#### 990

# **Return of Organization Exempt From Income Tax**

2015

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.

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

Α	For	the	2015 calend	lar year, or tax year begir	ning		07-01	, 2015, and	ending	06-	-30 ,2016
В	Chec	ck if a	pplicable:	C Name of organization NOR	THWEST VEG						Employer identification no.
	Addr	ress c	hange	Doing business as							33-1074344
	Nam	ne cha	nge	Number and street (or P.O. bo	ox if mail is not delivered to	street address)			Room/suite		Telephone number
	Initia	al retui	rn	13376 SW CHELS	EA LOOP						(503) 746-8344
	Final	l retur	n/terminated	City or town, state or province	e, country, and ZIP or foreig	gn postal code					252,401
	Ame	ended	return	TIGARD, OR 972	23					G	Gross receipts\$
	Appli	licatio	n pending	F Name and address of principal	al officer: <b>PETER</b>	SPENDELOW					
				533 NW MILLER,	PORTLAND, OF	97229			H(a) Is this a g subordina	roup retu ites?	rn for Yes X No
<u> </u>	Тах-є	exemp	ot status:	501(c)(3) 501(c) (	) ◀ (insert no.)	4947(a)(1) or	527		H(b) Are all su	bordinate	es included? Yes No
J	Web	site:		N. NWVEG.ORG					H(c) Group ex	o," attach emption r	es included? Yes No n a list. (see instructions)
ĸ	Form	n of or	ganization: X	Corporation Trust Ass	sociation Other		L Ye	ear of formation:			domicile: OR
Pa	nt l	П	Summar								
		1	Briefly descri	ibe the organization's miss	ion or most significar	nt activities:	EDUCAT	TE AND EN	COURAGE PEO	PLE T	O MAKE VEGAN
ø			CHOICES	FOR A HEALTHY, ST	USTAINABLE, A	ND COMPASS	IONATE	E WORLD.			
Governance				•							
)ru											
Š		2	Check this b	ox 🕨 🗌 if the organization	n discontinued its ope	erations or dispo	sed of m	ore than 25%	of its net assets.		
න		3	Number of vo	oting members of the gove	rning body (Part VI,	line 1a)				3	10
Se		4	Number of in	ndependent voting member	s of the governing bo	ody (Part VI, line	: 1b) •			4	10
į		5	Total number	r of individuals employed ir	n calendar year 2015	(Part V, line 2a)				5	3
Activities &		6	Total number	r of volunteers (estimate if	necessary)					6	350
∢		7a	Total unrelate	ed business revenue from	Part VIII, column (C)	, line 12 • •				7a	0
		b	Net unrelated	d business taxable income	from Form 990-T, lir	ne 34 • • •				7b	0
									Prior Year		Current Year
		8	Contributions	s and grants (Part VIII, line	1h)				42	789	36,946
ine		9	Program ser	vice revenue (Part VIII, line	e 2g)				150	,051	207,432
Revenue	1	10	Investment in	ncome (Part VIII, column (A	A), lines 3, 4, and 7d	)				272	(1,366)
Re	1	11	Other revenu	ue (Part VIII, column (A), lii	nes 5, 6d, 8c, 9c, 10d	c, and 11e) •			3	3,287	5,884
	1	12	Total revenue	e - add lines 8 through 11 (	must equal Part VIII,	column (A), line	e 12)     •		196	3,399	
	1	13	Grants and s	similar amounts paid (Part	IX, column (A), lines	1-3)					0
	1	14	Benefits paid	d to or for members (Part I)	K, column (A), line 4)						0
G	1	15	Salaries, oth	er compensation, employe	e benefits (Part IX, c	olumn (A), lines	5-10)		39	959	42,062
Se	1	16a	Professional	fundraising fees (Part IX,	column (A), line 11e)						0
Expenses		b	Total fundrais	sing expenses (Part IX, co	umn (D), line 25)	<u> </u>		0			
ă	1	17	Other expens	ses (Part IX, column (A), li	nes 11a-11d, 11f-24e				141	,649	176,698
	1	18	Total expens	ses. Add lines 13-17 (must	equal Part IX, colum	ın (A), line 25)			181	.,608	218,760
	1	19	Revenue les	s expenses. Subtract line	18 from line 12 · ·				14	791,	30,136
ō	Ses								Beginning of Currer	t Year	End of Year
sets	alan	20	Total assets	(Part X, line 16) · · · ·					149	,882	177,626
Net Assets or	<u> </u>	21	Total liabilitie	es (Part X, line 26)					2	,551	159
				r fund balances. Subtract	line 21 from line 20				147	,331	177,467
	ırt i			re Block							
				lare that I have examined this retul laration of preparer (other than off					y knowledge and belief,	it is	
				(-1						$\top$	
e:				A SANTANGELO							
Sig			Signatur	re of officer						Date	
He	re			· · · · · · · · · · · · · · · · · · ·	EASURER						
			Type or	print name and title							
_			Print/Type pre	eparer's name	Preparer's signature		Da	ate	Check	] if F	PTIN
Pa				E KJELDEN EA LTC	ALARRY E KJELI	DEN EA LTC	ATA10	-14-2016	self-emplo	yed	P00099539
	•	rer		Add Van	tage Acctg &	Tax Servic	es		Firm's EIN		
Us	e O	Only	Firm's addres	9013 NE	Hwy 99 Suite	0			Phone no.		
				Vancouve	er WA 98665-8						76-8648
May	/ the	: IRS	discuss this	return with the preparer sh	own above? (see ins	structions) -					· · · 🛚 Yes 🗌 No

218,138

4e

Total program service expenses

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Part W Checklist of Required Schedules

	· · · · · · · · · · · · · · · · · · ·		.,	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
	complete Schedule A	1	Χ	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Χ	
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		Х
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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			3.7
_	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		3.7
	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 Schedule D, Part III			3.7
0	·	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	9		Λ
10	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			21
•	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
-	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Χ
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Χ	
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		Χ
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	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 and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Χ
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, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			_
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			,.
4=	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			.,
40	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	4.		٦,
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40		7
	If "Yes," complete Schedule G, Part III	19		X

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Rant IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Χ
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Χ
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Χ
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		Χ
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Χ
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
·	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	244		
<b>2</b> 5a	transaction with a 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	ZJa		Λ
b				
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?  If "Yes," complete Schedule L, Part I	256		Χ
20		25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or	20		V
27	disqualified persons? 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,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	27		V
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
20	Was the argenization a party to a business transaction with one of the following parties (see Cabadyla I			
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):	200		V
a	Part IV instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
a b	Part IV instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete  Schedule L, Part IV	28a 28b		X
a	Part IV instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
a b c	Part IV instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b 28c		X
a b c	Part IV instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
a b c	Part IV instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b 28c 29		X X X
a b c 29 30	Part IV instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete  Schedule L, Part IV  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  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	28b 28c		X
a b c	Part IV instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete  Schedule L, Part IV  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  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	28b 28c 29 30		X X X
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a b c 29 30 31	Part IV instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete  Schedule L, Part IV  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  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? 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 Schedule N, Part II	28b 28c 29 30		X X X
a b c 29 30	Part IV instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete  Schedule L, Part IV  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  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? 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 Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	28b 28c 29 30 31		х х х х
a b c 29 30 31 32 33	Part IV instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete  Schedule L, Part IV  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  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? 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 Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	28b 28c 29 30		X X X X
a b c 29 30 31	Part IV instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete  Schedule L, Part IV  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  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? 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 Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	28b 28c 29 30 31 32		x x x x x
a b c c 29 30 31 32 33 34	Part IV instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  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  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? 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 Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	28b 28c 29 30 31 32 33		x x x x x x x x x x x
a b c c 29 30 31 32 33 34 35a	Part IV instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  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  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? 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 Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?	28b 28c 29 30 31 32		x x x x x
a b c c 29 30 31 32 33 34	Part IV instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  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  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? 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 Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?  If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	28b 28c 29 30 31 32 33		X X X X X X
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a b c c 29 30 31 32 33 34 35a	Part IV instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  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  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? 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 Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?  If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	28b 28c 29 30 31 32 33 34 35a 35b		X X X X X X X
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a b c c 29 30 31 32 33 34 35a b 36	Part IV instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete  Schedule L, Part IV  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  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? 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 Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?  If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization:  Part V in 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 V in the 1 organizatio	28b 28c 29 30 31 32 33 34 35a 35b		X X X X X X X
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Part V

# Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	<u></u>	
4-	Estable sumbar and dis Day 2 of Form 4000. Estable 0, if not applicable	_	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	7		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<u> </u>		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	40	<b> </b>	
20	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 colonder year anding with an within the year sourced by this return.			
h	Statements, filed for the calendar year ending with or within the year covered by this return	. 2b	Χ	
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	. 3a		Χ
sа b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	. 3a		Λ
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	. 55		
<b>-</b> 44	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:			22
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	. 5a		Χ
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	. 5b		Х
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	. 5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	. 6a		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	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	- 7b	Х	
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 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	- 7e		Χ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	- 7f		Χ
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	ļ	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	· 8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	• <u>9a</u>		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	· 9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
a	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.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	- 12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	-	<b> </b>	
а	Is the organization licensed to issue qualified health plans in more than one state?	· 13a		
u	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			
С	Enter the amount of reserves on hand	<b>-</b>		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	. 14a	1	Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	. 14b		<u> </u>
	· · · · · · · · · · · · · · · · · · ·			

**Part VI** Governance, Manage

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		10			
	If there are material differences in voting rights among members of the governing body, or					
	if the governing body delegated broad authority to an executive committee or similar					
	committee, explain in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent 1b		10			
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	Χ	
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		Χ
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4		Χ
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		Χ
6	Did the organization have members or stockholders?			6		Χ
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint					
	one or more members of the governing body?			7a		Χ
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,					
	stockholders, or persons other than the governing body?			7b		Χ
8	Did the organization contemporaneously document the meetings held or written actions undertaken during					
	the year by the following:					
а	The governing body?			8a	Χ	
b	Each committee with authority to act on behalf of the governing body?			8b	Χ	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at					
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		Χ
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)					
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		Χ
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form	n?		11a	Χ	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Χ	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to con	flicts?		12b		Χ
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"					
	describe in Schedule O how this was done			12c		Χ
13	Did the organization have a written whistleblower policy?			13		Χ
14	Did the organization have a written document retention and destruction policy?			14		Χ
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?					
а	The organization's CEO, Executive Director, or top management official			15a		Χ
b	Other officers or key employees of the organization			15b		Χ
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement					
	with a taxable entity during the year?			16a		Χ
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its					
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					
	organization's exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed   OR					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s	onlv)				
	available for public inspection. Indicate how you made these available. Check all that apply.	/				
	<ul> <li>✓ Own website</li> <li>✓ Another's website</li> <li>✓ Upon request</li> <li>✓ Other (explain in Schedule O)</li> </ul>					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest police	v and				
-	financial statements available to the public during the tax year.	,,				
20	State the name, address, and telephone number of the person who possesses the organization's books and records:	<b>•</b>				
	TINDA SANTANCETO (503) 746-8344 24305 NE FIRHODN DOAD RRICH DRATTE WA 9					

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

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

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

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

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

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

(A) Name and Title	(B)  Average hours per week (list any hours for related organizations below dotted line)	box,	unles	Pos eck m ss per	rson i	han one is both a r/trustee	n	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) PETER SPENDELOW	26.00									
DIRECTOR	20.00			Х				o	0	0
(2) LINDA SANTANGELO	12.00							<u>_</u>		
TREASURER				Х				o	o	0
(3) CINDY KOCZY	15.00									
DIRECTOR				Χ				0	0	0
(4) ERIC DAY	30.00									
PRESIDENT				Χ				0	0	0
(5) DEANNA CINTAS SECRETARY	2.00			Х				0	0	0
(6) MENDY CARRE DAY	3.00			21					0	
DIRECTOR				Χ				0	0	0
(7) LARRY SIMPSON DIRECTOR	2.00			Χ				O	0	0
(8) RACHEL STEIN	2.00							<del>_</del>		
VICE PRESIDENT				Х				o	o	0
(9) AMANDA OTTO	3.00									
DIRECTOR				Χ				0	0	0
(10)CATHY BERLOT DIRECTOR	4.00			Х				0	0	0
(11)				Λ					0	0
<u>(12)</u>										
<u>(13)</u>										
<u>(14)</u>										
	ı								1	F 200 (0045)

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r a r t	Section A. Officers, Directors, Trustees,	Key Employ	ees, a	na F	ııgn	est	Comp	ensa	ated Employees (	continuea)			
	40	(5)			(C Pos				(5)	(F)		<b>(F)</b>	
	(A)  Name and title	(B) Average			eck m	ore th	han one s both an		( <b>D</b> ) Reportable	(E) Reportable		(F) stimated	
		hours per week (list any					/trustee)		compensation from	compensation from related	a	mount of other	
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	or a	npensation from the ganization and related ganization	n d
<u>(15)</u>													
<u>(16)</u>													
(17)													
<u>(18)</u>													
<u>(19)</u>													
(20)													
<u>(21)</u>													
(22)													
(23)													
(24)													
<u>(25)</u>													
1b	Sub-total							<u> </u>					
C	Total (add lines 4b and 4c)							<b>&gt;</b>			+		
d 2	Total (add lines 1b and 1c)							nore	than \$100,000 of		)		0
	reportable compensation from the organization									(	)	1	
3	Did the organization list any <b>former</b> officer, director,	or trustee. k	ev emr	olove	e. o	r hic	ahest c	ome	ensated			Yes	No
	employee on line 1a? If "Yes," complete Schedule J			,							3		Χ
4	For any individual listed on line 1a, is the sum of rep												
	organization and related organizations greater than individual							e J fo	or such		4		Χ
5	Did any person listed on line 1a receive or accrue c							izati	on or individual		7		71
04'	for services rendered to the organization? If "Yes," or	complete Sch	edule	J for	suc	h pe	erson				5		Χ
	on B. Independent Contractors	ad indonanda		troo	toro	that	rossi		nore than \$100.000	) of			
1	Complete this table for your five highest compensate compensation from the organization. Report compe												
	year. (A)								(B)			(C)	
	Name and business address								Description of	services	Com	pensation	า
									+				
	Tatalan makes affind a seed of the first of the first	h. 4 1 2 - 2	11- 0							 			
2	Total number of independent contractors (including received more than \$100,000 of compensation from			ose I ▶	istec	ab	ove) w	110		<u> </u>			

**Part VIII** Statement of Revenue

		Check if Schedule O contains a response or	no	te to any line in this	s Part VIII			
					(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections
र र	1a	Federated campaigns	_			revenue		512-514
Contributions, Gifts, Grants and Other Similar Amounts	b		a b	21,965				
Q E	C		c	134				
ifts ar A	d		d	134				
ת פוון	l u	Government grants (contributions) - 1	-					
Sir	f	All other contributions, gifts, grants,	-					
utic	٠.		f	14 047				
흕	_	Noncash contributions included in lines 1a-1f:		14,847				
ont	9 5	Total. Add lines 1a-1f	•	. <del></del>	36.046			
<u>0 8</u>	-"	Total. Add lines 1a-11	İ	Business Code	36,946			
ine	22	VEG FEST	ł	900099	111,283	111,283		
ever	l	VEGAN MOVIE	-	900099	63,040			
ě.	l	HEALTH CONFERENCES	-	900099	30,744			
٩٧i	l	OTHER PROGRAMS	-	900099	2,365	i e		
Š	e	OTHER TROOTERS	-	300033	2,303	2,303		
Program Service Revenue	f	All other program service revenue						
4	l	Total. Add lines 2a-2f			207.432			
		Investment income (including dividends, interes						
	•	and other similar amounts) • • • • • • • •			282	282		
	4	Income from investment of tax-exempt bond pro	oce	eds · · · ►				
	5	Royalties						
		(i) Real		(ii) Personal				
	6a	Gross rents						
	b	Less: rental expenses · · · ·						
	С	Rental income or (loss) · · ·						
	d	Net rental income or (loss) • • • • • • • • • • • • • • • • • •						
	7a	Gross amount from sales of (i) Securities		(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses		1,648				
	С	Gain or (loss)		(1,648	1			
4	l	Net gain or (loss)	٠,	<u> ▶</u>	(1,648	) (1,648	)	
enne	8a	Gross income from fundraising						
ý		events (not including \$ 134						
Ŗ		of contributions reported on line 1c).				• • • • • • • • • • • • • • • • • • •		
Other Rev		See Part IV, line 18 · · · · · · · · · · · · · ·		6,798				
ō	l	Less: direct expenses		1,492	1			
	l	Net income or (loss) from fundraising events			5,306			5,306
	9a	Gross income from gaming activities.						
		See Part IV, line 19						
	l	Less: direct expenses						
		Net income or (loss) from gaming activities •						
	10a	Gross sales of inventory, less returns and allowances	<u> </u>	040				
	h	Less: cost of goods sold		943 365				
	l	Net income or (loss) from sales of inventory			578	578		
	Ť	Miscellaneous Revenue	Ī	Business Code	378	378		
	11a	missonalicous (Cercitute		240111633 OUG				
	b	-	-					
	c		-					
	l -	All other revenue	-					
	е	e Total. Add lines 11a-11d						
	12	Total revenue. See instructions	_	<u></u> ►	248,896	206,644	0	5,306

### Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a response or note to ar	ı <b>'</b>			<u></u>
	ot include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	<b>(D)</b> Fundraising
	b, and 10b of Part VIII.	·	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				<b> </b>
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B) · · · · ·				
7	Other salaries and wages	37,821	37,821		
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	4,241	4,241		
11	Fees for services (non-employees):				
a	Management	2,000	2,000		
b	Legal				
C	Accounting	622		622	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column	10 150	10 170		
40	(A) amount, list line 11g expenses on Schedule O.)	10,170	10,170		
12	Advertising and promotion	14,674	14,674		
13	Office expenses	300	300		
14 15	Information technology				
15 16	Royalties	12 000	12 000		
16 17	Travel	13,002	13,002		
18	Payments of travel or entertainment expenses				
10	•				
19	for any federal, state, or local public officials  Conferences, conventions, and meetings	425	425		
20	Interest	435 2,725	435		
20 21	Payments to affiliates	2,125	2,725		
22	Depreciation, depletion, and amortization				
23	Insurance	2,307	2,307		
24	Other expenses. Itemize expenses not covered		2,301		
_	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	EQUIPMENT RENTAL	14,536	14,536		
b	PRESENTATION EXPENSES	11,560	11,560		
С	FOOD/FOOD SAMPLING	18,343	18,343		
d	VENUE/BOOTH RENTAL FEES	28,605	28,605		
e	All other expenses	57,419	57,419		
25	Total functional expenses. Add lines 1 through 24e	218,760	218,138	622	0
26	Joint costs. Complete this line only if the	,:-•		<b>-</b>	
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				

Page **10** 

Cash - non-interest-bearing			Check if Schedule O contains a response or note to any line in this Part X			
1   Cash - non-interest bearing   91,552   1   120,835				(A)		(B)
2 Savings and temporary cash investments				Beginning of year		End of year
3   Pledges and grants receivable, net   3   4		1	Cash - non-interest-bearing	91,552	1	120,835
A Accounts receivable, net		2	Savings and temporary cash investments	55,912	2	56,136
S		3	Pledges and grants receivable, net		3	
trustees, key employees, and highest compensated employees. Complete Part II of Schedule L Lans and other receivables from other disqualified persons (as defined under section 4956(N(1)), presons described in section 4956(x)(3), presons described in 4956(x), presons and described in 4956(x), presons		4	Accounts receivable, net		4	
Complete Part II of Schedule L  Learns and other receivables from other disqualified persons (as defined under section 4590((Yil)), persons described in section 4950((3)(8)), and contributing employers and sponsoring organizations of section 6010(x(9) voluntary employees' beneficiary organizations (see instanctions). Complete Part II of Schedule L  7 Notes and loans receivable, net  8 Inventiories for sale or use  1 Inventiories for sale or use  1 Prepaid expenses and deferred charges  2 Prepaid expenses and deferred charges  2 B Less: accumulated depreciation  1 Investments - publicly traded securities  1 Investments - publicly traded securities  1 Investments - publicly traded securities  1 Investments - program-related. See Part IV, line 11  1 Investments - program-related. See Part IV, line 11  1 Investments - program-related. See Part IV, line 11  1 Investments - program-related. See Part IV, line 11  1 Investments - program-related and securities  1 Cherry assets. See Part IV, line 11  1 Investments - program-related and securities  1 Cherry assets. See Part IV, line 11  1 Investments - program-related and securities  1 Cherry assets. See Part IV, line 11  1 Investments - program-related and securities  1 Cherry assets. See Part IV, line 11  1 Investments - program-related and securities  1 Cherry assets. See Part IV, line 11  2 Cherry assets. See Part IV, line 11  2 Cherry assets and lines 1 through 15 (must equal line 34)  2 Cherry assets and lines 1 through 15 (must equal line 34)  2 Cherry assets and lines 1 through 25 (must equal line 34)  2 Cherry assets and lines 1 through 25 (must equal line 34)  2 Cherry assets and lines 1 through 25 (must equal line 34)  2 Cherry assets and lines 1 through 25 (must equal line 34)  2 Cherry assets and lines 1 through 25 (must equal lines 34)  2 Cherry assets and lines 1 through 25 (must equal lines 34)  2 Cherry assets and lines 1 through 25 (must equal lines 34)  3 Capatities (must equal lines 34)  4 Cherry assets and lines 1 through 25 (must equal lines 34)  4		5	Loans and other receivables from current and former officers, directors,			
1			trustees, key employees, and highest compensated employees.			
1989   1989			Complete Part II of Schedule L		5	
Sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part I of Schedule L		6	Loans and other receivables from other disqualified persons (as defined under section		ļ	
The property of the propert			4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
7   Notes and loans receivable, net   7			sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b Less: accumulated depreciation 11 Investments - publicy traded securities 11 Investments - program-related. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 15 Other assets. See Part IV, line 11 16 Total assets. See Part IV, line 11 17 Accounts payable and accrued expenses 177 170 Accounts payable and accrued expenses 177 18 Grants payable and accrued expenses 19 Deferred revenue 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Loans and other liabilities (including federal income tax, payables to related third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties 26 Total liabilities. Add lines 17 through 25 27 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34.  28 Temporarily restricted net assets 29 Permanently res			organizations (see instructions). Complete Part II of Schedule L		6	
10a	S	7	Notes and loans receivable, net		7	
10a	set	8	Inventories for sale or use	485	8	120
Secure   Part VI of Schedule D   10a   285   1,933   10c   285   10b   1,933   10c   285   11   11   11   12   12   13   10   12   13   10   14   14   14   15   15   15   15   15	As	9	Prepaid expenses and deferred charges		9	250
B		10a	Land, buildings, and equipment: cost or			
11   Investments - publicly traded securities   11   12   11   12   11   12   11   13   11   12   13   11   14   15   13   11   14   15   15   15   15   15   15			· · · · · · · · · · · · · · · · · · ·			
12   Investments - other securities. See Part IV, line 11   13   Investments - program-related. See Part IV, line 11   13   14   Intangible assets   14   15   Other assets. See Part IV, line 11   15   15   15   15   16   Total assets. Add lines 1 through 15 (must equal line 34)   149,882   16   177,626   17   Accounts payable and accrued expenses   17   18   Grants payable   18   18   19   Deferred revenue   19   19   20   Tax-exempt bond liabilities   20   21   22   Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D   22   22   23   24   Unsecured notes and loans payable to unrelated third parties   24   Unsecured notes and loans payable to unrelated third parties   24   Unsecured notes and other payables to related third parties   24   Unsecured notes and other payables to related third parties   24   Unsecured notes and other payable to unrelated third parties   24   Unsecured notes and loans payable to unrelated third parties   24   Unsecured notes and loans payable to unrelated third parties   24   Unsecured notes and other payables to related third parties   24   Unsecured notes and other payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D   2   2,551   25   159      26		b		1,933	10c	285
13   Investments - program-related. See Part IV, line 11   13   14   Intangible assets   14   15   15   15   15   15   15   15		11	Investments - publicly traded securities		11	
14		12	•		12	
15 Other assets. See Part IV, line 11   15		13			13	
16		14			14	
17		15	Other assets. See Part IV, line 11		15	
18   Grants payable   18   Deferred revenue   19   19   20   7ax-exempt bond liabilities   20   21   20   21   22   22   23   22   23   23   24   23   24   23   24   25   25   25   25   25   25   25				149,882	_	177,626
The property of the payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L  22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L  23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D  26 Total liabilities. Add lines 17 through 25  27 Total liabilities. Add lines 17 through 25  28 Temporarily restricted net assets  29 Permanently restricted net assets  29 Paid-in or capital stock or trust principal, or current funds  30 Capital stock or trust principal, or current funds  31 Paid-in or capital surplus, or land, building, or equipment fund  32 Retained earnings, endowment, accumulated income, or other funds  31 Total net assets or fund balances  147,331 32 177,467					_	
Tax-exempt bond liabilities			· ·		<del></del>	
21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 27 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances  21 Loans and other payables to current and former officers, directors, trusted particles, directors, directo					<del>-</del>	
Complete lines 27 through 29, and lines 33 and 34.   Capital stock or trust densests   Capital stock or trust principal, or carpital stock or trust principal, or current funds   Capital stock or trust principal, or current funds   Capital stock or trust principal, or carpital sarely and capital stock or fund balances   Capital sasets or fund					<del></del>	
trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L  23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D  26 Total liabilities. Add lines 17 through 25  27 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets  28 Temporarily restricted net assets  29 Permanently restricted net assets  29 Permanently restricted net assets  29 Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34.  30 Capital stock or trust principal, or current funds  31 Paid-in or capital surplus, or land, building, or equipment fund  31 Paid-in or capital surplus, or land, building, or equipment fund  31 Retained earnings, endowment, accumulated income, or other funds  32 Retained earnings, endowment, accumulated income, or other funds  33 Total net assets or fund balances  34 Unsecured notes and loans payable to unrelated third parties  22 23  23 24  24 Unsecured notes and loans payable to unrelated third parties  24 24  25 Other liabilities (including payable to unrelated third parties  24 24  25 Other liabilities (including payables to related third parties  24 25 Capital surplus and other liabilities not included on lines 17-24). Complete Part X  25 Other liabilities (including payables to related third parties  26 159  27,551 26 159  27,551 26 159  27,551 26 159  27,551 26 159  27,551 26 159  27,551 26 159  27,551 26 159  28 29  29 Permanently restricted net assets  29 Permanently restricted net assets  29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.  30 Capital stock or trust principal, or current funds  31 Paid-in or capital surplus, or land, building, or equip						 
23 Secured mortgages and notes payable to unrelated third parties	ties	22				
23 Secured mortgages and notes payable to unrelated third parties	iii				<b>†</b>	
23 Secured mortgages and notes payable to unrelated third parties	Lia				_	
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D					<del>                                     </del>	
parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D					24	
Schedule D   2,551   25   159		25	, , , , , , , , , , , , , , , , , , , ,			
26   Total liabilities. Add lines 17 through 25   2,551   26   159						450
Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34.  Unrestricted net assets					<del>                                     </del>	
Complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets		26	<u> </u>	2,551	26	159
33 Total net assets or fund balances	Se		· · · · · · · · · · · · · · · · · · ·			
33 Total net assets or fund balances	ju C	27	·		27	
33 Total net assets or fund balances	ala				<del>                                     </del>	
33 Total net assets or fund balances	Р				1	
33 Total net assets or fund balances	<u>ب</u> ا	29			23	
33 Total net assets or fund balances	o					
33 Total net assets or fund balances	sts	30			30	
33 Total net assets or fund balances	SSE				<del>                                     </del>	
33 Total net assets or fund balances	¥			1 / 7 2 2 1	<del></del>	177 /67
	Š			·	<del>                                     </del>	,
					<del>                                     </del>	

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

## **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.

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

OMB No. 1545-0047

2015

Open to Public

Employer identification number

NOR	THW	EST VEG					33-10743					
Pa	rt I	Reason for Public Charit	<b>y Status</b> (All oi	rganizations must c	omplete	this par	t.) See instructio	ns.				
The	orga	nization is not a private foundation beca	ause it is: (For lines	1 through 11, check only	one box.)							
1		A church, convention of churches, or	association of chur	ches described in section	n 170(b)(1	)(A)(i).						
2		A school described in section 170(b)	(1)(A)(ii). (Attach S	chedule E (Form 990 or	990-EZ).)							
3		A hospital or a cooperative hospital se	ervice organization	described in section 170	(b)(1)(A)(i	ii).						
4		A medical research organization oper	ated in conjunction	with a hospital described	l in <b>sectior</b>	170(b)(1)	(A)(iii). Enter the					
		hospital's name, city, and state:										
5		An organization operated for the bene	efit of a college or u	niversity owned or operat	ted by a go	vernmenta	Il unit described in					
		section 170(b)(1)(A)(iv). (Complete F	Part II.)									
6		A federal, state, or local government of		it described in section 17	70(b)(1)(A)	(v).						
7		An organization that normally received	s a substantial part	of its support from a gove	ernmental	unit or fron	n the general public					
		described in section 170(b)(1)(A)(vi)	. (Complete Part II.)	)								
8		A community trust described in section	on 170(b)(1)(A)(vi).	. (Complete Part II.)								
9	X				contributio	ns, membe	ership fees, and gross	S				
		support from gross investment income	e and unrelated bus	siness taxable income (le	ss section	511 tax) fr	om businesses					
		acquired by the organization after Jun	ie 30, 1975. See <b>se</b>	ection 509(a)(2). (Comple	ete Part III.	)						
10		An organization organized and operat	ed exclusively to te	st for public safety. See s	section 50	9(a)(4).						
11		An organization organized and operat	ted exclusively for the	he benefit of, to perform t	he function	s of, or to	carry out the purpose	es of				
		one or more publicly supported organ	izations described i	n section 509(a)(1) or se	ection 509	(a)(2). See	e section 509(a)(3).	Check				
		the box in lines 11a through 11d that of	describes the type of	of supporting organization	and comp	lete lines 1	l1e, 11f, and 11g.					
	а	Type I. A supporting organization	operated, supervis	ed, or controlled by its su	apported or	ganization	(s), typically by giving	1				
		the supported organization(s) the	power to regularly	appoint or elect a majorit	y of the dir	ectors or to	ustees of the support	ting				
		organization. You must complet	e Part IV, Sections	s A and B.								
	b	Type II. A supporting organization	n supervised or con	trolled in connection with	its suppor	ted organiz	zation(s), by having					
		control or management of the sup	porting organizatio	n vested in the same per	sons that o	control or n	nanage the supported	İ				
		organization(s). You must comp	lete Part IV, Section	ons A and C.								
	С	Type III functionally integrated.	A supporting organ	nization operated in conn	ection with	, and funct	ionally integrated with	١,				
		its supported organization(s) (see	instructions). You	must complete Part IV,	Sections	A, D, and	E.					
	d	Type III non-functionally integra	ated. A supporting	organization operated in	connection	with its su	pported organization	(s)				
		that is not functionally integrated.	The organization g	enerally must satisfy a dis	stribution re	equiremen	t and an attentivenes	S				
		requirement (see instructions). Ye	ou must complete	Part IV, Sections A and	l D, and Pa	art V.						
	е	Check this box if the organization	received a written	determination from the IR	RS that it is	a Type I, T	Type II, Type III					
		functionally integrated, or Type III	non-functionally int	tegrated supporting orgar	nization.							
	f	Enter the number of supported organi	zations									
	g	Provide the following information about	ut the supported org	ganization(s).								
	(i	) Name of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Amount of monetary	(vi) Amount of				
				(described on lines 1-9 above (see instructions))	listed in you docum		support (see instructions)	other support (see instructions)				
				above (see iristructions))	docum	entr	instructions)	ilistructions)				
					Yes	No						
/۸۱												
(A)												
(B)												
(0)												
(C)												
(0)												
(D)												
(D)												
(E)												
( <del>-</del> /												
Tota	ı											

Page **2** Schedule A (Form 990 or 990-EZ) 2015 NORTHWEST VEG 33-1074344

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	unde
Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)	

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
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	<b>Total.</b> 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)						
6	Public support. Subtract line 5 from line 4 · ·						
	tion B. Total Support	1	T	ī		1	
	ndar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 8	Amounts from line 4						
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 VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (s	see instructions)				12	
13	First five years. If the Form 990 is for the o organization, check this box and stop here						▶ 🗌
Sec	tion C. Computation of Public Su	upport Percen	tage				
14	Public support percentage for 2015 (line 6, o	column (f) divided b	y line 11, column (	f))		14	%
15	Public support percentage from 2014 Scheo	dule A, Part II, line 1	14			15	%
16a	33 1/3% support test - 2015. If the organization						
_	box and <b>stop here</b> . The organization qualific						▶ ⊔
b	33 1/3% support test - 2014. If the organization of the latest this have and start the control of the control o			•			. □
47-	check this box and <b>stop here</b> . The organiza						· · · · • 📙
17a	10%-facts-and-circumstances test - 2015	•					
	10% or more, and if the organization meets Part VI how the organization meets the "fact				•		
	organization		-	•			
b	10%-facts-and-circumstances test - 2014						
D	15 is 10% or more, and if the organization m	neets the "facts-and	d-circumstances" te	est, check this box	and stop here.		
	Explain in Part VI how the organization mee			-			
40							▶ ⊔
18	<b>Private foundation.</b> If the organization did						. □
	instructions						· · · · • 📙

 Schedule A (Form 990 or 990-EZ) 2015
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# Fatt-NT: 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.)

Se	ction A. Public Support	. ,		· •	•	,	
Cale	endar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees	25 200	20 427	44 126	41 654	26 010	176 410
2	received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise	25,380	28,437	44,136	41,654	36,812	176,419
	sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose • • • • • •	20,775	29,169	30,235	66,318	96,149	242,646
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	46,155	57,606	74,371	107,972	132,961	419,065
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons · · · ·						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b · · · · · · · · · · · · · · · · · ·						
	<b>Public support.</b> (Subtract line 7c from line 6.)						419,065
	ction B. Total Support					1	
	endar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6 · · · · · · · · · · · · · · · · · ·	46,155	57,606	74,371	107,972	132,961	419,065
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	246	312	312	272	282	1,424
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b · · · · · · · · · · ·	246	312	312	272	282	1,424
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 VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)	46,401	57,918	74,683	108,244	133,243	420,489
14	First five years. If the Form 990 is for the or organization, check this box and stop here	•		•	` , ` ,		▶ 🔲
Se	ction C. Computation of Public Su	• •					
15	Public support percentage for 2015 (line 8, c	• • • • • • • • • • • • • • • • • • • •		•		15	99.66 %
16	Public support percentage from 2014 Scheduction D. Computation of Investment					16	99.61 %
	ction D. Computation of Investme			ump (f))		47	0.00 %
17 18	Investment income percentage for <b>2015</b> (line Investment income percentage from <b>2014</b> So		-	umn (f))		17	0.00 %
	33 1/3% support tests - 2015. If the organiz 17 is not more than 33 1/3%, check this box	ation did not check	the box on line 14,	and line 15 is more	·	d line	<u> </u>
b	33 1/3% support tests - 2014. If the organiz line 18 is not more than 33 1/3%, check this	ation did not check abox and stop here.	a box on line 14 or The organization o	line 19a, and line 1 ualifies as a public	6 is more than 33 ly supported organ	1/3%, and	▶ □
20	Private foundation. If the organization did n	ot check a box on li	ne 14, 19a, or 19b,	check this box and	see instructions		▶ ∐

 Schedule A (Form 990 or 990-EZ) 2015
 NORTHWEST VEG
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# Part IV Supportin

#### **Supporting Organizations**

(Complete only if you checked a box in line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI**.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
		No
1		
2		
3a		
r		
3b		
30		
F 1		
4a		
41.		
4b		
4c		
5a		
5b		
5c		
6		
7		
7		
8		
9a		
9b		
9c		
102		
10a		
10b		_

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Or 990-PF)
Department of the Treasury
Internal Revenue Service

Name of the organization

# **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

2015

**Employer identification number** 

NORTHWEST VEG	33-1074344					
Organization type (check of	one):					
Filers of:	Section:					
Form 990 or 990-EZ	∑ 501(c)( 3 ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
Check if your organization is	s covered by the <b>General Rule</b> or a <b>Special Rule</b> .					
<b>Note.</b> Only a section 501(c) instructions.	(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See					
General Rule						
or more (in money	For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special Rules						
regulations under s	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line d that received from any one contributor, during the year, total contributions of the greater of (1) the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
contributor, during t	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one he year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, nal purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
contributor, during t contributions totaled during the year for a <b>General Rule</b> appli	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one he year, contributions exclusively for religious, charitable, etc., purposes, but no such d more than \$1,000. If this box is checked, enter here the total contributions that were received an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the es to this organization because it received nonexclusively religious, charitable, etc., contributions here during the year					
	at is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,					
, ,	nust answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

# SCHEDULE D (Form 990)

## **Supplemental Financial Statements**

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

2015

Open to Aublic Inspection

OMB No. 1545-0047

Name	of the organization		Employer identification number
NOI	RTHWEST VEG		33-1074344
Pa	T.I. Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or Ac	counts.
	Complete if the organization answered "Yes		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	.,	.,
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors	in writing that the assets held in donor advised	
	funds are the organization's property, subject to the organ	_	· · · · · · · · · · · · · · · · · · ·
6	Did the organization inform all grantees, donors, and donors	•	
	only for charitable purposes and not for the benefit of the		
	·		
Pa	rt [ Conservation Easements.		
	Complete if the organization answered "Ye	es" on Form 990. Part IV. line 7.	
1	Purpose(s) of conservation easements held by the organic		
-	Preservation of land for public use (e.g., recreation or		ically important land area
	Protection of natural habitat	Preservation of a certific	· ·
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qu	ualified conservation contribution in the form of a	conservation
_	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			
c	Number of conservation easements on a certified historic		
d	Number of conservation easements included in (c) acquire	( )	
-			2d
3	Number of conservation easements modified, transferred,		
•	tax year	, 10100000, 07.11.1901000, 07.10111111000 27.11.0 07.	gameadon daning and
4	Number of states where property subject to conservation	easement is located	
5	Does the organization have a written policy regarding the		
	violations, and enforcement of the conservation easemen		
6	Staff and volunteer hours devoted to monitoring, inspecting		
	<b>&gt;</b>	3, 3	3 · · <b>,</b> · ·
7	Amount of expenses incurred in monitoring, inspecting, ha	andling of violations, and enforcing conservation	easements during the year
	<b>▶</b> \$		ů ,
8	Does each conservation easement reported on line 2(d) a	above satisfy the requirements of section 170(h)	(4)(B)(i)
9	In Part XIII, describe how the organization reports conserv		
	balance sheet, and include, if applicable, the text of the fo	otnote to the organization's financial statements	that describes the
	organization's accounting for conservation easements.		
Pa	TIN Organizations Maintaining Collection	ons of Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered "Y	es" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116	(ASC 958), not to report in its revenue statemen	t and balance sheet
	works of art, historical treasures, or other similar assets he	eld for public exhibition, education, or research i	in furtherance of
	public service, provide, in Part XIII, the text of the footnote	e to its financial statements that describes these	items.
b	If the organization elected, as permitted under SFAS 116	(ASC 958), to report in its revenue statement an	nd balance sheet
	works of art, historical treasures, or other similar assets he	eld for public exhibition, education, or research i	in furtherance of
	public service, provide the following amounts relating to the	nese items:	
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works of art, historical		
	following amounts required to be reported under SFAS 11		
а	Revenue included on Form 990, Part VIII, line 1		▶ \$
b	Assets included in Form 990, Part X		

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 NORTHWEST VEG
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Pa	<b>Till</b> Organizations Maintaining Colle	ctions of Art	i, Histori	cal Tre	easures,	or Oth	er Similar As	sets (co	ntinue	ed)
3	Using the organization's acquisition, accession, and ot	her records, che	ck any of th	e followi	ng that are a	significa	nt use of its			-
	collection items (check all that apply):		•							
а	Public exhibition	d  Loan	or exchange	e prograi	ms					
b	Scholarly research	_	J							
С	Preservation for future generations									
4	Provide a description of the organization's collections a	and explain how	thev further	the orga	nization's e	cempt pu	rnose in Part			
•	XIII.	ли охрані пот	andy randron	and orgo		tompt pu	ipodo iii i dit			
5	During the year, did the organization solicit or receive	donations of art	historical tre	agurag	or other sim	ilar				
Ū	assets to be sold to raise funds rather than to be main							🗆 🗸	es [	□No
Da	#IV Escrow and Custodial Arrangement		tric organiz	ation 3 co	JIICOLIOIT:			·· ⊔'	03	
(II.Y)	Complete if the organization answe		Form 99	∩ Part	I\/ line 0	or ren	orted an amo	unt on Fo	٦rm	
	990, Part X, line 21.	100 100 011	1 01111 00	o, i ait	iv, iiiic o	, or rep	orted air airio	unit on i	/1111	
	Is the organization an agent, trustee, custodian or other	ar intermediany fo	r contributi	one or ot	har accate r	ot				
ıa	included on Form 990, Part X?	-						Пъ	′es [	No
h								🗆 '	es [	NO
b	If "Yes," explain the arrangement in Part XIII and comp	ilete trie ioliowiriç	, lable.				1 ^-	nont		
_	Beginning balance					40	<del> </del>	nount		
C	Additions during the year						<del> </del>			
d	Distributions during the year									
e	Ending balance						<del> </del>			
f	•								<u> </u>	٦
2a	Did the organization include an amount on Form 990,					-				⊣ No
b	If "Yes," explain the arrangement in Part XIII. Check he	ere if the explana	tion has be	en provid	ded on Part	XIII -			<u>· · · </u>	
Pa	Endowment Funds.	rad "Vaa" an	Form 00	0 Dort	N/ line 1	0				
	Complete if the organization answe									
		Current year	(b) Prior y	ear	(c) Two year	s back	(d) Three years back	(e) Four	years b	ack
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 current year e	end balance (line	1g, column	ı (a)) hele	d as:					
а	Board designated or quasi-endowment	%								
b	Permanent endowment • %									
С	Temporarily restricted endowment	%								
	The percentages in lines 2a, 2b, and 2c should equal	100%.								
3a	Are there endowment funds not in the possession of the	ne organization th	nat are held	and adn	ninistered fo	r the				
	organization by:								Yes	No
	(i) unrelated organizations							- 3a(i)		
	(ii) related organizations							- 3a(ii)		
b	If "Yes" on 3a(ii), are the related organizations listed as	required on Sch	nedule R?					. 3b		
4	Describe in Part XIII the intended uses of the organiza	tion's endowmen	it funds.							
Pa	T.VI. Land, Buildings, and Equipment.									
	Complete if the organization answe	red "Yes" on	Form 99	0, Part	IV, line 1	1a. See	Form 990, P	art X, line	e 10.	
	Description of property	(a) Cost or other	basis	(b) Cost or	other basis	(c) /	Accumulated	(d) Boo	k value	
		(investment	)	(0	ther)	de	preciation			
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment				285					85
e	Other									
Tota	I. Add lines 1a through 1e. (Column (d) must equal For	m 990, Part X, co	olumn (B), l	ine 10c.)					2	85

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PartVII	Investments - Other Securities.  Complete if the organization answer	ed "Yes" on Form 990, Pa	rt IV, line 11b. See Form 990	, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market	
(1) Financial of				
` ,	eld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Part VIII	Investments - Program Related. Complete if the organization answer	ed "Yes" on Form 990, Pa	rt IV, line 11c. See Form 990,	, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation  Cost or end-of-year market	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)		<u> </u>		
(9)				
Part IX	) must equal Form 990, Part X, col. (B) line 13.)  Other Assets.	<u> </u>		
	Complete if the organization answer	ed "Yes" on Form 990, Pa	rt IV, line 11d. See Form 990	
(4)	(a)	Description		(b) Book value
(1)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 15	.)		
Part X	Other Liabilities. Complete if the organization answer line 25.	ed "Yes" on Form 990, Pa	rt IV, line 11e or 11f. See For	m 990, Part X,
1.	(a) Description of liability	(b) Book value		
	income taxes	150		
	LL TAXES PAYABLE	159		
(3)				
(5)				
(6)				
(7)				
(8)				

159

(9)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2015 NORTHWEST VEG 33-1074344 Page 4 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains (losses) on investments 2a 2b b 2c d Other (Describe in Part XIII.) 2d Add lines 2a through 2d 3 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a Other (Describe in Part XIII.) 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990. Part IX. line 25: 2a 2b b 2c С d Other (Describe in Part XIII.) 2d Add lines 2a through 2d 2e 3 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a **b** Other (Describe in Part XIII.) 4b c Add lines 4a and 4b ...... Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

EEA Schedule D (Form 990) 2015

#### **SCHEDULE G** (Form 990 or 990-EZ)

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

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.

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

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OMB No. 1545-0047

Internal Revenue Service

Employer identification number Name of the organization NORTHWEST VEG 33-1074344 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events **d** In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or 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. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (or retained by) custody or control of (or retained by) (ii) Activity or entity (fundraiser) from activity fundraiser listed in contributions? organization col. (i) Yes No 1 2 3 5 6 7 R 9 10 3 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.

NORTHWEST VEG Schedule G (Form 990 or 990-EZ) 2015 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. **(b)** Event #2 (c) Other events (a) Event #1 (d) Total events (add col. (a) through col. (c)) (event type) (event type) (total number) Revenue Gross receipts 2 Less: Contributions Gross income (line 1 minus 4 Cash prizes Noncash prizes Rent/facility costs . . . . . . . . Direct Expenses Food and beverages Entertainment Other direct expenses . . . . . Direct expense summary. Add lines 4 through 9 in column (d) Net income summary. Subtract line 10 from line 3, column (d) 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. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue . . . . . . . 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes Volunteer labor No 6 Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Subtract line 7 from line 1, column (d) · · · · · · · · · · · · ▶

a	is the organization licensed to conduct gaming activities in each of these states?	J
b	If "No," explain:	
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No.	>
b	If "Yes." explain:	

Enter the state(s) in which the organization conducts gaming activities:

EEA Schedule G (Form 990 or 990-EZ) 2015

# 990 **2015** Page 1 **Overflow Statement** FEIN Name(s) as shown on return NORTHWEST VEG 33-1074344 PART VIII, LINE 1C - FUNDRAISING EVENTS Description Amount BUSINESS SPONSORS \$ $\frac{134}{134}$ 134 Total: PART VIII - STATEMENT OF REVENUE, LINE 1F Description Amount CONTRIBUTIONS 11,715 POTLUCK CONTRIBUTIONS 3,132 Total: 14,847 GROSS INCOME FROM FUNDRAISING EVENTS Description Amount 6**,**798 RACE/TOFURKY TROT 6,798 Total: **DIRECT EXPENSES** Description Amount 1,492 RACE/TOFURKY TROT 1,492 Total:

990	Overflow Statement	<b>2015</b> Page 2
Name(s) as shown on return		FEIN
NORTHWEST VEG		33-1074344

# ALL OTHER EXPENSES - PROGRAM SERVICES

Description		F	Mount
BANK SERVICE CHARGES		\$	24
CONTRIBUTIONS TO OTHER CHARITIES			6,000
COOKING DEMOS			1,527
EDUCATIONAL MATERIALS			648
LICENSES AND PERMITS			740
MEMBERSHIP INCENTIVES			2,863
POSTAGE			238
PRINTING AND REPRODUCTION			4,248
PROGRAM FILM PREMIER SHOWING COSTS			5,486
PROGRAM FILM PRODUCTION EXPENSES			30,786
PROGRAM FILM TRAVEL EXPENSES			2,514
PROGRAM SUPPLIES			961
SMALL EQUIPMENT			170
SPONSOR EXPENSE			234
SURVEY EXPENSE			830
TELEPHONE			150
	Total:	\$	57,419

# TOFURKY TROT

Description	F	Amount
SQUARE SERVICE CHARGES	\$	30
WAGES		1,462
Total:	\$	1,492
1		

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047
2015
Open-te-Public-

Employer identification number

NORTHWEST VEG 33-1074344 01. Officer, directors, etc. family relationship (Part VI, line 2) THERE ARE TWO INDIVIDUALS ON THE BOARD THAT ARE RELATED. ERIC DAY SERVES AS PRESIDENT AND WENDY GABBE DAY IS A DIRECTOR ON THE BOARD. 02. Form 990 governing body review (Part VI, line 11) NORTHWEST VEG BOARD WILL REVIEW THE FORM 990 BEFORE IT IS FILED. 03. Governing documents, etc, available to public (Part VI, line 19) DOCUMENTS ARE AVAILABLE FOR REVIEW ON THE ORGANIZATION WEB SITE. 04. List of other expenses (Part IX, line 24e) BANK CHARGES CONTRIBUTIONS TO OTHER CHARITIES COOKING DEMOS EDUCATION MATERIALS LICENSES AND PERMITS MEMBERSHIP INCENTIVES POSTAGE PRINTING AND REPRODUCTION PROGRAM FILM PREMIER SHOWING COSTS PROGRAM FILM PRODUCTION EXPENSES PROGRAM FILM TRAVEL EXPENSES PROGRAM SUPPLIES SMALL EQUIPMENT

SPONSOR EXPENSE

Page 2 Schedule O (Form 990 or 990-EZ) (2015) Name of the organization Employer identification number NORTHWEST VEG 33-1074344 SURVEY EXPENSE TELEPHONE

		33-107	4344	P	age <b>12</b>
Pa	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1		248,	896
2	Total expenses (must equal Part IX, column (A), line 25)	. 2		218,	760
3	Revenue less expenses. Subtract line 2 from line 1	. 3		30,	 136
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4		147,	331
5	Net unrealized gains (losses) on investments	. 5			
6	Donated services and use of facilities	. 6			
7	Investment expenses	. 7			
8	Prior period adjustments	- 8			
9	Other changes in net assets or fund balances (explain in Schedule O)	. 9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	. 10		177,	467
Pa	Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: 🗵 Cash 🔲 Accrual 🔲 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Χ
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				<b></b>
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	T	Χ
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
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		
	If the organization changed either its oversight process or selection process during the tax year, explain in			4   1   1   1	
	Schedule O.				1
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
EΑ			For	m <b>990</b> (	2015)

EEA