# Form 990

**Return of Organization Exempt From Income Tax** 

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

OMB No 1545-0047

		the Treasury	The association may be used	benefit trust or private foun	,		roonsting roonis			Open to Public
_		ie Service	► The organization may have						700	Inspection
A I	or the 2		<u> </u>	UL 1, 2007	and en	aing	JUN 30	Γ'	800	
B	heck if pplicable:	Please use IRS	lame of organization					D Empl	oyer ide	ntification number
Г	Address	label or CC	mmunity Action Org	anization				93	3-05	54941
	Name change	type.	lumber and street (or P.O. box if mail is n		3)	-	Room/suite	E Telep	hone nu	ımber
	Initia) return		01 SW Baseline St.		,					48-6646
	Termin-	lantaus	City or town, state or country, and ZIP + 4					F Accoun	ntino metho	t Cash X Accrual
	⊒ation ]Amend∈ _retum		llsboro, OR 97123						ther pecify)	, —
	Application	tion Secti	on 501(c)(3) organizations and 4947(a)	1) nonexempt charitable tru	ısts	H an	d lare not app			on 527 organizations.
		' must	attach à completed Schedule A (Form 9	90 or 990-EZ).			Is this a group r			
G 1	Vebsite:	►www.c	aowash.org			H(b)	If "Yes," enter no	ımber of	affiliate	s► N/A
J	)rganiza	tion type (check	only one) ► X 501(c) ( 3 ) < (inse	rt no ) 4947(a)(1) or	527	H(c)	Are all affiliates		? N	/A 🔲 Yes 🔙 No
K (	heck he	re 🕨 🔙 if	the organization is not a 509(a)(3) suppo	rting organization and its gro	oss	H(d)	(If "No," attach a Is this a separat	e return	filed by	an or
			at more than \$25,000. A return is not requ	uired, but if the organization			ganization cove	red by a	group ri	uling? Yes X No
	hooses	to file a return	be sure to file a complete return.				Group Exemption			N/A
						M			_	on is <b>not</b> required to attach
L (			es 6b, 8b, 9b, and 10b to line 12 🕨	17,145,64			Sch. B (Form 99	30, 990-	EZ, or 99	90-PF).
P	rt I		Expenses, and Changes in		Bala	nce	<u> </u>			
	1	Contributions	s, gifts, grants, and similar amounts recei	ved.		i				
	a	Contributions	s to donor advised funds		1a					
	b		support (not included on line 1a)		1b		865,0			
	C		c support (not included on line ta)		10		11,0			
	d		contributions (grants) (not included on lin		1d	1	5,455,2	14.		16 221 240
	е		es 1a through 1d) (cash \$16,3				<del>.</del>	-)  -	1e	16,331,240.
	2	-	vice revenue including government fees a	nd contracts (from Part VII, l	ine 93)		***		2	158,783.
	3	•	dues and assessments				******	-	3	
	4		avings and temporary cash investments						4	
	5		d interest from securities	*************	1 _ 1				5	
	6 a				6a			<del></del>		
	Ь		expenses	o-	6b		<del></del>			
ne	, C		ome or (loss). Subtract line 6b from line	ba	• • • •		* * *	· ···· }	6c 7	
Revenue	7		nent income (describe   it from sales of assels other	(A) Securities			(B) Other			
Ä	оа			(A) Securities			(b) Other			
	,		yother basis and sales expenses		8b		<del></del>	$\overline{}$		
			) (attach schedule)		8c					
	d		oss). Combine line 8c, columns (A) and (	R)	00				8d	
	9	-	s and activities (attach schedule). If any a		k here 1	▶ [	7	İ		
	a	Gross revenue (not		of contributions reported on line 1b)	9a		_	ŀ		
	b		expenses other than fundraising expenses		9b					
	C		r (loss) from special events. Subtract line						9c	
	10 a		of inventory, less returns and allowances		10a					
	Ь	Less: cost of	goods sold	A - 21-1 - 121-24	10b					
	C		or (loss) from sales of inventory (attach s		rorn line	10a			10c	
	11	Other revenu	e (from Part VII, line 103)						11	655,621.
	12		e. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 1						12	17,145,644.
	13		vices (from line 44, column (B))						13	14,483,809.
Expenses	14		and general (from line 44, column (C))						14	1,788,827.
pen	15		from line 44, column (D))						15	320,712.
X	16		affiliales (attach schedule)						16	- <del> </del>
	17	Total expens	es. Add lines 16 and 44, column (A)						17	16,593,348.
L/3	18		eficit) for the year. Subtract line 17 from I						18	552,296.
etset.	19	Net assets or	fund balances at beginning of year (from	i line 73, column (A))					19	1,643,283.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Net assets or fund balances at end of year. Combine lines 18, 19, and 20

Other changes in net assets or fund balances (attach explanation)

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122,011.

2,317,590.

20

21

See Statement 1

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds	† †		1		The second secon
(attach schedule)					
(cash $$0 = noncash $0$ .	y				
If this amount includes foreign grants, check here	223			1	
22b Other grants and allocations (attach schedule	X			1	
(cash \$ 0 • noncash \$ 0 •	1 1			į	
If this amount includes foreign grants, check here	22b			1	
23 Specific assistance to individuals (attach				1	
schedule)	23		:		
24 Benefits paid to or for members (attach				1	
schedule)	24		ŀ		
25a Compensation of current officers, directors, key					
employees, etc. listed in Part V-A	25a	106,050.	0.	106,050.	0.
b Compensation of former officers, directors, key					
employees, etc. listed in Part V-B	25b	0.	0.	0.	0.
c Compensation and other distributions, not included					
above, to disqualified persons (as defined under	1				
section 4958(f)(1)) and persons described in					
section 4958(c)(3)(B)	25€				
26 Salaries and wages of employees not					
included on lines 25a, b, and c	26	6,822,521.	6,035,346.	622,548.	164,627.
27 Pension plan contributions not included on		· · · · · · ·	•		.*
lines 25a, b, and c	27	75,248.	66,604.	6,827.	1,817.
28 Employee benefits not included on lines			,	•	
25a - 27	28	1,406,533.	1,225,416.	147,691.	33,426.
29 Payroll taxes	29	759,189.	661,430.	79,717.	18,042.
30 Professional fundraising fees	30				
31 Accounting fees	31				
32 Legal fees	32				
33 Supplies	33	302,678.	211,322.	55,949.	35,407.
34 Telephone	34	282,723.	207,466.	44,697.	30,560
35 Postage and shipping	35	·			
36 Occupancy	36	689,442.	578,607.	97,719.	13,116
37 Equipment rental and maintenance	37		•		<u> </u>
38 Printing and publications	38				
39 Travel	39	166,998.	131,661.	31,722.	3,615
40 Conferences, conventions, and meetings	40				· · · · · · · · · · · · · · · · · · ·
41 Interest	41				
42 Depreciation, depletion, etc. (attach schedule)	42	93,219.	19,933.	73,286.	-
43 Other expenses not covered above (itemize):					
a Professional Costs	43a	414,246.	46,673.	367,573.	
Advertising	43b	23,458.	15,497.	4,772.	3,189
Insurance	43c	92,219.	30,801.	61,418.	<del></del>
Repairs & Maintenance	43d	98,754.	97,672.	1,082.	
e Miscellaneous	43₽	253,055.	188,988.	58,962.	5,105
Client Expenses	431	4,960,446.	4,919,824.	28,814.	11,808
Capital Outlay	439	46,569.	46,569.		
44 Total functional expenses. Add lines 22a through		•			
43g. (Organizations completing columns (B)-(D),		į			
carry these totals to lines 13-15)	44	16,593,348.	14,483,809.	1,788,827.	320,712
Joint Costs. Check Dif you are following				· · · · · · · · · · · · · · · · · · ·	
Are any joint costs from a combined educational campa			ported in (B) Program servi	ces?	Yes X No
If "Yes," enter (i) the aggregate amount of these joint co		,	(ii) the amount allocated to		N/A ;
(iii) the amount allocated to Management and general \$		/-	(iv) the amount allocated to		N/A
723011 12-27-07					Form <b>990</b> (2007

#### Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► See Statement 5		Program Service Expenses
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the n clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations	(4) 49	equired for 501(c)(3) and (4) orgs., and 947(a)(1) trusts; but optional for others.)
a See Statement 2		
(Grants and allocations \$ ) If this amount includes foreign grants, check his	ere D	7,222,237.
b See Statement 3	510 7	.,,===,==
(Grants and allocations \$ ) If this amount includes foreign grants, check he	ere 🕨 🔲	7,261,572.
C		
(Grants and allocations \$ ) If this amount includes foreign grants, check h	ere 🕨 🔲	
d See Statement 4		
(Grants and allocations \$ ) If this amount includes foreign grants, check h	ere 🕨 🗌	
e Other program services (attach schedule)  (Grants and allocations	oro 🕨 🗔	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)		4,483,809.

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·	: Whe	ore required, attached schedules and amounts wit ald be for end-of-year amounts only.	hin the c	description column	(A) Beginning of year		(B) End of year
	45 46	Cash · non-interest-bearing Savings and temporary cash investments		-	1,020,153.	45 46	2,326,837.
	70	Savings and temporary cash investments				7.0	
	47 a	Accounts receivable	47a	652,148.			
	þ	Less: allowance for doubtful accounts	47b		684,381.	47c	652,148.
	48 a	Pledges receivable	48a	30,573.			
		Less: allowance for doubtful accounts	48b		42,398.	48c	30,573.
	49	Grants receivable			· · · · ·	49	
	1	Receivables from current and former officers, di					
	** -	key employees				50a	
	ь	Receivables from other disqualified persons (as					
S	_	4958(I)(1)) and persons described in section 49				50b	
Assets	51 a	Other notes and loans receivable	1 11 1		-		-
As	1	Less: allowance for doubtful accounts	<del></del>			51c	
	52	Inventories for sale or use				52	
	53	Prepaid expenses and deferred charges			3,045.	53	3,045.
		Investments - publicly-traded securities Stmt			350.	54a	350.
	1	•	•			54b	
	1	Investments - land, buildings, and					
	***	equipment: basis	55a				
		adopmond odolo					
	l h	Less: accumulated depreciation	55b			55c	
	56	Investments - other	<u> </u>			56	
	1	Land, buildings, and equipment: basis	57a	3,394,585.			
		Less: accumulated depreciation	57b	1,154,939.	2,113,853.	57c	2,239,646.
	58	Other assets, including program-related investments	<u> </u>				<u> </u>
		(describe ► Loan Costs		)	12,282.	58	10,822.
	59	Total assets (must equal line 74). Add lines 45	through	58	3,876,462.	59	10,822. 5,263,421.
	60	Accounts payable and accrued expenses		F	747,523.		970,162.
	61	Grants payable				61	
	62	Deferred revenue			46,645.	62	566,465.
ilities	63	Loans from officers, directors, trustees, and key				63	
ij	64 a	Tax-exempt bond liabilities				64a	
Liab	l t	Mortgages and other notes payable St	mt 7	Stmt 8	1,439,011.	64b	1,409,204.
	65	Other liabilities (describe		)		65	
	66	Total liabilities. Add lines 60 through 65			2,233,179.	66	2,945,831.
	Orga	enizations that follow SFAS 117, check here	X a	nd complete lines		. :	
s)		67 through 69 and lines 73 and 74.			010 007		1 100 045
S C	67	Unrestricted			818,827.		1,133,245.
<u>a</u>	68	Temporarily restricted			824,456.		1,184,345.
8	69	Permanently restricted				69	
Š	Orga	anizations that do not follow SFAS 117, check	here P	L and			
ō	7.0	complete lines 70 through 74.				70	
ats	70	Capital stock, trust principal, or current funds				70	
155	71	Paid-in or capital surplus, or land, building, and		[**	<del></del>	71	
Net Assets or Fund Balances	72	Retained earnings, endowment, accumulated in			<del></del> _	72	
ž	73	Total net assets or fund balances. Add lines 67 through (6) must equal line 19 and column (8) must			1,643,283.	73	2,317,590.
	74	(Column (A) must equal line 19 and column (B) must Total liabilities and net assets/fund balances			3,876,462.		5,263,421.
	14	Total lianuities and liet assets/tund haigudes	- mus nift	A GO BITO Z U	3,070,402.	14	1 212031421.

	instructions.)				1 1	7463634.
3	Total revenue, gains, and other support per audited financial stateme	nts		a	<u> </u>	7463634.
b.	Amounts included on line a but not on Part !, line 12:	1.	.1			
1	Net unrealized gains on investments		317,9	0.0	1	
2	Donated services and use of facilities		<del></del>	50.		
3	Recoveries of prior year grants	<del> -</del>	3		1	
4	Other (specify):			ь		317,990.
	Add lines <b>b1</b> through <b>b4</b> Subtract line <b>b</b> from line <b>a</b>					7145644.
ų a	Amounts included on Part I, line 12, but not on line a:			6	<del> </del>	, 1142044.
1	Investment expenses not included on Part I, line 6b	١,	ı <b>.</b>			
2	·		2			
-	Other (specify): Add lines d1 and d2		· <del>-</del> · · · · · · · · · · · · · · · · · · ·	d		0.
						7145644.
Pa	Total revenue (Part I, line 12). Add lines c and d art IV-B Reconciliation of Expenses per Audited Fine	ancial Statements W	ith Expenses	per Re	turn	71130111
a	Total expenses and losses per audited financial statements					6911338.
b	Amounts included on line a but not on Part I, line 17:				+	0311330.
1	Donated services and use of facilities	h	317,9	90.		
2	Prior year adjustments reported on Part I, line 20		12			
3	Losses reported on Part I, line 20	· · · · · ·	13			
4	Other (specify):		14			
,	Add lines b1 through b4		· · · · · · · · · · · · · · · · · · ·	ь	. ]	317,990.
C	Subtract line b from line a					6593348
ď	Amounts included on Part I, line 17, but not on line a:					
1	Investment expenses not included on Part I, line 6b		ıı İ			
•	Other (specify):		12			
_	Add lines d1 and d2		<del></del>	ď		0.
e						
	iotal expenses (Part I, line 17). Add lines c and d			e	1	6593348
	Total expenses (Part I, line 17). Add lines c and d htt V-A Current Officers, Directors, Trustees, and Ke					
		ey Employees (List eacere not compensated.) (See	ch person who was e the instructions.)	s an office	er, dire	ctor, trustee.
	ert V-A Current Officers, Directors, Trustees, and Ke	ey Employees (List each ere not compensated.) (See (B) Title and average hours per week devoted to	ch person who was e the instructions.)	s an office	er, dire	(E) Expense account and
	or key employee at any time during the year even if they we	ey Employees (List eace re not compensated.) (Second Title and average hours	ch person who was e the instructions.)	s an office	er, dire	(E) Expense
	or key employee at any time during the year even if they we	ey Employees (List each ere not compensated.) (See (B) Title and average hours per week devoted to	ch person who was e the instructions.) (C) Compensation (If not paid, enter	(D) Contrib	er, dire	(E) Expense
Pa	or key employee at any time during the year even if they we  (A) Name and address	ey Employees (List each ere not compensated.) (See (B) Title and average hours per week devoted to	ch person who was e the instructions.) (C) Compensation (If not paid, enter -0)	(D) Contrib employee plans & o compensat	er, dire- outions to benefit deferred tion plans	(E) Expense account and other allowance
Pa	or key employee at any time during the year even if they we  (A) Name and address	ey Employees (List each ere not compensated.) (See (B) Title and average hours per week devoted to	ch person who was e the instructions.) (C) Compensation (If not paid, enter	(D) Contrib employee plans & o compensat	er, dire	(E) Expense account and other allowance
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	n 990 (2007) Community Ac	tion O	<u>rganization</u>			93-	0554941 Page <b>8</b>
Pa	rt VI Other Information (continued)						Yes No
C	At any time during the calendar year, did the organ	ization mair	ntain an office outside of	the U	nited States?		91c X
	If "Yes," enter the name of the foreign country		N/A				
92	Section 4947(a)(1) nonexempt charitable trusts filin						▶ 🗀 🗀
	and enter the amount of tax-exempt interest receive					92	N/A
Pa	rt VII Analysis of Income-Producing A						
Not	te: Enter gross amounts unless otherwise		ted business income		ded by section 512, 513	or 514	(E)
indi	icated.	(A) Business	(B)	(C) Exclu-	(D)		Related or exempt
93	Program service revenue:	code	Amount	code	Amount		function income
а	Service Fees						158,783.
b							
C							
đ							
е							
f	Medicare/Medicaid payments					-	
	Fees and contracts from government agencies						
_	Membership dues and assessments						
	Interest on savings and temporary cash investments						
96	Dividends and interest from securities						
97	Net rental income or (loss) from real estate:		_				
	debt-financed property						
	not debt-financed property						
	Net rental income or (loss) from personal property			1			
	Other investment income						
	Gain or (loss) from sales of assets						
	other than inventory						
101	Net income or (loss) from special events						
	Gross profit or (loss) from sales of inventory						
	Other revenue:	<del>-</del> -					
	Other Revenue	İ					260,079.
h	Lawsuit Proceeds						395,542.
n n		ļ					33373121
ď							
		ļ					
104	Subtotal (add columns (B), (D), and (E))		0.			0.	814,404.
	Total (add line 104, columns (B), (D), and (E))			1	1		814,404.
	: Line 105 plus line 1e, Part I, should equal the amo						011/1011
	rt VIII Relationship of Activities to the			t Pu	rposes (See the	instructi	ions)
ستستسب	No. Explain how each activity for which income is repo		<del></del>		<del>*                                      </del>		<del></del>
Line	exempt purposes (other than by providing funds f			ııııpuı	tantily to the accomp	ROTHINGILL	or the organization 5
93	Day care and migrant ch			rov	ide a saf	e en	vironment
	while the parents work.		те тесь со р	TOV	Ide a sai	<u> </u>	VIIOIMETE
	WILLE ONE PATONED WOLKS						
10	3 Miscellaneous income th	at hel	n reach CAO'	s n	rimary ev	emn+	nurnose
FT 11.	rt IX Information Regarding Taxable						
	(A) (B)	Oubsidial	(C)	CU L	(D)	ristructio	(E)
Na	ame, address, and EIN of corporation, Percentage of partnership, or disregarded entity ownership intere:	et	Nature of activities		Total incom	e	End-of-year assets
	partitership, or disregarded entity — ownership interes						assets
	N/A	%			-		
		%					
		%			<del>                                     </del>		
100-2	rt X Information Regarding Transfer	1-1	ted with Personal	Bon	ofit Contracts	1000 44	o instructions )
	Did the organization, during the year, receive any funds, i	-				٠	Yes X No
	Did the organization, during the year, pay premiums, dire	-		ontra <b>ct</b> '.	<i>:</i>		Yes X No
No	te: If "Yes" to (b), file Form 8870 and Form 4720 (se	E INSTRUCTION	13).			<del></del>	F 000 (000**
							Form <b>990</b> (2007)

Par	Information Regarding Transfers To and From C controlling organization as defined in section 512(b)(13).	ontrolled Entitie N/A	S. Complete only if the organi	zation is a
				Yes No
106	Did the reporting organization make any transfers to a controlled entity a	s defined in section 5	12(b)(13) of the Code? If "Yes	,
	complete the schedule below for each controlled entity.	(0)	(0)	(7)
	(A) Name, address, of each	(B) Employer	(C) Description of	(D) Amount of
	controlled entity	identification Number	transfer	transfer
+		Rumber		
a -				
_  -				
b _				
_  -				
c  -				
		h	<del></del>	
	Totals		<u></u>	1
_				Yes No
107	Did the reporting organization receive any transfers from a controlled en	tity as defined in sect	ion 512(b)(13) of the Code? If	"Yes,"
	complete the schedule below for each controlled entity.  (A)	(B)	(C)	(D)
	Name, address, of each	Employer	Description of	Amount of
	controlled entity	Identification Number	transfer	transfer
а				
-	- PENNING TO THE PENN			
b -				
-				
c _				
	T-A-I-			
	Totals			Yes No
108	Did the organization have a binding written contract in effect on August	7, 2006, covering the	e interest, rents, royalties, and	
	annuities described in question 107 above?			
	Under penalties of perjury, I declare that I have examined this return, including accompany and complete. Declaration of preparer (other than officer) is based on all information of which	ing schedules and statement ch preparer has any knowled	is, and to the best of my knowledge and ge	belief, it is true, correct,
Pleas			1 0 7	1 0
Sign	Storfature of officer		100 (1)6 /	<u> </u>
Here	LERRALUNN LIESS PRETENT	THE TO		
	Type or print name and title	IVE JOIR		
Daid	Preparer's Q		Check if Preparer's SS	N or PTIN (See Gen. Inst.
Paid Prepar	signature Tuesday, cfA	12/16/08	employed	
Use Or	voursif Alken & Sanders, Inc., PS		EIN >	
	self-employed), 343 W. WISHKAN			
	ZIP+4 Aberdeen, WA 98520		Phone no.	
				Form <b>990</b> (200

#### **SCHEDULE A**

(Form 990 or 990-EZ)

# Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ Employer identification number

	Community Action Organiza	tion		93 05549	941
Part I	Compensation of the Five Highest Paid Emp		Officers, Direc	ctors, and T	rustees
(a)	(See page 1 of the instructions. List each one. If there are none, er ) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
	Baseline St., Hillsboro, OR	Ex Director 40.00	104,850.	1,200	
	Baseline St., Hillsboro, OR	Fiscal Direct	75,314.	1,200	•
	Baseline St., Hillsboro, OR	40.00	Com Res 65,958.	1,200	
	Baseline St., Hillsboro, OR Siddiqui	Finance Manag 40.00 Dir of Erly C	57,670.	1,200	*
1001 <u>sw</u>	Baseline St., Hillsboro, OR	40.00	57,280.	1,200	•
over \$50,000	<u></u>	6			· · · · · · · · · · · · · · · · · · ·
Part II-A	Compensation of the Five Highest Paid Inde (See page 2 of the instructions. List each one (whether individuals			onal Servic	es 
(	a) Name and address of each independent contractor paid more the	an \$50,000	(b) Type of s	ervice	(c) Compensation
None					
<del>-</del>					
			· -		
Fotal number of c \$50,000 for profe	others receiving over	0			
Part II-B	Compensation of the Five Highest Paid Inde (List each contractor who performed services other than profession firms. If there are none, enter "None." See page 2 of the instruction	onal services, whether individu		ervices	
(	a) Name and address of each independent contractor paid more th	an \$50,000	(b) Type of s	service	(c) Compensation
None					
			···		
	other contractors receiving over			Wight Company of the	······································
otal number of 0 \$50,000 for other		0		<u> </u>	· · · · · · · · · · · · · · · · · · ·

723101/12-27-07 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2007

P	art III Statements About Activities (See page 2 of the instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence			
	public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the			
	lobbying activities 🕨 \$ (Must equal amounts on line 38, Part VI-A, or			
	line i of Part VI-B.)	1		X
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations			
	checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			1
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)	-		
2	s Sale, exchange, or leasing of property?	2a		X
t	Lending of money or other extension of credit?	2b		X
0	Furnishing of goods, services, or facilities?	2c		X
0	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Part V-A, Form 990	2d	X	
ε	: Transfer of any part of its income or assets?	_2e		X
	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how			
	the organization determines that recipients qualify to receive payments.)	_3a_	Ĺ	X
t	Did the organization have a section 403(b) annuity plan for its employees?	3b	X	
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space,			
	the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3¢		X
t	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		Х
	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4t			
	and 4g	4a		Х
t	Did the organization make any taxable distributions under section 4966? N/A	4b		
0	Did the organization make a distribution to a donor, donor advisor, or related person?	46		
	Enter the total number of donor advised funds owned at the end of the tax year		N/	A
Ε	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year		N/	'A
	Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on			
	line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts			0.
r	Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year			0.

Schedule A (Form 990 or 990-EZ) 2007

	Reason for Non-Private Foundation S	Status (See pages 41	arough 8 of the Instructio	ns.)	,	
rtify that	the organization is not a private foundation because it is: (	Please check only ONE a	applicable box.)			
	A church, convention of churches, or association of cl	hurches. Section 170(b)(	1)(A)(i).			
	A school, Section 170(b)(1)(A)(ii), (Also complete Par	t V.)				
	A hospital or a cooperative hospital service organization	on, Section 170(b)(1)(A)(	iii).			
	A federal, state, or local government or governmental	unit. Section 170(b)(1)(A	i)(v),			
	A medical research organization operated in conjuncti	on with a hospital. Sectio	n 170(b)(1)(A)(iii). E <b>nter t</b>	he hospital's	name, city,	
	and state 🕨			<u>-</u>		
	An organization operated for the benefit of a college of	r university owned or ope	rated by a governmental i	unit. Section 1	170(b)(1)(A)(iv)	
	(Also complete the Support Schedule in Part IV-A.)					
X	An organization that normally receives a substantial p	art of its support from a	governmental unit or from	the general p	oublic.	
	Section 170(b)(1)(A)(vi). (Also complete the Support	Schedule in Part IV-A.)				
	A community trust. Section 170(b)(1)(A)(vi). (Also co	mplete the Support Sche	dule in Part IV-A.)			
	An organization that normally receives; (1) more than					
	receipts from activities related to its charitable, etc., fu					
	its support from gross investment income and unrelat				ses acquired	
	by the organization after June 30, 1975. See section 5	ous(a)(z). (Also complet	e the Support Schedute ii	i rail iv <del>-</del> A.)		
	An organization that is not controlled by any disqualifi	ed persons (other than fo	oundation managers) and	otherwise me	ets the requiren	nents of section
	509(a)(3). Check the box that describes the type of su	pporting organization:				
	Type I Type II	Type III-Fi	inctionally Integrated		Type III-D	ther
			****			
	Provide the following information a	bout the supported orga	nizations. (See page 8 of	the instruction	ons.)	
	(a)	(b)	(c)	(d)	i i	(e)
	Name(s) of supported organization(s)	Employer identification	Type of organization (described in lines		pported	Amount of
		number (EIN)	5 through 12 above	the sup	on listed in porting	support
		' '	or IRC section)	organiz	ration's	
				governing	documents?	
				Yes	No	
		ļ				

Pé	Support Schedule (Co	omplete only if you che worksheet in the instr	cked a box on line 10, uctions for converting	.11, or 12.) <b>Use cash</b> from the accrual to the	method of account cash method of a	nting. accounting.
begi	indar year (or fiscal year inning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	14334027.	13703599.	14369433.	1324660	3. 55,653,662.
15	Membership fees received			_		
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	152,805.	107,527.	170,551.	126,83	3. 557,716.
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
19	Net income from unrelated business activities not included in line 18					
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21	The value of services or facilities furnished to the organization by a governmental unit without charge. On not include the value of services or facilities generally furnished to the public without charge.					
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	176,814.	225,545.	See Stateme 109,773.	nt 10 119,99	7. 632,129.
23	Total of lines 15 through 22	14663646.	14036671.	14649757.	1349343	
24	Line 23 minus line 17	14510841.	13929144.	14479206.	1336660	0. 56,285,791.
25	Enter 1% of line 23	146,636.	140,367.	146,498.	134,93	
25	Organizations described on lines 10	or 11: a Enter 2% of a	imount in column (e), line	24	▶ 21	5a 1,125,716.
b	Prepare a list for your records to sho	w the name of and amour	nt contributed by each pe	rson (other than a govern	nmental	
	unit or publicly supported organization	on) whose total gifts for 2	003 through 2006 exceed	led the amount shown in	line 26a.	
	Do not file this list with your return.			* * *	<b>⊢</b>	5b 0.
C	Total support for section 509(a)(1) to				, , , , , , , , , , , , , , , , , , ,	6c 56,285,791.
d	Add: Amounts from column (e) for li	nes: 18	19			500 100
		22 6	32,129. 26b			632,129.
9	Public support (line 26c minus line 2	6d total)			21	55,653,662.
	Public support percentage (line 26e					
27	Organizations described on line 12: records to show the name of, and tot such amounts for each year: (2006)	al amounts received in eaN/A	ch year from, each "disqu	valified person." Do not fil	le this list with your I	
b						
	and amount received for each year, the described in lines 5 through 11b, as the larger amount described in (1) or (2006)	hat was more than the lar well as individuals.) <b>Do</b> no (2), enter the sum of the (2005)	ger of (1) the amount on at file this list with your r se differences (the excess (26	line 25 for the year or (2) elurn. After computing to s amounts) for each year: (004)	\$5,000. (Include in the difference between N/A (2003)	the list organizations
C	Add: Amounts from column (e) for li	nes: 15	<del></del>	16		NT / TA
ه.	1/	20	d line 27h total	21		7c N/A 7d N/A
d	Add: Line 27a total  Public support (line 27c total minus )	ine 27d total)				7d N/A 7e N/A
e f	Total support for section 509(a)(2) to				N/A	IV/A
,	Public support percentage (line 27e					7g N/A %
	Investment income percentage (line					7h N/A %
28	Unusual Grants: For an organization de show, for each year, the name of the co	escribed in line 10, 11, or ontributor, the date and ar	12 that received any unus mount of the grant, and a	sual grants during 2003 t brief description of the n	hrough 2006, prepar ature of the grant. Do	
İ	return. Do not include these grants in f		One	,	•	

723131 12-27-07

If you answered "Yes" to either 34a or b, please explain using an attached statement.

1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation

Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50,

Private School Questionnaire (See page 9 of the instructions.) Part V (To be completed ONLY by schools that checked the box on line 6 in Part IV) Yes No Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing 29 29 instrument, or in a resolution of its governing body? 30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 30 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of 31 solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? 31 If "Yes," please describe; if "No," please explain, (If you need more space, attach a separate statement.) Does the organization maintain the following: Records indicating the racial composition of the student body, faculty, and administrative staff? 32a Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 32c d Copies of all material used by the organization or on its behalf to solicit contributions? 32d If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: a Students' rights or privileges? 33a Admissions policies? 33b Employment of faculty or administrative staff? Scholarships or other financial assistance? 33de Educational policies? .... Use of facilities? 33f Athletic programs? 33g Other extracurricular activities? 33h If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement ) 34 a Does the organization receive any financial aid or assistance from a governmental agency? 34a Has the organization's right to such aid ever been revoked or suspended? 34b

Schedule A (Form 990 or 990-EZ) 2007

35

		Expenditures by Ele ed ONLY by an eligible organi	_	s (See pag	ge 11 o	f the instructions.)		-0554941 Page 6 N/A
Chec		ation belongs to an affiliated (		b if v	vou che	cked "a" and "limite	d control*	provisions apply.
<u>,01100</u>	Li	imits on Lobbying E	xpenditures	<u> </u>		(a) Affiliated gro totals		(b) To be completed for all electing organizations
	(The ter	rm "expenditures" means amo	unts paid or incurred.)			N/A		occomy organizations
26 .	Tatal labbuine avasedituras i	to influence public opinion (gi	ranger of a labburion		36	N/A		
		to influence a legislative body			37			-
		(add lines 36 and 37)		•	38			
	Other exempt purpose expen			•	39			
		ditures (add lines 38 and 39)			40			
		t. Enter the amount from the f				<del>ran i garar ng garaga 19, 111 i</del>		<del>,</del>
I	If the amount on line 40 is -	The lobbyin	g nontaxable amount is -					
Ņ	Not over \$500,000	20% of the am	ount on line 40					
C	Over \$500,000 but not over \$1,000	0,000 \$100,000 plus	15% of the excess over \$500,000					
			10% of the excess over \$1,000,000		41			
		_	5% of the excess over \$1,500,000				İ	
	Over \$17,000,000		to the second		40			
	Grassroots nontaxable amou Subtract line 42 from line 36		nan line 36	8.8	42			-
			nan line 38		44			-
77	oubtile time at mornimic oo	, Entor O mano il iginolo a	121) 1110 00 .,			······································		
(	Caulion: If there is an amo	ount on either line 43 or lin	ne 44, you must file Form 47	720.				
		(-)	· · · -			ar Averaging Perio		N/A
fisca	ndar year (or I year beginning in)	(a) 2007	(b) 2006	(c) 2005		(d 200		(e) Total
	Lobbying nontaxable							
	amount					l l		0
	(150% of line 45(e))	1	1			***		0.
		-	i					
47 1	Total lobbying							
	Total lobbying expenditures						Addanistant de de de de de de de de de de de de de	0.
								0.
48 (	expenditures Grassroots nontaxable amount							0.
48 (	expenditures Grassroots nontaxable amount Grassroots ceiling amount			*****				0.
48 (	expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e))							0.
48 ( 49 ( 50 (	expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e)) Grassroots lobbying							0.
48 ( 49 ( 50 (	expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e)) Grassroots lobbying expenditures		ting Public Charities					0.
48 ( 49 ( 50 (	expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e)) Grassroots lobbying expenditures TVIB Lobbying	Activity by Nonelec	ting Public Charities not complete Part VI-A) (See p		he instr	uctions.)		0. 0. 0. 0. 0.
48 ( 49 ( 50 (	expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  rt VI-B Lobbying (For reporting of	Activity by Nonelec		age 14 of th		t to	ne No	0. 0. 0. 0. N/A
48 (49 (45 (45 (45 (45 (45 (45 (45 (45 (45 (45	expenditures  Grassroots nontaxable amount  Grassroots ceiling amount (150% of line 48(e))  Grassroots lobbying expenditures  of VI-B Lobbying (For reporting of the year, did the organizatence public opinion on a legis	Activity by Nonelectonly by organizations that didion attempt to influence nationalize the matter or referendum,	not complete Part VI-A) (See p	age 14 of th		t to	es No	0. 0. 0.
48 (49 (45 (45 (45 (45 (45 (45 (45 (45 (45 (45	expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 48(e)) Grassroots lobbying expenditures (For reporting of the year, did the organizate ence public opinion on a legis Volunteers	Activity by Nonelectonly by organizations that did ion attempt to influence nationalities to the matter or referendum,	not complete Part VI-A) (See p	page 14 of the cluding any		t to	es No	0. 0. 0. 0. N/A
48 ( 49 ( 50 ( Parininflue a \	expenditures  Grassroots nontaxable amount  Grassroots ceiling amount  (150% of line 48(e))  Grassroots lobbying expenditures  T. VI-B Lobbying (For reporting of the year, did the organizatence public opinion on a legis	Activity by Nonelectonly by organizations that didion attempt to influence nationalizative matter or referendum, include compensation in expensionalizative.	not complete Part VI-A) (See p	page 14 of the cluding any		t to	es No	0. 0. 0. 0. N/A
48 ( 49 ( 50 ( Parininflue a \	Expenditures  Grassroots nontaxable amount  Grassroots ceiling amount  (150% of line 48(e))  Grassroots lobbying expenditures  T. VI-B Lobbying (For reporting of the year, did the organizate ence public opinion on a legis	Activity by Nonelectonly by organizations that didion attempt to influence nationalizative matter or referendum, include compensation in expension	not complete Part VI-A) (See p	page 14 of the cluding any		t to	es No	0. 0. 0. 0. N/A
48 ( 49 ( 50 ( 50 d) Durin influe a \ \ b F C M	expenditures  Grassroots nontaxable amount  Grassroots ceiling amount  (150% of line 48(e))  Grassroots lobbying expenditures  Tt VI-B Lobbying a (For reporting of the year, did the organizate ence public opinion on a legisty of the verse of the verse open the verse open the verse opinion on a legisty of the verse open the verse opinion on a legisty of the verse opinion on a legisty opini	Activity by Nonelectonly by organizations that didion attempt to influence national slative matter or referendum, include compensation in expentors, or the public	not complete Part VI-A) (See p	page 14 of the cluding any		t to	es No	0. 0. 0. 0. N/A
48 ( 49 ( 50 ( 50 c Parininflue a \ b F c M e F	expenditures  Grassroots nontaxable  amount  Grassroots ceiling amount  (150% of line 48(e))  Grassroots lobbying  expenditures  I Lobbying  (For reporting of the year, did the organizate ence public opinion on a legisty of the properties of the public opinion on a legisty of the year opinion on a legisty opinion on a legisty of the year opinion on a legisty opinion on a legisty opinion on a legisty opinion on a legisty opinion on a legisty opinion on a legisty opinion on a legisty opinion on a legisty opinion on a legisty opinion on a legisty opinion on a legisty opinion on a legisty opinion on a legisty opinion on a legisty opinion on a legisty opinion on a legisty opinion on a legi	Activity by Nonelectonly by organizations that didion attempt to influence national slative matter or referendum, aclude compensation in expentors, or the public broadcast statements	not complete Part VI-A) (See prinal, state or local legislation, in through the use of:  nses reported on lines a through	page 14 of the cluding any		t to	es No	0. 0. 0. 0. N/A
48 (0 49 (0 50 (0 to the second secon	expenditures  Grassroots nontaxable  amount  Grassroots ceiling amount  (150% of line 48(e))  Grassroots lobbying  expenditures  (For reporting of the year, did the organizate ence public opinion on a legisty of the properties of the public advertisements  Mailings to members, legislate of the organizations of the organiza	Activity by Nonelectonly by organizations that didion attempt to influence national slative matter or referendum, include compensation in expensions, or the public broadcast statements of or lobbying purposes	not complete Part VI-A) (See p	oage 14 of the cluding any		t to	es No	0. 0. 0. 0. N/A
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Par		garding Transfers To an zations (See page 14 of the inst		d Relationships With Noncharita	ble		
 51		irectly or indirectly engage in any of		er organization described in section			
	. 2 3	section 501(c)(3) organizations) or		5			
а		ganization to a noncharitable exemp		•	ſ	Yes	No
			<del>-</del>		51a(i)		Х
					a(ii)		Х
b	Other transactions:			,			
-		ts with a noncharitable exempt orga	anization		b(i)		Х
	* -	noncharitable exempt organization			b(ii)		Х
		ent, or other assets			b(iii)	-	Х
		ents			b(iv)		Х
					b(v)		Х
					b(vi)		X
r					C		X
6				always show the fair market value of the			- 1
d		e is Tes, complete the following so given by the reporting organization					
	•	rent, show in column (d) the value (	•	•	1	N/A	
			of the goods, other assets, i			N/A	
(a) Line i		(c) Name of noncharitable ex	xempt organization	(d) Description of transfers, transactions, and sh	naring arı	rangen	nents
							-
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	Code (other than section 501(c If "Yes," complete the following	)(3)) or in section 527?	···· ··· · · · · · · · · · · · · · · ·	ganizations described in section 501(c) of the	Yes	<u>X</u>	No
	(a Name of or	) ganization	(b) Type of organization	(c) Description of relationshi	р		
			1				
	W-1						
		· · · · · · · · · · · · · · · · · · ·					
723152 12-27-1	07	· · · · · · · · · · · · · · · · · · ·		Schedule A (Form	990 or 9	990-E2	2) 200

Form 990	Other Changes in Net Assets or Fund Balances	Statement 1
Description		Amount
To adjust bu Prior Period	ilding and equipment to actual as of 6/30/07 Adjustments	116,441. 5,570.
Total to For	m 990, Part I, line 20	122,011.
Form 990	Statement of Program Service Accomplishments	Statement 2

#### Description of Program Service One

During the 2007-2008 school year, Community Action provided comprehensive early childhood programs preparing children for educational success in school. In total, 1,081 children participated in Head Start in 2007-2008. This is a 37% increase over the previous year. 462 children transitioned to kindergarten. Sixty homeless children participated in Head Start. Additional outcomes: 20% of children were diagnosed with disabilities; 6% of children received medical treatment; 19% of children received dental treatment; and 10% of children received mental health treatment. 31 children were treated for hearing and vision difficulties; 12 children were treated for asthma; and 14 children were treated for obesity. 91% of Head Start children were enrolled in a health insurance plan by the end of the school year. Developmentally, students ages 3 to 5 improved exponentially in eight core areas from the beginning of the school year to the close of the school year; creative arts, 41% improvement; approaches to learning, 40% improvement; social/emotional development, 37% improvement; physical health, 34% improvement; language, 36% improvement; literacy, 39% improvement; math, 41% improvement; science, 41% improvement; and 92% of students could identify their printed name. 27% of Head Start families participated in parenting classes; 13% of families received assistance with housing; and 24% of families received financial help to obtain education or job training. Surveys revealed that 94% of parents felt their child's needs were being fully met; 88% felt that family needs were being fully met; and 91% were satisfied with the overall quality of the program.

	Grants	Expenses
To Form 990, Part III, line a		7,222,237.

Form 990 Statement of Program Service Accomplishments

Statement

3

#### Description of Program Service Two

Family & Community Resources: Through programs focused on addressing the causes and conditions of poverty, Community Action was able to provide families with access to the resources necessary to meet immediate needs, alleviate suffering, and promote self-sufficiency. In 2007-2008, 33,487 individuals benefitted from Community Action's leadership in responding to requests for assistance from 14,534 households. Additional outcomes: 1,336 parents were able to go to work or school because they could access quality, affordable child care. The quality of local child care resources improved as 1,553 providers participated in 12,946 hours of training in early childhood development; 96% of providers reported increased knowledge. 60 child care sites completed comprehensive on-site literacy training. Community Action also supported an employer child care network of 29 providers. With access to appropriate prenatal services, 608 low-income pregnant women were better equipped for a healthy birth. 52 at-risk pregnant women received comprehensive services to enable healthy delivery and 100% gave birth to healthy babies. In addition, parenting support to prevent child abuse and neglect was provided for 111 at-risk new parents and 15 families participated in the "Make Parenting a Pleasure" program to improve parenting skills. By promoting housing stability and sheltering families in times of crisis, 201 homeless children and parents had the chance to get back o their feet by staying at Community Action's Family Shelter for a total of 5,928 bed nights; 531 individuals received comprehensive case management support; emergency food boxes were provided to 371 families; 203 children were provided with advocacy and support to ensure school success; and the "Bridges to Housing" program provided permanent housing to 15 high resource using families. With bill paying assistance for heat and electricity, 8,308 families stayed warm and safe in their homes; 478 families avoided evictions with rent assistance provided by Community Action. 54% of households receiving rental assistance also received energy assistance to further stabilize their families. 224 families had lower fuel costs and warmer, safer homes because Community Action provided comprehensive weatherization services; and 339 homes were made more energy efficient through base load measures. 1,084 individuals participated in energy education workshops, which provided energy saving information and tools for reducing energy costs. Community Action is the Washington County partner for 211 INFO, a four county collaboration which provided 14,631 callers with information and referral to critical health and human service needs. Those seeking information or assistance visited the program website 13,003 times, where they found listings for 1,251 resources available to Washington County residents. 18 individuals received comprehensive case management support. 233 partners from the health and human services network attended information and referral breakfast meetings; 97% reported learning about new resources.

	Grants	Expenses
To Form 990, Part III, line b		7,261,572.

Form 990 Statement of Program Service Accomplishments Statement 4

#### Description of Program Service Four

Resource Development: Community Action continues to serve as a leader in educating and engaging the community about issues of poverty and the impacts of poverty on Washington County and its residents. Community Action interacts with more than 125 local partners to identify critical issues, develop effective long-term solutions and ensure the delivery of critical serices to those with the greatest need. Community Action staff provide insight and leadership by serving as board members or on committees with a number of other agencies in related fields. A variety of publications are distributed by Community Action, including more than 10,000 newsletters mailed three times per year, to raise awareness of and support for programs and services. Community Action maintains a comprehensive website that provides up-to-date information on poverty issues and statistics. 830 volunteers, providing 9,718 hours of service, were placed throughout the agency to support program delivery.

			Grants	Expenses	
To Form 990	), Part III,	line d			
Form 990	Statement o	f Organization's Prima Part III	ry Exempt Purpose	Statement	<del></del> 5

#### Explanation

In partnership with the community, Community Action Organization assists low-income people in Washington County to achieve self-determination.

Form 990 Go	vernment Sec	Statement 6	6		
Description	Cost/FMV	U.S. Government	State and Local Gov't	Total Gov't Securities	
US Savings Bond	FMV	350.		350.	•
Total to Form 990, line 54a,	Col B	350.		350.	- -

Form 990	Mortgages Payable	Statement	
Description		Balance Due	
Columbia Community Bank		1,409,204.	
Total included on Form 990,	Part IV, line 64b, Column B	1,409,204.	

Form 990	Other Not	tes ar	nd Loans Pa	yable	Statement	8	
Lender's N	Name	Term:	s of F	Repayment			
Columbia C	Community Ba	ank On De	emand				
Date of Note		Origina Loan Amou		Interest Rate			
02/05/07	03/31/09	400,	000.	6.00%			
Security F	Provided by	Borrower	Purp	ose of Loa	n		
A/R, Inver	ntory, Equip	oment	Line	e of Credit			
Relationsh	nip of Lende	er					
Bank Description	on of Consid	deration			FMV of Consideration	Balance Due	e
					0.		0.

	Current Officers, es and Key Employee		State	ement 9
Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	Expense Account
Jerralynn Ness 1001 SW Baseline St. Hillsboro, OR 97123	Executive Dire	ctor 104,850.	1,200.	0.
Kevin Aguirre 1001 SW Baseline St. Hillsboro, OR 97123	Chair 0.00	0.	0.	0.
Ron Sarazin 1001 SW Baseline St. Hillsboro, OR 97123	Vice Chair 0.00	0.	0.	0.
Leroy Bentley 1001 SW Baseline St. Hillsboro, OR 97123	Treasurer 0.00	0.	0.	0.
Dana Galaxy 1001 SW Baseline St. Hillsboro, OR 97123	Secretary 0.00	0.	0.	0.
Leslea Smith 1001 SW Baseline St. Hillsboro, OR 97123	At-Large 0.00	0.	0.	0.
Ralph Brown 1001 SW Baseline St. Hillsboro, OR 97123	At-Large 0.00	0.	0.	0.
Cathy Stanton 1001 SW Baseline St. Hillsboro, OR 97123	BOD 0.00	0.	0.	0.
Christy Barker 1001 SW Baseline St. Hillsboro, OR 97123	BOD 0.00	0.	0.	0.
Craig Kinnie 1001 SW Baseline St. Hillsboro, OR 97123	BOD 0.00	0.	0.	0.
David Wu 1001 SW Baseline St. Hillsboro, OR 97123	BOD 0.00	0.	0.	0.

Community Action Organization				93-	-0554941
David M. Powers 1001 SW Baseline St. Hillsboro, OR 97123	BOD	0.00	0.	0.	0.
Dick Schouten 1001 SW Baseline St. Hillsboro, OR 97123	BOD	0.00	0.	0.	0.
Dick Stenson 1001 SW Baseline St. Hillsboro, OR 97123	BOD	0.00	0.	0.	0.
Lou Ogden 1001 SW Baseline St. Hillsboro, OR 97123	BOD	0.00	0.	0.	0.
Lynn Baker 1001 SW Baseline St. Hillsboro, OR 97123	BOD	0.00	0.	0.	0.
Maria Lopez 1001 SW Baseline St. Hillsboro, OR 97123	BOD	0.00	0.	0.	0.
Monique Beikman 1001 SW Baseline St. Hillsboro, OR 97123	BOD	0.00	0.	0.	0.
Rob Drake 1001 SW Baseline St. Hillsboro, OR 97123	BOD	0.00	0.	0.	0.
Scott Gardner 1001 SW Baseline St. Hillsboro, OR 97123	BOD	0.00	0.	0.	0.
Tom Hughes 1001 SW Baseline St. Hillsboro, OR 97123	BOD	0.00	0.	0.	0.
Wendy N. Watson 1001 SW Baseline St. Hillsboro, OR 97123	BOD	0.00	0.	0.	0.
Totals Included on Form 990, Par	t V-A		104,850.	1,200.	0.

Schedule A	Other Inc	ome	Statement		
Description	2006 Amount	2005 Amount	2004 Amount	2003 Amount	
Miscellaneous	176,814.	225,545.	109,773.	119,997.	
Total to Schedule A, line 22	176,814.	225,545.	109,773.	119,997.	

### Community Action Organization Form 990 93-0554941 2007

## Part IV Line 57 - Land, Buildings, & Equipment

				Accum.	Deprec.
Asset	Method	Life	Cost	Deprec.	Expense
Land			316,192		
Buildings	S/L	40 YRS	2,629,768	895,785	66,221
Vehicles		7 YRS	257,615	142,966	12,512
Equipment	S/L	3 - 5 YRS	191,011	116,188	13,028
Total			3,394,586	1,154,939	91,761
Amortization	n Loan Fee	S			1,458
				-	93,219
				5	

Form **8868** (Rev. April 2008)

(MeV. April 2008)
Department of the Treasury
Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

			<del></del>
• If you	are filing for an Automatic 3-Month Extension, complete only Part I and check this box are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this complete Part II unless you have already been granted an automatic 3-month extension on a previously file.	•	▶ X m 8868.
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		
A corpor Part I on	ation required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete	
	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an ome tax returns.	exten	sion of time
noted be (not auto you mus	ic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension low (8 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic matic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or cort submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing gov/efile and click on e-file for Charities & Nonprofits.	cally if nsolida	(1) you want the additional ited Form 990-T. Instead,
Type or print	Name of Exempt Organization	Empl	oyer identification number
print	Community Action Organization	9	3-0554941
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions.  1001 SW Baseline St.		
Check type of return to be filed (file a separate application for each return):           X         Form 990         Form 990-T (corporation)         Form 4720           Form 990-BL         Form 990-T (sec. 401(a) or 408(a) trust)         Form 5227           Form 990-EZ         Form 990-T (trust other than above)         Form 6069           Form 990-PF         Form 1041-A         Form 8870			
Telep  If the	ooks are in the care of ▶ John Russell hone No. ▶ 503-639-3245  organization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If thi If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all		
1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until February 15, 2009 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:  ▶ □ calendar year or ▶ ☒ tax year beginning JUL 1, 2007 , and ending JUN 30, 2008 .			
2 lf t	his tax year is for less than 12 months, check reason: Initial return Final return		Change in accounting period
	his application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nrefundable credits. See instructions.	3a	\$
b If t	his application is for Form 990-PF or 990-T, enter any refundable credits and estimated		
	payments made. Include any prior year overpayment allowed as a credit.	3ь	\$
	lance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,		
	posit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). e instructions.	3c	s N/A
	If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form		
	For Privacy Act and Paperwork Reduction Act Notice, see Instructions.		Form <b>8868</b> (Rev. 4-2008)
LIA I	or I have you and I aperation includes on you have a see managed as		TOTAL GOOD (1169. T 2000)