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Form **990**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
Inspection**A For the 2013 calendar year, or tax year beginning 10/01/13, and ending 09/30/14**

B Check if applicable: ☐ Address change ☒ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization ONABEN		D Employer identification number 93-1064121
	Doing Business As		E Telephone number 503-968-1500
	Number and street (or P.O. box if mail is not delivered to street address) 6441 SW CANYON COURT	Room/suite 104	
	City or town, state or province, country, and ZIP or foreign postal code PORTLAND OR 97221		
	F Name and address of principal officer VERONICA HIX 6441 SW CANYON CT., SUITE 104 PORTLAND OR 97221		G Gross receipts \$ 559,748
I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no) ☐ 4947(a)(1) or ☐ 527		H(a) Is this a group return for subordinates? ☐ Yes ☒ No H(b) Are all subordinates included? ☐ Yes ☐ No If "No," attach a list (see instructions)	
J Website WWW.ONABEN.ORG		H(c) Group exemption number ▶	
K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶		L Year of formation 1991	M State of legal domicile OR

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities ONABEN'S MISSION IS TO STRENGTHEN INDIGENOUS COMMUNITIES AND INDIVIDUALS BY INCREASING OPPORTUNITIES FOR ECONOMIC GROWTH THROUGH CULTURALLY INNOVATIVE BUSINESS SOLUTIONS.		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)		
	4 Number of independent voting members of the governing body (Part VI, line 1b)		
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)		
	6 Total number of volunteers (estimate if necessary)		
	7a Total unrelated business revenue from Part VIII, column (C), line 42		
b Net unrelated business taxable income from Form 990-T, line 34			
Revenue	8 Contributions and grants (Part VIII, line 1h)		3 6
	9 Program service revenue (Part VIII, line 2g)		4 6
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		5 9
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		6 5
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		7a 0 7b 0
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		Prior Year Current Year
	14 Benefits paid to or for members (Part IX, column (A), line 4)		807,519 248,613
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		182,487 211,917
	16a Professional fundraising fees (Part IX, column (A), line 11e)		78
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 11,262		56,976 71,090
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,046,982 531,698
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		408,423 446,070
19 Revenue less expenses Subtract line 18 from line 12		458,220 417,246	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)		866,643 863,316
	21 Total liabilities (Part X, line 26)		180,339 -331,618
	22 Net assets or fund balances Subtract line 21 from line 20		787,664 442,926
	Beginning of Current Year End of Year		87,793 74,673
22 Net assets or fund balances Subtract line 21 from line 20		699,871 368,253	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date 2-14-15	
	VERONICA HIX Type or print name and title		EXECUTIVE DIRECTOR	
Paid Preparer Use Only	Print/Type preparer's name JAMES E. RICHMAN	Preparer's signature	Date 02/06/15	Check ☒ if self-employed PTIN P00088854
	Firm's name ▶ JAMES E. RICHMAN CPA, PC			Firm's EIN ▶ 93-1309646
	Firm's address ▶ 1 SW COLUMBIA, SUITE 400 PORTLAND, OR 97258			Phone no 503-295-3780

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Form **990** (2013)

917,118

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SCANNED MAR 03 2015

Part III Statement of Program Service Accomplishments

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

☒**1** Briefly describe the organization's mission.

ONABEN'S MISSION IS TO STRENGTHEN INDIGENOUS COMMUNITIES AND INDIVIDUALS BY INCREASING OPPORTUNITIES FOR ECONOMIC GROWTH THROUGH CULTURALLY INNOVATIVE BUSINESS SOLUTIONS. .

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ **738,133** including grants of \$) (Revenue \$ **211,917**)

ONABEN - OUR NATIVE AMERICAN BUSINESS NETWORK - PROVIDED A VARIETY OF PRODUCTS AND SERVICES TO NATIVE COMMUNITIES THROUGHOUT INDIAN COUNTRY, INCLUDING HAWAII AND ALASKA IN 2014. WE OFFERED ENTREPRENEURIAL DEVELOPMENT SERVICES TO ASPIRING INDIANPRENEURS AND SMALL BUSINESS OWNERS FROM COAST TO COAST VIA ONLINE LEARNING PLATFORMS AND FACE-TO-FACE WORKSHOP SETTINGS. ADDITIONALLY, THE ONABEN TEAM PROVIDED ORGANIZATIONAL CAPACITY BUILDING AND TECHNICAL ASSISTANCE SERVICES TO NATIVE ORGANIZATIONS IN NEED OF PROGRAMMATIC AND LEADERSHIP SUPPORT. MANY OF THE ORGANIZATIONS BENEFITTING FROM SUCH SERVICES INCLUDED COMMUNITY DEVELOPMENT FINANCIAL INSTITUTIONS (CDFIS), TRIBAL BUSINESS RESOURCE OFFICES, TRIBAL COLLEGES AND ECONOMIC CONTINUED ON SCHEDULE O.

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► **738,133**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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		X
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		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		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	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	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		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		X
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		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		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		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 employees? If "Yes," complete Schedule J		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
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		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
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)		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		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		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		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		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		
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		X
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		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.		
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)?		X
4b	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?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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?		X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		X
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		X
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?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders.		
11b	Gross income from other sources (Do not net amounts due or paid to other sources 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?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	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.		
13c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

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

- 1a** Enter the number of voting members of the governing body at the end of the tax year
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O
- b** Enter the number of voting members included in line 1a, above, who are independent
- 2** Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?
- 3** Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?
- 4** Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?
- 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?
- 7a** Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?
- b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?
- 8** Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following
- a** The governing body?
- b** Each committee with authority to act on behalf of the governing body?
- 9** Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O

	Yes	No
1a 6		
1b 6		
2		X
3		X
4		X
5		X
6		X
7a		X
7b		X
8a	X	
8b	X	
9		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)

- 10a** Did the organization have local chapters, branches, or affiliates?
- b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?
- 11a** Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?
- b** Describe in Schedule O the process, if any, used by the organization to review this Form 990
- 12a** Did the organization have a written conflict of interest policy? If "No," go to line 13
- b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?
- c** Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done
- 13** Did the organization have a written whistleblower policy?
- 14** Did the organization have a written document retention and destruction policy?
- 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?
- a** The organization's CEO, Executive Director, or top management official
- b** Other officers or key employees of the organization
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?
- 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?

	Yes	No
10a		X
10b		
11a	X	
12a	X	
12b	X	
12c	X	
13		X
14		X
15a	X	
15b		X
16a		X
16b		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **OR**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)
- 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 organization: **SELENA YOKOYAMA**

6441 SW CANYON COURT, SUITE 104**PORTLAND****OR 97221****503-968-1500**

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- 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 related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JACK LENOX	1.00									
CHAIRMAN	0.00	X		X				0	0	0
(2) AUOLYN STWYER	1.00									
SECRETARY/TREASURER	0.00	X		X				0	0	0
(3) BRYAN MERCIER	1.00									
DIRECTOR	0.00	X						0	0	0
(4) TED PICCOLO	1.00									
DIRECTOR	0.00	X						0	0	0
(5) DIRELLE CALICA	1.00									
DIRECTOR	0.00	X						0	0	0
(6) ROBERT WHITENER	1.00									
VICE CHAIR	0.00	X		X				0	0	0
(7) VERONICA HIX	40.00									
EXECUTIVE DIRECTOR	0.00			X				78,885	0	6,104
(8) SELENA YOKOYAMA	40.00									
FINANCE DIRECTOR	0.00			X				64,153	0	10,403
(9)										
(10)										
(11)										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
1b Sub-total								143,038		16,507
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								143,038		16,507

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **0**

- 3** Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4		X
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to 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
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	173,663			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	74,950			
	g Noncash contributions included in lines 1a-1f \$					
	h Total. Add lines 1a-1f		248,613			
Program Service Revenue		Busn. Code				
	2a CONSULTING		179,991	179,991		
	b CURRICULUM TRAINING		18,255	18,255		
	c CONFERENCE REGISTRATIONS		13,671	13,671		
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		211,917			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		78			78
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
		(i) Real (ii) Personal				
	6a Gross rents					
	b Less rental exps					
	c Rental inc or (loss)					
	d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b Less cost or other basis & sales exps					
	c Gain or (loss)					
	d Net gain or (loss)					
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a				
	b Less direct expenses	b				
	c Net income or (loss) from fundraising events					
	9a Gross income from gaming activities See Part IV, line 19	a				
	b Less direct expenses	b				
	c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances	a	77,393				
b Less cost of goods sold	b	28,050				
c Net income or (loss) from sales of inventory		49,343	49,343			
Miscellaneous Revenue		Busn. Code				
11a OTHER		21,747			21,747	
b						
c						
d All other revenue						
e Total. Add lines 11a-11d		21,747				
12 Total revenue. See instructions		531,698	261,260	0	21,825	

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

☒**Do not include amounts reported on lines 6b, 7b, 8b, 9b, 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 U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	166,841	144,357	16,604	5,880
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 Other salaries and wages	208,224	182,450	24,440	1,334
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	5,673	4,994	679	
9 Other employee benefits	32,495	28,415	3,630	450
10 Payroll taxes	32,837	28,624	3,604	609
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	21,066	1,152	19,855	59
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	185,092	168,502	14,198	2,392
12 Advertising and promotion	2,095	945	1,150	
13 Office expenses	37,934	25,506	12,365	63
14 Information technology				
15 Royalties				
16 Occupancy	16,637	14,268	2,249	120
17 Travel	82,703	78,827	3,876	
18 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				
22 Depreciation, depletion, and amortization	5,068	4,805	263	
23 Insurance	4,389	2,454	1,905	30
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.)				
a CURRICULUM DEVELOPMENT	15,622	15,622		
b MEALS AND INCIDENTALS	15,294	12,471	2,823	
c OTHER	13,819	9,110	4,515	194
d TELEPHONE/INTERNET	12,962	11,632	1,234	96
e All other expenses	4,565	3,999	531	35
25 Total functional expenses. Add lines 1 through 24e	863,316	738,133	113,921	11,262
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)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing	100,069	1	50,725
	2 Savings and temporary cash investments	100,934	2	30,113
	3 Pledges and grants receivable, net	501,112	3	194,612
	4 Accounts receivable, net	53,139	4	129,619
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined 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		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	18,199	8	18,515
	9 Prepaid expenses and deferred charges	6,060	9	7,885
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 26,916		
	b Less accumulated depreciation	10b 15,459	10c 8,151	11,457
	11 Investments—publicly traded securities		11	
	12 Investments—other securities See Part IV, line 11		12	
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets See Part IV, line 11		15		
16 Total assets. Add lines 1 through 15 (must equal line 34)	787,664	16	442,926	
Liabilities	17 Accounts payable and accrued expenses	87,793	17	74,673
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	87,793	26	74,673
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	84,769	27	158,495
	28 Temporarily restricted net assets	615,102	28	209,758
	29 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		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	699,871	33	368,253	
34 Total liabilities and net assets/fund balances	787,664	34	442,926	

Part XI Reconciliation of Net AssetsCheck 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	531,698
2	Total expenses (must equal Part IX, column (A), line 25)	2	863,316
3	Revenue less expenses Subtract line 2 from line 1	3	-331,618
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	699,871
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	368,253

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

- 1** Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
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
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
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
☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 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?
- 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

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

SCHEDULE A
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2013**Open to Public
Inspection**▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

ONABEN

Employer identification number

93-1064121**Part I Reason for Public Charity Status** (All organizations must complete this part) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h
- a ☐ Type I b ☐ Type II c ☐ Type III—Functionally integrated d ☐ Type III—Non-functionally integrated
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**.
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Schedule A (Form 990 or 990-EZ) 2013

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.)

Section A. Public Support

Calendar 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.")	462,919	431,295	1,135,009	767,266	248,613	3,045,102
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	462,919	431,295	1,135,009	767,266	248,613	3,045,102
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)						1,314,867
6 Public support. Subtract line 5 from line 4						1,730,235

Section B. Total Support

Calendar year (or fiscal year beginning in)▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	462,919	431,295	1,135,009	767,266	248,613	3,045,102
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					78	78
9 Net income from unrelated business activities, whether or not the business is regularly carried on				24,965	20,747	45,712
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	15	2,448	1,478	25,965	21,825	51,731
11 Total support. Add lines 7 through 10						3,142,623
12 Gross receipts from related activities, etc. (see instructions)					12	289,310

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	55.06 %
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	54.95 %
16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization ▶ ☒		
b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization ▶ ☐		
17a 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐		
b 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning 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						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar 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						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ ☐						

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	%

Section 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 33 1/3% support tests—2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶ ☐

b 33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶ ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV **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).

PART II, LINE 10 - OTHER INCOME DETAIL

OTHER INCOME \$ 51,731

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service

Name of the organization

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.gov/form990.

OMB No 1545-0047

2013Open to Public
Inspection

Employer identification number

ONABEN**93-1064121****Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 6

- 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

(a) Donor advised funds

(b) Funds and other accounts

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☐ Yes ☐ No

- 6 Did the organization inform all grantees, donors, and donor advisors in writing 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?

☐ Yes ☐ No**Part II Conservation Easements.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 7

- 1 Purpose(s) of conservation easements held by the organization (check all that apply)

- ☐ Preservation of land for public use (e.g., recreation or education)
- ☐ Protection of natural habitat
- ☐ Preservation of open space

- ☐ Preservation of an historically important land area
- ☐ Preservation of a certified historic structure

- 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

Held at the End of the Tax Year

- a Total number of conservation easements

2a

- b Total acreage restricted by conservation easements

2b

- c Number of conservation easements on a certified historic structure included in (a)

2c

- d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

2d

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

- 4 Number of states where property subject to conservation easement is located ▶

- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

- 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶

- 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$

- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

- 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of 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

▶ \$

- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1

▶ \$

b Assets included in Form 990, Part X

▶ \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- ☐ **a** Public exhibition
☐ **b** Scholarly research
☐ **c** Preservation for future generations
☐ **d** Loan or exchange programs
☐ **e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes ☐ No

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, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
1c	
1d	
1e	
1f	

- c** Beginning balance
d Additions during the year
e Distributions during the year
f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a** Board designated or quasi-endowment ☐ %
b Permanent endowment ☐ %
c Temporarily restricted endowment ☐ %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i)** unrelated organizations
(ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		26,916	15,459	11,457
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) **11,457**

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
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 990, Part IV, line 11c See Form 990, Part X, line 13

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ►		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ►	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f See Form 990, 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 (b) must equal Form 990, Part X, col (B) line 25) ►	

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	531,698
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	531,698
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	531,698

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a

1	Total expenses and losses per audited financial statements		1	863,316
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	863,316
4	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	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	863,316

Part XIII Supplemental Information

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.

PART X - FIN 48 FOOTNOTE

UNDER FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS CODIFICATION (ASC) TOPIC 740, INCOME TAXES, AN ORGANIZATION MUST ALSO EVALUATE ITS TAX POSITIONS AND PROVIDE FOR A LIABILITY FOR ANY POSITIONS THAT WOULD NOT BE CONSIDERED "MORE LIKELY THAN NOT" TO BE UPHELD UNDER A TAX AUTHORITY EXAMINATION. MANAGEMENT HAS EVALUATED ITS TAX POSITIONS AND HAS CONCLUDED THAT IT HAS NO UNCERTAIN TAX POSITIONS THAT MEET THIS CRITERION.

Part XIII Supplemental Information (continued)

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZComplete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2013**Open to Public
Inspection**

Employer identification number

ONABEN**93-1064121****FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT****DEVELOPMENT AGENCIES TASKED WITH BUILDING THE ASSETS OF NATIVE AMERICANS.**

**ONABEN PROVIDED PRODUCTS (900 BOOKS) AND SERVICES (30 TRAININGS AND 18
WEBCASTS) TO 25 UNIQUE CUSTOMERS AND CLIENTS AND 400+ SMALL BUSINESSES IN
BOTH RURAL AND URBAN SETTINGS IN EVERY REGION OF THE UNITED STATES.**

**ONABEN'S CURRENT PRODUCTS INCLUDE THE INDIANPRENEURSHIP SUITE OF PRODUCTS:
A NATIVE AMERICAN JOURNEY INTO BUSINESS (STUDENT AND INSTRUCTOR GUIDE),
GROWING YOUR BUSINESS IN INDIAN COUNTRY (VOLUMES I, II AND A FACILITATOR'S
GUIDE), A MOTIVATIONAL DVD (CONSISTING OF EIGHT SUCCESS STORIES ATTRIBUTED
TO INDIANPRENEURSHIP).**

**ONABEN ALSO PROVIDES AN ARRAY OF CONTRACTUAL SERVICES DESIGNED TO GROW THE
ABILITY OF INDIAN-OWNED BUSINESSES AND ORGANIZATIONS THAT SUPPORT:
ENTREPRENEURIAL TRAINING AND DEVELOPMENT, PROGRAM DEVELOPMENT, LEADERSHIP
DEVELOPMENT, STRATEGIC PLANNING, DESIGN SERVICES AND TEAM BUILDING.**

**FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
EXECUTIVE MANAGEMENT AND THE BOARD TREASURER PERFORM A DETAILED REVIEW OF
THE 990 BEFORE FILING.**

**FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
ANNUALLY THE BOARD OF DIRECTORS DISCLOSES ANY CONFLICTS OF INTERESTS.**

Name of the organization

ONABEN

Employer identification number

93-1064121

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
THE BOARD OF DIRECTORS CONDUCTS A PERFORMANCE REVIEW OF THE EXECUTIVE
DIRECTOR AND ESTABLISHES COMPENSATION THAT IS WELL WITHIN MARKET LIMITS FOR
THE WORK PERFORMED.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART IX, LINE 11G - OTHER FEES FOR SERVICES

DESCRIPTION

PROGRAM SERVICE

MGT & GENERAL

FUNDRAISING

CONTRACT SERVICES

\$ 168,502

\$ 14,198

\$ 2,392



Secretary of State
Corporation Division
255 Capitol Street NE, Suite 151
Salem, OR 97310-1327

Phone: (503) 986-2200
www.filinginoregon.com

Registry Number: 253496-89
Type: DOMESTIC NONPROFIT CORPORATION

Next Renewal Date: 06/27/2014

ONABEN
PO BOX 25477
PORTLAND OR 97281

Acknowledgment Letter

The document you submitted was recorded as shown below. Please review and verify the information listed for accuracy.

Document
ARTICLES OF AMENDMENT

Filed On
07/10/2014

Jurisdiction
OREGON

Nonprofit Type
PUBLIC BENEFIT WITH
MEMBERS

Name
ONABEN

Principal Place of Business
6441 SW CANYON CT STE #104
PORTLAND OR 97221

Registered Agent
VERONICA HIX
6441 SW CANYON CT #104
PORTLAND OR 97221

Mailing Address
PO BOX 25477
PORTLAND OR 97281

President
JACK LENOX
COQUILLE INDIAN TRIBE
3050 TREMONT ST
NORTH BEND OR 97459

Secretary
AUROLYN STWYER
PO BOX 1564
WARM SPRINGS OR 97761

DEBHAR
ACK
07/10/2014



Secretary of State
Corporation Division
255 Capitol Street NE, Suite 151
Salem, OR 97310-1327

Phone: (503) 986-2200
www.filinginoregon.com

2014 ANNUAL REPORT

Registry Number: 253496-89

Date of Incorporation: 06/27/1991

Fee: \$50.00

Due Date: 06/27/2014

Type: DOMESTIC NONPROFIT CORPORATION

0189

THE OREGON NATIVE AMERICAN BUSINESS AND ...
PO BOX 25477
PORTLAND OR 97281

Name of Domestic Nonprofit Corporation

~~THE OREGON NATIVE AMERICAN BUSINESS AND ENTREPRENEURIAL NETWORK~~ ONABEN

Jurisdiction: OREGON

Nonprofit Type: Public Benefit With Members

The following information is required by statute. Please complete the entire form. If any of the information is incorrect, you can make changes on this form. Failure to submit this Annual Report and fee by the due date may result in inactivation on our records.

Registered Agent

VERONICA HIX
6441 SW CANYON CT #104
PORTLAND OR 97221

If the Registered Agent has changed, the new Agent has consented to the appointment. Oregon street address required.

1) Type of Business

2) Principal Place of Business (Str. address, city, state, zip)

6441 SW CANYON CT STE #104
PORTLAND OR 97221

3) Mailing Address (Address, city, state, zip)

PO BOX 25477
PORTLAND OR 97281

4) President Name and Address

JACK LENOX
~~COQUILLE INDIAN TRIBE~~ PO Box 1606
3050 TREMONT ST
~~NORTH BEND OR 97459~~ Florence OR 97439

5) Secretary Name and Address

AUROLYN STWYER
PO BOX 1564
WARM SPRINGS OR 97761

6) Signature

7) Printed Name

Jack Lenox

8) Date

June 23, 2014

9) Daytime Phone Number

~~503-468-1500~~ 503-468-1500

Make check payable to "Corporation Division" and mail completed form with payment to Secretary of State, Corporation Division, 255 Capitol ST NE Suite 151, Salem, OR 97310-1327.

Note: You can also fax to (503) 378-4381. Filing fees may be paid with VISA or MasterCard. Submit the card number and expiration date on a separate page for your protection.

**Articles of Amendment - Nonprofit**Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - <http://www.FilingInOregon.com> - Phone (503) 986-2200REGISTRY NUMBER: 253496-89

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public record. We must release this information to all parties upon request and it will be posted on our website.

For office use only

Please Type or Print Legibly in Black Ink.

1) ENTITY NAME: THE OREGON NATIVE AMERICAN BUSINESS AND ENTREPRENEURIAL NETWORK

2) STATE THE ARTICLE NUMBER(S): and set forth the article(s) as it is amended to read (Attach a separate sheet if necessary.)

Article I is amended in its entirety to read as follows:"The name of this corporation is ONABEN (the "Corporation"), and its duration shall be perpetual."3) THE AMENDMENT WAS ADOPTED ON: December 19, 2013

(If more than one amendment was adopted, identify the date of adoption of each amendment.)

4) CHECK THE APPROPRIATE STATEMENT:

☒ Membership approval was not required. The amendment(s) was approved by a sufficient vote of the board of directors or incorporators.☐ Membership approval was required.

The membership vote was as follows.

Class(es) entitled to vote	Number of members entitled to vote	Number of votes entitled to be cast	Number of votes cast FOR	Number of votes cast AGAINST

5) EXECUTION: (Must be signed by at least one officer or director.)

By my signature, I declare as an authorized authority, that this filing has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment or both.

Signature:

Printed Name:

Title:

Jack LenoxPresident

CONTACT NAME: (To resolve questions with this filing.)

Brenna Dickey

PHONE NUMBER: (Include area code.)

(503) 224-5858**FEES**

Required Processing Fee \$50

No Fee for Nonprofit Type Change

Processing Fees are nonrefundable. Please make check payable to "Corporation Division."

Free copies are available at FilingInOregon.com, using the Business Name Search program.

OREGON NATIVE AMERICAN BUSINESS & ENTREPRENEURIAL NETWORK

**UNANIMOUS WRITTEN CONSENT OF BOARD OF DIRECTORS
IN LIEU OF MEETING**

The undersigned, being all the directors of Oregon Native American Business & Entrepreneurial Network, an Oregon nonprofit corporation (the "Corporation"), hereby adopt the following resolutions by written consent in lieu of a meeting pursuant to ORS 65.341:

Articles of Amendment

RESOLVED that the Articles of Amendment attached as Exhibit A are hereby adopted by the Corporation.

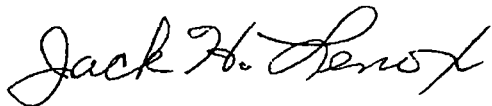
Amendment to Bylaws

RESOLVED that the Amendments to the Bylaws attached as Exhibit B are hereby adopted by the Corporation.

RESOLVED that the officers of the Corporation are each authorized and directed, in the name of the Corporation, to do all things necessary or appropriate in order to effect the intent and purposes of the foregoing resolutions, and that any and all actions previously taken to carry out the intent and purposes of the foregoing resolutions in all respects are ratified, confirmed, and approved.

This consent may be executed in counterparts. A signature transmitted by fax or electronic means shall be deemed effective as an original.

Dated as of January 20, 2014.



Jack Lenox

Robert Whitener

Aurolyn Stwyer

Bryan Mercier

Ted Piccolo

Direlle Calica

Tina Retasket

Monica Simeon

*Leo Stewart is not a current
Board Director. He is eligible to
be seated on the Board as of
September 2014*
Leo Stewart

OREGON NATIVE AMERICAN BUSINESS & ENTREPRENEURIAL NETWORK

**UNANIMOUS WRITTEN CONSENT OF BOARD OF DIRECTORS
IN LIEU OF MEETING**

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Articles of Amendment

RESOLVED that the Articles of Amendment attached as Exhibit A are hereby adopted by the Corporation.

Amendment to Bylaws

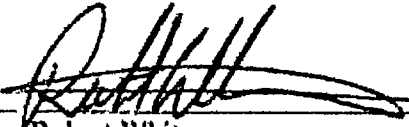
RESOLVED that the Amendments to the Bylaws attached as Exhibit B are hereby adopted by the Corporation.

RESOLVED that the officers of the Corporation are each authorized and directed, in the name of the Corporation, to do all things necessary or appropriate in order to effect the intent and purposes of the foregoing resolutions, and that any and all actions previously taken to carry out the intent and purposes of the foregoing resolutions in all respects are ratified, confirmed, and approved.

This consent may be executed in counterparts. A signature transmitted by fax or electronic means shall be deemed effective as an original.

Dated as of January 20, 2014.

Jack Lenox



Robert Whitener

Aurolyn Swyer

Bryan Mercier



Ted Piccolo

Direlle Calica

Tina Retasket

Monica Simeon

Leo Stewart

OREGON NATIVE AMERICAN BUSINESS & ENTREPRENEURIAL NETWORK**UNANIMOUS WRITTEN CONSENT OF BOARD OF DIRECTORS
IN LIEU OF MEETING**

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Articles of Amendment

RESOLVED that the Articles of Amendment attached as Exhibit A are hereby adopted by the Corporation.

Amendment to Bylaws

RESOLVED that the Amendments to the Bylaws attached as Exhibit B are hereby adopted by the Corporation.

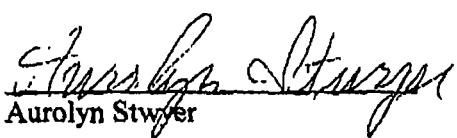
RESOLVED that the officers of the Corporation are each authorized and directed, in the name of the Corporation, to do all things necessary or appropriate in order to effect the intent and purposes of the foregoing resolutions, and that any and all actions previously taken to carry out the intent and purposes of the foregoing resolutions in all respects are ratified, confirmed, and approved.

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Dated as of January 20, 2014.

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OREGON NATIVE AMERICAN BUSINESS & ENTREPRENEURIAL NETWORK

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Articles of Amendment

RESOLVED that the Articles of Amendment attached as Exhibit A are hereby adopted by the Corporation.

Amendment to Bylaws

RESOLVED that the Amendments to the Bylaws attached as Exhibit B are hereby adopted by the Corporation.

RESOLVED that the officers of the Corporation are each authorized and directed, in the name of the Corporation, to do all things necessary or appropriate in order to effect the intent and purposes of the foregoing resolutions, and that any and all actions previously taken to carry out the intent and purposes of the foregoing resolutions in all respects are ratified, confirmed, and approved.

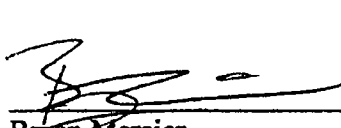
This consent may be executed in counterparts. A signature transmitted by fax or electronic means shall be deemed effective as an original.

Dated as of January 20, 2014.

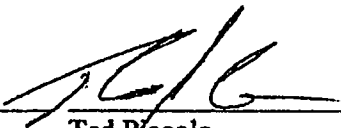
Jack Lenox

Robert Whitener

Aurolyn Stwyer



Bryan Mercier



Ted Piccolo

Direlle Calica

Tina Retasket

Monica Simeon

Leo Stewart

OREGON NATIVE AMERICAN BUSINESS & ENTREPRENEURIAL NETWORK

**UNANIMOUS WRITTEN CONSENT OF BOARD OF DIRECTORS
IN LIEU OF MEETING**

The undersigned, being all the directors of Oregon Native American Business & Entrepreneurial Network, an Oregon nonprofit corporation (the "Corporation"), hereby adopt the following resolutions by written consent in lieu of a meeting pursuant to ORS 65.341:

Articles of Amendment

RESOLVED that the Articles of Amendment attached as Exhibit A are hereby adopted by the Corporation.

Amendment to Bylaws

RESOLVED that the Amendments to the Bylaws attached as Exhibit B are hereby adopted by the Corporation.

RESOLVED that the officers of the Corporation are each authorized and directed, in the name of the Corporation, to do all things necessary or appropriate in order to effect the intent and purposes of the foregoing resolutions, and that any and all actions previously taken to carry out the intent and purposes of the foregoing resolutions in all respects are ratified, confirmed, and approved.

This consent may be executed in counterparts. A signature transmitted by fax or electronic means shall be deemed effective as an original.

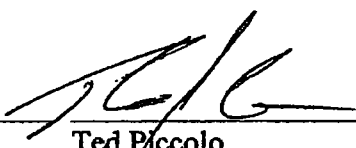
Dated as of January 20, 2014.

Jack Lenox

Robert Whitener

Aurolyn Stwyer

Bryan Mercier



Ted Piccolo

Direlle Calica

Tina Retasket

Monica Simeon

Leo Stewart

OREGON NATIVE AMERICAN BUSINESS & ENTREPRENEURIAL NETWORK

**UNANIMOUS WRITTEN CONSENT OF BOARD OF DIRECTORS
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The undersigned, being all the directors of Oregon Native American Business & Entrepreneurial Network, an Oregon nonprofit corporation (the "Corporation"), hereby adopt the following resolutions by written consent in lieu of a meeting pursuant to ORS 65.341:

Articles of Amendment

RESOLVED that the Articles of Amendment attached as Exhibit A are hereby adopted by the Corporation.

Amendment to Bylaws

RESOLVED that the Amendments to the Bylaws attached as Exhibit B are hereby adopted by the Corporation.

RESOLVED that the officers of the Corporation are each authorized and directed, in the name of the Corporation, to do all things necessary or appropriate in order to effect the intent and purposes of the foregoing resolutions, and that any and all actions previously taken to carry out the intent and purposes of the foregoing resolutions in all respects are ratified, confirmed, and approved.

This consent may be executed in counterparts. A signature transmitted by fax or electronic means shall be deemed effective as an original.

Dated as of January 20, 2014.

Jack Lenox

Robert Whitener

Aurolyn Stwyer

Bryan Mercier

Ted Piccolo


Direlle Calica

Tina Retasket

Monica Simeon

Leo Stewart

OREGON NATIVE AMERICAN BUSINESS & ENTREPRENEURIAL NETWORK

**UNANIMOUS WRITTEN CONSENT OF BOARD OF DIRECTORS
IN LIEU OF MEETING**

The undersigned, being all the directors of Oregon Native American Business & Entrepreneurial Network, an Oregon nonprofit corporation (the "Corporation"), hereby adopt the following resolutions by written consent in lieu of a meeting pursuant to ORS 65.341:

Articles of Amendment

RESOLVED that the Articles of Amendment attached as Exhibit A are hereby adopted by the Corporation.

Amendment to Bylaws

RESOLVED that the Amendments to the Bylaws attached as Exhibit B are hereby adopted by the Corporation.

RESOLVED that the officers of the Corporation are each authorized and directed, in the name of the Corporation, to do all things necessary or appropriate in order to effect the intent and purposes of the foregoing resolutions, and that any and all actions previously taken to carry out the intent and purposes of the foregoing resolutions in all respects are ratified, confirmed, and approved.

This consent may be executed in counterparts. A signature transmitted by fax or electronic means shall be deemed effective as an original.

Dated as of January 20, 2014.

Jack Lenox

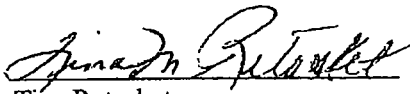
Robert Whitener

Aurolyn Stwyer

Bryan Mercier

Ted Piccolo

Direlle Calica



Tina Retasket

Monica Simeon

Leo Stewart

OREGON NATIVE AMERICAN BUSINESS & ENTREPRENEURIAL NETWORK

**UNANIMOUS WRITTEN CONSENT OF BOARD OF DIRECTORS
IN LIEU OF MEETING**

The undersigned, being all the directors of Oregon Native American Business & Entrepreneurial Network, an Oregon nonprofit corporation (the "Corporation"), hereby adopt the following resolutions by written consent in lieu of a meeting pursuant to ORS 65.341:

Articles of Amendment

RESOLVED that the Articles of Amendment attached as Exhibit A are hereby adopted by the Corporation.

Amendment to Bylaws

RESOLVED that the Amendments to the Bylaws attached as Exhibit B are hereby adopted by the Corporation.

RESOLVED that the officers of the Corporation are each authorized and directed, in the name of the Corporation, to do all things necessary or appropriate in order to effect the intent and purposes of the foregoing resolutions, and that any and all actions previously taken to carry out the intent and purposes of the foregoing resolutions in all respects are ratified, confirmed, and approved.

This consent may be executed in counterparts. A signature transmitted by fax or electronic means shall be deemed effective as an original.

Dated as of January 20, 2014.

Jack Lenox

Robert Whitener

Aurolyn Stwyer

Bryan Mercier

Ted Piccolo

Direlle Calica

Tina Retasket



Monica Simeon

Leo Stewart

EXHIBIT A

Articles of Amendment

**ARTICLES OF AMENDMENT
OF
ONABEN**

Immediately prior to the effective time of these Articles of Amendment, the name of the corporation was the Oregon Native American Business and Entrepreneurial Network (the "Corporation"). The Corporation's registry number is 23496-89.

The Corporation's Restated Articles of Incorporation, which were filed with the Oregon Secretary of State on June 15, 2000 (the "Articles"), are hereby amended as follows:

ARTICLE I

Article I of the Articles is deleted and replaced with the following:

"The name of this corporation is ONABEN (the "Corporation"),
and its duration shall be perpetual."

The effective date of these Articles of Amendment is the date these Articles of Amendment are filed with the Oregon Secretary of State.

EXHIBIT B

Amendments to the Bylaws

**AMENDMENTS TO THE BYLAWS
OF
ONABEN**

Section 1.1 of the Bylaws is hereby amended and restated in its entirety as follows:

"1.1 Corporate Name. The name of this corporation is ONABEN (the "Corporation")."

Section 3.4(a) of the Bylaws is hereby amended and restated in its entirety as follows:

"(a) The Board of Directors shall consist of individuals who represent a broad cross-section of the Corporation's stakeholders, including but not limited to tribes, individual Native American business owners, practitioner organizations, and other sectors as the Board of Directors may deem desirable, and a majority of the Board of Directors shall consist of individuals from Native American Tribes who are members or officials of tribal governments or entities nominated by tribal council resolution."

Section 3.4(c) of the Bylaws is hereby amended and restated in its entirety as follows:

"(c) The Board of Directors shall be divided into three groups, so that the terms of approximately one-third of the Board of Directors shall expire annually, in order to ensure continuity of operations and for regular renewal of board membership."



Secretary of State
Corporation Division
255 Capitol Street NE, Suite 151
Salem, OR 97310-1327

Phone: (503) 986-2200
www.filinginoregon.com

Registry Number: 545619-99
Type: ASSUMED BUSINESS NAME

VERONICA HIX
6441 SW CANYON CT STE 104
PORTLAND OR 97221

Acknowledgment Letter

The document you submitted was recorded as shown below. Please review and verify the information listed for accuracy.

Document
CANCELLATION OF REGISTRATION

Filed On
07/10/2014

Name
ONABEN

Principal Place of Business
6441 SW CANYON CT #104
PORTLAND OR 97221

Authorized Representative
VERONICA HIX
6441 SW CANYON CT STE 104
PORTLAND OR 97221

Registrant
THE OREGON NATIVE AMERICAN BUSINESS

ALL COUNTIES

DEBHAR
ACK
07/10/2014

**Assumed Business Name - Cancellation**

Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - <http://www.FilingInOregon.com> - Phone: (503) 986-2200

REGISTRY NUMBER: 545619-99

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public record.
We must release this information to all parties upon request and it will be posted on our website.

For office use only

Please Type or Print Legibly in **Black Ink**. Attach Additional Sheet if Necessary.

1. ASSUMED BUSINESS NAME: ONABEN

2. PRINCIPAL PLACE OF BUSINESS: (Street Address, City, State, Zip)

6441 S.W. Canyon Court, #104, Portland, Oregon 97221

3. SIGNATURE(S): (Authorized Representative or All Registrants must sign.)

By my signature, I declare as an authorized signer, that this filing has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment or both.

Jack H. Lenox

Jack H. Lenox, President of The Oregon Native American Business and Entrepreneurial Network

CONTACT NAME: (To resolve questions with this filing)

Brenna Dickey

PHONE NUMBER: (Include area code)

(503) 224-5858

FEES

Required Processing Fee **\$50**

Processing Fees are nonrefundable. Please make check payable to "Corporation Division"

Free copies are available at FilingInOregon.com using the Business Name Search program.