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SCANNED MAR 2 5 7015

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

OMB No 1545-0047 2014 Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ 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.

Ar	or the	e 2014 calendar year, or tax year beginning an	d ending						
В	Check if	C Name of organization		D Employer identifi	cation number				
	Addre:	Northwest Housing Association							
	Name change	Doing business as		91-0	935278				
	Initial return	Number and street (or P.O box if mail is not delivered to street address)	Room/su	lite E Telephone numbe	er				
\vdash	Final return/	1530 Errongmoon Donk Dr. CW		(360					
	termin ated			G Gross receipts \$	229,576.				
	Ameno			H(a) is this a group r					
\vdash	Applic			for subordinates					
	tion pendir								
Same as C above H(b) Are all subordinates included? Yes									
		e: > www.nwhousingassociation.com	<u>, , , , , , , , , , , , , , , , , , , </u>	H(c) Group exemption					
		organization: X Corporation			M State of legal domicile: WA				
	art I	Summary	<u> </u>	ear of formation. 1913	VI State of legal dofficie. WA				
		Briefly describe the organization's mission or most significant activities Ser	ring :	to improve nu	hlia				
S		awareness and opinion of manufactured he		co improve pu	DIIC				
Activities & Governance	1			acrothan 25% of the not o					
Je J		Check this box if the organization discontinued its operations or discontinued its operations of the discontinued its operation in the discontin	osed of fi	TH THE	1				
ဇ္ဌ	1	Number of voting members of the governing body (Part VI, line 1a)		,	11				
∞ಕ	1	Number of independent voting members of the governing body (Part VI, line 1b), · · · ·	4	11				
ies	l .	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	Λ · Λ :	5	2				
Ξ		Total number of volunteers (estimate if necessary)	$_{\perp}$, $_{\perp}$	• • •	11				
٩c		Total unrelated business revenue from Part VIII, column (C), line 12		<u>7a</u>	0.				
	b	Net unrelated business taxable income from Form 990-T, ine 34		7b	0.				
		Care Care Care Care Care Care Care Care		Prior-Year	Current Year				
ā	ì	Contributions and grants (Part VIII, line 1h)	0.	0.					
ē	1	Program service revenue (Part VIII, line 2g)	205,501.	223,142.					
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	243.	312. 6,122.					
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		6,147.					
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	211,891.	229,576.					
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.				
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10	0)	138,023.	141,809.				
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	_	0.					
ă	b	Total fundraising expenses (Part IX, column (D), line 25)	0.						
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		52,382.	55,096.				
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		190,405.	196,905.				
	19	Revenue less expenses. Subtract line 18 from line 12		21,486.	32,671.				
583				Beginning of Current Year	End of Year				
sets	20	Total assets (Part X, line 16)		406,783.	441,588.				
t AS	21	Total liabilities (Part X, line 26)		3,361.	5,495.				
Net Assets or Fund Balances	22	Net assets or fund balances Subtract line 21 from line 20		403,422.	436,093.				
Pa	art II	Signature Block							
Und	ler pena	ilties of perjury, I declare that) have examined this ret <u>urn, incl</u> uding accompanying schedi	ules and sta	itements, and to the best of n	ny knowledge and belief, it is				
true	, correc	ct, and complete. Declaration/of preparer (other than officer) is based on all information of	which prep	arer has any knowledge.					
		1 Dran		3-1	13-15				
Sig	ın	Signature of office		Date	•				
Her	re	Joan Brown, Executive Director							
		Type or print name and title		10.					
		Print/Type preparer's name Preparer's signature		Date Check [PTIN				
Paid	d	Maria A. Ichiyama, CPA Maria a Uchufarwa	CPA_	03/10/15 self-emplo					
Pre	parer	Firm's name ▶ Frost & Company, P.S. ∨		Firm's EIN	91-1136436				
Use	Only	Firm's address P O Box 7609							
Olympia, WA 98507-7609 Phone no. (360) 786-8080									
Ma	y the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No				
4000	201 11	1 HA For Panerwork Reduction Act Notice, see the separate instruc	rtions		Form 990 (2014)				

	990 (2014) Northwest Housing Association	91-0935278 Page 2
Par	t 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	,
`	Serving to improve public awareness an opinion of manuf	actured homes.
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 X No
	If "Yes," describe these new services on Schedule O	
_		Yes X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	LYes LA_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	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to oth	ers, the total expenses, and
	revenue, if any, for each program service reported	
4a	(Code) (Expenses \$) (Rever	iue \$
	Educated the public and public officials about the qual	ity of the
	manufactured homes, about the manufactured housing indu	
	promoted the industry.	
	DIOMOCCA CHE IMABELY	
4b	(Code) (Expenses \$	iue \$
		-
		
		· · · · · · · · · · · · · · · · · · ·
4c	(Code) (Expenses \$ including grants of \$) (Rever	nue \$
	The state of the s	
4 d	Other program services (Describe in Schedule O.)	
4d	Other program services (Describe in Schedule O) (Fevenue \$ (Sevenue \$) (Revenue \$)	· · · · · · · · · · · · · · · · · · ·
4d 4e	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$ Total program service expenses > 196,905.)

Form 990 (2014) Northwest Housing Association 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)?		103	140
	If "Yes," complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			İ
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		l	
	Part VI	11a	Х	<u> </u>
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
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		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	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,	1		
	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	<u> </u>	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	<u> </u>	Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	1]	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	<u> </u>	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			,,
••	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	-	X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	990	(201 A)
		FORT	33U	(2014)

Form 990 (2014) Northwest Housing Association
Part IV Checklist of Required Schedules (continued)

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					
Dot the organization report more than \$5.000 organization answer "Yes" to Part VII, Section A, Ine 3, 4, or 3 about companization of the organization's current and former officers, directors, rustees, key employees, and implicate companizated employees? If "Yes," complete Schedule J But 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 assued after December 31, 2002? If "Yes," carewer lines 24b through 2dd and complete Schedule J William Provides and the Schedule J William Provides and that the transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I william Provides and that the transaction with a disqualified person and provides and that the transaction with a disqualified person at provides and that the transaction with a sont been reported on any of the organization spinor Forms 950 or 990 EZ? If "Yes," complete Schedule L, Part I will be the organization and that the transaction with a singular personar 3 if "Yes, complete Schedule L, Part II will be discussed as a provide that the transaction with a singular personar 3 if "Yes, complete Schedule L, Part II will be discussed as a 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 39% controlled entity or family member of a current or former officer, director, trustee, or key employee? If "Yes, complete Schedule L, Part II will be the organization receive and that Schedule L,		Diddle accounts a constant of the OF 000 for the other contract of the constant of the contract of the contrac		Yes	No
22 Dut the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, committee Schedule I. Part IV and IV Section A, Inc 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 I. Part IV Schedule IV IV IV IV Schedule IV IV Schedule IV IV	21				•
Part IX, column (A), line 27 if "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VIII, 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 and III and	·		21		
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 shoul compensation of the organization is current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, I'mo," go to line 25a both the organization have a tax-exempt bond size 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," arrawer lines 24b through 24d and complete Schedule K. If "No", go to line 25a both the organization maintain an escrow account other than a refunding secrow at any time during the year? did bid the organization act as an ino behalf of "issuer for bonds outstanding at any time during the year? did bid the organization act as an ino behalf of issuer for bonds outstanding at any time during the year? 35 Section 501(6)(3), 501(6)(4), and 501(6)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? "If "Yes," complete Schedule L, Part I is the organization with a disqualified person during the year? "If "Yes," complete Schedule L, Part I is the organization with a disqualified person in a princy year, and that the transaction has not been reported on any of the organization engage in an excess benefit transaction with a disqualified person in a princy year, and that the transaction has not been reported on any of the organization engage in an excess benefit transaction with a disqualified person in a princy year, and that the transaction has not been reported on any of the organization engage in an excess benefit transaction with a disqualified person in a princy year, and that the transaction with a disqualified person in a princy year, and that the transaction with a disqualified person in a princy year, and that the transaction is a princy of the p	22				v
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J			22		
Schedule / 24a Did the organization have a tax exempt bond issue with an oustanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," ariswer lines 24b through 24d and complete Schedule K. If "No", go to line 25a. 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year? defease any tax-exempt bonds? 24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year? do Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? do Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? do Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? do Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? do Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? do Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? do Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? do Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? do Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? do Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? do Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? do Did the organization act and any act act as an excess benefit transaction with a during the year? do Did the organization act and the organization and the secretion of the organization act and the secretion of any of these persons? If "Yes," complete Schedule L, Part IV Did the organization liquidate, terminate, or dissolve	23				
24a Dd 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 D bid the organization mivest any proceeds of tax-exempt bonds beyond a temporary period exception? D dit the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? D dit the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d					.
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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), 601(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 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 pnor Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part II 25b Unit 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 "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee hereof, 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 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 29 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 29 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 31 Did the organization organization organization organization organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section \$12(b)(13)? If "Yes," complete Schedule R, Part I II 32 Did the organization have a controlled entity within the meaning	С		240		
Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I I 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-E27 If "Yes," complete Schedule L, Part I I I Is Did the organization report any amount on Part X, the 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustess, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II I Is 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 IV Is 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 Is 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 Is A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Is Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV Is Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Is Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M, Part II Is Did the organization owing the Schedule M, Part II Is Did the organization own 100% of an entity disrega		•		 	_
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sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33	33	•			
Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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 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 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			_33		X
Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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 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 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	34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			1
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 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 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		Part V, line 1	34	ļ	
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 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note, All Form 990 filers are required to complete Schedule O 38 X	35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	ļ	X
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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note, All Form 990 filers are required to complete Schedule O 38 X	b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
If "Yes," complete Schedule R, Part V, line 2 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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note, All Form 990 filers are required to complete Schedule O 38 X			35b		
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 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note, All Form 990 filers are required to complete Schedule O 38 X	36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O 38 X			36	ļ	ļ
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note, All Form 990 filers are required to complete Schedule O 38 X	37				
Note. All Form 990 filers are required to complete Schedule O			37	-	X
	38				
Form 990 (2014)		Note. All Form 990 filers are required to complete Schedule O			<u> </u>
			Form	990	(2014)

	. Check if Schedule O contains a response or note to any line in this Part V				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	2		165	NO
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and			1		
·	(gambling) winnings to prize winners?	орона	olo gurinig	1c	х	
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			- '`		
Za	filed for the calendar year ending with or within the year covered by this return	2a	2			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns			2b	х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instruction					
32	Did the organization have unrelated business gross income of \$1,000 or more during the year?	J ,		3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	. 0		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other		ity over a			
70	financial account in a foreign country (such as a bank account, securities account, or other financial			4a		x
h	If "Yes," enter the name of the foreign country:	accoun	14,1	70		
D	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	Accoun	te (FRAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	-ccouri	ts (i bAily	5a		x
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans	action?		5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	action.		5c		 **
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he oras	enization solicit	30		†
Qa	any contributions that were not tax deductible as charitable contributions?	ne orga	anization solicit	6a		x
h	If "Yes," did the organization include with every solicitation an express statement that such contributions.	tions o	r ofts	- Oa		1
D	were not tax deductible?	tions o	giits	6b		
7	Organizations that may receive deductible contributions under section 170(c).			-00		†
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and so	rvices n	rovided to the navor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	n vioco p	Tovided to the payor	7b		\vdash
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v	ner seu	ured	70	-	\vdash
·	to file Form 8282?	vas roq	uncu	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		-,-		\vdash
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit		+7	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit confi		, .	7f		t
g	If the organization, during the year, pay premiums, directly of indirectly, on a personal period contribution of qualified intellectual property, did the organization file F		199 as required?	7g	-	
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h	<u> </u>	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaine					
Ū	sponsoring organization have excess business holdings at any time during the year?	 ,	-	8		
9	Sponsoring organizations maintaining donor advised funds.					†
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		1
10	Section 501(c)(7) organizations. Enter					†
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		1		1
11	Section 501(c)(12) organizations. Enter.	100				
		11a				
	Gross income from other sources (Do not net amounts due or paid to other sources against	1		1		
_	amounts due or received from them)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				\vdash
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120		1		
	Is the organization licensed to issue qualified health plans in more than one state?			13a		1
u	Note. See the instructions for additional information the organization must report on Schedule O.					1-
h	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	13b				
_	Enter the amount of reserves on hand	13c		1		
•	Did the organization receive any payments for indoor tanning services during the tax year?			14a	 	X
142	THE HIR CHARLIZATION ICCEIVE ANY DAVINCHIA TO INDUCT TAILING SCIVICES GUING THE TAX VEST !					

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.

	Observed Cabardada O acadama a construir a construir de la constitución de la constitució			X
Sas	Check if Schedule O contains a response or note to any line in this Part VI			
<u> </u>	tion A. Governing Body and Management		·	
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 11			
	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 0.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	
-	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	X	
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	, u		
D	persons other than the governing body?	7b	X	
_		70		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	_	v	
а	The governing body?	8a	X	ļ.——
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		_X_
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
·	in Schedule O how this was done	12c		х
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	х	
	Did the process for determining compensation of the following persons include a review and approval by independent	17	-25	
15				1
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45.	v	
	The organization's CEO, Executive Director, or top management official	15a	X	77
þ	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a	ļ .	X
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	Ì		
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►WA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availab	le	
	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	i finan	cial	
13	statements available to the public during the tax year		J	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
20	Executive Director of NWHA - (360) 357-5650			
	1530 Evergreen Park DR SW, Olympia, WA 98502-5903			

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

 $\vec{\ \ }$ Employees, and Independent Contractors

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

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

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

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

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

(A) Name and Title	(B) Average hours per week	Бох.	not c	Pos heck ss pe	ition more rson i	than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Del Detray	0.50								_	_
Vice-President	0.50	Х		X	_			0.	0.	0.
(2) Troy Morrow	0.50								•	_
Treasurer	0.50	X						0.	0.	0.
(3) Steve Leedom	0.50			,,					0	
President	0.50	X		X	 	-		0.	0.	0.
(4) Don Nelsen	0.50	x						0.	0.	_
Director (5) Watch Dadasta	0.50	Λ			┢			<u> </u>	U•	0.
(5) Keith Padgett	0.30	x						0.	0.	0.
Director (6) David Pearson	0.50	A						0.	<u></u>	
Director	0.30	x		ļ				0.	0.	0.
(7) Jim Smith	0.50		-	<u> </u>	┢═	_		· · · · · · · · · · · · · · · · · · ·		0.
Director		x						0.	ο.	0.
(8) Gary Stoskopf	0.50				Т				<u> </u>	
Director		X						0.	0.	0.
(9) Jack Tibesar	0.50									
Director		X						0.	0.	0.
(10) Katerine Wendell	0.50									
Secretary		X		X				0.	0.	0.
(11) Mike Wolf	0.50									
Director		X				<u>L</u>		0.	0.	0.
(12) Joan Brown	40.00					1				
Director		ļ		X		ļ		93,425.	0.	0.
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Form **990** (2014)

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	and	d Hi	ghe	st C	ompensated Employe	es (continued)				
· (A)	(B)			(0	C)			(D)	(E)			(F)	
Name and title	Average	/do			OSITION eck more than one			Reportable	Reportable		Est	mated	Ė
•	hours per	box	, unle:	ss pe	rson	is bot	n an	compensation	compensation		am	ount c	f
	week		cer an	dad	recto	or/trus	tee)	from	from related	d other		other	
	(list any	ecto			ļ			the	organizations		· •		
	hours for related	or d	23		j	ated		organization	(W-2/1099-MISC	2)			
	organizations	uste	trust		8	ubeu		(W-2/1099-MISC)			•	ınızatıd relate	
	below	E E	tonal		ptoy	is st	•					nizatio	
	line)	Individual trustee or director	Institutional trustee	Officer	ey en	Highest compensated employee	Former			1	orgu	····Lutio	
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]				ļ							
		}			L .	<u> </u>							
1b Sub-total								93,425.		0.			0.
c Total from continuation sheets to Part V	II, Section A							0.		0.			0.
d Total (add lines 1b and 1c)							<u> </u>	93,425.		0.			0.
2 Total number of individuals (including but r	not limited to th	nose	liste	ed a	bov	e) wl	no r	eceived more than \$100	,000 of reportable	;			
compensation from the organization													0
										_		Yes	No
3 Did the organization list any former officer	director, or tr	uste	e, ke	ey er	mplo	oyee	, or	highest compensated e	mployee on				
line 1a? If "Yes," complete Schedule J for s	such individual	•								l	3		X
4 For any individual listed on line 1a, is the si	um of reportab	le c	omp	ensa	atior	n and	d ot	her compensation from	the organization				
and related organizations greater than \$15	0,000? If "Yes	, " cc	mpl	ete :	Sch	edul	e J i	for such individual			4		X
5 Did any person listed on line 1a receive or	accrue compe	nsat	ion i	from	any	y uni	elat	ted organization or indiv	idual for services	ſ			
rendered to the organization? If "Yes," con								-			5		Х
Section B. Independent Contractors													
1 Complete this table for your five highest co	mpensated in	dep	ende	ent c	cont	racto	ors t	that received more than	\$100,000 of comp	oens:	ation fi	rom	
the organization Report compensation for	•												
(A)								(B)			(C	3)	
Name and business	address	N	ON	E				Description of s	services	С	omper		1
									• •				
					-	-							
	-				_							-	
						-						-	
O Total number of reduced and and and are	Gmali indire m hi i 4 i							d abaya)b= ================================	nava than			-	
2 Total number of independent contractors		iot l	mme	ea to	inc	ose II ∧	stec	u abovej wno received n	nore than				
\$100,000 of compensation from the organ	ization 🟲					U						200	
											Form 9	9 9U (2	(014

	-	Check if Schedule O contains a	response	or note to any line	e in this Part VIII			
,				,	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
at st	1 a	Federated campaigns	1a					
통회	b	Membership dues	1b					
S,E	c	Fundraising events	1c					
a it		Related organizations	1d					
S,E		Government grants (contributions)	1e					
ig S		All other contributions, gifts, grants, and						
돌		similar amounts not included above	1f					
ĒĎ	c	Noncash contributions included in lines 1a-1f \$						
Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add lines 1a-1f		<u> </u>				
				Business Code				
ا رہ	2 a	Membership dues		900099	223,142.	223,142.		
ξ)						
Se								
an eve	,							-
Program Service Revenue)						
Pro		All other program service revenue						
ļ		Total. Add lines 2a-2f			223,142.			· · · · · · · · · · · · · · · · · · ·
	3	Investment income (including divide	nds. inter	est, and			•	
		other similar amounts)		>	312.			312.
	4	Income from investment of tax-exem	nt hond r	proceeds				312
	5	Royalties	pr bond p	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	Ū	-	Real	(ii) Personal				
	6 a		,000.					
-		Less rental expenses	0.					
}			,000.					
1		d Net rental income or (loss)	, , , , , , , , , , , , , , , , , , , 		6,000.			6,000.
1			ecurities	(II) Other	0,000.			0,000
	, ,	assets other than inventory	connics	(ii) Other				
		b Less cost or other basis						
	•	and sales expenses		1				-
		c Gain or (loss)						
		d Net gain or (loss)						İ
		a Gross income from fundraising ever	te (not					 -
Ę.	0 6	including \$						
Ş		contributions reported on line 1c) S						
Other Rever		Part IV, line 18						
亨		b Less direct expenses	a b					
δ		c Net income or (loss) from fundraising						
		a Gross income from gaming activities	-					1
	3 (Part IV, line 19						
		b Less. direct expenses	a b					
		c Net income or (loss) from gaming ac	_					
		a Gross sales of inventory, less return						
	10 6	and allowances	a					
		b Less cost of goods sold	b					
		c Net income or (loss) from sales of in						
		Miscellaneous Revenue	voritory	Business Code		 	 	
	44	a Miscellaneous		900099	71.			71.
		b Form sales		900099	51.			51
				700099	21.			
		d All other revenue						
		d All other revenue e Total, Add lines 11a-11d			122.	1	,	
	12	Total revenue. See instructions.			229,576.		0	6,434
43200		TOTAL TEVELINE. OCC MON NOTIONS.			227,310.	. 227,1740	<u> </u>	Form 990 (2014

		_			
	n 990 (2014) Northwest Hort IX Statement of Functional Expense	ousing Associ	iation	91-09	935278 Page 10
	on 501(c)(3) and 501(c)(4) organizations must comp		er organizations must co	omplete column (A)	
	Check if Schedule O contains a respons				
	not include amounts reported on lines 6b, 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 domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				·
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	131,607.	131,607.		·
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	10,202.	10,202.		
11	Fees for services (non-employees)				
а	Management				
b	Legal			T	
С	Accounting	1,100.	1,100.		
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				

1,345.

10,646.

33,618.

4,842.

1,781.

1,100.

664.

196,905.

Form **990** (2014)

0.

0.

1,345.

10,646.

33,618.

4,842.

1,781.

1,100.

664.

196,905

Other (If line 11g amount exceeds 10% of line 25,

Advertising and promotion

Information technology

Payments to affiliates

Business taxes

e All other expenses

Check here

Office expenses

Royalties

Interest

Occupancy

12

13 14

15

16

17 18

19

20

21

22

23

24

25

column (A) amount, list line 11g expenses on Sch O.)

Payments of travel or entertainment expenses for any federal, state, or local public officials

Conferences, conventions, and meetings

Depreciation, depletion, and amortization

Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)

Total functional expenses Add lines 1 through 24e

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

if following SOP 98-2 (ASC 958-720)

Balance Sheet			
Check if Schedule O contains a response or note to any line in this Part X			
	(A) Beginning of year		(B) End of year
Cash · non-interest-bearing	1.40 0.46	1	
Savings and temporary cash investments	149,346.	_2	189,513
Pledges and grants receivable, net		3	·
Accounts receivable, net		4	
Loans and other receivables from current and former officers, directors,			
trustees, key employees, and highest compensated employees. Complete			
Part II of Schedule L		5	
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 instr). Complete Part II of Sch L		6	
Notes and loans receivable, net		7	
Inventories for sale or use		8	
Prepaid expenses and deferred charges		9	
Land, buildings, and equipment cost or other			
basis Complete Part VI of Schedule D 10a 374,573.			
Less accumulated depreciation 10b 122, 498.	257,437.	10c	252,075
Investments - publicly traded securities		11	
Investments - other securities See Part IV, line 11		12	
Investments - program-related. See Part IV, line 11		13	
Intangible assets		14	
Other assets See Part IV, line 11		15	
Total assets. Add lines 1 through 15 (must equal line 34)	406,783.	16	441,588
Accounts payable and accrued expenses	3,361.	17	5,495
Grants payable		18	· · · · · · · · · · · · · · · · · · ·
Deferred revenue		19	
Tax-exempt bond liabilities		20	
Escrow or custodial account liability Complete Part IV of Schedule D		21	
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	
Secured mortgages and notes payable to unrelated third parties		23	
Unsecured notes and loans payable to unrelated third parties		24	
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	
Total liabilities. Add lines 17 through 25	3,361.	26	5,495
Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
complete lines 27 through 29, and lines 33 and 34.			
Unrestricted net assets	403,422.	27	436,093
Temporarily restricted net assets		28	100,050
· · · ·			
·			
•			
·		30	
· · · · · · · · · · · · · · · · · · ·			
_ · · · · · · · · · · · · · · · · · · ·	14		
	403 422		436,093
_			441,588
Per Org and Cap Par Ret Tot	rmanently restricted net assets ganizations that do not follow SFAS 117 (ASC 958), check here do complete lines 30 through 34. pital stock or trust principal, or current funds addin or capital surplus, or land, building, or equipment fund tained earnings, endowment, accumulated income, or other funds tal net assets or fund balances tal liabilities and net assets/fund balances	ganizations that do not follow SFAS 117 (ASC 958), check here do complete lines 30 through 34. pital stock or trust principal, or current funds and in or capital surplus, or land, building, or equipment fund tained earnings, endowment, accumulated income, or other funds tall net assets or fund balances 403,422.	ganizations that do not follow SFAS 117 (ASC 958), check here do complete lines 30 through 34. pital stock or trust principal, or current funds and in or capital surplus, or land, building, or equipment fund tained earnings, endowment, accumulated income, or other funds tail net assets or fund balances 29

Form **990** (2014)

Form 990 (2014)

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

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

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

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

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

	Section 501(c)(4), (5), or (6) organiza	tions Complete Part III			
Nam	e of organization			Emp	loyer identification number
	Northwe	st Housing Assoc	ciation		91-0935278
Pa	rt I-A Complete if the org	anization is exempt und	der section 501(c)	or is a section 527 o	rganization.
2	Provide a description of the organiz Political expenditures Volunteer hours	cation's direct and indirect politi	cal campaign activities		·
Pa	rt I-B Complete if the org	ganization is exempt un	der section 501(c)	(3)	
_	Enter the amount of any excise tax			<u>,(o).</u> ▶\$	<u> </u>
	Enter the amount of any excise tax			•	· · · · · · · · · · · · · · · · · · ·
	If the organization incurred a section			•	Yes No
	Was a correction made?		,		Yes No
b	If "Yes," describe in Part IV				
Pa	rt I-C Complete if the org	janization is exempt un	der section 501(c)	, except section 501	(c)(3).
1	Enter the amount directly expended	d by the filing organization for s	ection 527 exempt fund	ction activities > \$	S
2	Enter the amount of the filing organ	nization's funds contributed to c	ther organizations for s	section 527	
	exempt function activities			▶ \$	S
3	Total exempt function expenditures	Add lines 1 and 2. Enter here	and on Form 1120-POI		
	line 17b			▶ \$	Yes No
	Did the filing organization file Form	•			
5	Enter the names, addresses and er made payments For each organiza contributions received that were pr political action committee (PAC) If	ation listed, enter the amount paromptly and directly delivered to	nd from the filing organ	ization's funds. Also enter tl ganization, such as a separa	he amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
					If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2014

LHA 432041 10-21-14

Schedule C (Form 990 or 990 EZ) 2014 No Part II-A Complete if the organ section 501(h)).	<u>rthwest H</u> ization is exe	ousing Assompt under section	ciation n 501(c)(3) and file	91- d Form 5768(0935278 Page 2 election under
A Check ► if the filing organization expenses, and share of if the filing organization if the filing organization	excess lobbying	expenditures).		group member's nai	me, address, EIN,
	n Lobbying Expe	nditures		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence	ce public opinion (grass roots lobbying)			
b Total lobbying expenditures to influence					
c Total lobbying expenditures (add lines	1a and 1b)		Ī		
d Other exempt purpose expenditures			[
e Total exempt purpose expenditures (a	dd lines 1c and 1d	d)			
f Lobbying nontaxable amount Enter th	ne amount from the	e following table in bot	h columns		
If the amount on line 1e, column (a) or (b)	is: The lob	bying nontaxable am	ount is:	· · · · · · · · · · · · · · · · · · ·	
Not over \$500,000	20% of	the amount on line 1e			
Over \$500,000 but not over \$1,000,00	00 \$100,00	00 plus 15% of the exc	ess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	000 \$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000	0,000 \$225,00	\$225,000 plus 5% of the excess over \$1,500,000			
Over \$17,000,000	\$1,000,	000			
g Grassroots nontaxable amount (enter	25% of line 1f)				
h Subtract line 1g from line 1a If zero or less, enter -0-					
i Subtract line 1f from line 1c. If zero or	less, enter -0-		Ĺ		
j If there is an amount other than zero o	on either line 1h or	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this year	rን				Yes No
(Some organizations that	made a section 5	eraging Period Under 01(h) election do not ate instructions for li	have to complete all o	f the five columns	below.
· · · · · · · · · · · · · · · · · · ·	Lobbying Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots Johnwing expenditures					

Schedule C (Form 990 or 990-EZ) 2014

Schedule C (Form 990 or 990 EZ) 2014 Northwest Housing Association 91-0935278 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	or each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
	e lobbying activity.	Yes	No	Amo	ount	
1	During the year, did the filing organization attempt to influence foreign, national, state or					
	local legislation, including any attempt to influence public opinion on a legislative matter					
_	or referendum, through the use of					
	Volunteers?	-				
b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?		ļ <u> </u>			
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), sect	ion 501(c)(5), or se	ction		
	501(c)(6).					
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?		1	ļ	X	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	X		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), sect		3		X	
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes." Dues, assessments and similar amounts from members	d "No," O	R (b) Par	t III-A, Iir	ne 3, is	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	tical			•	
9	Current year		2a	1		
	Carryover from last year		2b			
	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		-	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the e	xcess				
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and					
	expenditure next year?	, p =	4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5	-		
Pai	t IV Supplemental Information					
Prov	ide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground	up list), Part	II-A, lines 1	and 2 (see	-	
	uctions), and Part II-B, line 1. Also, complete this part for any additional information		·	•		
						

SCHEDULE D

(Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

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

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection Employer identification number

	Northwest Housing Association	91-0935278
Par	t I Organizations Maintaining Donor Advised Funds or Other Similar Funds or A	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised fur	nds
-	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	
_	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confei	*
	impermissible private benefit?	Yes No
Par		
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) Preservation of a historically	/ important land area
	Protection of natural habitat Preservation of a certified h	•
	Preservation of open space	istorio strastaro
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a co	onservation easement on the last
_	day of the tax year	one of the last
	, -: «··· · · · · · · · · ·-	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 included in (a)	2c
	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 organ	
	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	
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)(l)	
	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 state	
	include, if applicable, the text of the footnote to the organization's financial statements that describes the or	
_	conservation easements	
Pai	rt 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 a	and balance sheet works of art,
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	f 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 I	palance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public se	ervice, provide the following amounts
	relating to these items	-
	(i) Revenue 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	
а	Revenue included in Form 990, Part VIII, line 1	> \$
b	Assets included in Form 990, Part X	► \$ ► \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 432051 10-01-14

Schedule D (Form 990) 2014

		st Housing						<u>91-09</u>			<u>je 2</u>
Par	t III Organizations Maintaining (Collections of A	rt, Hist	torical Tr	easures, c	or Othe	r Simil	ar Asse	ts (contin	ued)	
3	Using the organization's acquisition, access	ion, and other record	ds, checl	k any of the	following that	it are a si	gnificant	use of its	collection	items	
	(check all that apply)										
a٠	Public exhibition				change progra						
b	Scholarly research	6	• 🔲	Other	<u>.</u>						
С	Preservation for future generations										
4	Provide a description of the organization's of							ose in Par	t XIII		
5	During the year, did the organization solicit					er sımılar	assets		_		
<u> </u>	to be sold to raise funds rather than to be m						 .		Yes		No
Par	t IV Escrow and Custodial Arran		ete if the	organizatio	on answered '	"Yes" to	Form 990), Part IV,	ine 9, or		
	reported an amount on Form 990, Pa									_	
1a	Is the organization an agent, trustee, custoo	dian or other interme	diary for	contribution	ns or other as	sets not	ıncluded	_	٦		
	on Form 990, Part X?								」Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table			<u> </u>				
	Decision belows								Amount	-	
	Beginning balance						1c				
a	Additions during the year						1d				
e	Distributions during the year Ending balance						1e 1f	-			
f	Did the organization include an amount on F	Form 990 Part V line	21 for	eccrow or c	ustodial acco	sunt kabil			Yes		No
	If "Yes," explain the arrangement in Part XIII						ity '		J 1€S	H	NO
Par							n				
	to a place to the second complete	(a) Current year		Prior year	(c) Two year			rears hack	(e) Four	vears h	ack
1a	Beginning of year balance	(a) Content year	10/	noi you	(C) Two year	13 Baok	(4) 111100)	ours buok	(e) i our	y cars b	uon_
	Contributions				<u> </u>			•			
	Net investment earnings, gains, and losses						-				
	Grants or scholarships				1						
	Other expenditures for facilities										
•	and programs										
f	Administrative expenses									-	
g	End of year balance										
2	Provide the estimated percentage of the cui	rrent year end balan	ce (line 1	g, column (a)) held as.				<u> </u>		
а	Board designated or quasi-endowment	,	%	J, (,						
b	Permanent endowment	%	_								
С	c Temporarily restricted endowment \ %										
	The percentages in lines 2a, 2b, and 2c sho	ould equal 100%.									
За	Are there endowment funds not in the poss	ession of the organiz	zation the	at are held a	and administe	ered for th	he organiz	zation			
	by									Yes	No
	(i) unrelated organizations								3a(i)		
	(II) related organizations								3a(ii)		
b	If "Yes" to 3a(ii), are the related organization	ns listed as required	on Sche	dule R?					3b		
4	Describe in Part XIII the intended uses of th		owment	funds							
Pai	t VI Land, Buildings, and Equipr	nent.									
	Complete if the organization answere	ed "Yes" to Form 99	0, Part IV	/, line 11a S	See Form 990	, Part X,	line 10				
	Description of property	(a) Cost or		, · · · ·	t or other	, , ,	ccumulate		(d) Book	value	
	· · · · · · · · · · · · · · · · · · ·	basis (invest	ment)		(other)	der	oreciation				
1a	Land			1	10,334.) <u>,33</u>	
b	Buildings		<u>-</u>	20	09,129.		97,3	88.	11:	L,74	1.
C	Leasehold improvements		 	 							
d	Equipment			2	25,110.		25,1	10.			0.
	Other			<u> </u>							
Tota	. Add lines 1a through 1e (Column (d) must	equal Form 990, Par	t X, colui	mn (B), line	10c.)					<u>2,07</u>	
								Schedule	D (Form	990) 2	2014

	edule D (Form 990) 2014 Northwest Housing Association		91-0935278 Page
Pai	rt XI Reconciliation of Revenue per Audited Financial Sta	atements With Reven	ue per Return.
	Complete if the organization answered "Yes" to Form 990, Part IV, III	ne 12a	
1	Total revenue, gains, and other support per audited financial statements		1
	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a		2a	
b	Donated services and use of facilities	2b	
-	Recoveries of prior year grants		 -
C	, - -	2c	
d	Other (Describe in Part XIII)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
С	Add lines 4a and 4b		4c
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12		5
Pa	rt XII Reconciliation of Expenses per Audited Financial S	tatements With Expe	nses per Return.
	Complete if the organization answered "Yes" to Form 990, Part IV, lii	ne 12a	
1	Total expenses and losses per audited financial statements		1
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	
٠.	80 / 8 / 8 / 8 / 8 / 8 / 8 / 8 / 8 / 8 /		
d	·	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 . 1	
а	•	4a	
b	Other (Describe in Part XIII)	4b	
_			
C			4c
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line	18)	4c 5
5 Pa	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information.		5
5 Pa	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line	4; Part IV, lines 1b and 2b,	5
5 Pa	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. ride the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	4; Part IV, lines 1b and 2b,	5
5 Pa	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. ride the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	4; Part IV, lines 1b and 2b,	5
5 Pa	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. ride the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	4; Part IV, lines 1b and 2b,	5
5 Pa	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. ride the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	4; Part IV, lines 1b and 2b,	5
5 Pa	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. ride the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	4; Part IV, lines 1b and 2b,	5
5 Pa	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line rt XIII Supplemental Information. ride the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	4; Part IV, lines 1b and 2b,	5
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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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection **Employer identification number**

Northwest Housing Association	91-0935278
Form 990, Part VI, Section A, line 6:	
The organization has members.	
Form 990, Part VI, Section A, line 7a:	
The members elect board members and the board elects the	officers.
Form 990, Part VI, Section A, line 7b:	
Changing to governing documents require the approval of t	he members.
Form 990, Part VI, Section B, line 11:	
The staff of the organization review the 990 prior to it	being filed.
Form 990, Part VI, Section B, Line 15a:	
Executive committee and board determine the compensation	of the Executive
Director.	
Form 990, Part VI, Section C, Line 19:	
Governing documents are available upon request.	
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