

Form 990  
2019Department of the  
Treasury  
Internal Revenue Service

## Return of Organization Exempt From Income Tax

2019  
Open to Public  
Inspection

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.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

## A For the 2019 calendar year, or tax year beginning 01-01-2019, and ending 12-31-2019

B Check if applicable:

- Address change
- Name change
- Initial return
- Final return/terminated
- Amended return
- Application pending

C Name of organization  
CASCADE WINE COUNTRYWOODINVILLE WINE COUNTRY

D Employer identification number

16-1652865

Doing business as  
WOODINVILLE WINE COUNTRY

E Telephone number

(425) 287-3298

Number and street (or P.O. box if mail is not delivered to street address) Room/suite

City or town, state or province, country, and ZIP or foreign postal code  
WOODINVILLE, WA 98072

G Gross receipts \$ 1,182,336

F Name and address of principal officer:

LESTER H BAER  
17306 5TH PL W  
BOTHELL, WA 98012H(a) Is this a group return for  
subordinates?  Yes  NoH(b) Are all subordinates  
included?  Yes  No

If "No," attach a list. (see instructions)

H(c) Group exemption number ►

I Tax-exempt status:  501(c)(3)  501(c) ( 6 ) (insert no.)  4947(a)(1) or  527J Website: ► [WWW.WOODINVILLEWINECOUNTRY.COM](http://WWW.WOODINVILLEWINECOUNTRY.COM)K Form of organization:  Corporation  Trust  Association  Other ►

L Year of formation: 2002

M State of legal domicile:  
WA

## Part I Summary

1 Briefly describe the organization's mission or most significant activities:  
PROMOTE WINERY TOURISM IN WOODINVILLE, WASHINGTON

2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	3	7
3 Number of voting members of the governing body (Part VI, line 1a)	4	7
4 Number of independent voting members of the governing body (Part VI, line 1b)	5	13
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	6	20
6 Total number of volunteers (estimate if necessary)	7a	0
7a Total unrelated business revenue from Part VIII, column (C), line 12	7b	0
b Net unrelated business taxable income from Form 990-T, line 39		

8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9 Program service revenue (Part VIII, line 2g)	170,861	269,618
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	908,173	902,554
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	82	0
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,079,116	1,180,367

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0
14 Benefits paid to or for members (Part IX, column (A), line 4)	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	232,620
16a Professional fundraising fees (Part IX, column (A), line 11e)	0
b Total fundraising expenses (Part IX, column (D), line 25) ►0	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	753,324
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	985,944
19 Revenue less expenses. Subtract line 18 from line 12	93,172
	331,473

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	108,911	426,778
21 Total liabilities (Part X, line 26)	23,633	9,043
22 Net assets or fund balances. Subtract line 21 from line 20	85,278	417,735

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  
LESTER H BAER TREASURER  
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date 2020-05-15	Check <input checked="" type="checkbox"/> if self-employed	PTIN P00112251
Firm's name ► Personal Tax Service		Firm's EIN ►		
Firm's address ► 17306 5th Pl W		Phone no. (425) 787-6127		
Bothell, WA 980129192				

May the IRS discuss this return with the preparer shown above? (see instructions) . . . . .  Yes  No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form 990 (2019)

## 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:

PROMOTE WINERY TOURISM IN WOODINVILLE, WASHINGTON

**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 \$  including grants of \$  ) (Revenue \$  )  
See Additional Data

**4b** (Code:  ) (Expenses \$  including grants of \$  ) (Revenue \$  )  
See Additional Data

**4c** (Code:  ) (Expenses \$  including grants of \$  ) (Revenue \$  )  
See Additional Data

**4d** Other program services (Describe in Schedule O.)  
(Expenses \$  including grants of \$  ) (Revenue \$  )

**4e** Total program service expenses ►

Part IV Checklist of Required Schedules

- 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A
- 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?
- 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
- 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
- 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
- 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
- 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
- 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III
- 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
- 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
- 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
  - 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
  - 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
  - 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
  - e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part 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
- 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII
  - 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
- 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 14a Did the organization maintain an office, employees, or agents outside of the United States?
  - 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
- 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
- 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
- 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 11? If "Yes," complete Schedule G, Part I (see instructions)
- 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
- 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
- 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H
  - b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?
- 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

	Yes	No
<b>1</b>		No
<b>2</b>		No
<b>3</b>		No
<b>4</b>		
<b>5</b>		No
<b>6</b>		No
<b>7</b>		No
<b>8</b>		No
<b>9</b>		No
<b>10</b>		No
<b>11a</b>		No
<b>11b</b>		No
<b>11c</b>		No
<b>11d</b>		No
<b>11e</b>		No
<b>11f</b>		No
<b>12a</b>		No
<b>12b</b>		No
<b>13</b>		No
<b>14a</b>		No
<b>14b</b>		No
<b>15</b>		No
<b>16</b>		No
<b>17</b>		No
<b>18</b>		No
<b>19</b>		No
<b>20a</b>		No
<b>20b</b>		
<b>21</b>		No

## Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
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?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	
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	25b	
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	No
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, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	No
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	No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	Yes

## 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

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0

b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c Yes

Part V **Statements Regarding Other IRS Filings and Tax Compliance (continued)**

2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . . .	2a	13		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .	3a		No	
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O . . . . .</i>	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .	4a		No	
b	If "Yes," enter the name of the foreign country: ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .	5a		No	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No	
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . .	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . . . .	6a		No	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	6b			
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>		7a		No	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . .	7b			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	7c		No	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	7d			
d	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	7e		No	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	7f		No	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	7g			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	7h			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .	8			
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . .		9a			
<b>9 Sponsoring organizations maintaining donor advised funds.</b>		9b			
<b>10 Section 501(c)(7) organizations.</b> Enter:		10a			
a	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	10b			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .	11a			
<b>11 Section 501(c)(12) organizations.</b> Enter:		11b			
a	Gross income from members or shareholders . . . . .	12a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . .	12b			
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		13a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. ► 12b				
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		13b			
a	Is the organization licensed to issue qualified health plans in more than one state? . . . . .	13c			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . . . . .	14a		No	
c	Enter the amount of reserves on hand . . . . .	14b			
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year? . . . . .	15			
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O . . . . .</i>	16			
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? . . . . .				
	If "Yes," see instructions and file Form 4720, Schedule N.				
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . . . . .				
	If "Yes," complete Form 4720, Schedule O.				



## Part VII

## **Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

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

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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
  - List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
  - List all of the organization's **former** officers, key employees, or 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.

See instructions for the order in which to list the persons above.

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

## Part VII

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

<b>1b Sub-Total . . . . .</b>	►			
<b>c Total from continuation sheets to Part VII, Section A . . . .</b>	►			
<b>d Total (add lines 1b and 1c) . . . . .</b>	►	72,092	0	0

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

	<b>Yes</b>	<b>No</b>
<b>3</b> Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	<b>3</b>	No
<b>4</b> 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? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	<b>4</b>	No
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .	<b>5</b>	No

## **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 ►

## Part VIII Statement of Revenue

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

Contributions, Gifts, Grants and Other Similar Amounts		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
1a Federated campaigns . . .	1a				
b Membership dues . . .	1b	147,130			
c Fundraising events . . .	1c	89,747			
d Related organizations	1d				
e Government grants (contributions)	1e	32,741			
f All other contributions, gifts, grants, and similar amounts not included above	1f				
g Noncash contributions included in lines 1a - 1f: \$	1g				
<b>h Total.</b> Add lines 1a-1f . . . ►		269,618			
Program Service Revenue					
2a PASSPORT TO WOODINVILLE	Business Code				
	813910	761,930		0	0
b ST. NICKS	813910	39,290		0	0
c SEASONAL EVENTS	813910	101,334		0	0
d					
e					
f All other program service revenue.					
<b>g Total.</b> Add lines 2a-2f. . . ►		902,554			
Other Revenue					
3 Investment income (including dividends, interest, and other similar amounts) . . . ►					
4 Income from investment of tax-exempt bond proceeds					
<b>5 Royalties . . . . .</b>					
6a Gross rents	(i) Real	(ii) Personal			
<b>6b</b>					
<b>6c</b>					
<b>d Net rental income or (loss) . . . . . ►</b>					
7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
<b>7b</b>					
<b>7c</b>					
<b>d Net gain or (loss) . . . . . ►</b>					
8a Gross income from fundraising events (not including \$ 89,747 of contributions reported on line 1c). See Part IV, line 18 . . .	8a				
<b>b Less: direct expenses . . .</b>	8b				
<b>c Net income or (loss) from fundraising events . . . ►</b>					
9a Gross income from gaming activities. See Part IV, line 19 . . .	9a				
<b>b Less: direct expenses . . .</b>	9b				
<b>c Net income or (loss) from gaming activities . . . ►</b>					
10a Gross sales of inventory, less returns and allowances . . .	10a	10,164			
<b>b Less: cost of goods sold . . .</b>	10b	1,969			
<b>c Net income or (loss) from sales of inventory . . . ►</b>		8,195		8,195	
Miscellaneous Revenue		Business Code			
<b>11a</b>					
<b>b</b>					
<b>c</b>					
<b>d All other revenue . . . . .</b>					
<b>e Total.</b> Add lines 11a-11d . . . . . ►					
<b>12 Total revenue.</b> See instructions . . . . . ►		1,180,367	910,749	0	0

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	<b>(A) Total expenses</b>	<b>(B) Program service expenses</b>	<b>(C) Management and general expenses</b>	<b>(D) Fundraising expenses</b>
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 . . . . .	72,092	0	0	0
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 . . . . .	148,922	0	0	0
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) . . . . .				
9 Other employee benefits . . . . .	8,128	0	0	0
10 Payroll taxes . . . . .	19,257	0	0	0
11 Fees for services (non-employees):				
a Management . . . . .	3,492	0	0	0
b Legal . . . . .				
c Accounting . . . . .	16,197	0	0	0
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)				
12 Advertising and promotion . . . . .	146,511	0	0	0
13 Office expenses . . . . .	17,052	0	0	0
14 Information technology . . . . .				
15 Royalties . . . . .				
16 Occupancy . . . . .	40,118	0	0	0
17 Travel . . . . .				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
19 Conferences, conventions, and meetings . . . . .	33,718	0	0	0
20 Interest . . . . .	1,737	0	0	0
21 Payments to affiliates . . . . .				
22 Depreciation, depletion, and amortization . . . . .				
23 Insurance . . . . .	500	0	0	0
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 PASSPORT TO WOODINVILLE	95,352	0	0	0
b ST.NICKS	18,895	0	0	0
c SEASONAL EVENTS	139,696	0	0	0
d FUNDRAISING EXPENSES	76,787	0	0	0
e All other expenses	10,440	0	0	0
<b>25 Total functional expenses.</b> Add lines 1 through 24e	848,894	0	0	0
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
Check here ► <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X **Balance Sheet**Check if Schedule O contains a response or note to any line in this Part IX 

		(A) Beginning of year		(B) End of year
	<b>Assets</b>			
<b>1</b>	Cash—non-interest-bearing . . . . .	108,861	<b>1</b>	428,428
<b>2</b>	Savings and temporary cash investments . . . . .		<b>2</b>	
<b>3</b>	Pledges and grants receivable, net . . . . .		<b>3</b>	
<b>4</b>	Accounts receivable, net . . . . .	-550	<b>4</b>	-2,250
<b>5</b>	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . .		<b>5</b>	
<b>6</b>	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) . . . . .		<b>6</b>	
<b>7</b>	Notes and loans receivable, net . . . . .		<b>7</b>	
<b>8</b>	Inventories for sale or use . . . . .		<b>8</b>	
<b>9</b>	Prepaid expenses and deferred charges . . . . .	600	<b>9</b>	600
<b>10a</b>	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b>		
<b>b</b>	Less: accumulated depreciation	<b>10b</b>		<b>10c</b>
<b>11</b>	Investments—publicly traded securities . . . . .		<b>11</b>	
<b>12</b>	Investments—other securities. See Part IV, line 11 . . . . .		<b>12</b>	
<b>13</b>	Investments—program-related. See Part IV, line 11 . . . . .		<b>13</b>	
<b>14</b>	Intangible assets . . . . .		<b>14</b>	
<b>15</b>	Other assets. See Part IV, line 11 . . . . .		<b>15</b>	
<b>16</b>	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	108,911	<b>16</b>	426,778
	<b>Liabilities</b>			
<b>17</b>	Accounts payable and accrued expenses . . . . .	23,633	<b>17</b>	9,043
<b>18</b>	Grants payable . . . . .		<b>18</b>	
<b>19</b>	Deferred revenue . . . . .		<b>19</b>	
<b>20</b>	Tax-exempt bond liabilities . . . . .		<b>20</b>	
<b>21</b>	Escrow or custodial account liability. Complete Part IV of Schedule D		<b>21</b>	
<b>22</b>	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . .		<b>22</b>	
<b>23</b>	Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
<b>24</b>	Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
<b>25</b>	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		<b>25</b>	
<b>26</b>	<b>Total liabilities.</b> Add lines 17 through 25 . . . . .	23,633	<b>26</b>	9,043
	<b>Net Assets or Fund Balances</b>			
	<b>Organizations that follow FASB ASC 958, check here ► <input type="checkbox"/></b> and complete lines 27, 28, 32, and 33.			
<b>27</b>	Net assets without donor restrictions . . . . .		<b>27</b>	
<b>28</b>	Net assets with donor restrictions . . . . .		<b>28</b>	
	<b>Organizations that do not follow FASB ASC 958, check here ► <input checked="" type="checkbox"/></b> and complete lines 29 through 33.			
<b>29</b>	Capital stock or trust principal, or current funds . . . . .		<b>29</b>	
<b>30</b>	Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>30</b>	
<b>31</b>	Retained earnings, endowment, accumulated income, or other funds	85,278	<b>31</b>	417,735
<b>32</b>	Total net assets or fund balances . . . . .	85,278	<b>32</b>	417,735
<b>33</b>	Total liabilities and net assets/fund balances . . . . .	108,911	<b>33</b>	426,778

## Part XI

**Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI 

1	Total revenue (must equal Part VIII, column (A), line 12) . . . . .	1	1,180,367
2	Total expenses (must equal Part IX, column (A), line 25) . . . . .	2	848,894
3	Revenue less expenses. Subtract line 2 from line 1 . . . . .	3	331,473
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .	4	85,278
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	984
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	417,735

Part XII **Financial Statements and Reporting**Check 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		No
2b		No
2c		
3a		No
3b		

## Additional Data

**Software ID:** 19009670

**Software Version:**

**EIN:** 16-1652865

**Name:** CASCADE WINE COUNTRYWOODINVILLE WINE COUNTRY

Form 990 (2019)

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### **Form 990, Part III, Line 4a:**

PASSPORT TO WOODINVILLE EVENT HOSTED OVER 2500 PEOPLE VISITING MORE THAN 30 WINERIES IN WOODINVILLE. SOUVENIR GLASSES AND LOCAL AREA MAPS WERE PROVIDED TO EACH PARTICIPANT.

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**Form 990, Part III, Line 4b:**

St. Nick's Open House provided patrons with the opportunity to sample and purchase wines for holiday entertaining and gift giving from Woodinville's celebrated wineries, many of which are not open to the public.

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**Form 990, Part III, Line 4c:**

A summertime wine garden at each concert in the park, featuring selections from world-class Woodinville Wine Country wineries and tasting rooms.

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# 990 Schedule O, Supplemental Information

Return Reference	Explanation
Pt VI, Line 6	AND AFFILIATE MEMBERS WITH NO VOTING RIGHTS.

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
Pt VI, Line 7a	VOTING RIGHTS INCLUDE ELECTIONS OF THE OFFICERS,

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
Pt VI, Line 7a	AND APPROVAL OF THE ANNUAL BUDGET.

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
Pt VI, Line 7b	ANY AMENDMENT TO THE ORGANIZATIONAL BYLAWS IS SUBJECT

# 990 Schedule O, Supplemental Information

Return Reference		Explanation
Pt VI, Line 7b	TO APPROVAL BY THE MEMBERS.	

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
Pt VI, Line 11b	THE OFFICERS GET AN EMAIL WITH THE DRAFT 990 FOR THEIR

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
Pt VI, Line 11b	REVIEW. THE TREASURER COMPARES THE FORM 990 TO THE

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
Pt VI, Line 11b	PROFIT & LOSS STATEMENT AND BALANCE SHEET FOR THE

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
Pt VI, Line 11b	TAX YEAR.

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
Pt VI, Line 18	MEMBERS OF THE PUBLIC CAN REQUEST COPIES OF ANY OF

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
Pt VI, Line 18	DOCUMENTS IN WRITING TO THE BOARD OF DIRECTORS OF THE

# 990 Schedule O, Supplemental Information

Return Reference		Explanation
Pt VI, Line 18	ASSOCIATION.	

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
Pt VI, Line 19	MEMBERS OF THE PUBLIC CAN REQUEST COPIES OF ANY OF

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
Pt VI, Line 19	DOCUMENTS IN WRITING TO THE BOARD OF DIRECTORS OF THE

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
Pt VI, Line 19	ASSOCIATION.