n Shanng of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		ı
o Sharing of paid employees with related organization(s)				10		
						ŧ
p Reimbursement paid to related organization(s) for expenses				1p		I
q Reimbursement paid by related organization(s) for expenses				19		F
					····	
r Other transfer of cash or property to related organization(s)				7		J
s Other transfer of cash or property from related organization(s)				1s		ı
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.	line, including covered re	lationships and transactic	in thresholds.			
(e)	(a)	9	(p)			
Name of related organization	Transaction type (a-s)	Amount involved	Method of determining amount involved	ount involved		
						1
(1)						1
(3)						
						1
(3)						- 1
(4)						
						1
(5)						- 1
(9)						
			Schedule R (Form 990) 2013	R (Form	990) 2013	က

Schedule R (Form 990) 2013 PORTLAND REGIONAL EDUCATIONAL

047280

Unrelated Organizations Taxable as a Partnership Complete of the organization answered "Yes" on Form 990, Part IV, line 37 Part VI

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

(e) (p) (2) (q) (e)	(q)		© _	(p)	(0)					€	3		5	3
Name, address, and EIN of entity	Primary activity				Are all par	thers	Share of		Disprop	Disproportionate	Code V—UBI	Gene	General or	Percentage
		<u> </u>		unrelated, excluded from tax under	501(c)(3) organizations?	3)		assets	3	200	of Schedule K-1 (Form 1065)	part	partner?	dineien
		8			Yes	No			Yes	No	,	Yes	N _o	
PECTRUM LLC	1										-/			
P.O. BOX 6060 41-2183115 BOULDER CO 80306	.83115 EDUCATION		 ප	ROYALTIES		×	177,013	433,283		×	4/z		×	9.10
(3)						-								
(4)			-											
(5)														
(9)														
(1)														
(8)														
(6)	-					_								
(10)														
(11)														

Schedule R (Form 990) 2013

Schedule R (Form 990) 2013 PORTLAND REGIONAL EDUCATIONAL

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Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions).