COMMITTEE ON NATURAL RESOURCES

Disclosure Form

As required by and provided for in House Rule XI, clause 2(g) and the Rules of the Committee on Natural Resources

May 21, 2012, Failed Federal Forest Policies: Endangering Jobs, Forests and Species

* * * * *

For Witnesses Representing Organizations:

- 1. Name: Mitch Friedman
- 2. Name of Organization(s) You are Representing at the Hearing: Conservation Northwest
- 3. Business Address: 1208 Bay St #201, Bellingham WA 98225
- 4. Business Email Address: [Information redacted for privacy]
- 5. Business Phone Number: 360-671-9950 [Information redacted for privacy]

Name/OrganizationMitch Friedman/Conservation NW
Title/Date of Hearing May 21, 2012, Failed Federal Forest Policies: Endangering Jobs, Forests and Species
 a. Any training or educational certificates, diplomas or degrees or other educational experiences that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing. BA Zoology, University of Washington, 1986
b. Any professional licenses, certifications, or affiliations held that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.NA
c. Any employment, occupation, ownership in a firm or business, or work-related experiences that relate to your qualifications to testify on or knowledge of the subject matter of the hearing. Executive Director, Conservation Northwest
d. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of the Interior</u> (<u>and /or other agencies invited</u>) that you have received in the current year and previous four years, including the source and the amount of each grant or contract. NA
e. A list of all lawsuits or petitions filed by you against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed.
NA
f. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.
NA

Name/Organization Mitch Friedman/Conservation NW_

Title/Date of Hearing_May 21, 2012, Failed Federal Forest Policies: Endangering Jobs, Forests and Species

<u>In addition, for witnesses representing organizations:</u>

g. Any offices, elected positions, or representational capacity held in the organization(s) on whose behalf you are testifying.

NA

h. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of the Interior</u> (<u>and /or other agencies invited</u>) that were received in the current year and previous four years by the organization(s) you represent at this hearing, including the source and amount of each grant or contract for each of the organization(s).

Sept., '09	\$2,500	US Forest Service for cost-share lynx research
October, '09	\$2,000	US Fish and Wildlife Service for a restoration project contract
Sept., '10	\$5,400	US Forest Service for the same restoration project contract
October, '10	\$2,500	US Forest Service for cost-share
October, '10	\$6,000	US Fish and Wildlife Service towards a science conference
October, '11	\$6,000	US Fish and Wildlife Service towards a science conference

i. A list of all lawsuits or petitions filed by the organization(s) you represent at the hearing against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed for each of the organization(s).

2008. *Defenders, Conservation Northwest et al. v. FWS*, contesting US Fish and Wildlife Service finding that listing wolverine under the Endangered Species Act was not warranted.

2008. Intervened in *Carpenters Industrial Council et al. v. USFWS*, contesting the critical habitat designation and recovery plan for the northern spotted owl under the Endangered Species Act. After evidence of political interference emerged, critical habitat and recovery plan were scrapped by the Service.

2008. NRDC, Conservation Northwest et al. v. USDI et al., contesting a regulation eliminating Endangered Species Act consultation requirements. Regulation was terminated in Nov. 2011.

2008. *CNW et al. v. USTR*, contesting the Softwood Lumber Agreement under National Environmental Policy Act, and contesting the distribution of Soft Lumber Agreement funds without Congressional oversight under Miscellaneous Receipts Act.

2010. WHC, Conservation Northwest et al. v. FHA et al., contesting the Cross-Base Highway environmental review under the National Environmental Policy Act. All parties requested and obtained a stay in the case.

j. A list of any countries from which the organization(s) you represent at the hearing have received foreign donations and the total amount of donations received from each country, for the current year and the previous four years, by each organization.

NA

k. For tax-exempt organizations and non-profit organizations, copies of the three most recent public IRS Form 990s (including Form 990-PF, Form 990-N, and Form 990-EZ) for each of the organization(s) you represent at the hearing (not including any contributor names and addresses or any information withheld from public inspection by the Secretary of the Treasury under 26 U.S.C. 6104)).

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

2010	
Open to Public Inspection	

Α	For the	2010 calendar year, or tax year beginning APR 1, 2010 and ending	MAR 31, 2011	
	Check if	C Name of organization	D Employer identif	
	applicable	C Name of organization	D Employer Identifi	
Г	Addres			
F	Name change		94-3	091547
F	Initial	Number and street (or P.O. box if mail is not delivered to street address) Room/s		
F	return Termin	,		671-9950
F	ated Amend		G Gross receipts \$	2,188,098.
F	☐return ☐Applic		H(a) Is this a group r	
	⊥tion pendin		for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates in	
$\overline{}$	Τον-ονο		` '	list. (see instructions)
		e: CONSERVATIONNW.ORG	H(c) Group exemption	
				M State of legal domicile: WA
		Summary	our or formation,p op_	VI Otato or logal dominolo, 1122
		Briefly describe the organization's mission or most significant activities: FOCUS RE	SOURCES ON EN	VIRONMENTAL
Governance	'	PROTECTION ISSUES.		
na.		Check this box if the organization discontinued its operations or disposed of r	nore than 25% of its net a	esets
Ver			3	13
Ğ	1	Number of independent voting members of the governing body (Part VI, line 1b)		13
Activities &	1	Fotal number of individuals employed in calendar year 2010 (Part V, line 1a))	20
itie	1	Total number of volunteers (estimate if necessary)		100
ċį		Fotal unrelated business revenue from Part VIII, column (C), line 12		0.
Š		Net unrelated business taxable income from Form 990-T, line 34		0.
_	├	vet unrelated business taxable income from 1 on 1 350 1, into 04	Prior Year	Current Year
•	8	Contributions and grants (Part VIII, line 1h)	1,774,809.	2,085,540.
nue		Program service revenue (Part VIII, line 2g)	0.	0.
Revenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	2,202.	<870.
æ	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	15,849.	
	1	Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,792,860.	
_		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	1	Benefits paid to or for members (Part IX, column (A), line 4)	0.	
s	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	985,465.	1,036,884.
Expenses	16a		0.	0.
be	b	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 277,392.		
й	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	713,849.	751,110.
	1	Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,699,314.	
	19	Revenue less expenses. Subtract line 18 from line 12	93,546.	288,324.
Net Assets or Fund Balances	3		Beginning of Current Year	End of Year
ets	20	Fotal assets (Part X, line 16)	1,063,632.	1,326,270.
ASS	21	Fotal liabilities (Part X, line 26)	87,781.	62,095.
Net	22	Net assets or fund balances. Subtract line 21 from line 20	975,851.	1,264,175.
		Signature Block		
Und	ler pena	ties of perjury, I declare that I have examined this return, including accompanying schedules and sta	atements, and to the best of m	ny knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowledge.	
		<u> </u>		
Sig	n	Signature of officer	Date	
Hei		MITCH FRIEDMAN, EXECUTIVE DIRECTOR		
		Type or print name and title		
		Print/Type preparer's name Preparer's signature	Date Check	PTIN
Pai	d	JACK W. CURNOW	self-employ	ed
Pre	parer	Firm's name CURNOW & CURNOW, PLLC	Firm's EIN	
Use	Only	Firm's address 1720 IOWA ST		
		BELLINGHAM, WA 98229-4702	Phone no. 3	60-676-6655
Ma	y the IF	S discuss this return with the preparer shown above? (see instructions)		Yes No
				F 000 (0040)

Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	CONSERVATION NORTHWEST PROTECTS AND CONNECTS OLD-GROWTH FORESTS AND
	OTHER WILD AREAS FROM THE WASHINGTON COAST TO THE BC ROCKIES: VITAL TO
	A HEALTHY FUTURE FOR US, OUR CHILDREN, AND WILDLIFE.
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
	the prior Form 990 or 990-EZ? 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 X No
3	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
7	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 1,370,766 • including grants of \$ 647,470 •) (Revenue \$
	WE CONTINTUED TO WORK FOR AND SECURE CONSERVATION EASEMENTS IN THE
	COLUMBIA HIGHLANDS; AN AREA IN NORTHEAST WASHINGTON WHERE WE ARE
	WORKING IN PARTNERSHIP WITH TIMBER INDUSTRY LEADERS, PRIVATE
	LANDOWNERS, SMALL BUSINESS OWNERS, PUBLIC AGENCIES, CONSERVATION AND
	RECREATION GROUPS, AND COMMUNITY LEADERS TO CONSERVE THOUSANDS OF ACRES
	OF WILDLIFE HABITAT ON BOTH PUBLIC AND PRIVATE LANDS.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	WE CONTINUE TO PROTECT OLD-GROWTH FORESTS ON STATE AND FEDERAL LANDS AND FOCUS THE FOREST SERVICE ON PRACTICES THAT RESTORE HABITAT VALUE TO
	PLANTATIONS WHILE GENERATING SOCIAL BENEFITS.
	FLANIATIONS WHILE GENERATING SOCIAL BENEFITS:
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	WE MADE STRIDES TO HELP WOLVES GAIN ACCEPTANCE AROUND THE STATE AND
	HELPED DESIGN A STATE WOLF PLAN WHICH WAS ADOPTED BY THE WASHINGTON
	FISH AND WILDLIFE COMMISSION. WE HOSTED A STANDING ROOM ONLY WOLF FORUM
	IN SEATTLE, AND OTHER EVENTS IN ELLENSBURG, YAKIMA, WENATCHEE, SOUTHERN
	BC, FEDERAL WAY, BELLINGHAM, AND NORTH BEND. OUR EXPERTISE WAS TAPPED
	FOR A GREAT EXHIBIT AT THE BURKE MUSEUM. FINALLY, OUR WOLF PROGRAM
	DIRECTOR JASMINE MINBASHIAN HELPED FILM A BBC SPECIAL ON THE RETURN OF
	WOLVES. BE ON THE LOOKOUT FOR IT ON THE DISCOVERY CHANNEL IN SPRING 2012.
	<u></u>
	Other program convices (Describe in Schedule O.)
4d	Other program services. (Describe in Schedule O.) (Exponence \$
40	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 1,370,766.
70	Form 990 (2010)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			3,7
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
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; serve as a custodian for amounts not listed in Part X; or provide	_		Х
40	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?	40		х
	If "Yes," complete Schedule D, Part V	10		Α
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. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	Part VI	11a	х	
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	Ha		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
Ŭ	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		Х
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, XII, and XIII	12a	Х	
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, XII, and XIII is optional	12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			l
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			.,
	located outside the United States? 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,			٠,,
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		_ v	
46	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	4-		- v
00	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	00:		
	operate one or more hospitals must attach audited financial statements (see instructions)	20 b		

Form 990 (2010) CONSERVATION NORTH Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			.,
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			Х
	Schedule K. If "No", go to line 25	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
a	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	24u		
ZJa	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	23a		
	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		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		Х
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			.,
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			х
00	Schedule N, Part II	32		Λ
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	20		Х
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		22
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	33		
a	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes X No			
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		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form **990** (2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
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 2a)		
b	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 e-file. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	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		Х
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	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?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12	_		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders	_		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
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 The who are a way or band.	-		
	Enter the amount of reserves on hand	44-		Х
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

CONSERVATION NORTHWEST 94-3091547 Form 990 (2010) 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. X Check if Schedule O contains a response to any question in this Part VI Section 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 13 **b** Enter the number of voting members included in line 1a, above, who are independent ______ Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision Х of officers, directors or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х 5 Did the organization become aware during the year of a significant diversion of the organization's assets? X Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the 7a Х governing body? **b** Are any decisions of the governing body subject to approval by members, stockholders, or other persons? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a X **b** Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х 9 organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No Х 10a Does the organization have local chapters, branches, or affiliates? 10a b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 Х 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise Х 12b to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Х in Schedule O how this is done 12c X Does the organization have a written whistleblower policy? 13 13 Does the organization have a written document retention and destruction policy? X Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х a The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. X Own website Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

WA

98225

THE ORGANIZATION - (360)671-9950

1208 BAY STREET, NO. 201, BELLINGHAM,

Form 990 (2010)

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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average		Position					Reportable	Reportable	Estimated
	hours per	(c	heck	c all	that	app	ly)	compensation	compensation	amount of
	week (describe hours for related organizations in Schedule O)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
HEIDI WILLS										
PRESIDENT	1.00	X		X				0.	0.	0
MICHEL GIRARD										
VICE PRESIDENT	1.00	X		Х				0.	0.	0
JENNIFER MERKEL								_	_	_
SECRETARY	1.00	X		Х				0.	0.	0
BILL DONNELLY										
TREASURER	1.00	X		Х				0.	0.	0
EMILY BARNETT	1 00	1								_
DIRECTOR	1.00	X						0.	0.	0
TOM CAMPION	1 00	7,7								_
DIRECTOR HILARY FRANZ	1.00	X						0.	0.	0
	1.00	x						0.	0.	0
DIRECTOR RON JUDD	1.00	┷	-					0.	0.	0
DIRECTOR	1.00	x						0.	0.	0
ALEXANDRA LOEB	1.00	123						0.	•	
DIRECTOR	1.00	x						0.	0.	0
JOHN MAGOTEAUX		Ħ						-		
DIRECTOR	1.00	x						0.	0.	0
PEGGY PRINTZ										
DIRECTOR	1.00	X						0.	0.	0
FLOYD ROGERS										
DIRECTOR	1.00	X						0.	0.	0
MITCH FRIEDMAN										
EXECUTIVE DIRECTOR	40.00			Х				83,302.	0.	0
		1	1		1	1		l		

032007 12-21-10 Form **990** (2010)

Form 9	90 (2010) CONSERVA	TION NOI	RTI	IWI	ES7	<u> </u>				94-30	91	547	Pa	age 8
Part '	VII Section A. Officers, Directors, Tru	ıstees, Key Eı	mplo	oyee	s, a	nd l	High	est	Compensated Employ	ees (continued)				
	(A) Name and title	(B) Average hours per	(cl		Pos all t	itior		ılv)	(D) Reportable	(E) Reportable			(F) timate	
		week (describe hours for related organizations in Schedule O)	istee or director	Institutional trustee	Officer		Highest compensated 5		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MIS	3	com fr orga	nount other pensa om the anizat d relat unization	ition e ion ed
											_			
1b S	Sub-total		<u> </u>						83,302.		0.			0.
	otal from continuation sheets to Part VI otal (add lines 1b and 1c)						7		83,302.		0.			0.
2 T	otal number of individuals (including but not ompensation from the organization	ot limited to th					e) w	no r),000 in reportable				(
	-				7								Yes	No
lii	olid the organization list any former officer, ne 1a? If "Yes," complete Schedule J for s	uch individual										3		X
	or any individual listed on line 1a, is the sund related organizations greater than \$150	-		-					· · · · · · · · · · · · · · · · · · ·	the organization		4		X
5 D	oid any person listed on line 1a receive or a	accrue compe	nsat	ion f	from	any	y uni	elat	ted organization or indiv			_		v
	endered to the organization? If "Yes," com on B. Independent Contractors	piete Scheaui	e J ī	or si	ucn _i	pers	son					5		Х
1 C	complete this table for your five highest cone organization. NONE	mpensated in	depe	ende	ent c	onti	racto	ors t	that received more than	\$100,000 of com	pens	ation f	rom	
	(A) Name and business	address							(B) Description of s	services	С	(C omper		n
	otal number of independent contractors (in 100,000 in compensation from the organization	•	ot li	mite	d to		se li 0	stec	d above) who received n	nore than				

Pa	rt V	Ш	Statement of Reven	ue					
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
tributions, gifts, grants other similar amounts		b N c F d F e C f A	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions, gifts, grants) Similar amounts not included above	1b 1c 1d ons) 1e s, and re 1f 2,	20,485. 065,055. 99,872.				
Con and			Noncash contributions included in lines Fotal. Add lines 1a-1f			2,085,540.			
	2	a _	Total. Add lilles Ta-11		Business Code	2700373101			
rogram Serv Revenue		b _ c _ d _ e _							
Ā			All other program service rever						
Other Revenue Contributions, gifts, grants Revenue and other similar amounts	3	lı c	Total. Add lines 2a-2f	dividends, intere	est, and	1,014.	1,014.		
	4		ncome from investment of tax			414.	414.		
	5	-	Royalties	(i) Real	(ii) Personal	111.	414.		
		b L	Gross Rents Less: rental expenses Rental income or (loss)	5,142.	(ii) reisonal				
				3,1120		5,142.	5,142.		
		а (Gross amount from sales of assets other than inventory	(i) Securities 20,000.	(ii) Other				
		c (Less: cost or other basis and sales expenses Gain or (loss)	21,884.	>	~1 88 <i>4</i>	> <1,884.		
evenue		a (Net gain or (loss)	g events (not 85 • of		(1,001.	(1,001.		
Other R		Б b L	Part IV, line 18	a b	89,896.	<15,995.			<15,995.>
	9	a C	Net income or (loss) from fund Gross income from gaming ac Part IV, line 19	tivities. See		<13,993.			X13,993.2
		c N	Less: direct expenses Net income or (loss) from gami	ing activities					
		а b L	Gross sales of inventory, less in allowances	a					
			Miscellaneous Revenue		Business Code				
	11		MISCELLANEOUS		900099	2,117.	2,117.		
		ь <u>С</u>	CURRENCY EXCHAN	GE	900099	<30.	> <30.	>	
		c _							
			All other revenue			2,087.			
	12		Total. Add lines 11a-11d Total revenue. See instructions.			2,087.	6,773.	0 -	<15,995.>

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) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	, ,		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
3	the U.S. See Part IV, line 22				
3	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees	83,301.	58,311.	4,165.	20,825.
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	767,036.	538,367.	68,495.	160,174.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	21,136.	14,821.	2,051.	4,264. 17,223.
9	Other employee benefits	85,786.	61,958.	6,605.	17,223.
10	Payroll taxes	79,625.	56,711.	6,451.	16,463.
11	Fees for services (non-employees):				
а	Management	0.455	0.455		
b	Legal	9,455.	9,455.	7 756	
	Accounting	7,756. 2,700.	2,700.	7,756.	
d	Lobbying	2,700.	2,700.		
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	322,804.	283,553.	3,862.	35,389.
g 12	Other Advertising and promotion	11,338.	11,085.	3,002.	253.
13	Office expenses	149,274.	72,524.	5,160.	71,590.
14	Information technology	24,764.	18,806.	2,750.	3,208.
15	Royalties			,	· · · · · · · · · · · · · · · · · · ·
16	Occupancy	106,579.	74,272.	11,445.	20,862.
17	Travel	44,852.	59,655.	<18,844.>	4,041.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,501.	2,970.		531.
20	Interest				
21	Payments to affiliates	00 505	0.016	10.00	
22	Depreciation, depletion, and amortization	20,785.	2,916.	17,869.	
23	Insurance Other avanged Itamiza avanged not solvered	12,133.		12,133.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A)				
9	amount, list line 24f expenses on Schedule 0.) SPONSORSHIPS AND GRANTS	75,851.	75,851.		
h	BANK FEES	10,737.	1,201.	683.	8,853.
c	DUES AND SUBSCRIPTIONS	3,065.	2,770.	159.	136.
d	AWARDS	738.	555.	93.	90.
е	SPECIAL EVENT ALLOCATIO	<89,896.	>		<89,896.>
f	All other expenses	34,674.	22,285.	9,003.	3,386.
25	Total functional expenses. Add lines 1 through 24f	1,787,994.	1,370,766.	139,836.	277,392.
26	Joint costs. Check here ▶ if following SOP				
	98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
					Carra 990 (0010)

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Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	705,495.	2	515,732.
	3	Pledges and grants receivable, net	92,682.		388,718.
	4	Accounts receivable, net	53,720.	4	24,655.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II			
		of Schedule L		5	
	6	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			
ις		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	24 172
As	8	Inventories for sale or use			24,172.
	9	Prepaid expenses and deferred charges	15,150.	9	29,441.
	10a	Land, buildings, and equipment: cost or other	۵ ا		
	١	basis. Complete Part VI of Schedule D Less: accumulated depreciation 10a 277,66 10b 90,45	9. 59,585.	10-	187,207.
				10c	107,207.
	11 12	Investments - publicly traded securities Investments - other securities. See Part IV, line 11		11	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11			156,345.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	4 060 600	16	1,326,270.
	17	Accounts payable and accrued expenses	0 = 0.4	17	62,095.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
S	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,			
iab		highest compensated employees, and disqualified persons. Complete Part II			
_		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	60.005
	26	Total liabilities. Add lines 17 through 25	87,781.	26	62,095.
		Organizations that follow SFAS 117, check here			
ces		lines 27 through 29, and lines 33 and 34.	767 612		1 112 042
aŭ	27	Unrestricted net assets		27	1,112,843.
Ва	28	Temporarily restricted net assets		28	131,332.
pur	29	Permanently restricted net assets		29	
Ę		Organizations that do not follow SFAS 117, check here and			
o S	20	complete lines 30 through 34.		20	
Net Assets or Fund Balances	30 31	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund		30	
t As	32	Retained earnings, endowment, accumulated income, or other funds		32	
Š	33	Total net assets or fund balances		33	1,264,175.
	34	Total liabilities and net assets/fund balances	1 062 620	34	1,326,270.
	U T	1 Stal Habilition and flot according palatices		<u>, ,,</u>	5 000 (2012)

Form **990** (2010)

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1			6,3	
2	Total expenses (must equal Part IX, column (A), line 25)	2	1		7,9	
3	Revenue less expenses. Subtract line 2 from line 1	3			8,3	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		97	5,8	51.
5	Other changes in net assets or fund balances (explain in Schedule O)	5				0.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	1	, 26	4,1	75 .
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					Ш
			_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.				
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?					_X_
b	b Were the organization's financial statements audited by an independent accountant?				Х	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Aud	it			
	Act and OMB Circular A-133?			За		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audi	it [
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.			3b		
				Form	9 90 (2010)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

CONSERVATION NORTHWEST

Employer identification number

94-3091547 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name. 4 city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. **b** Type II c Type III - Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes Nο the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). h (iii) Type of (vi) Is the (iv) Is the organization (v) Did you notify the (vii) Amount of (i) Name of supported (ii) EIN organization in col. organization in col. (i) listed in your organization in col. organization support (described on lines 1-9 aovernina document? (i) of your support? U.S.? above or IRC section (see instructions)) Yes No Yes Yes No

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

Schedule A (Form 990 or 990-EZ) 2010

Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4.						
	ction B. Total Support					1	
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain	· ·					
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
	Total support. Add lines 7 through 10						
	Gross receipts from related activities,					12	
13	First five years. If the Form 990 is for	•			•	. , . ,	
S ₂ (organization, check this box and store ction C. Computation of Publ						P
			<u> </u>	l (f)		14	
	Public support percentage for 2010 (I					15	%
	Public support percentage from 2009						% v and
Iba	33 1/3% support test - 2010. If the o	•		•		•	
h	stop here. The organization qualifies						
D	33 1/3% support test - 2009. If the o	•		•		•	
170	and stop here. The organization qual						
1/a	10% -facts-and-circumstances tes						
	and if the organization meets the "fact						
L	meets the "facts-and-circumstances"	-	•				
O	10% -facts-and-circumstances tes						
	more, and if the organization meets the		·				
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18	Private foundation. If the organization	n dia not check a	00x on line 13, 16	oa, 160, 1/a, or 1/	b, check this box a	and see instruction	s

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

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

Girts, grants, contributions, and membership feets received. (Continue to the contributions and the co	Sec	ction A. Public Support	ciow, picace comp	note i art ii.j				
Gitte, grants, contributions, and membership feet received. (Do not include any "unusual grants.") 1729129. 1918348. 1810397. 1774808. 2085540. 9318222.			(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
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11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 13 Total support (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage from 2010 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2009 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2009 Schedule A, Part III, line 17 19 a 33 1/3% support tests - 2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. 10 public support tests - 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.	c	Add lines 10a and 10b	43,161.	50,829.	22,541.	18,051.	4,686.	139,268.
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regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 13 Total support (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2009 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2009 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 10 b 33 1/3% support tests - 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 17 Intervention of Investment Income Percentage 18 Intervention of Investment Income Percentage 19 Intervention of Investment Income Percentage 10 Intervention of Investment Income Percentage 10 Intervention of Investment Income Percentage 11 Intervention of Investment Income Percentage Intervention of Investment Income Percenta								
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assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12.) 1773679. 1941915. 1877334. 1792859. 2076318. 9462105. 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2009 Schedule A, Part III, line 15 17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2009 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 18 Is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 19 Investment income percentage from 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 10 Investment income percentage from 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization income percentage from 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization income percentage from 2009.	12							
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16 Public support percentage from 2009 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2009 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization X	Sec							· ·
16 Public support percentage from 2009 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2009 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization X	15	Public support percentage for 2010 (I	ine 8, column (f) di	ivided by line 13, c	olumn (f))		15	98.48 %
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18 Investment income percentage from 2009 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	Sec							
18 Investment income percentage from 2009 Schedule A, Part III, line 17	17	Investment income percentage for 20	10 (line 10c, colun	nn (f) divided by lin	ne 13, column (f))		17	1.47 %
19a 33 1/3% support tests - 2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							18	
more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization			•					
b 33 1/3% support tests - 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization			-					
line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	b							
	-	• •	•			•	•	
	20	•			•		•	

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

➤ See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

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), or Form 990-EZ, Part V, line 35a (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Nan	ne of organization			Emp	loyer identification number
		ATION NORTHWEST			94-3091547
Pa	art I-A Complete if the org	ganization is exempt und	ler section 501(c)	or is a section 527 of	organization.
2	Provide a description of the organize Political expenditures Volunteer hours	·		▶	
Pa	art I-B Complete if the org	ganization is exempt und	ler section 501(c)	(3).	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955	>	3
2	Enter the amount of any excise tax	incurred by organization manage	ers under section 4955	>	<u> </u>
3	If the organization incurred a section	on 4955 tax, did it file Form 4720	for this year?		Yes No
4a	a Was a correction made?				Yes No
	o If "Yes," describe in Part IV.				
	art I-C Complete if the orc			•	. , . ,
1	Enter the amount directly expended	d by the filing organization for se	ction 527 exempt func	tion activities > s	S
2	Enter the amount of the filing organ				
	exempt function activities				<u> </u>
3	Total exempt function expenditures			-	
	line 17b	1400 DOI (5
	Did the filing organization file Form				
5	Enter the names, addresses and er made payments. For each organiza			-	
	contributions received that were pr	·	0 0		•
	political action committee (PAC). If			•	99
	(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) 2010

Schedule C (Form 990 or 990-EZ) 2010			ON NORTHWES			091547 Page 2
Part II-A Complete if the org			mpt under sectio	n 501(c)(3) and fil	ed Form 5768	
(election under sec		•				
A Check if the filing organiza	-		- ·			
B Check ▶ ☐ if the filing organiza	tion checked	box A ar	nd "limited control" pro	ovisions apply.		
Limi	ts on Lobbyi	ng Expe	nditures		(a) Filing organization's	(b) Affiliated group totals
(The term "expend	ditures" mea	ns amou	ınts paid or incurred.		totals	ισιαισ
4. Total labbying avacaditures to infl	uanaa nublia	oninion (arasa raata labbuina\		164.	
1a Total lobbying expenditures to inflb Total lobbying expenditures to infl					34,311.	
b Total lobbying expenditures to inflc Total lobbying expenditures (add l					34,475.	
d Other exempt purpose expenditures					1,753,519.	
e Total exempt purpose expenditure					1,787,994.	
f Lobbying nontaxable amount. Ent					239,400.	
If the amount on line 1e, column (a) of			bying nontaxable am		,	
Not over \$500,000			the amount on line 1e.			
Over \$500,000 but not over \$1,00	0,000	\$100,00	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	500,000	\$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000	\$225,00	00 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000		\$1,000,	000.			
g Grassroots nontaxable amount (er	nter 25% of lin	ne 1f)			59,850.	
h Subtract line 1g from line 1a. If zer	•				0.	
i Subtract line 1f from line 1c. If zero	•				0.	
j If there is an amount other than ze					Г	¬.,
reporting section 4911 tax for this				2 11 5041)	L	Yes No
(Some organiz			eraging Period Under	Section 501(n) n do not have to comp	olete all of the five	
				s 2a through 2f on pa		
	Lobbyir	ng Exper	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 200)7	(b) 2008	(c) 2009	(d) 2010	(e) Total
(or fiscal year beginning in)						
2a Lobbying nontaxable amount	235,	131.	414,204.	234,966.	239,400.	1,123,701.
b Lobbying ceiling amount						4 605 550
(150% of line 2a, column(e))						1,685,552.
	22	0.5.2	19,850.	10,103.	34,475.	06 100
c Total lobbying expenditures	44,	052.	19,050.	10,103.	34,473.	86,480.
d Grassroots nontaxable amount	58	783.	103,551.	58,742.	59,850.	280,926.
e Grassroots ceiling amount	33,			23,7220	22,000	
(150% of line 2d, column (e))						421,389.
f Grassroots lobbying expenditures		562.	1,042.	352.	164.	2,120.

Schedule C (Form 990 or 990-EZ) 2010

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2010 CONSERVATION NORTHWEST 94-309154 | 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)).

		(a	1)	(b	`
		Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities? If "Yes," describe in Part IV				
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				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	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), section	on 501(c)	(5), or se	ection	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?				
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4)				
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa	rt III-A, lii	ne 3 is a	nswered	
	"Yes."				
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	cal			
	expenses for which the section 527(f) tax was paid).				
	Current year				
b	Carryover from last year				
С					
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 exceeds the amount on line 3, what portion of the exceeds the amount on line 3.				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
	expenditure next year?				
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par					
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; ar	nd Part II-B,	line 1i. Also	o, complete	this part
	ny additional information.				
PAI	RT I-A, LINE 1:				
 / -					
N/2	<u> </u>				

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

2010
Open to Public Inspection

Name of the organization

CONSERVATION NORTHWEST

Employer identification number 94-3091547

Pa	rt I Organizations Maintaining Donor Advis	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lir	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
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 advise	ed funds
_	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor		
•	for charitable purposes and not for the benefit of the donor		
	impermissible private benefit?		
Pa	irt II Conservation Easements. Complete if the or		
1	<u> </u>	•	
•	Preservation of land for public use (e.g., recreation or		torically important land area
	Protection of natural habitat	Preservation of a certi	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	lified conservation contribution in the form	of a conservation easement on the last
_	day of the tax year.	and defined various definition and the form of	or a consorvation casement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		
h			
Č	Number of conservation easements on a certified historic st		
d			
u	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		
3	year	eleased, extilliguished, or terminated by the	organization during the tax
4	Number of states where property subject to conservation ea	assement is located	
5	Does the organization have a written policy regarding the pe		
3	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo		
0			
9	and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conserva		
9	include, if applicable, the text of the footnote to the organization		
	conservation easements.	ation's illiancial statements that describes i	the organization's accounting for
Pa	irt III Organizations Maintaining Collections of	of Art Historical Treasures or Ot	ther Similar Assets
	Complete if the organization answered "Yes" to Form		inor ommar /1000101
12	If the organization elected, as permitted under SFAS 116 (A		nent and halance sheet works of art
	historical treasures, or other similar assets held for public ex		
	the text of the footnote to its financial statements that desc		ice of public service, provide, in Fait XIV,
h	If the organization elected, as permitted under SFAS 116 (A		and halance sheet works of art historical
b	treasures, or other similar assets held for public exhibition,	•	
	relating to these items:	education, or research in furtherance of pur	one service, provide the following amounts
	•		*
	(i) Revenues included in Form 990, Part VIII, line 1		
^			
2	If the organization received or held works of art, historical truths following employed required to be reported under SEAS		gain, provide
_	the following amounts required to be reported under SFAS	, ,	• •
a	Revenues included in Form 990, Part VIII, line 1		
a	Assets included in Form 990, Part X		▶ \$

Pai	t III Organizations Maintaining C	ollections of A	t, Historic	al Tr	easures, c	r Othe	r Simila	ar Ass	e ts (conti	nued)
3	Using the organization's acquisition, accession	on, and other record	s, check any	of the	following that	t are a siç	nificant i	use of its	collection	n items
	(check all that apply):									
а	Public exhibition	d	Loan (or excl	hange progra	ms				
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	llections and explain	n how they fu	ther th	ne organizatio	on's exen	npt purpo	se in Pa	rt XIV.	
5	During the year, did the organization solicit or	receive donations	of art, historic	al trea	sures, or othe	er similar	assets			
	to be sold to raise funds rather than to be ma	intained as part of t	he organizatio	n's cc	llection?			<u></u>	Yes	☐ No
Pai	t IV Escrow and Custodial Arrang		ete if the orga	nizatio	n answered "	Yes" to F	orm 990	, Part IV	line 9, or	
	reported an amount on Form 990, Par									
1a	Is the organization an agent, trustee, custodia	an or other intermed	liary for contri	bution	s or other as	sets not i	ncluded	_	_	
	on Form 990, Part X?							L	_ Yes	└─ No
b	If "Yes," explain the arrangement in Part XIV									
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance									
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?	4				L	_ Yes	└─ No
<u>b</u>	If "Yes," explain the arrangement in Part XIV.									
Pai	t V Endowment Funds. Complete if	the organization an	swered "Yes"	to Fo						
		(a) Current year	(b) Prior ye	ar	(c) Two year	s back (d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the year	end balance held a	is:							
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Term endowment ▶ 9	6								
За	Are there endowment funds not in the posses	ssion of the organiza	ation that are	neld a	nd administe	red for th	e organiz	ation		
	by:								ſ	Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	listed as required o	n Schedule R	?					3b	
4	Describe in Part XIV the intended uses of the									
Pai	t VI Land, Buildings, and Equipm	ent. See Form 990), Part X, line 1	0.						
	Description of investment	(a) Cost or o	ther (b) Cost	or other	(c) Ac	cumulate	d	(d) Bool	k value
	·	basis (investr		basis ((other)		reciation		. ,	
1a	Land			12	6,619.				12	6,619.
	Buildings									
	Leasehold improvements				4,586.					4,586.
	Equipment				6,461.		90,4	59.	5	5,002.
	Other				-		-			-
	. Add lines 1a through 1e. (Column (d) must ed		X, column (B)	line 1	0(c).)			ightharpoonup	18'	7,207.

Schedule D (Form 990) 2010

Part VII Investments - Other Securities. Se	e Form 990, Part X, line	12.		<u> </u>
(a) Description of security or category (including name of security)	(b) Book value	Co	(c) Method of valua st or end-of-year mar	
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D) (E)				
(F)				
(G)				
(H)				
(1)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related. Se	ee Form 990, Part X, line	e 13.		
(a) Description of investment type	(b) Book value	Co	(c) Method of valua st or end-of-year mar	
(1)				
(2)				
(3)				
(4)				
(5)				
<u>(6)</u>				
(9)				
(10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, line	15.			
	Description			(b) Book value
(1) DEPOSITS				153,000.
(2) MISCELLANEOUS RECEIVABLES				3,345.
(3)				
(4)				
(5)				
(6)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	: 15.)		•	156,345.
Part X Other Liabilities. See Form 990, Part X,				•
1. (a) Description of liability		(b) Amount		
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)			-	
(9)			-	
(10)				
(11)	25)		-	
Total. (Column (b) must equal Form 990, Part X, col (B) line FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to 2. FIN 48 (ASC 740).	the organization's financial sta	tements that reports the organ	lization's liability for uncertain	n tax positions under

	dule D (Form 990) 2010 CONSERVATION NORTHWEST				3091547 Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form	990 to Audited F	inancial Sta	temen	
1					2,076,318.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		1,787,994.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		288,324.
4	Net unrealized gains (losses) on investments		4		
5	Donated services and use of facilities				
6	Investment expenses				
7	Prior period adjustments				
8	Other (Describe in Part XIV.)				
9	Total adjustments (net). Add lines 4 through 8		9		0.
10	Excess or (deficit) for the year per audited financial statements. Combine lin				288,324.
Pai	t XII Reconciliation of Revenue per Audited Financial St	atements With I	Revenue per	Returr	
1	Total revenue, gains, and other support per audited financial statements			1	2,166,214.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities				
С	Recoveries of prior year grants				
d	Other (Describe in Part XIV.)		89,896		
е	Add lines 2a through 2d			2e	89,896.
3	Subtract line 2e from line 1			3	2,076,318.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIV.)				
	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12				2,076,318.
Pa	t XIII Reconciliation of Expenses per Audited Financial S	tatements With	Expenses pe	er Retu	rn
1	Total expenses and losses per audited financial statements			1	1,877,890.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments				
С	Other losses				
d			89,896	.	
е	Add lines 2a through 2d	·	_	2e	89,896.
3	Subtract line 2e from line 1				1,787,994.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIV.)				
	Add lines 4a and 4b			4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	18.)			1,787,994.
	t XIV Supplemental Information	, , , , , , , , , , , , , , , , , , , ,		. 0	
	olete this part to provide the descriptions required for Part II, lines 3, 5, and e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Al				
PAI	RT XII, LINE 2D - OTHER ADJUSTMENTS:				
SPI	ECIAL EVENT DIRECT EXPENSES NETTED FOR	TAX PURPOS	SES		
PAI	RT XIII, LINE 2D - OTHER ADJUSTMENTS:				
DII	RECT EXPENSES NETTED AGAINST REVENUE F	OR TAX PURE	POSES		

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Inspection

Employer identification number Name of the organization CONSERVATION NORTHWEST 94-3091547 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Internet and email solicitations b Phone solicitations c In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? No b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser (v) Amount paid (vi) Amount paid (iv) Gross receipts (i) Name and address of individual tò (or retained by) (ii) Activity to (or retained by) have custody from activity fundraiser or entity (fundraiser) or control of contributions? organization listed in col. (i) Yes No List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

					-	-			
			(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through			
			AUCTION			' ' ' '			
o)			(event type)	(event type)	(total number)	- col. (c))			
nue									
Revenue	1	Gross receipts	94,386.			94,386.			
	2	Less: Charitable contributions	20,485.			20,485.			
	3	Gross income (line 1 minus line 2)	73,901.			73,901.			
	4	Cash prizes							
ses	5	Noncash prizes							
Direct Expenses	6	Rent/facility costs	3,663.			3,663.			
Direct	7	Food and beverages	27,216.			27,216.			
	8	Entertainment							
	9	Other direct expenses				59,017.			
	10	Direct expense summary. Add lines 4 through			>	(89,896,			
		Net income summary. Combine line 3, colum	n (d), and line 10)	<15,995.			
Pa	Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than								
		\$15,000 on Form 990-EZ, line 6a.				T			
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))			
Rev	1	Gross revenue							
ses	2	Cash prizes							
Expens	3	Noncash prizes							
Direct Expenses	4	Rent/facility costs							
	5	Other direct expenses							
	6	Volunteer labor	Yes % No	Yes % No	Yes % No				
	7	Direct expense summary. Add lines 2 through	h 5 in column (d)		>	()			
	8	Net gaming income summary. Combine line	1, column d, and line 7		>				
а	9 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? b If "No," explain:								
		ere any of the organization's gaming licenses re	evoked, suspended or te	rminated during the tax y	/ear?	Yes No			

Sch	nedule G (Form 990 or 990-EZ) 2010 CONSERVATION NORTHWEST 94 -	<u> 3091</u>	<u>547</u>	Page 3
	Does the organization operate gaming activities with nonmembers?		Yes	☐ No
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	☐ No
13	Indicate the percentage of gaming activity operated in:			
	a The organization's facility	13a		%
	b An outside facility	13b		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name ▶			
	Address			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	🖳	Yes	└─ No
k	b If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained by the third party > \$			
(c If "Yes," enter name and address of the third party:			
	Name			
	Address ▶			
16	Gaming manager information:			
	Name			
	Gaming manager compensation > \$			
	Description of any data provided N			
	Description of services provided			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
47				
	Mandatory distributions:			
á	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		Yes	□ No
	retain the state gaming license?	'	162	∟ No
k	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
Da	organization's own exempt activities during the tax year \$) ! <i>(</i>	۸ . •	D+ !!!
٢٤	Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (ii		-	
_	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information	n (see	ınstruc	uons).
_				
_				
_				
_				

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV. lines 29 or 30.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Name of the organization

Attach to Form 990.

CONSERVATION NORTHWEST 94-3091547 Types of Property (a) (b) (c) (d) Check if Number of Noncash contribution Method of determining contributions or amounts reported on applicable noncash contribution amounts tems contributed Form 990, Part VIII, line 1g Art - Works of art Art - Historical treasures 2 Art - Fractional interests X 9,887. FMV - DONOR 4 Books and publications Clothing and household goods Cars and other vehicles 6 Boats and planes _____ 7 Intellectual property 8 Securities - Publicly traded 9 Securities - Closely held stock 10 11 Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 Qualified conservation contribution -13 Historic structures Qualified conservation contribution - Other 14 Real estate - Residential 15 Real estate - Commercial 16 17 Real estate - Other 18 Collectibles Food inventory 19 Drugs and medical supplies 20 21 Taxidermy 22 Historical artifacts Scientific specimens 23 24 Archeological artifacts (AUCTION ITEMS) X 0 63,798. FAIR MARKET VALUE 25 Other COMPUTER SOFT 17,009. PR X 0 FAIR MARKET VALUE Other > 26 5,352. **SERVICES** X 0 VALUE FAIR MARKET 27 Other -X 0 2.309. FAIR MARKET ADVERTISING A VALUE 28 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for Х the entire holding period? 30a **b** If "Yes," describe the arrangement in Part II. Х Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Х contributions? 32a b If "Yes," describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service 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.

2010
Open to Public Inspection

FORM 990, PART VI, SECTION C, LINE 18: THE ORGANIZATION'S FORM 990 IS	Name of the organization CONSERVATION NORTHWEST	Employer identification number 94-3091547		
FORM 990, PART VI, SECTION C, LINE 18: THE ORGANIZATION'S FORM 990 IS AVAILABLE UPON REQUEST OR AT THEIR WEBSITE. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING	FORM 990, PART VI, SECTION B, LINE 11: DRAFT TAX RETURN W	AS PRESENTED TO		
AVAILABLE UPON REQUEST OR AT THEIR WEBSITE. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING	MANAGEMENT BEFORE FILING.			
AVAILABLE UPON REQUEST OR AT THEIR WEBSITE. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING				
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING	FORM 990, PART VI, SECTION C, LINE 18: THE ORGANIZATION'S	FORM 990 IS		
	AVAILABLE UPON REQUEST OR AT THEIR WEBSITE.			
	FORM 990. PART VI. SECTION C. LINE 19: THE ORGANIZATION'S	GOVERNING		

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements.

Inspection

Α	For th	e 2009 c	alendar year, or tax year beginning $\mathrm{APR}1,2009$	MAR 31, 2010	
B Check if applicable: Please use IRS C Name of organization D Employer identification			cation number		
Γ-	Addr	ess label			
F	Name chan	type		94-3	091547
F	Initial return	See	Number and street (or P.O. box if mail is not delivered to street address) Room/s	uite E Telephone numbe	
F	Term		[201]	(360	
F	Amer	nded tions		G Gross receipts \$	<u>1,792,860.</u>
F	Appli		Bellingham, WA 98225	H(a) Is this a group re	
_	pend	F Name and address of principal officer:Mitch Friedman for affiliates?		Yes X No	
			08 Bay Street, Bellingham, WA 98225	H(b) Are all affiliates inc	luded? Yes No
1	Гах-ех		tus: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527	If "No," attach a	list. (see instructions)
			ww.conservationnw.org	H(c) Group exemptio	n number 🕨
			ion: X Corporation	ear of formation: 1989 N	State of legal domicile: WA
	art I				
4	1	Briefly d	escribe the organization's mission or most significant activities: Focus $$ re	sources on en	vironmental
Governance			ection issues.		
rna	2	Check th	nis box 🕨 🔲 if the organization discontinued its operations or disposed of r	nore than 25% of its net as	ssets.
)Ve	3	Number	of voting members of the governing body (Part VI, line 1a)	3	15
Ğ	4	Number	of independent voting members of the governing body (Part VI, line 1b)	4	15
ళ	5	Total nu	mber of employees (Part V, line 2a)	5	20
/itie	6	Total nu	mber of volunteers (estimate if necessary)	6	100
Activities	7a		ss unrelated business revenue from Part VIII, column (C), line 12		0.
4		_	lated business taxable income from Form 990-T, line 34		0.
				Prior Year	Current Year
d)	8	Contribu	tions and grants (Part VIII, line 1h)	204,117.	1,774,809.
Revenue	9	Program	service revenue (Part VIII, line 2g)	20,000.	
eve	ı	-	ent income (Part VIII, column (A), lines 3, 4, and 7d)	1,895.	2,202.
ď			venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	7,620.	15,849.
			enue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	233,632.	1,792,860.
	13	Grants a	nd similar amounts paid (Part IX, column (A), lines 1-3)	7,726.	
	l		paid to or for members (Part IX, column (A), line 4)	-	
Ø	ı		other compensation, employee benefits (Part IX, column (A), lines 5-10)	258,298.	985,465.
Expenses	I .		onal fundraising fees (Part IX, column (A), line 11e)		
be			draising expenses (Part IX, column (D), line 25) 325, 334.		
ũ			penses (Part IX, column (A), lines 11a-11d, 11f-24f)	198,519.	713,849.
			enses. Add lines 13-17 (must equal Part IX, column (A), line 25)	464,543.	1,699,314.
			less expenses. Subtract line 18 from line 12	-230,911.	93,546.
or				Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total ass	ets (Part X, line 16)	931,066.	1,063,632.
AS D B B	21	Total liab	ilities (Part X, line 26)	48,761.	87,781.
File	22	Net asse	ts or fund balances. Subtract line 21 from me20	882,305.	975,851.
Pa	rt II		eture Block		
		Under pen	alties of perjury, I declare that I have examined this return, including accompanying schedules and statements. Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	nts, and to the best of my knowledg	e and belief, it is true, correct,
		Late comp.		-3	
Sign Here		_		<u> </u>	<u> </u>
		Sig	nature of officer	Date	
		<u>M</u> :	tch Friedman, Executive Director		
		Тур	e or print name and title		
Deld		Preparer'	s Date	Check if Self- Prepare (see ins	r's identifying number tructions)
Paid		signature	V/14/45dus 1-11-11	employed >	P01354950
Preparer's		Firm's nam	Ganders & Sanders CPAs PS	EIN ▶	
Use	UNIY	self-emplo			
		address, a ZIP + 4	Belfair, WA 98528	Phone no. ► (:	360) 275-0991
Mav	the IF	RS discus	s this return with the preparer shown above? (see instructions)		Yes No

932002 07-20-09

Form **990** (2009)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
•	If "Yes," complete Schedule A	1	X	
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			
Ŭ	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	X	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
Ū	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
•	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; 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	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
•	as applicable	11	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.			
•	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.			
•	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.			
•	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.			
•	Did the organization report an amount of other liabilities in Part X, line 25? If "Yes," complete Schedule D, Parts X.			
•	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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain a separate, independent audited financial statement for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII.	12	х	
12A	Was the organization included in a consolidated, independent audited financial statement for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X	1		·
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			
	located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 of expenses for professional fundraising services on Part IX, column (A),			
	line 11e? If "Yes," complete Schedule G, Part I	17		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		Х
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
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
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Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the X United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, 22 X 22 column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current 23 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete X Schedule J 23 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 X 24a Schedule K. If "No", go to question 25 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a X 25a disgualified 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 prior Forms 990 or 990-EZ? If "Yes," complete X 25b Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified Х person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial 27 contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete X 27 Schedule L, Part III Was the organization a party to a business transaction with one of the following parties, directly or indirectly (see Schedule 28 L, Part IV instructions for definitions of "direct" and "indirect" and applicable filing thresholds, conditions, and exceptions): X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was X an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV 28c X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M X 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 X Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule Part X Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 34 X Is any related organization a controlled entity within the meaning of section 512(b)(13)? 35 If "Yes," complete Schedule R, Part V, line 2 X 35 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 Х 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Х Did the organization complete Schedule O and provide explanations for Part VI, lines 11 and 19?

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rai	t V Statements riegarding other into running and run of the			Yes	No
	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of				
1a	U.S. Information Returns. Enter -0- if not applicable	1a 0			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable				
	Did the organization comply with backup withholding rules for reportable payments to vendors and	reportable gaming	1		
С	(gambling) winnings to prize winners?		1c		
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 20			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	irns?	2b		X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year cover		3a		X
			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		X
ь	If "Yes," enter the name of the foreign country: ▶				
-	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Bank and			
	Financial Accounts.				}
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans-		5b		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	Regarding Prohibited			
	Tax Shelter Transaction?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he organization solicit			
	any contributions that were not tax deductible?		<u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions or gifts			
	were not tax deductible?		6b		
	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods and services	_		
	provided to the payor?		7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w			37	
	to file Form 8282?	1 1	7c	X	
	If "Yes," indicate the number of Forms 8282 filed during the year				
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a		.		
	benefit contract?		7e 7f		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont For all contributions of qualified intellectual property, did the organization file Form 8899 as required		7 <u>1</u>		
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-		7 <u>9</u> 7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting or		, II		
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exc				
	at any time during the year?	g	8		
	Sponsoring organizations maintaining donor advised funds.				
	Did the organization make any taxable distributions under section 4966		9a		
			9b		
	Section 501(c)(7) organizations. Enter:				
	Initiation fees and capital contributions included on Part VIII, line 12	10a		ŀ	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:	1 1			
	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		202	
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Conservation Northwest 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.

Sec	ction A. Governing Body and Management			
_			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	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 organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		,	l
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	10b		
11	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	11	X	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b		X
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c		X
13	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		Ì	
а	The organization's CEO, Executive Director, or top management official?	15a		X
	Other officers or key employees of the organization?	15b		Х
	Describe the process in Schedule O. (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint verture of similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	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 (501(c)(3)s only) available f	or		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and	d finar	ncial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	on: 🕨		
	Convervation Northwest - (360) 671-9950	-		
	1208 Bay Street, Suite 201, Bellingham, WA 98225			
		Form !	990 (2	2009)

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- 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. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not (A) Name and Title	(B) Average			(O Pos	C) itior	ì		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	lnstitutional trustee	c all	Key employee	Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Mitch Friedman								00.460	_	
Executive Director	40.00	_	_	X		_	L	83,162.	0.	0.
Ron Judd	1 00									
Director	1.00					_		0.	0.	0.
Tom Campion	4 00					١.				•
Treasurer	1.00						<u> </u>	0.	0.	0.
Emily Barnett	1 00									0
Director	1.00			\vdash				0.	0.	0.
Chris Kopczynski	1 00								0	0
Director	1.00	_		\dashv				0.	0.	0.
William Donnelly Vice President	1.00							0.	0.	0.
Nancy Ritzenthaler	1.00			-				0.		0.
Director	1.00							0.	0.	0.
Alexandra Loeb	1.00				—			0.		<u> </u>
President	1.00							0.	0.	0.
Hilary Franz	1.00				-	· **				- 0.
Director	1.00					Y		D W 0.	0.	0.
John Magoteaux						2	S			
Director	1.00							0.	0.	0.
Peggy Printz	1									
Director	1.00		ļ					0.	0.	0.
Floyd Rogers										
Director	1.00							0.	0.	0.
Anne-Marie Faiola					ļ					
Director	1.00							0.	0.	0.
Andy Held										
Director	1.00	_		\dashv	_			0.	0.	0.

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Par	t VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, a	nd l	High	est		ees (continued)	$\overline{}$		
	(A)	(B)				C)			(D)	(E)		(F)	
	Name and title	Average			Pos				Reportable	Reportable		Estimat amount	
		hours	(cl	neck	all	that	app	ly)	compensation from	compensation from related		othe	
		per week	ector					ĺ	the	organizations	0	ompens	
		WOOK	Individual trustee or director	a			Highest compensated employee		organization	(W-2/1099-MISC)		from th	ne
			ustee	trust		8	npens		(W-2/1099-MISC)			organiza	
			dual tr	institutional trustee	_	Key employee	stcor	<u> </u>				and rela	
			Indivi	Institu	Officer	Key el	Highe	Former			'	organizat	lions
					_		\vdash				+		
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						L	Ļ		02 162	0	+		
	Total						<u> </u>		83,162.	0	•		0.
2	Total number of individuals (including but r	ot limited to th	ose	liste	a ar	oove	e) wr	io re	eceived more than \$100	,000 in reportable			0
	compensation from the organization											Yes	
3	Did the organization list any former officer,	director or true	stee	kev	/ em	ola	vee ·	or h	ighest compensated en	nplovee on			
3	line 1a? If "Yes," complete Schedule J for s										1 :	3	х
4	For any individual listed on line 1a, is the su												
•	and related organizations greater than \$150										4		X
5	Did any person listed on line 1a receive or a									ces rendered to			
	the organization? If "Yes," complete Sched	•				1	21					5	X
Sect	tion B. Independent Contractors								had lad				
1	Complete this table for your five highest co	mpensated ind	lepe	nde	nt co	ontr	acto	rs th	hat received more than	\$100,000 of comper	ısatic	n from	
	the organization. NONE							_					
	(A)								(B)	:	^	(C)	
	Name and business	address						\dashv	Description of s	ervices	Com	pensatio)T1
								-+					
								+					
								+		14			
								\dagger					
2	Total number of independent contractors (in	ncluding but no	ot lin	nited	l to 1	thos	se lis	ted	above) who received m	ore than			
	\$100,000 in compensation from the organiz					0							
											For	m 990 (2009)

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must compl	(A)	(B)	(C)	(D) Fundraising
Do 7b,	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	trustees, and key employees	83,162.	70,688.	4,158.	8,316
6	Compensation not included above, to disqualified	30 / 2 32 3			
٠	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	737,186.	533,443.	63,275.	140,468
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	91,956.	69,118.	7,502.	15,336
10	Payroll taxes	73,161.	54,191.	5,912.	13,058.
11	Fees for services (non-employees):				
а	Management				
b	Legai	6,899.	6,899.	0.254	
С	Accounting	9,354.	2 000	9,354.	
d		3,000.	3,000.		
е	Professional fundraising services. See Part IV, line 17				
f	•	312,366.	270,760.	4,553.	37,053.
g		7,648.	7,330.	98.	220.
12	Advertising and promotion	65,956.	5,927.	2,492.	57,537
13	Office expenses	6,741.	6,192.	198.	351.
14 15	Royalties	0,741	0,1521	150.	331.
16	Occupancy	81,602.	47,691.	10,384.	23,527.
17	Travel	42,047.	53,215.	-14,613.	3,445.
18	Payments of travel or entertainment expenses	- Company			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,830.	1,780.		50.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	15,620.	3,058.	12,562.	
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	Printing	45,131.	40,489.	300.	4,342.
b	Telephone	27,873.	22,573.	1,183.	4,117.
c	Sponsorships and grants	22,266.	22,266.		
d	Postage and shipping	18,083.	13,286.	184.	4,613.
е	Furniture and equipment	13,887.	5,213.	6,017.	2,657.
f	All other expenses	33,546.	7,282.	16,020.	10,244.
25	Total functional expenses. Add lines 1 through 24f	1,699,314.	1,244,401.	129,579.	325,334.
26	Joint Costs. Check here if following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

	rt X						
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			606,892.		705,495.
	3	Pledges and grants receivable, net			97,157.		92,682.
	4	Accounts receivable, net			47,770.	4	53,720.
	5	Receivables from current and former officers, di	rectors, tr	rustees, key			
		employees, and highest compensated employe	es. Comp	lete Part II			
		of Schedule L				5	
	6	Receivables from other disqualified persons (as	defined u	nder section			
		4958(f)(1)) and persons described in section 49	. Complete				
		Part II of Schedule L				6	
Ŋ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			12,337.	8	10,687.
Ä	9	Prepaid expenses and deferred charges			22,016.	9	<u> </u>
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	136,140.			
	ь	Less: accumulated depreciation	10b	76,555.	18,864.	10c	<u>59,585.</u>
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line	I1			12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		126,030.	15	126,313.	
	16	Total assets. Add lines 1 through 15 (must equ		931,066.	16	1,063,632.	
	17	Accounts payable and accrued expenses			48,761.	17	87,781.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
Ø	21	Escrow or custodial account liability. Complete				21	
Liabilities	22	Payables to current and former officers, director	s, key employees,				
abi		highest compensated employees, and disqualifi	s. Complete Part II				
Ξ.		of Schedule L		22			
	23	Secured mortgages and notes payable to unrela			23		
	24	Unsecured notes and loans payable to unrelated	ties		24		
	25	Other liabilities. Complete Part X of Schedule D			25		
	26	Total liabilities. Add lines 17 through 25	48,761.	26	<u>87,781.</u>		
		Organizations that follow SFAS 117, check he	re 🚩	X and complete			
S		lines 27 through 29, and lines 33 and 34.	6	SUPM			
ű	27	Unrestricted net assets			655,078.	27	767,613.
ala	28	Temporarily restricted net assets			227,227.	28	208,238.
g P	29	Permanently restricted net assets				29	
-un		Organizations that do not follow SFAS 117, cl	neck here	and			
or		complete lines 30 through 34.					
sts	30	Capital stock or trust principal, or current funds				30	
1886	31	Paid-in or capital surplus, or land, building, or eq				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	come, or c	other funds		32	
ž	33	Total net assets or fund balances			882,305.	33	975,851.
	34	Total liabilities and net assets/fund balances			931,066.	34	1,063,632.

Form **990** (2009)

	990 (2009)		Paç	ge 12
Pa	rt XI Financial Statements and Reporting			
			Yes	No_
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	2a		х
2a	were the organization's financial statements complied or reviewed by air maspersasing and accomplished or reviewed by air maspersasing accomplished or reviewed by air maspersasing and accomplished or reviewed by a complished or reviewed by a compl	_	77	
b	Were the organization's illiancial statements addited by an independent descarrance	2b	<u>X</u>	
С	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?	2c	x	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a	2d		
	X separate basis consolidated basis both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a		_ <u>X</u> _
b		3b		

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Form **990** (2009)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

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

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

Open to Public Inspection

Employer identification number

			Conser	vation Northy	west_					94	<u>-3091</u>	<u>.547</u>	
Par	t l	Reason	for Public Cha	rity Status (All organi	zations m	ust comple	ete this par	t.) See ins	tructions				
The c	rgan	ization is not	a private foundation	because it is: (For lines	1 through	11, check	only one b	oox.)					
1 [es, or association of chu).				
2		A school de	scribed in section 1	70(b)(1)(A)(ii). (Attach So	chedule E.)							
з [A hospital or	r a cooperative hosp	oital service organization	described	in sectio i	170(b)(1)	(A)(iii).					
4 [A medical re	search organization	operated in conjunction	with a ho	spital desc	ribed in se	ection 170	(b)(1)(A)(i	iii). Enter th	e hospital	l's nam	ıе,
		city, and sta											
5 [An organizat	tion operated for the	benefit of a college or u	iniversity o	wned or o	perated by	/ a govern	mental un	it described	d in		
		section 170	0(b)(1)(A)(iv). (Comp	lete Part II.)									
6		A federal, st	ate, or local governn	nent or governmental un	it describe	d in secti	on 170(b)(1)(A)(v).					
7		An organizat	tion that normally re	ceives a substantial part	of its supp	port from a	a governme	ental unit d	or from the	e general pı	ublic desc	ribed i	n
		section 170	(b)(1)(A)(vi). (Compl	ete Part II.)									
8		,	•	section 170(b)(1)(A)(vi).									
9	X			ceives: (1) more than 33									
				ınctions - subject to cert									
		income and	unrelated business	taxable income (less sec	tion 511 to	ax) from bu	usinesses	acquired b	y the orga	anization af	ter June 3	30, 197	′5.
_			509(a)(2). (Complet	•									
10 L	_	-	-	perated exclusively to te									
11 L		_	_	perated exclusively for t									or
		•	, ,,	ations described in sect				2). See se e	ction 509	(a)(3). Chec	k the box	that	
				organization and compl									
г		a Type		— ,·			ctionally in	_			Type III - (
eL		-		at the organization is not									n
			-	than one or more publicl						9(a)(1) or se	ection 509	$\theta(\mathbf{a})(2)$.	
f		•		tten determination from									
			_	his box							•••••		
g				organization accepted a								V	NI.
				directly controls, either a							44 ~/3\	Yes	No
		_		upported organization? n described in (i) above?									
				a person described in (i) above?									
L-		-		a person described in (i) to about the supported or						•••••	11g(iii)	i I	
h		Provide trie i	ollowing information	about the supported of	garlization	(5).							
				(iii) Type of	(iv) Ic the	organization	(v) Did you	notify the	(vi) ls	s the			
(i) N		of supported	(ii) EIN	organization			organizat		organizati	on in col. I	(vii) Am		1
	urya	nization		(described on lines 1-9 above or IRC section			(i) of your		(i) organiz U.S	i.?	supj	purt	
				(see instructions))	Yes	No	Yes	No	Yes	No			
_													
		- I											
otal													

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

Schedule A (Form 990 or 990-EZ) 2009

Page 2 Schedule A (Form 990 or 990-EZ) 2009 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support (f) Total (e) 2009 Calendar year (or fiscal year beginning in) (c) 2007(d) 2008 (a) 2005 (b) 2006 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4 Section B. Total Support (c) 2007 (d) 2008 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) (b) 2006 (a) 2005 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) % 14 15 Public support percentage from 2008 Schedule A, Part II, line 14 % 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization

Schedule A (Form 990 or 990-EZ) 2009

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support (f) Total (d) 2008 (e) 2009 (a) 2005 (b) 2006 (c) 2007Calendar year (or fiscal year beginning in) 1 Gifts, grants, contributions, and membership fees received. (Do not 1810397. 1774808. 9194731. 1962049. 1729129. 1918348. include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 1918348. 1810397. 1774808. 1729129. 9194731. 1962049. 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 0. 3 received from disqualified persons **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the 0. amount on line 13 for the year 0. c Add lines 7a and 7b 9194731. 8 Public support (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 1918348. 1810397. 1774808. 9194731. 1962049. 1729129. 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties 43,161 50,829 22,541 18,051. 159,385. 24,803 and income from similar sources ... b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 24,803. 43,161 50,829 22.541 18.051. 159,385. c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital 9,765. 1,389. -27,262, 396 28,288. assets (Explain in Part IV.) 1996617. 1773679. 1941915. 1877334. 1792859. Total support (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 98.00 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) % 15 16 Public support percentage from 2008 Schedule A, Part III, line 15 98.16 16 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f) 17 1.70 % 18 Investment income percentage from 2008 Schedule A, Part III, line 17 1.61 18 % 19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization $\triangleright X$ b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public

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

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- 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.

• Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.		Emi	ployer identification number
Name of organization	Nowthwest		Lin	94-3091547
Part I-A Complete if the org	<u>ration Northwest</u> ganization is exempt und	der section 501(c)	or is a section 527	organization.
Provide a description of the organiz Political expenditures Volunteer hours	zation's direct and indirect politic	cal campaign activities i	n Part IV.	\$
Part I-B Complete if the org	ganization i <mark>s exempt un</mark> d	der section 501(c)(3).	
1 Enter the amount of any excise tax 2 Enter the amount of any excise tax 3 If the organization incurred a section 4a Was a correction made? b If "Yes," describe in Part IV. Part I-C Complete if the organization directly expended 2 Enter the amount directly expended 2 Enter the amount of the filing organization activities 3 Total of direct and indirect exempting Form 1120-POL, line 17b 4 Did the filing organization file Form 5 State the names, addresses and enfor each organization listed, enter that were promptly and directly deliced. (PAC). If additional space is needed.	ganization is exempt unce the distributed by organization for semination is function expenditures. Add lines and the distributed to other than the distributed to a separate political organization management of the distributed to a separate political organization management of the distributed to a separate political organization management of the distributed to a separate political organization management of the distributed to a separate political organization management of the distributed to the distributed	der section 4955 der section 501(c), ection 527 exempt function for section 521 and 2. Enter here and section 527 polyrganization, such as a separation, such as a separation for section 527 polyrganization, such as a separation for section	except section 501 ion activities ction 527 d on itical organizations to who enter the amount of pol	\$ No Yes No
(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

932041 07-17-09

LHA

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Schedule C (Form 990 or 990-EZ) 2009

91,061. 22,052 19,850. 10,103. 143,066. c Total lobbying expenditures 53,313. 58,783 103,551 58,742. 274,389. d Grassroots non-taxable amount e Grassroots ceiling amount (150% of line 2d, column (e)) 411,584. 1,042. 1,322. 562. 352. 3,278. f Grassroots lobbying expenditures Schedule C (Form 990 or 990-EZ) 2009

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Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? If "Yes," describe in Part IV Total. Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? TIII-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? 3 trill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." Dues, assessments and similar amounts from members Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures (see instructions) 5 the definition of the between the production of the excess and one of the political expenditures (see instructions) 5 the definition of the producti		(a)	(t)
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: 3 Volunteers? 5 Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? 5 Media advertisements? 6 Media advertisements? 7 Publications, or published or broadcast statements? 7 Publications, or published or broadcast statements? 8 Grants to other organizations for lobbying purposes? 9 Publications, or published or broadcast statements? 9 Create twith legislators, their staffs, government officials, or a legislative body? 9 Publications, seminars, conventions, speeches, lectures, or any similar means? 9 Cother activities? If "Yes," describe in Part IV 9 Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? 9 If "Yes," enter the amount of any tax incurred under section 4912 9 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 9 If "Yes," enter the amount of any tax incurred under section 4912 9 If "III-A Complete if the organization incurred a section 4912 tax, did it file Form 4720 for this year? 11 If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? 12 If the organization make only in-house lobbying expenditures of \$2,000 or less? 13		Yes	No	Amo	ount
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or referendum, through the use of: Department Partment Partment Partment					
Notinteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Polications, or published or broadcast statements? Cother activities? If "Yes," describe in Part IV Total. Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? 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? If III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization agree to carryover lobbying expenditures of \$2,000 or less? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? Did the organization agree to carryover lobbying and political expenditures from the prior year? Did the organization agree to carryover lobbying and political expenditures from the prior year? Did the organization agree to carryover some members 1 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2 cexceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeducti					
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Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

2009
Open to Public Inspection

Name of the organization Conservation Northwest Employer identification number 94-3091547

Pa	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
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 advis	sed funds
•	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor a		
Ŭ	for charitable purposes and not for the benefit of the donor of		
Pa	rt II Conservation Easements. Complete if the org		
1	Purpose(s) of conservation easements held by the organization		
•	Preservation of land for public use (e.g., recreation or p		storically important land area
	Protection of natural habitat	· —	tified historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified cons	envation contribution in the form of a con	servation easement on the last day
2	· -	orvation contribution in the form of a con-	oorvation oddomant on the last day
	of the tax year.		Held at the End of the Year
_	Total number of concentation concents		
а	Total number of conservation easements Total acreage restricted by conservation easements		
b	Number of conservation easements on a certified historic stru		
C			
d	Number of conservation easements included in (c) acquired a Number of conservation easements modified, transferred, rel		
3	_	eased, extinguished, or terminated by the	e organization during the taxable
	year ▶ Number of states where property subject to conservation eas	coment is located	
4			
5	Does the organization have a written policy regarding the per- violations, and enforcement of the conservation easements it		
_	Staff and volunteer hours devoted to monitoring, inspecting,		
6			
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) above		
_	and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation		
9		Control of the Contro	· · · · · · · · · · · · · · · · · · ·
	include, if applicable, the text of the footnote to the organization	on s imancial statements that describes	the organization's accounting for
Dar	conservation easements. t III Organizations Maintaining Collections of	Art Historical Treasures or O	ther Similar Assets
. ai	Complete if the organization answered "Yes" to Form 9		alei Olilliai Assets.
	Complete if the organization answered Tes to Form to	550,1 arriv, mis 6.	
	If the average state aleated as permitted under SEAS 116 not	to report in its revenue statement and b	planes about weeks of set bistorical
12	If the organization elected, as permitted under SFAS 116, not	•	· A 2000
	treasures, or other similar assets held for public exhibition, ed		blic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these it		
b	If the organization elected, as permitted under SFAS 116, to r	•	,
	or other similar assets held for public exhibition, education, or	research in furtherance of public service	, provide the following amounts relating to
	these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		
	If the organization received or held works of art, historical trea		I gain, provide
	the following amounts required to be reported under SFAS 11		
	Revenues included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		• \$

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

Schedule D (Form 990) 2009

CONSERN2

Schedule D (Form 990) 2009 Conservati	<u>on Northwest</u>		94-	-3091547 Page
Part VII Investments - Other Securities.	See Form 990, Part X, line	12.		
(a) Description of security or category (including name of security)	(b) Book value	Co	(c) Method of valuat ost or end-of-year mark	
Financial derivatives and other financial products				
Closely-held equity interests				
Other			<u> </u>	
	-			
otal. (Col (b) should equal Form 990, Part X, col (B) line 12.)	•			
Part VIII Investments - Program Related.	See Form 990, Part X, lin	e 13.		
(a) Description of investment type	(b) Book value		(c) Method of valuat	
(a) Description of investment type	(b) Book value	Co	st or end-of-year mark	et value
				_
	-			
	· · · · · · · · · · · · · · · · · · ·			
	+			_
otal. (Col (b) should equal Form 990, Part X, col (B) line 13.)	·			
Part IX Other Assets. See Form 990, Part X, lin	e 15.			
) Description			(b) Book value
and - Purchased for future	donation to s	support envi	ronment	126,313
				
		CO COLE	7777	
			2 17	
otal. (Column (b) should equal Form 990, Part X, col (B)	line 15.)		>	126,313
Part X Other Liabilities. See Form 990, Part X	, line 25.		•	
(a) Description of liability		(b) Amount		
ederal income taxes				
<u> </u>				
				
otal. (Column (b) should equal Form 990, Part X, col (B)	line 25.)			
otali (Soldilli (S) silvala equal Form 550, Fart 7, col (B)			L	

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

932053 07-10-09

SCHEDULE 0

(Form 990)

Department of the Treasury

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

Conservation Northwest

Employer identification number 94-3091547

Form 990, Part III, Line 1, Description of Organization Mission: between the region's wildest landscapes to bolster the viability of wildlife and the adaptability of the ecosystems to climate change. Having made extrodinary progress this decade to maintain connections between the North and Central Cascades, much of our present focus is linking the Cascades and Rockies: Columbia Highland Initiative. Working towards congressional designation of wilderness in northeastern Washington through a process that includes collaboration on forest restoration and management. Inland Temperate Rainforest. Working to protect habitat and recover mountain caribou in southeastern British Columbia. North Cascades. Working with ranch oweners, we are keeping these properties from being developed. Form 990, Part III, Line 4a, Program Service Accomplishments The rest of our work in 2009 followed our five-year strategic plan including the following: A. Protecting a vital wildlife habitat link between the Cascades and Rocky Mountains. 1.In southeastern British Columbia, we persuaded the BC Premier in late 2007 to announce a recovery plan for the highly endangered mountain caribou that will protect over five million acres of habitat from logging and damaging motorized recreation. We have been focused on implementation.

2.Protect and connect vital wildlife habitat through the collaborative

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

Department of the Treasury

(Form 990)

Supplemental Information to Form 990

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Attach to Form 990.

2009
Open to Public Inspection

Internal Revenue Service

Name of the organization

Conservation Northwest

Employer identification number 94-3091547

effort of the Columbia Highlands Initiative (described above). 3. In north central Washington, we are in a coalition with the WA Department of Fish and Wildlife, Trust for Public Lands, Okanogan Valley Land Council and others that is matching conservation buyers with habitat-rich ranches that are on the market, and purchasing conservation easements from those ranchers who want to remain in operation. 4.We are working to keep at least seven key ranches in the Columbia Highlands in open space through a mix of conservation buyers and acquisition of conservation easements using private funds to leverage state and federal grants. B. Protecting mature and old-growth forests on state and federal lands, and focusing the Forest Service on practices that restore habitat value to plantations while generating social benefits. 1.We continued our role in the Old-Growth Legacy Campaign. 2.We continued our role in collaborative groups to move the Forest Service forward with stream and forest restoration activities. We are working in several places to restore roads and improve stream habitat, challenging projects that could harm threatened wildlife, such as the Stevens Pass Ski Area expansion proposal, and monitoring activities in areas of burned forests to ensure full ecosystem recovery. C. Protecting an ecological link between the Chuckanut Mountains and the North Cascades.

1.We led the campaign for Blanchard Mountain State Forest and played a

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2009

932211

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

Conservation Northwest

Employer identification number 94-3091547

key role in a state-convened negotiation that resulted in a 1,600-acre

protected area. We are continuing to seek state funds to acquire

private timber lands nearby that are at risk of development.

2.We led the successful decade-long effort to protect state forests

that comprise half of the Lake Whatcom watershed (drinking water for

over half of Whatcom County). We're now helping Whatcom County take

over from the state 8,400 acres of these forests to be managed as

county parkland with ecological objectives.

D. Re-wilding ecosystems through recovery (or reintroduction as needed) of native wildlife.

OWE helped initiated and fund a partnership with the Washington

Department of Fish and Wildlife resulting in 90 Pacific fishers being reintroduced in the Olympic Mountains.

oIn 2008, our volunteer-placed cameras in the Methow Valley caught the first photos of a documented pure wolf pack in Washington State since the 1930's. Since then, we've recorded the pack's first litter of pups, too. We're part of the state's Wolf Working Group that issued recommendations on wolf management in 2009 and are actively engaged to make sure that the state adopts a scientifically viable recovery plan. oWe use citizen science to detect the presence of rare species of wildlife, such as fisher, wolverine, grizzly bear, and others through our Citizen Wildlife Monitoring Project. Staff work with agency biologists to identify geography to engage volunteers in placing remote-sensing cameras and produce a year-end monitoring report with

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932211 07-17-09

Schedule O (Form 990) 2009

our findings.

(Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

OMB No. 1545-0047 Open to Public Inspection

Employer identification number

Department of the Treasury internal Revenue Service

Name of the organization Conservation Northwest	94-3091547
oWe've expanded our grizzly bear recovery efforts to BC,	where
contractor Sue Senger is building community support to s	ecure at-risk
grizzly populations that are critical to the recovery of	
Cascades' bears and to identify key habitat corridors an	
protect them.	
oWe gained Endangered Species Act protections for the Ca	nada lynx and
continue to defend its boreal habitat. We continue to wo	rk on behalf of
dozens of additional wildlife, bird, fish, and insect sp	ecies.
Form 990, Part VI, Section B, line 11: Conservation Nort	hwest's auditor
provided a draft of the Form 990, which was reviewed by	members of the
Board of Directors and management staff.	
Form 990, Part VI, Section C, Line 19: The organization'	s governing
documents are available to the public upon request.	<u> </u>
Form 990 Part XI Line 2c	
Audit Oversite	
The Executive Committee of the volunteer Board of Directo	ors oversees
the audit function.	

Form 8868 (Rev. 4-2009)

923832 05-26-09

Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

2008
Open to Public Inspection

Department of the Treasury Internal Revenue Service benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

2005 and ending A For the 2008 calendar year, or tax year beginning D Employer identification number C Name of organization Check if applicable label or Addrass change Conservation Northwest print or 94-3091547 Lype Doing Business As E Telephone number initia! return Number and street (or P.O. box if mail is not delivered to street address) Room/suite See 671-9950 (360)Specific 201 1208 Bay Street Termin-ation 1,877,334. G Gross receipts \$ Amende City or town, state or country, and ZIP + 4 H(a) Is this a group return Applica-tion pending Bellingham, WA <u>98225</u> Yes X No for affiliates? F Name and address of principal officer: H(b) Are all affiliates included? If "No," attach a list. (see instructions) 4947(a)(1) or I Tax-exempt status: X 501(c) (3) (insert no.) H(c) Group exemption number J Website: Www.conservationnw.org L Year of formation: 1989 M State of legal domicile: WA Other > K Type of organization: X Corporation Trust Part I Summary Briefly describe the organization's mission or most significant activities: Focus resources on environmental 1 Governance protection issues. Check this box if the organization discontinued its operations or disposed of more than 25% of its assets. 12 Number of voting members of the governing body (Part VI, line 1a) 12 Number of independent voting members of the governing body (Part VI, line 1b) 4 4 Activities & 26 Total number of employees (Part V, line 2a) 5 500 6 Total number of volunteers (estimate if necessary) Total gross unrelated business revenue from Part VIII, line 12, column (C) 7a 0. 7h b Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Year 1,810,397. 1,918,348. Contributions and grants (Part VIII, line 1h) 8 Program service revenue (Part VIII, line 2g) 50,829 22,541. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 44,396. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,941,914 1,877,334. Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) 355,979 1,656,109. Benefits paid to or for members (Part IX, column (A), line 4) 984,289 1,059,963. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2,800. 16a Professional fundraising fees (Part IX, column (A), line 11e) 366<u>,619</u>. b Total fundraising expenses (Part IX, column (D), line 25) 759,975 707,023. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 2,100,243 3,425,895. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 -158,329 -1,548,561. ts or Beginning of Year End of Year 2,704,284 1,144,835. Total assets (Part X, line 16) 42,507 31,619. Total liabilities (Part X, line 26) 21 2,661,777 113,216. Net assets or fund balances. Subtract line Signature Block Part II Under penalties of perpry, I declare that Leave 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 Sian Signature of office Here Type or print name and tille Preparer's identifying number Preparer's self-Paid signalure employed > Preparer's Firm's name (or Sanders & Sanders CPAs PS EIN 🕨 yours if Use Only self-employed). 471 NE Landon Road address, and Phone no. ► (360) Belfair, WA 98528

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

Yes

832002 12-18-08

P	art IV Checklist of Required Schedules		Yes	No
4	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
1	If "Yes," complete Schedule A	1	X	
^	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
2	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
3	public office? If "Yes," complete Schedule C, Part I	3		X
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	X	
4	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			1
5	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	_5	N/	A
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			
0	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
٥	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide]
J	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
40	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
10	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
11	If "Yes," complete Schedule D, Parts VI, VII, IX, or X as applicable	11	X	
10	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
12	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	the second of the II S 2	14a		X
I -r a	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity	/		
10	located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
10	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		X
24a	Did the organization have a lax-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 questions 24b-24d and complete Schedule K.			
	If "No", go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
•	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
_	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
Ь	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			
	prior year? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
		Earm C	00.00	000

Part IV Checklist of Required Schedules (continued) Yes No During the tax year, did any person who is a current or former officer, director, trustee, or key employee: a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other X person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV 28a b Have a family member who had a direct or indirect business relationship with the organization? X If "Yes," complete Schedule L, Part IV c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV 28c X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X 30 contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? 31 X If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 X 32 Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X 33 sections 301.7701-2 and 301.7701-37 if "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? 34 X 34 If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? 35 X 35 If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 36 If "Yes," complete Schedule R, Part V, line 2 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 Form 990 (2008)



P	Statements Regarding Other INS Fillings and Tax Compliance		1.	Γ
	1 1		Yes	No
18	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter to it not applicable)		
ì	Enter the number of Forms W-2G included in line 12. Chief of thot applicable	4		
(Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			37
	(gambling) winnings to prize winners?	10		Х
28	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	7	-	İ
Ŀ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a		3a		X
b		3b		-
4a				
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			1
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886 T, Disclosure by Tax-Exempt Entity Regarding Prohibited			ı
	Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not lax deductible?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
ď	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	79		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)		ı	
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have			
	excess business holdings at any time during the year?	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		- 1	
а	Did the organization make any taxable distributions under section 4966? N/A	9a		
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section FO4(aV7) accominations Enter: N/A			
а	Initiation fees and capital contributions included on Part VIII, line 12			
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter: N/A			
а	Gross income from members or shareholders 11a			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
			00.	

Form **990** (2008)

Form 990 (2008)

Conservation Northwest

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Se	ction A. Governing Body and Management		Va		10
			Yes	5 IN	10
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,				
	processes, or changes in Schedule O. See instructions.	,			
1a	Enter the number of voting members of the governing body				
b	Enter the number of voting members that are independent	4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	2		١,	X
	officer, director, trustee, or key employee?		+-	+4	7
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	3		١,	X
	of officers, directors or trustees, or key employees to a management company or other person?	4		$\overline{}$	K.
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	5	+	_;	X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		+		<u>X</u>
6	Does the organization have members or stockholders?	6	+-	+-	7
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			١,	Ų.
	governing body?	7a			<u>X</u> X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	+	1	7
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year				
	by the following:		v		
а		8a	1 11	-	_
b	Each committee with authority to act on behalf of the governing body?	86			<u>ح</u>
9a	Does the organization have local chapters, branches, or affiliates?	9a			K
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,				
	and branches to ensure their operations are consistent with those of the organization?	9ь	+-	+	_
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must		77	1	
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	+	_
11	Is there any officer, director or 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	11	1	<u> </u>	Š.
Sec	tion B. Policies		Т	Τ	
			Yes	N ₁	0
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	_A	+-	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	401		X	,
	to conflicts?	12b	+	╁	-
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	1.0		- v	,
	in Schedule O how this is done	12c	+-	X	
13	Does the organization have a written whistleblower policy?	13		X	_
14	Does the organization have a written document retention and destruction policy?	14	\vdash	X	<u> </u>
15	Did the process for determining compensation of the following persons include a review and approval by independent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			1	
	The organization's CEO, Executive Director, or top management official?	15a	+	X	
Ь	Other officers or key employees of the organization?	15b		X	-
	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			٠,	
	taxable entity during the year?	16a	ļ	X	<u>. </u>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation				
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's				
	exempt status with respect to such arrangements?	16b	1		_
	ion C. Disclosure				_
	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 (501(c)(3)s only) available	ior			
	public inspection. Indicate how you make these available. Check all that apply.				
	Own website Another's website X Upon request				
	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, ar	d fina	ncial		
	statements available to the public.				
	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	on:	-		_
	Convervation Northwest - (360) 671-9950				_
	1208 Bay Street, Suite 201, Bellingham, WA 98225		000	_	_
32006		Form	990 (2008	4)

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099 MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization die (A)	(B)			(C)			(D)	(E)	(F)
Name and Title	Average	/_	. .	Pos			s Is A	Reportable	Reportable compensation	Estimated amount of
	hours per week week week week week week week we		from the organization	from related organizations (W-2/1099-MISC)	other compensation from the organization and related					
		Indrwidu	Institutio	Officer	Хеу етр	Highest employe	Former			organizations
Jeffrey Bode										
Secretary	1.00	_	_	_		₩	-	_0.	0.	0.
Tom Campion										
Treasurer	1.00			_		<u> </u>	_	0.	0.	0.
Emily Barnett										
Director	1.00					-		0.	0.	0.
Chris Kopczynski	1 00									
Director	1.00							0.	0.	0.
William Donnelly	1 00							0.	0	0
Vice President	1.00					-	\dashv	0.	0.	0.
Nancy Rizenthaler Director	1.00							0.	0.	0.
Alexandra Loeb	1.00	\dashv							0.	
President	1.00	ļ					1	0.		0.
Hilary Franz	1.00							•	0.1	
Director	1.00	-		ı				0.	0.	0.
John Magoteaux							\neg			
Director	1.00			.				0.	0.	0.
Peggy Printz				7		7)				
Director	1.00	ľ	V	? [9	2		0.	0.	0.
Floyd Rogers							П			
Director	1.00							0.	0.	0.
Anne-Marie Faiola					- 1	-				
Director	1.00			_				0.	0.	<u> </u>
Mitch Friedman						- 1				
Executive Director	40.00	_		X				82,845.	0.	0.
		- 1								
		_	\dashv	_	\dashv	\dashv	+			
				Ì						
				-	_		_+			
		+	-	+	\dashv	-	+			
					- 1					

Form 990 (2008)

Pa	rt VII Section A. Officers, Directors, Tru	stees, Key E	mple mple	oyee	es, a	ınd	<u>High</u>	est	Compensated Employ	ees (continued)			//=3	
	(A)	(B)			(0	C)			(D)	(E)		Г-	(F)	- 4
	Name and title	Average	١,		Pos			.1. A	Reportable compensation	Reportable compensation			timate rount	
		hours per	H	neci	(all	tnai	app) (VIII)	from	from related	- 1		other	
		week	iecto				_		the	organization			pensa	
			6015	e			sated		organization	(W·2/1099·MI	SC)		om th anizat	
			truste	al Iros		oyee	E .		(W-2/1099-MISC)			_	d relat	
			Individual trustee or director	nstrlubonal Irustee	Officer	Key employee	Highest compensated employee	ě				orga	ınizati	ons
			Ē	E	5	ž	골들	Ē						
			1											
			L.		<u>_</u>									
			├-	<u> </u>	<u> </u>	₩	↓_	<u> </u>						
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		!			ĺ									
			_	\vdash	 -		-							
	Total	-30 17					⊳		82,845.		0.			0.
2	Total number of individuals (including those	in 1a) who re	ceiv	ed n	nore	tha	n \$1	00,0	000 in reportable					
_	compensation from the organization		Min.			iii				والمستحدث والمح			Yes	- 14
											Г		Yes	No
3	Did the organization list any former officer,	director or tru	stee	, ke	у өп	olqı	yee.	or h	ighest compensated er	nployee on			İ	Х
	line 1a? If "Yes," complete Schedule J for so	uch individual			3115				from 1	ha organization		3		Λ
4	For any individual listed on line 1a, is the su and related organizations greater than \$150	m of reportab	le co	ompe mo/	ensa . * o °	atior Sobr	i and	OUT	ier compensation nom : or such individual		f	4		X
_	Did any person listed on line 1a receive or a	ccrie comper	nsati	inpie	rom	anv	unn	elate	ed organization for servi	ces rendered to		-		
5	the organization? If "Yes," complete Schedu	ile J for such i	oers	on .								5	,	X
Sec	ction B. Independent Contractors													
1	Complete this table for your five highest cor	npensated inc	iepe	nde	nt c	ontr	acto	rs th	nat received more than	\$100,000 of com	ipensa	ition fr	om	
	the organization.								<u> </u>				-	
	(A)								(B) Description of s	anvicas	Cr	C) mpen		1
	Name and business	agoress	10		1	1	T	5	N/7	BI VICES		- Inperi		
			(C		(())	1	夘	\Y					
								+	U	_				
					_									
									<u> </u>					
						-			H (M100 000 :					
2	Total number of independent contractors (in		in 1) wh	o re	ceiv	ed r	nore	tnan \$100,000 in comp	pensation				
	from the organization							_				orm 9	90 (2	יאטטאי

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp	(A)	(B)	(C)	(D) Fundraising
Do 7b	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and	1 656 100	1 656 100		
	organizations in the U.S. See Part IV, line 21	1,656,109.	1,656,109.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,			4 4 4 0	16 560
	trustees, and key employees	82,845.	62,134.	4,142.	16,569
6	compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
_	Other salaries and wages	799,760.	583,371.	65,322.	151,067
7	Pension plan contributions (include section 401(k)				
8	and section 403(b) employer contributions)	21,328.	15,860.	1,910.	3,558
_	Other employee benefits	75,304.	58,393.	4,510.	12,401
9	Payroll taxes	80,726.	59,466.	6,188.	15,072
10	Fees for services (non-employees):				
11					
a b		2,199.	2,199.		
C		8,609.		8,609.	
d		3,150.	3,150.		
e	D. C. Lie Andries and Can Doct B/ hop 17	2,800.			2,800
f	Investment management fees				
g		249,753.	202,230.	4,977.	42,546
12	Advertising and promotion	16,599.	15,980.		619
13	Office expenses	141,314.	120,149.	5,966.	<u> 15,199</u> .
14	Information technology	22,610.	18,034.	252.	4,324
15	Royalties				·
16	Occupancy	96,193.	51,969.	8,956.	35,268
17	Travel	<u>57,585.</u>	61,245.	-7,404.	3,744.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	6,346.	6,227.		119.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	10,741.	1,019.	7,560.	2,162,
23	Insurance	12_818.	2,733.	9,960.	125.
24	Other expenses, Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)	COP	Y		
а	Other supplies	52,091.	4,062.	92.	47,937.
b	Credit card processing	11,664.	518.		11, <u>146</u> .
C	Intern Stipends	9,983.	8,750.		1,233.
d	Publications	2,553.	2,553.		
е	Gifts and Awards	1,818.	1,238.	72.	508,
f	All other expenses	997.	301.	474.	222.
25	Total functional expenses. Add lines 1 through 24f	3,425,895.	2,937,690.	121,586.	<u>366,619.</u>
26	Joint Costs. Check here if following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				Form 990 (2008)

832010 12-18-08

.l P₂	art X	Balance Sheet					
					(A) Beginning of year		(B) End of year
_	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			966,968	. 2	904,071
	3	Pledges and grants receivable, net			42,202		64,512
	4	Accounts receivable, net			11,689	. 4	9,516
	5	Receivables from current and former officers, of					
		employees, or other related parties. Complete				5_	
	6	Receivables from other disqualified persons (a	s defined (under section			
		4958(f)(1)) and persons described in section 49	958(c)(3)(B	3). Complete		1 1	
		Part II of Schedule L				6	
ţ	7	Notes and loans receivable, net		H	45.000	7	12 064
Assets	8	Inventories for sale or use			15,390.		13,064
×	9	·			11,227.	9	10,212
	10a		10a	128,328.			
	b	Less: accumulated depreciation. Complete		440 000	14 272	l	17 420
		Part VI of Schedule D			14,372.		17,430
	11	Investments · publicly traded securities			<u> </u>	11	
	12	Investments other securities. See Part IV, line				12	
	13	Investments - program related. See Part IV, line				13	
	14	Intangible assets			1,642,436.	+	126,030
	15	Other assets. See Part IV, line 11			2,704,284.		1,144,835
-	16	Total assets. Add lines 1 through 15 (must equal Accounts payable and accrued expenses			42,507.		31,619
	17	Grants payable			42,5011	18	51,015
	18	Deferred revenue		1	-	19	
	20	Tax-exempt bond liabilities				20	
en.	21	Escrow account liability. Complete Part IV of So				21	
ţ	22	Payables to current and former officers, directo					
Liabilities	-	highest compensated employees, and disqualif of Schedule L	ied persor	ns. Complete Part II		22	
	23	Secured mortgages and notes payable to unrel				23	
	24	Unsecured notes and loans payable				24	
	25	Other liabilities. Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25	Here should never		42,507.	26	31,619.
		Organizations that follow SFAS 117, check he	ere 🕨	X and complete			
S		lines 27 through 29, and lines 33 and 34.					
ű	27	Unrestricted net assets			753,818.	<u>2</u> 7	830,403.
Net Assets or Fund Balance	28	Temporarily restricted net assets			1,907,959.	28	282,813.
ק ק	29					29	
F.		Organizations that do not follow SFAS 117,	beok here	and and			
ō		complete lines 30 through 34.	ے (ل	ルド YY I			
ets	-	Capital stock or trust principal, or current funds	T			30	
Ass		Paid-in or capital surplus, or land, building, or eq				31	
et		Retained earnings, endowment, accumulated in			2 ((1 777	32	1 112 016
_		Total net assets or fund balances			2,661,777.	33	1,113,216.
<u> </u>		Total liabilities and net assets/fund balances			2,704,284.	34	1,144,835.
Par	t XI	Financial Statements and Reporting					Yes No
1		unting method used to prepare the Form 990:			Other		103 140
		the organization's financial statements compiled			countant?		2a X
		the organization's financial statements audited b					2b X
		s" to lines 2a or 2b, does the organization have a					
		v, or compilation of its financial statements and s					
		esult of a federal award, was the organization red					
				-0			3a X
h	If "Yes	s." did the organization undergo the required aud	in or audit:	51		Albert bearing	3b

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public

OMB No 1545-0047

Inspection

Name of the organization

Employer identification number

Reason for Public Charity Status (At organizations must complete this part) (see instructions) A public, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A public, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). A school described in section 170(b)(1)(A)(ii). A public of a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). (Complete Part II.) A norganization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(v). (Complete Part II.) A norganization that normally receives 1 (I) more than 33 1/3% of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). (Complete Part III.) A norganization that normally receives 1 (I) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempl functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempl functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross instructions)	Name of the organization		vation North	west					94	1-3093	15 47
The organization is not a private foundation because it is (Please check only one organization)	Part I Reason 1	or Public Ch	arity Status (All organ	nizations rr	ust compl	ete this pa	rt.) (see in	structions)			
A Activate, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A A necical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(ii). Enter the hospital's name. etc., and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(ii). Complete Part II). An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II). A redural, state, or local government or governmental unit described in section 170(b)(1)(A)(iv). A norganization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(iv). (Complete Part III). A community fust described in section 170(b)(1)(A)(vi). (Complete Part III). A community fust described in section 170(b)(1)(A)(vi). (Complete Part III). A community fust described in section 170(b)(1)(A)(vi). (Complete Part III). A community fust described in section 170(b)(1)(A)(vi). (Complete Part III). A community fust described in section 170(b)(1)(A)(vi). (Complete Part III). A community fust described in section 170(b)(1)(A)(vi). (Complete Part III). A community fust described in section 170(b)(1)(A)(vi). (Complete Part III). A community fust described in section 170(b)(1)(A)(vi). (Complete Part III). A community fust described in section 170(b)(1)(A)(vi). (Complete Part III). A community fust described in section 170(b)(1)(A)(vi). (Complete Part III). A community fust described in section 170(b)(1)(A)(vi). (Complete Part III). A community fust described in 0 organization organization and complete fust organization section 170(b)(1)(A)(vii). (Complete Part III). A community fust described in 0 organization organization organization organization described in section 170(b)(4)(A)(see instructions). A community fust described in											
A school described in section 170(b)(1)(A)(ii), (Attach Schedule E.) A hospital or a cooperative hospidal service organization described in section 170(b)(1)(A)(iii), (Attach Schedule H.) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii), Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv), (Complete Part II.) An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v), (Complete Part II.) An organization that normally receives (1) more than 33 1/39's of its support from contributions, membership fees, and gross receipts from activities related to its example functions: subject to certain exceptions, and (2) no more than 33 1/39's of its support from gross investmen income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete the Part III.) An organization organizad and operated exclusively to test for public safety. See section 509(a)(4), (see instructions) and organization organizad and operated exclusively to test for public safety. See section 509(a)(4), (see section 509(a)(3), Check the box that describes the type of supporting organization accomplete lines 11e through 11h.	4 A church cor	vention of churc	hes, or association of chi	urches des	cribed in s	ection 170	D(b)(1)(A)((i) .			
A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attack Schedule H.) A norganization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iii). (Complete Part III) A rederal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). A rederal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). A rederal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). A rederal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). A community function substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v)). A community function substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v)). A community function substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v)). A community function substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). A community function substantial part of its support from a governmental unit described in section 170(b)(1)(A)(v). A community function substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). A community function substantial part of its support from a governmental unit described in section 170(b)(1)(A)(v). A community function substantial part of its support from a contribution of the functions of or to carry out the purposes of each or more publicly supported organization described in action 509(a)(4) (a) (see instructions) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a											
A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii), Enter the hospital's name only, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(iv). (Complete Part II.) A community trust described in section 170(b)(1)(A)(iv). (Complete Part II.) A community frust described in section 170(b)(1)(A)(iv). (Complete Part II.) A community frust described in section 170(b)(1)(A)(iv). (Complete Part II.) A community frust described in section 170(b)(1)(A)(iv). (Complete Part II.) A community frust described in section 170(b)(1)(A)(iv). (Complete Part II.) A community frust described in section 170(b)(1)(A)(iv). (Complete Part II.) A community frust described in section 170(b)(1)(A)(iv). (Complete Part II.) A community frust described in section 170(b)(1)(A)(iv). (Complete Part II.) A community frust described in section 170(b)(1)(A)(iv). (Complete Part II.) A community frust f	a A hospital or a	a cooperative hos	spital service organization	n describe	d in sectio	n 170(b)(1)	(A)(iii). (A	ttach Sche	edule H.)		
city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(v). Complete Part II.) A tederal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). A community receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). (Complete Part II.) A community rust described in section 170(b)(1)(A)(v). (Complete Part III.) S	4 A medical res	earch organizatio	n operated in conjunctio	n with a ho	spital des	cribed in s	ection 17	O(b)(1)(A)(i	ii). Enter t	he hospita	ıl's name.
An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(v). (Complete Part II.) A regard state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). (Complete Part II.) A community trust described in section 170(b)(1)(A)(v). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its evempt [functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investmen income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete the Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) An organization organized and operated exclusively to the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations organized sections of section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 1 te through 11h. a	city and state	et.			<u> </u>						
section 170(b)(1)(A)(iv), (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). A norganization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). (Complete Part II.) A norganization that normally receives: (1) more than 33 1/39's of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/39's of its support from gross investmen income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete the Part III.) An organization organization and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 11 An organization organization ado operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations and complete lines 11e through 11h. a Type I b Type II c Type III. Functionally integrated b Synchright this box, Lecrify that the organization in and complete lines 11e through 11h. a Type II. Type III. Type III. Type III. The supported organization received a written determnation from the IRS that it is a Type I. Type III. Type III. Type III. The organization organization in controlled directly or indirectly or indirectly or organization organization (described on the IRS that it is a Type I. Type III. Type III. (i) A person who directly or indirectly or organization for organization in col. (approximation organization about the organizations the organization (v) (b) (b) yeu nolly the organization in col. (described on thesis 1-9 above 7 lines of III. (described on thesis 1-9 above 1 (iii) (approximation or col. (described on thesis 1-9 above 1 (iii) (approximation organization in col. (described on thesis 1-9 above 1 (iii)	5 An organization	on operated for the	ne benefit of a college or	university	owned or o	perated by	y a goveri	nmental un	it describe	ed in	
A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). (Complete Part II.) A community frust described in section 170(b)(1)(A)(v). (Complete Part III.) A community frust described in section 170(b)(1)(A)(v). (Complete Part III.) A community frust described in section 170(b)(1)(A)(v). (Complete Part III.) A community frust described in section 170(b)(1)(A)(v). (Complete Part III.) A community frust described in section 170(b)(1)(A)(v). (Complete Part III.) A community frust described in section 170(b)(1)(A)(v). (Complete Part III.) A community frust described in section 170(b)(1)(A)(v). (Complete Part III.) A community frust described in section 110(a) (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c											
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A community trust described in section 170(b) (1/A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investmen income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete the Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4), (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organizations described in section 509(a)(1) or section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a	7 An organization	on that normally r	eceives a substantial par	t of its sup	port from	a governm	ental unit	or from the	general p	public desc	cribed in
An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investmen income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete the Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4), (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a	section 170(b)(1)(A)(vi). (Com	olete Part II.)								
activities related to its exempl functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investmen income and unrelated business taxable income (less section 5014 (2) no more than 33 1/3% of its support from gross investmen income and unrelated business taxable income (less section 5014) (2) no more publicly supported organization and operated exclusively to test for public safety. See section 509(a)(4), (see instructions) 11	8 A community	trust described in	n section 170(b)(1)(A)(vi)	. (Complet	e Part II.)						
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An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a	See section 5	09(a)(2), (Comple	ete the Part III.)								
more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a Type I b Type II o Type II Functionally integrated d Type III Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization creceived a written determination from the IRS that it is a Type II, Type III, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (iii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? (iv) Is the organization in col. (iii) Canization in col. (iii) Canization in col. (iii) Canization in col. (iii) Canization in col. (ii) Canization in col. (ii) Canization in col. (ii) Canization in col. (ii) Canization in col. (iii) Canization in col. (iiiii) Canization in col. (iiiii) Canization in col. (iiiiii) Canization in col. (iiiiii) Canization in col. (iiiiii) Canization in col. (iiiiiii) Canization in col. (iiiiiii) Canization in col. (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	10 An organization	n organized and	operated exclusively to t	est for put	olic safety.	See section	on 509(a)((4). (see ins	structions)		-6
describes the type of supporting organization and complete lines 11e through 11h. a											
a Type II b Type II c Type III - Functionally integrated d Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting organization, check this box Gince August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) above? (iii) Type of organization about the organization supports. (iv) Is the organization foot. (iv) Is the organization in cot. (iv) Is the organization in cot. (iv) organ							2). See se	Jeuc norro	a)(3). One	CK the box	mai
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(see instructions)) Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No	1.							(i) organize	ed in the	sup	port
Total											
			(see instructions))	162	NO	165	140	163	140		
					F -) 122 G	-				
					£ 0111						
							-				
	Cotol										
		Paperwork Red	uction Act Notice, see t	he Instruc	tions for F	orm 990.		Schedule	A (Form	990 or 990	0-EZ) 2008

94-3091547 Page 3 Schedule A (Form 990 or 990 EZ) 2008 Conservation Northwest Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part L.) Section A. Public Support (d) 2007 (f) Total (e) 2008 (c) 2006 Calendar year (or fiscal year beginning in) (b) 2005 (a) 2004 1 Gifts, grants, contributions, and membership fees received (Do not 1810397. 9667177. 1918348 1729129. 1962049. 2247254. include any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 1729129. 1918348 1810397. 9667177. 1962049. 2247254. 6 Total, Add lines 1 - 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 c Add lines 7a and 7b 9667177. 8 Public support (Subtract line 7c from line 6) Section B. Total Support (c) 2006 (d) 2007 (e) 2008 (f) Total (b) 2005 (a) 2004 Calendar year (or fiscal year beginning in) 1962049 1810397 9667177. 2247254 1729129 1918348 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties 22,541 158,866. 50,829 43,161 17,532 24,803 and income from similar sources b Unrelated business laxable income (less section 511 taxes) from businesses acquired after June 30, 1975 22,541 158,866. 43,161 50,829 17,532 24.803 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital -27,26244,396 22,076. 9,765. 1,389 -6,212. assets (Explain in Part IV.) 9848119. Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f) 98.16 % 15 98.79 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g 16 % Section D. Computation of Investment Income Percentage 1.61 % 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 17

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

Schedule A (Form 990 or 990-EZ) 2008

18

19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and
line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

1.13

%

 $\triangleright X$

18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h

Schedule C (Form 990 or 990-EZ) 2008	Conservatio	n Northwest		94-3	091547 Page 2
Schedule C (Form 990 or 990-EZ) 2008 Part II-A To be completed b	v organizations ex	cempt under sec	tion 501(c)(3) tha	t filed Form 5768	3
(election under sec	tion 501(h)). See th	e instructions for Sche	edule C for details.		
	ation belongs to an affilia				
B Check I If the filing organiza	ation checked box A and	"limited control" prov	isions apply.		
Lim	its on Lobbying Expend ditures" means amoun	ditures		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to inf	hence public opinion (g	rassroots lobbying)		1,042.	
b Total lobbying expenditures to infl	uence a legislative hods	(direct lobbying)		12,034.	
c Total lobbying expenditures (add	lines 1a and 1b)	. (0		13,076.	
d Other exempt purpose expenditur				3,412,819.	
e Total exempt purpose expenditure	es (add lines 1c and 1d)			3,425,895.	
f Lobbying nontaxable amount. Ent	er the amount from the	following table in both	columns	321,295.	
If the amount on line 1e, column (a)		ying nontaxable amo	unt is:		
Not over \$500,000	' '	ne amount on line 1e			
Over \$500,000 but not over \$1,00	0.000 \$100,000	plus 15% of the exce	ss over \$500,000.		
Over \$1,000,000 but not over \$1,5		plus 10% of the exce			
Over \$1,500,000 but not over \$17		plus 5% of the exces			
Over \$17,000,000	\$1,000,00	00			
g Grassroots nontaxable amount (er	nter 25% of line 1f)			80,324.	
h Subtract line 1g from line 1a; Ente	r-0- if line g is more thar	line a			
i Subtract line 1f from line 1c. Enter	-0- if line f is more than	line c			-
j If there is an amount other than ze		ne 1i, did the organizat	tion file Form 4720	Г	
reporting section 4911 tax for this	year?				YesNo
(Some organia colum	4-Year Avera tations that made a sec ns below. See the instr	aging Period Under S ction 501(h) election ructions for lines 2a t	do not have to comp	ete all of the five ructions.)	
		litures During 4-Year			
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
	440.046	04.2 05.2	225 121	201 205	1 170 005
2a Lobbying non-taxable amount	410,216.	213,253.	235,131.	321,295.	1,179,895.
b Lobbying ceiling amount					1,769,843.
(150% of line 2a, column(e))					1,703,043.
c Total lobbying expenditures	49,463.	91,061.	22,052.	13,076.	175,652.
d Grassroots non-taxable amount	102,554.	53,313.	58,783.	80,324.	294,974.
e Grassroots ceiling amount		/		,	
(150% of line 2d, column (e))					442,461.
f Grassroots lobbying expenditures	881.	1,322.	562.	1,042.	3,807.



Schedule C (Form 990 or 990-EZ) 2008

Schedule D (Form

Total. (Column (b) should equal Form 990, Part X, col (B) line 25.)

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

832053 12-23-08

SCHEDULE I (Form 990)		Grants and	Grants and Other Assistance to Organizations.	to Organizations			OMB Np 1545-0047
		Govern	Governments, and Individuals in the U.S.	uals in the U.S.			2008
Department of the Treasury Internal Revenue Service	▲ Comp	 Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990. 	in answered "Yes," on F	" on Form 990, Pa	rt IV, lines 21 or 22.		Open to Public
Name of the organization	Non-						Employer identification number
Part General Information on Grants and Assistance	nd Assistance	IWest					94-3091547
Does the organization maintain records to substantiate the amount of criteria used to award the grants or assistance?	o substantiate th	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
<u> </u>	cedures for mon	itoring the use of grant	funds in the United	States.			Yes X No
Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Check this box if no one recipient received more than \$5,000. Check this box if no one recipient received more than \$5,000.	Governments an 85,000. Check thi	d Organizations in the s box if no one recipier	e United States. C	omplete if the orga	nization answered "\	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Cascade Land Conservancy 615 2nd Ave Ste 625 Seattle WA 98104	94-3112461	501c3	70.029,	o	To the second		
American land Alliance 122 C Street NW Sue 240 Washington DC, DC_20001	93-1089517	501¢3	50,000	a			
Wilderness Awareness School PO Box 5000 PMV 137 Duvall, WA 98019	22-3190778	501c3	6.025.	Ó			
2 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations	nd government a	rganizations					
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	ction Act Notice	, see the Instructions	for Form 990.				Schedule I (Form 990) 2005

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Employer identification number 94-3091547

Conservation Northwest

Form 990, Part III, Line 1, Description of Organization Mission: between the region's wildest landscapes to bolster the viability of wildlife and the adaptability of the ecosystems to climate change. Having made extrodinary progress this decade to maintain connections between the North and Central Cascades, much of our present focus is linking the Cascades and Rockies: Columbia Highland Initiative. Working towards congressional designation of wilderness in norteastern Washington through a process that includes cooaboration on forest restoration and management. Inland Temperate Rainforest. Working to protect habitat and recover mountain caribou in southeastern British Columbia. North Cascades. Working with ranch oweners, we are keeping these properties from being developed. Form 990, Part III, Line 4b, Program Service Accomplishments Colville National Forest. In 2008 we: Organized multiple NRW Foresty Coalition outreach events; Gained press in rural and regional publications and published our own sucessful 4-page tobloid highlighting benefits and values of the NEW Forestry Coalition collaboration; Garnered over 150 signors on a business sign-on letter in support of Wilderness: Finalized NRW Forestry Coalition agreements: Worked within the NRW Forestry Coalition to keep moterized recreation interest from derailing the progress we've made on recration issues; Hosted another sucessful hike series (235 participants) and held nine trail work parties to keep deteriorating trails in the Salmo-Priest LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008

(Form 990)

Department of the Treasury internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047 Open to Public Inspection

Employer identification number 94-3091547

Name of the organization Conservation Northwest Wilderness Area open and build wilderness support amoung various recreation constituents; Organized grassroots support (1,350 postcards, 100 hand-written letters, 70 people to attend hearing) for widerness during the Colville National Forest's management plan revision process; Worked with offices of Rep McMorris-Rodgers and Senator Cantwell on listening session in Spokane in August that increased awareness of these issues. C. In north-central Washington, we're working in partnerships to march conservation buyers with habitat-rich ranches that are on the market, and purchase conservation easements from those ranchers who want to remain in operation. In 2008, we heped raise and spend almost \$10 million in state and federal fund protected over 6,000 acres of grassland from development. In 2009 we are working with an additional almost \$7 million to protect thousands of more acres. Protecting matrue and old-growth forest on federal land in the Pacific Northwest: A. We are a leader in the Old-Growth Legacy Campaign, advocation for Congressional action to bring favorable closure to the historic three decade effort ot save these ancient forests. In this last year, we lad the Washington contingency of the campaign in tracking, evaluating, and informing the public about potential bills in Congress.

B. Since 1991 Conservation Northwest field staff have watch-dogged

virtually every US Forest Service timber project in the State. We

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 832211 12-18-08

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. 2008
Open to Public Inspection

Conservation Northwest 94-3091547

continued our role in collaborative groups such as Pinchot Parnership, while also helping fledgling groups move forward with stream and forest restoration activities. We he; ed pursuade the Wenatchee-Okanogan Nationa Forest supervisor to conduct a review of the Natapoc timber sale to determine if old-growth logging violated environmental laws Protection an ecological link between the coastal Chuckannut Mountains and the North Cascades. In follow-up to the historic Blanchard Mountain Agreement, we work to fulfill the funding and other terms of the agreement and have intervened in a lawsuit in hipes that hostile parties can reach settlement terms consistent with the agreement. B. We led the effort to protect state forest that comprise half of the Lake Whatcom warershed and are active with Whatcom County to help them take over 8,400 acres of state forests to be managed as county parkland. Re-wilding these ecosystems through recovery (or reintrduction) of native wildlife. Grav wolves. Our volunteer placed cameras in the Methow Balley caught the first photos of a documented wolf pack in Washington since the 1930's and we fhlped publicize this great news. We participated on the Wolf Working Group and produced recommendation for the state wolf management plan.

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

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. 2008
Open to Public Inspection

Name of the organization

Conservation Northwest

Employer identification number 94-3091547

- With our partner, Washington Department of Fish Pacific Fister. and Wildlife, we successfully reintroduced 49 fishers back to the Olymipic Mountains. C. We've worked on behalf of dozens of additional wildlife, bird, fish, and even insect species including: Defending the boreal forest habitat of the Canada lynx through lawsuits and appeals; Conducting a public outreach compaign about recovering the North Cascades grizzly bear; Filing suit on against the US Fish and Wildlife Service for its failure to protect the wolverine under the Endangered Species Act; and Filed a lowsuit challenging the Bush administration's owl recovery plan. D. Our Citizen Monitoring Project (run be the I-90 Wildlife Bridges Coalition in 2008) produced its first annual report detailing the work of over 50 vounteers placing 43 camers throughout the Cascades to gain thousands of photos of wildlife, including wolves, lynx, Cascade red fox, and many others. E. We hosted our second successful "Wildlinks" briefing that brought together 70 people representing tribes, the timber industry, conservations, state and federal wildlife biologists focused on "Planning a Future with Working Landscapes and Wildlife Linkages from the North Cascades to Northeast Washington."
- F. Throgh the work of the I-90 Wildfile Bridges Coalition, which

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.
832211
12-18-08

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. 2008
Open to Public Inspection

Name of the organization

Employer identification number 94-3091547

Conservation Northwest 94-3091547
Conservation NE administers, the WA Dept of Transportation released it
final design for the expansion of I-90 near Snowqualmie Pass and
included tow wildlife overpasses and several underpasses to allow
wildlife to move between inportant habitats on either side of the
interstate
Form 990, Part VI, Section A, line 10: Conservation Northwest's auditor
provided a draft of the Form 990, which was reviewed by members of the
Board of Directors and management staff.
Form 990, Part VI, Section C, Line 19: The organization's governing
documents are available to the public upon request.

Fa 000	9 (Dov. 4.2009)		Page 2
Form 8868 (Rev. 4-2008) X			
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box Value V			
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.			
If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1). Part II Additional (Not Automatic) 3-Month Extension of Time. You must file original and one copy.			
Part II			oloyer identification number
Type or	Name of Exempt Organization		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
print	S. Northwest	9	4-3091547
File by the	Conservation Northwest Number, street, and room or suite no. If a P.O. box, see instructions.		RS use only
extended due date for			
filing the	City, town or post office, state, and ZIP code. For a foreign address, see instructions.		
return See	Bellingham, WA 98225		
Check type of return to be filed (File a separate application for each return):			
X Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A Form 5227 Form 8870			
Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720 Form 6069			
STOPI Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.			
Convervation Northwest			
 The books are in the care of ► 1208 Bay Street, Suite 201, Bellingham, WA - 98225 			
Telephone No. ► (360) 671-9950 FAX No. ►			
If the organization does not have an office or place of business in the United States, check this box			
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this			
box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.			
	I request an additional 3-month extension of time until November 15, 2009.		
	For calendar year 2008, or other tax year beginning, and ending,		
6 If th	If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period		
7 Sta	State in detail why you need the extension		
Additional time is needed to gather the information necessary to file			
	complete and accurate return.		
8a If th	is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		
	refundable credits. See instructions.	8a	\$
	is application is for Form 990 PF, 990 T, 4720, or 6069, enter any refundable credits and estimated		
	payments made. Include any prior year overpayment allowed as a credit and any amount paid		
	viously with Form 8868.	8b	\$
	ance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit		27./2
with	FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$ <u>N/A</u>
Signature and Verification			
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.			
		Doto	
Signature	Title	Date	Form 8868 (Rev. 4-2008)
			1 UIIII 0000 (NEV. 4-2000)

COPY