Department of the Treasury Internal Revenue Service

EXTENDED TO NOVEMBER 15, 2019 2949328501408

Return of Organization Exempt From Income Tax

C&E

904

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

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

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Form **990** (2018)

	A F	or the 2	018 calendar year, or tax year beginning	and	ending		
	a	heck if oplicable	C Name of organization BETTER BUSINESS BUREAU NO.	RTHWEST		D Employer identif	ication number
	X	Address change	& THE PACIFIC				
	X	Name change	Doing business as			91-1	614623
		Initial return Final return/	Number and street (or P.O. box if mail is not delivered 12639 W EXPLORER DR.		Room/suite 200	E Telephone numb 206 -	er -431-2227
dh		termin- ated	City or town, state or province, country, and ZIP or	G Gross receipts \$	15,617,232.		
		Amended return	BOISE, ID 83713			H(a) Is this a group	return
. O		Applica- tion	F Name and address of principal officer TYLER	ANDREW		for subordinate	s? Yes X No
		pending	SAME AS C ABOVE	H(b) Are all subordinates	included? Yes No		
				nsert no.) 4947(a)(1)	or 🔲 527	If "No," attach	a list (see instructions)
			▶ WWW.THEBBB.ORG		<u> </u>	H(c) Group exempti	
			ganization: X Corporation Trust Associat	on Other	L Year	of formation 1919	M State of legal domicile: WA
	Ра		ummary	222	`	UE DAGTETAL	a vitagitov
	رو	1 Br	refly describe the organization's mission or most signif	ficant activities BBB	NW & T	HE PACIFIC	S MISSION
	and	_	S TO ADVANCE MARKETPLACE TRI			· ·	
	Governance		eck this box if the organization discontinue		sed of more		1 20
	્ટ્ર		imber of voting members of the governing body (Part \	•		<u> 3</u>	10
	⊸ ব		imber of independent voting members of the governing tal number of individuals employed in calendar year 20			5	151
	Activities		tal number of volunteers (estimate if necessary)	OTO (Fait V, line Za)		6	
	훒		tal unrelated business revenue from Part VIII, column ((C) line 12		78	506 505
	ĕ		et unrelated business taxable income from Form 990-T			71	_
						Prior Year	Current Year
		8 Cc	ontributions and grants (Part VIII, line 1h)			0.	
	Revenue		ogram service revenue (Part VIII, line 2g)			12,730,250.	15,207,995.
	eve		vestment income (Part VIII, column (A), lines 3, 4, and	7d): (ı 🗀	1,658.	
2019	۳		her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 1	NEW 1 V 1 1 / 1		318,893.	
			tal revenue - add lines 8 through 11 (must equal Part)			13,050,801.	15,559,521.
ANDER BROOKS 4		13 Gr	ants and similar amounts paid (Part IX, column(இ), line	68~13) 0 1 2019	<u> </u>	0.	0.
			nefits paid to or for members (Part IX, column (A) line	_	! <u> </u>	0.	
8	န္	15 Sa	laries, other compensation, employee benefits (Part()	(A), lines 5-10)	<u> </u>	8,479,096.	
2	šuš		ofessional fundraising fees (Part IX, column (A), line 11	e)	, <u> </u>	0.	0.
8	Š		tal fundraising expenses (Part IX, column (D), line 25)		<u> </u>	4 000 261	F 200 272
	۳		her expenses (Part IX, column (A), lines 11a-11d, 11f-2		<u> </u>	4,000,361.	
2			tal expenses Add lines 13-17 (must equal Part IX, colu	umn (A), line 25)	-	12,479,457.	
Ö			evenue less expenses Subtract line 18 from line 12			571,344.	
3804	ts or	00 Ta	tal accets (Dart V. line 16)		Ве	7,360,343	
σ	Assets A Balanc	20 To	tal assets (Part X, line 16) tal liabilities (Part X, line 26)			3,701,960.	
2	Eét E		et assets or fund balances Subtract line 21 from line 2	on.		3,658,383	
\sim	Pa		Signature Block	.0	<u>'</u>	0,000,000	1 0/2/2/2000
W	Unde	r penaltie	s of perjury, I declare that I have examined this return, includ	ding accompanying schedules	s and stateme	ents, and to the best of n	ny knowledge and belief, it is
(m)			and complete. Declaration of preparer (other than officer) is b				
₹0		N	(sules andre				
-	Sıgr	, ,	Signal e of officer			Date	
\searrow	Here	e	TYLER ANDREW, PRESIDENT A	ND CEO			
13		J	Type or print name and title				
7			** ' '	arer's signature	l l	Date Check	PTIN
· u	Paid	_		HOLMDAHL		7/03/19 sell-empl	pyed P00120599
3	Prep		rm's name PETERSON SULLIVAN L			Firm's EIN ▶	91-0605875
Ö	Use	Only F	rm's address 601 UNION ST, STE 2				2061 202 7777
_		41 125	SEATTLE, WA 98101-2			Phone no. (2	
(/)	IVIAV	ine IBS	discuss this return with the preparer shown above? (s	see instructions)			X Yes No

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

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	n 990 (2018) & THE PACIFIC	91-16146	523	Page 2
	rf III Statement of Program Service Accomplishments		_	
-	Check if Schedule O contains a response or note to any line in this Part III	_		X
1	Briefly describe the organization's mission			_
	BETTER BUSINESS BUREAU NORTHWEST & THE PACIFIC'S (BBB)	MISSION IS	S TO	
	ADVANCE MARKETPLACE TRUST. WE DO THIS BY REVIEWING BUSI			
	PROVIDING RATINGS AND BBB BUSINESS REVIEWS TO CONSUMERS			
	SPEECHES AND HOLDING OTHER EVENTS FOR CONSUMERS TO EDUC	ATE THEM,	AND	
2	Did the organization undertake any significant program services during the year which were not listed on the	_		
	prior Form 990 or 990-EZ?		Yes	X No
	If "Yes," describe these new services on Schedule O	_		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	.7	Yes	X No
	If "Yes," describe these changes on Schedule O			
4	Describe the organization's program service accomplishments for each of its three largest program services, a	is measured by exp	enses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ners, the total expe	nses, and	d
	revenue, if any, for each program service reported			
4a		venue \$)
	· · · · · · · · · · · · · · · · · · ·	RIVATE		
	ORGANIZATION, WITH THE GOAL OF MAINTAINING FAIR AND HON			
	DEALINGS BETWEEN CONSUMERS AND BUSINESS IN OUR COMMUNIT			
	THAN 10,000 ACCREDITED BUSINESSES. THE BBB PROMOTES ET			
	PRACTICES BY ISSUING REVIEWS ON BUSINESSES, INVESTIGATION OF THE PROPERTY OF T			· ,
	MEDIATING BUYER-SELLER DISPUTES, REPORTING ON CHARITABLE			
	ORGANIZATIONS, ISSUING ALERTS ABOUT SCHEMES AND FRAUDS,).I.TMG	<u> </u>
	INTELLIGENT BUYING THROUGH CONSUMER AND BUSINESS EDUCAT	TON.		
	•			
4b	(Code) (Expenses \$			
40	(Code) (Expenses 5 including grants or 5) (He	Zenue \$		
	· · · · · · · · · · · · · · · · · · ·			
4c	(Code) (Expenses \$ including grants of \$) (Re	venue \$)
		_		
				
4d	Other program services (Describe in Schedule O)			
	(Expenses \$ including grants of \$) (Revenue \$)		
<u>4e</u>	Total program service expenses ▶		r 00	<u> </u>

BETTER BUSINESS BUREAU NORTHWEST & THE PACIFIC

Form 990 (2018) & THI

91-1614623

Page 3

Part IV | Checklist of Required Schedules Yes No 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? Х If "Yes," complete Schedule A X 2 Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for Х 3 public office? If "Yes," complete Schedule C, Part I 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 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or Х similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C. Part III 5 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to Х provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Х 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." complete Х 8 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? X 9 If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent X endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X 11 a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, X 11a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total X assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX Х 11d X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses Х the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Х Schedule D. Parts XI and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? Х 12b If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Х Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 Х 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 Х 14b or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any 15 Х foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to 16 Х or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Х 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 18 Х 1c and 8a? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes." 19 Х 19 complete Schedule G, Part III Х 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 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

Form 990 (2018)

Form 990 (2018) & THE PACIFIC
Part IV Checklist of Required Schedules

Fai	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		<u>X</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23_	_X_	
24 a	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			v
	Schedule K If "No," go to line 25a	24a		<u>x</u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
انہ	any tax-exempt bonds? Did the exemptation act as an "on behalf of" request for bonds outstanding at any time during the year?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(a)(4), and 501(a)(4), and 501(a)(20) expensions. Did the organization engage in an excess benefit	24d		
20 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes."			
	complete Schedule L, Part II	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 entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			1
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		<u>X</u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u>X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			7.7
	contributions? If "Yes," complete Schedule M	_30_		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			v
00	If "Yes," complete Schedule N, Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			х
22	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
•	Part V. line 1	34	х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		_X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
Par				
	Check if Schedule O contains a response or note to any line in this Part V		-	
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 13			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		۱,,	
	(gambling) winnings to prize winners?	1c	Х	

Form 990 (2018)

	BETTER BUSINESS BUREAU NORTHWEST			_
	990 (2018) & THE PACIFIC 91-1614	<u>623</u>	P	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 151		l	اــــا
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	- 2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Х	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
74	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
	If "Yes," enter the name of the foreign country	76		 -
D				
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	 -	X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		^
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		\vdash
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			۱
	any contributions that were not tax deductible as charitable contributions?	6a	<u> </u>	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b	<u> </u>	L
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		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b_		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		· ····································
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		$\overline{}$
-	If the organization received a contribution of qualified intellectual property, and the organization file a Form 1098-C?	7 <u>4</u>		
_		- / / -		\vdash
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			<u>-</u>
_	sponsoring organization have excess business holdings at any time during the year?	8		 ,
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		ļ <u>,</u>
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12	ļ		1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)	 		
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			.
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the	<u> </u> -		'
	organization is licensed to issue qualified health plans			-
c	Enter the amount of reserves on hand	1	İ	'
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
_	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1-+1	t	†
15		15		x
	excess parachute payment(s) during the year? If "You " and patricular and file Form 4700. Schodule N.	15	 	
40	If "Yes," see instructions and file Form 4720, Schedule N			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	 -	X
	If "Yes," complete Form 4720, Schedule O	<u> </u>	. 000	(2018)
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BETTER BUSINESS BUREAU NORTHWEST

Form 990 (2018) & THE PACIFIC 91-1614623

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes | No 20 1a Enter the number of voting members of the governing body at the end of the tax year 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. 18 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee, or key employee? 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Х a The governing body? 8a X b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses in Schedule O Section B. Policies This Section B requests information about policies not required by the Internal Revenue Code Nο Yes 10a Did the organization have local chapters, branches, or affiliates? 10a 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 X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? <u>1</u>1a 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 Х 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c in Schedule O how this was done Х 13 13 Did the organization have a written whistleblower policy? Х 14 Did the organization have a written document retention and destruction policy? 14 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? X 15a a The organization's CEO, Executive Director, or top management official Х 15b Other officers or key employees of the organization 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 X taxable entity during the year? 16a 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ightharpoonup , MT , WY 17 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Another's website Own website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records HEATHER TUTTLE - 206-676-4194 12639 W EXPLORER DR., 200, BOISE ID 83713 Form 990 (2018) 832006 12-31-18

Form 990 (2018) Rart VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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 (Ď), (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 organizat (A)	(B)	l	11120			ipei	Jal	(D)	(E)	(F)
(A) Name and Title	Average			(C Pos	ر۔ ition	1		Reportable	(E) Reportable	(r) Estimated
reame and title	hours per		not cl , unte:	heck i	more	than o		compensation	compensation	amount of
	week		cer an					from	from related	other
	(list any	흥						the	organizations	compensation
	hours for	or dire				<u> </u>		organization	(W-2/1099-MISC)	from the
	related	stee	ruste		ىدە	beusa		(W·2/1099-MISC)		organization
	organizations	la fru	onal 1		ploye	5 8				and related
	below line)	Individual frustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) TYLER ANDREW	40.00	트	드	0	ž	포함	<u> </u>			
PRESIDENT/CEO	2.00	X		Х				362,726.	0.	55,932.
(2) JOHN MANOLIDES	2.00	-					<u> </u>	302,7201	•	33,332.
BOARD MEMBER	1.00	x						0.	0.	0.
(3) CASSIE BENSON	2.00	-				\vdash				
BOARD MEMBER	1.00	x						0.	· 0.	0.
(4) JACK ZURLINI	2.00		_				<u> </u>			
VICE CHAIR	1.00	х		Х				0.	0.	0.
(5) LON WILSON	2.00									
TREASURER	1.00	Х		Х				0.	0.	0.
(6) GREG MAYES	2.00									
BOARD MEMBER	1.00	Х						0.	0.	0.
(7) SCOTT MILLSAP	2.00									
BOARD MEMBER	1.00	Х						0.	0.	0.
(8) COLLEEN RUDIO	2.00									
CHAIR	1.00	Х		Х				0.	0.	0.
(9) CHRIS WASHKO	2.00						ŀ			
SECRETARY	1.00	Х		Х				0.	0.	0.
(10) JIM BURBRIDGE	2.00						ŀ			
BOARD MEMBER	1.00	Х						0.	0.	0.
(11) DAMOND WATKINS	2.00									
BOARD MEMBER	1.00	Х						0.	0.	0.
(12) ARI ZABELL	2.00									
BOARD MEMBER	1.00	Х						0.	0.	0.
(13) ELAINE DAMSCHEN	2.00									
BOARD MEMBER	1.00	Х	ļ				<u> </u>	0.	0.	0.
(14) KYLE CHOWN	2.00	 								
BOARD MEMBER	1.00	X	<u> </u>			<u> </u>	<u> </u>	0.	0.	0.
(15) COLBY TAKEDA	2.00									
BOARD MEMBER		Х	igspace			_	-	0.	0.	0.
(16) MARIA BORJE-BONKOWSKI	2.00							_		_
BOARD MEMBER		Х				_	_	0.	0.	0.
(17) NISSA MCMILLAN	2.00								_	_
BOARD MEMBER 832007 12-31-18	1.00	Х						0.	0.	0 . Form 990 (2018)

Form **990** (2018)

& THE PACIFIC

Part VII Section A. Officers, Directors, Trus		nlov	299	anc	Hid	nhes	t C	compensated Employee	S (continued)			i age o
(A)	(B)	 	ccs,))	giica	<u>, </u>	(D)	(E)	Т	(F)
Name and title	Average			Pos	ition			Reportable	Reportable		Estima	
realite and title	hours per		not c					compensation	compensation	ľ	amou	
	week		cer an					from	from related		oth	er
	(list any	ē						the	organizations	(compen	sation
	hours for	a dire	。			pa		organization	(W-2/1099-MISC)	İ	from	the
	related	slee (l se			Suac		(W-2/1099-MISC)			organiz	
	organizations below	altru	l le		loyee	E CO					and re	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			1	organiz	ations
(18) ROBYN FORBES	2.00	=	트	ō	<u>s</u>	¥ 5	<u> </u>			╁		
BOARD MEMBER	1.00	x						0.	0			0.
(19) RON PRICE	2.00						Г					
BOARD MEMBER	1.00	Х				L.,		0.	0			0.
(20) SCOTT WILLIAMS	2.00											
BOARD MEMBER	1.00	Х				ļ	_	0.	0	:		0.
(21) MATT EHRLICHMAN	2.00											•
BOARD MEMBER	1.00	Х			┝	├	┞	0.	0	+		0.
(22) HEATHER TUTTLE SVP	2.00	ł		x				214,699.	0		39	432.
(23) DAVID QUINLAN	40.00	\vdash		43	 		\vdash	211,055.		•	<u> </u>	1021
VP	2.00	1		x	ļ	1		124,825.	0		19,	886.
(24) TONY BARLOW	40.00									\top		
VP	2.00			Х				207,575.	0		31,	<u>559.</u>
(25) DALE DIXON	40.00		1						_			
CIO	2.00	_	_	Х				156,319.	. 0	•	47,	<u>571.</u>
(26) JULIE WITT	2.00	1		x				119,800.	0		10	585.
The Sub-hand	2.00	İ		Δ.	<u> </u>	<u> </u>	_	1,185,944.	0			965.
1b Sub-total	II Cooken A							775,896.	0			830.
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 1,961,840.									297,795.			
Total number of individuals (including but including	not limited to th	ose	liste	d ab	ove) wh	o re		.,,			<u> </u>
compensation from the organization												11
										_	Ye	s No
3 Did the organization list any former officer	, director, or tru	ıste	e, ke	y en	olqn	yee,	or	highest compensated er	nployee on	-1 70 -000		
line 1a? If "Yes," complete Schedule J for					•					-	3	X
4 For any individual listed on line 1a, is the s	· ·		-					•	ne organization		X	
and related organizations greater than \$15Did any person listed on line 1a receive or									fual for corvices	-	4 X	
rendered to the organization? If "Yes," cor					-		Jiat	ed organization of marvic	darior services		5	X
Section B. Independent Contractors	norte denedun	- <u>U. I.</u>	<u> </u>		<i>J</i> C/3	<i>U</i> 11		-				
Complete this table for your five highest co	ompensated ind	lepe	nde	nt co	ontra	acto	rs t	hat received more than \$	100,000 of compen	satio	n from	
the organization Report compensation for	the calendar ye	ear e	endir	ng w	ith c	or wi	thır	the organization's tax y	ear			
(A)				_				(B)		^	(C)	
Name and business	address	N	INC	<u> </u>	-			Description of s	ervices		mpensa	
						_				_		
	-											
2 Total number of independent contractors (Including but n	ot lir	nite:	1 to	thos	و ا د	ted	above) who received me	ore than		_	
\$100,000 of compensation from the organ	-	J. III			(_						

Form 990 & THE PAC	CIFIC								91-161	4623
Part'VII Section A. Officers, Directors, Tru		nplo	yee			ligh	est (ees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	/-1	Position (check all the					Reportable	Reportable	Estimated
	hours per	(CI	Teck	all	ınat	app	iy)	compensation from	compensation from related	amount of other
	week					93		the	organizations	compensation
	(list any	ector				mploy		organization	(W-2/1099-MISC)	from the
	hours for	or dire	بو			ated e		(W-2/1099-MISC)		organization
	related	ustee	Iruste		စ္က	bens				and related
	organizations below	lual tri	Ironal		nploye	1001	L			organizations
	line)	Individual trustee or director	Institutional Irustee	Officer	Key employee	Highest compensated employee	Former			
(27) TIMOTHY BRYAN	40.00			Ë	_	-	<u> </u>			
BUSINESS DEV REP	10.00					x		161,911.	0.	19,391.
(28) ELIZABETH STEELEY	40.00					-		202/3220		23,0321
BUSINESS DEV REP						х		141,731.	0.	13,214.
(29) JOSIAH HANSON	40.00							,	<u> </u>	,
BUSINESS DEV MGR						х		107,155.	0.	15,270.
(30) MICHELLE BALLARD	40.00					Ī		.,==•		,
PROGRAMS CONSULTANT						X		174,085.	, 0.	19,134.
(31) LILLAS JEFFERY	40.00									
BUSINESS DEV REP						X		191,014.	0.	16,821.
									-	
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						L				
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							L			
										00 000
Total to Part VII, Section A, line 1c								775,896.	<u> </u>	83,830.

Page 9

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax under (B) (C) Related or Unrelated Total revenue exempt function business revenue revenue 1 a Federated campaigns 1b b Membership,dues c Fundraising events 1c d Related organizations <u>1</u>d e Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f Business Code 2 a MEMBERSHIP FEES 900001 13,737,979 13,737,979 WEBSITE ENHANCEMENT 541800 721,895 582,741 139,154 : 8,923 MEMBER PROGRAM REVENUE 900001 400,472 391,549 541800 347,649 347 649 ADVERTISING REVENUE f All other program service revenue 15,207,995. Total. Add lines 2a-2f Investment income (including dividends, interest, and 3 5,030 other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 100,243, 6 a Gross rents 57,711. b Less rental expenses 42,532 c Rental income or (loss) 31,009 d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Revenue including \$ contributions reported on line 1c) See Part IV, line 18 Other b Less direct expenses . c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Business Code PAYMENT PLAN FEES 900099 296,225 296,225 .11 a b NON-DUES REVENUE 900099 6,197 6,197 OTHER SERVICE FEES 900099 1,027 900099 515 d All other revenue 303,964. Total. Add lines 11a-11d 15,559,521 320 Total revenue See instructions

Form 990 (2018) & THE PACIFIC Part X Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns All oth	er organizations must coi	nplete column (A)	
	Check if Schedule O contains a respon	nse or note to any line in			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				HANDARA MARKA
_	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.				的 外域中 等的。
4	Benefits paid to or for members				Par A-mara
5	Compensation of current officers, directors,			_	
	trustees, and key employees	1,399,910.			
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	6,604,368.		,	
8	Pension plan accruals and contributions (include			,	
•	section 401(k) and 403(b) employer contributions)	203,097.			
9	Other employee benefits	1,120,559.	• • • • • • • • • • • • • • • • • • • •		, , , , , , , , , , , , , , , , , , ,
10	Payroll taxes	672,883.			
11	Fees for services (non-employees)		1		
а	Management				v.
b	Legal'	31,919.			
С	Accounting	78;453.			
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17			HEALTHANDE	
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	68,508.			
12	Advertising and promotion	649,699.			
13	Office expenses	503,837.			
14	Information technology				
15	Royalties				
16	Occupancy	967,900.	•	*	
17	Travel	140,842.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	212,324.		5	
20	Interest	160,500.			
21	Payments to affiliates	,			
22	Depreciation, depletion, and amortization	421,631.			
23	Insurance	111,120.	المراجع المراج		ا خام در المال
24	Other expenses: Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A)				
_	amount, list line 24e expenses on Schedule 0.) DUES AND SUBSCRIPTIONS	701,924.	The state of t	The second with the second sec	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a	MEMBERSHIP PROGRAMS	535,251.		·	
a	RESEARCH AND DEVELOPMEN	335,345.	 		
C C	HIRING, TRAINING, & DEV	200,667.	· -	-	
a	All other expenses	279,452.	, -		
е 25	Total functional expenses Add lines 1 through 24e	15,400,189.			
<u>25</u> 26	Joint costs Complete this line only if the organization			· · ·	
20	reported in column (B) joint costs from a combined	,			
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

Form 990 (2018)
Part X Balance Sheet

Linke ""	Balance Sheet				
	Check if Schedule O contains a response or not	e to any line in this Part X		, 	
			(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing		882,635.	1	198,578.
2	Savings and temporary cash investments		524,015.	2	793,103
3	Pledges and grants receivable, net			3	
4	Accounts receivable, net			4	
5	Loans and other receivables from current and fo	rmer officers, directors,		NAME OF THE PERSON OF THE PERS	
	trustees, key employees, and highest compensa	ted employees Complete		èűű	
	Part II of Schedule L			5	
6	Loans and other receivables from other disqualif	ied persons (as defined under		127.Y.117 137.1111	
	section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing		W A	
	employers and sponsoring organizations of sect		B. Y		
	employees' beneficiary organizations (see instr)	Complete Part II of Sch L		6	
7	Notes and loans receivable, net		441,386.	7	. 0
8	Inventories for sale or use			8	
9	Prepaid expenses and deferred charges		(A)	9	can accuse which is the state of a line
10 a	Land, buildings, and equipment cost or other				
	basis Complete Part VI of Schedule D	10a 3,452,803		i di	
b	Less accumulated depreciation	10b 1,620,252		10c	1,832,551 597,312
11	Investments - publicly traded securities		754,311.	11	597,312
12	Investments - other securities See Part IV, line 1	1		12	
13	Investments · program-related See Part IV, line	l 1		13	
14	Intangible assets		11 050	14	
15	Other assets See Part IV, line 11				3,733,992
16		al line 34)	7,360,343.	16	7,155,536
17	Accounts payable and accrued expenses		17		
					•
	·				_
	•		E-10 - 4, 247 - 444, 97, 97, 99, 97, 97, 97, 97, 97, 97, 97	21	' 1885 to 1876
22	• •			10 A	
		s, and disqualified persons		وَمُنْكُنَّةً الْمُ	
	·	A - d Ale and a - a - a	2 947 649		3,085,415
		·	2,341,043.		3,003,413
	· ·	•		24	
23	·				-
		17-24) Complete Part X of	754 311	م ا	597,312
26					3,682,727
20	•	shock here X and	THE REPORT OF THE	20	to Michigan Signification
		· ——		34-19	
27	•	u 54.	3 658 383	27	3,472,809
			3,030,303.		3,1,2,003
	-		•	1	
23	•	SC 958) check here	- M. C. C. C. C. C. C. C. C. C. C. C. C. C.	25 25/3°	NATION OF THE PROPERTY OF THE PARTY OF THE P
		30 300), Check here			
30	•		de de la constante de la const	30	
		upment fund		1	
32	Retained earnings, endowment, accumulated inc		-	32	
		Johns, Or Other rullus		1 32	ļ
33	Total net assets or fund balances	,	3,658,383.	33	3,472,809
	2 3 4 5 6 7 8 9 10a b 11 12 13 14 15 16	1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and fo trustees, key employees, and highest compensa Part II of Schedule L 6 Loans and other receivables from other disqualif section 4958(f)(1)), persons described in section employers and sponsoring organizations of section employees' beneficiary organizations (see instr) 7 Notes and loans receivable, net 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 b Less accumulated depreciation 11 Investments - publicly traded securities 12 Investments - other securities See Part IV, line 1 intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Factions and other payables to current and former key employees, highest compensated employee Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated Unsecured notes and loans payable to unrelated Other liabilities (including federal income tax, pay parties, and other liabilities not included on lines Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958) complete lines 27 through 29, and lines 33 and Unrestricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Permanently restricted net assets 30 Organizations that do not follow SFAS 117 (ASC 958) and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	Pledges and grants receivable, net Accounts receivable, net Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D Less accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - other securities. See Part IV, line 11 Intragible assets. Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses. Grants payable Deferred revenue Tax-exempt bond liabilities. Escrow or custodial account liability. Complete Part IV of Schedule D 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 Secured mortgages and notes payable to unrelated third parties. Unsecured notes and loans payable to unrelated third parties. Unsecured notes and loans payable to unrelated third parties. Other liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here Total liabilities included on the assets Temporarily restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 20 through 34. Capital stock or trust principal, or current funds	1 Cash - non-interest-bearing 882 , 635 . 2 Savings and temporary cash investments 524 , 015 . 3 Pledges and grants receivable, net 524 , 015 . 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instr) Complete Part II of Sch L 7 Notes and loans receivable, net 8 Inventones 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 10a 3 , 452 , 803 . 1b Less accumulated depreciation 10b 1 , 620 , 252 . 1d Investments - publicly traded securities 11 Investments - publicly traded securities 12 Investments - other securities See Part IV, line 11 Investments - publicly traded securities 13 Investments - program-related See Part IV, line 11 Intargible assets 15 Other assets See Part IV, line 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(pt(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees and sponsoring organizations of section 501(c)(9) voluntary employees and sponsoring organizations of section 501(c)(9) voluntary employees and sponsoring organizations of section 501(c)(9) voluntary employees and sponsoring organizations of section 501(c)(9) voluntary employees and sponsoring organizations of section 501(c)(9) voluntary employees and sponsoring organizations of section 501(c)(9) voluntary employees and sponsoring organizations of section 501(c)(9) voluntary employees and sponsoring organizations of section 501(c)(9) voluntary employees and sponsoring organizations of section 501(c)(9) voluntary employees and sponsoring organizations of section 501(c)(9) voluntary employees and sponsoring organizations of section 501(c)(9) voluntary employees and sponsoring organizations of section 501(c)(9) voluntary employees and sponsoring organizations of section 501(c)(9) voluntary employees and sponsoring organizations that 601(c) 500 place and 10 of Section 501(c)(9) voluntary employees (as defined under section 501(c)(9) voluntary employees and fortered charges 9 Permanents—10 flood 501 place and 10 of Section 501(c)(9) voluntary employees (as defined under section 501(c)(9) voluntary employees (as defined under section 501(c)(9) voluntary employees (as defined under section 501(c)(9) voluntary employees (as defined under section 501(c)(9) voluntary employees (as defined under section 501(c)(9) voluntary employees (as defined under section 501(c)(9) voluntary employees

Form **990** (2018)

	1 990 (2016) & THE FACILIC	ЭT.		4 3	Pa	ıge I∠
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
			_			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	<u>1</u> 5,	55	9,5	21.
2	Total expenses (must equal Part IX, column (A), line 25)	2	15,	40	0,1	89.
3	Revenue less expenses Subtract line 2 from line 1	3				32.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,	65	8,3	83.
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				79.
9	Other changes in net assets or fund balances (explain in Schedule O)	9		34	4,7	27.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	3,	47	2,8	09.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
			_		Yes	No
1	Accounting method used to prepare the Form 990 Cash Cash Other SEE SCH					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.	_			.
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					<u> </u>
b	Were the organization's financial statements audited by an independent accountant?		L	2b	X	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basıs,				
	consolidated basis, or both					
	Separate basis X 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	audıt,				
	review, or compilation of its financial statements and selection of an independent accountant?		L	2c	Х	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	O slut				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single	gle Auc	dit			
	Act and OMB Circular A-133?		L	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed aud	lit	ļ		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		<u> </u>
			F	orm	990	(2018)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

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

➤ Go to www.irs.gov/Form990 for instructions and the latest information.

2018
Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

Name organization BETTRR BUSINESS BUREAU NORTHWEST Employer identification number 91-1614623		Section 501(c)(4), (5), or (6) organizat				
Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political campaign activity expenditures 3 Volunteer hours for political campaign activities Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 a Was a correction made? b If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization, such as a separate segregated fund or a political organization, such as a separate segregated fund or a political organization. (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds directly delivered to a separate political organization, such as a separate political organization, such as a separate political organization is contributions received and promptly and directly delivered to a separate political organization.	Nam			NORTHWEST	Emple	•
1 Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political campaign activity expenditures 3 Volunteer hours for political campaign activities Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 a Was a correction made? 4 b If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization; such as a separate segregated fund or a political action committee (PAC) if additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds contributions received and organization is funds organization. Part IV (e) Amount paid from filing organization's contributions received and organization organization.		& THE P.	ACIFIC			
Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 Was a correction made? 5 If "ves," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from promptly and directly delivered to a separate political organization's funds If none, enter -0. (e) Amount of political organization promptly and directly delivered to a separate political organization's funds If none, enter -0. (e) Amount of political organization is funds If none, enter -0. (e) Amount of political organization promptly and directly delivered to a separate political organization's funds If none, enter -0.	Pa	rt I-A Complete if the org	anization is exempt und	er section 501(c) c	or is a section 527 org	ganization.
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4a Was a correction made? b f "Yes," describe in Part IV	2	Enter the amount of any excise tax	incurred by organization manage	ers under section 4955	▶ \$	
Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1	3	If the organization incurred a section		Yes No		
Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds from filing organization's funds. If none, enter -0-filing organization's funds if none, enter -0-filing organization's funds if none, enter -0-filing organization's funds.	4a	Was a correction made?				Yes No
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Total exempt function expenditures Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0- delivered to a separate political organization.	2	5 5	ization's funds contributed to ot	her organizations for se		
Inne 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0-promptly and directly delivered to a separate political organization.		•			▶\$	
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(a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds If none, enter -0- delivered to a separate political organization						e segregated fund or a
filing organization's funds If none, enter -0- funds If none, enter -0- delivered to a separate political organization		·		<u> </u>		T
		(a) Name	(b) Address	(c) EIN	filing organization's	contributions received and promptly and directly delivered to a separate political organization
			<u> </u>			-

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

832041 11-08-18

BETTER BUSINESS BUREAU NORTHWEST

Schedule C (Form 990 or 990 EZ) 2018				91-1	614623 Page 2					
Part II-A Complete if the org	anization is exer	npt under sectior	1 501(c)(3) and file	d Form 5768 (el	ection under					
section 501(h)).										
			Part IV each affiliated	group member's nam	e, address, EIN,					
	e of excess lobbying	•			_					
B Check ▶	tion checked box A a	nd "limited control" pro	visions apply.							
	ts on Lobbying Expe ditures" means amou	nditures ints paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals					
1a Total lobbying expenditures to influ	uence public opinion (grass roots lobbying)								
b Total lobbying expenditures to influ	b Total lobbying expenditures to influence a legislative body (direct lobbying)									
c Total lobbying expenditures (add li	nes 1a and 1b)									
d Other exempt purpose expenditure	es									
e Total exempt purpose expenditure	s (add lines 1c and 1d)								
f Lobbying nontaxable amount Ente	er the amount from the	e following table in both	n columns							
If the amount on line 1e, column (a) o	r (b) is The lob	bying nontaxable am	ount is:							
Not over \$500,000	20% of	the amount on line 1e								
Over \$500,000 but not over \$1,000	0,000 \$100,00	00 plus 15% of the exc	ess over \$500,000							
Over \$1,000,000 but not over \$1,5	00,000 \$175,00	00 plus 10% of the exc	ess over \$1,000,000							
Over \$1,500,000 but not over \$17,	ss over \$1,500,000									
Over \$17,000,000	Over \$17,000,000 \$1,000,000									
g Grassroots nontaxable amount (en	ter 25% of line 1f)									
h Subtract line 1g from line 1a If zer	o or less, enter -0-		•		<u> </u>					
Subtract line 1f from line 1c If zero	or less, enter -0-									
j If there is an amount other than ze	ro on either line 1h or	line 1i, did the organiza	ation file Form 4720							
reporting section 4911 tax for this	year ⁹				Yes No					
(Some organizations th	nat made a section 5	eraging Period Under 01(h) election do not l ate instructions for lii	have to complete all o	of the five columns b	elow.					
	Lobbying Expe	nditures During 4-Yea	ar Averaging Period							
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total					
2a Lobbying nontaxable amount										
b Lobbying ceiling amount										
(150% of line 2a, column(e))					 					
c Total lobbying expenditures										
d Grandranta nontavable amazust										
d Grassroots nontaxable amount e Grassroots ceiling amount					<u> </u>					
(150% of line 2d, column (e))		1								
(10070 01 11110 20, 001011111 (0))										

Schedule C (Form 990 or 990-EZ) 2018

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2018 & THE PACIFIC 91-16146

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

For eac	h "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(6	a)	(I	၁)
	obbying activity	Yes	No	Amo	ount
lo o	During the year, did the filing organization attempt to influence foreign, national, state, or ocal legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of following forms of the control of the co				
b P	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
			<u> </u>	-	
	Mailings to members, legislators, or the public?		ļ		
	Publications, or published or broadcast statements?		ļ		
	Grants to other organizations for lobbying purposes?		<u> </u>		
-	Direct contact with legislators, their staffs, government officials, or a legislative body?	<u> </u>	<u> </u>	 	
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?				
jТ	otal. Add lines 1c through 1i	E. Salphing	149 P		
2a D	old the activities in line 1 cause the organization to be not described in section 501(c)(3)?				A PARTE
	"Yes," enter the amount of any tax incurred under section 4912				
c If	"Yes," enter the amount of any tax incurred by organization managers under section 4912	· 医克里特氏			
	the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				in a second
Part.		n 501(c)(5), or sec	tion	
				Yes	No
- \A	Vere substantially all (90% or more) dues received nondeductible by members?		1	-	Х
	old the organization make only in-house lobbying expenditures of \$2,000 or less?		2	 	X
	old the organization make only in-riduse lobbying expericitures of \$2,000 of less? Old the organization agree to carry over lobbying and political campaign activity expenditures from the				X
·····	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."		(b) Tare	13,73	
	section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politi	cal	1 to 100 to		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		081	(1.1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
	expenses for which the section 527(f) tax was paid).		2a	1	
	Current year			 	
	Carryover from last year		2b		
	fotal		2c		_
	aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	-	
	notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc		िक की जिल्ला		
	loes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical	2.94~15		
	xpenditure next year?		4	 	
	axable amount of lobbying and political expenditures (see instructions)		5	<u></u>	
Part	V/- Supplemental Information				
Provide	the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group	list), Part II	·A, lines 1 a	ınd 2 (see	
	tions), and Part II-B, line 1 Also, complete this part for any additional information				
THE	ORGANIZATION RECEIVES MEMBERSHIP DUES, HOWEVER, I	r does	NOT C	ONDUC	<u>r</u>
POLI	ITICAL OR LOBBYING ACTIVITIES.			<u>-</u>	
					<u>.</u>
	<u>'</u>				

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

BETTER BUSINESS BUREAU NORTHWEST

& THE PACIFIC

Employer identification number 91-1614623

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if	the
L	organization answered "Yes" on Form 990, Part IV, lin		·	
		(a) Donor advised funds	(b) Funds and other acco	unts
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 v	writing that the assets held in donor advis	sed funds	
_	are the organization's property, subject to the organization's		Yes	☐ No
6	Did the organization inform all grantees, donors, and donor a	_	used only	
_	for charitable purposes and not for the benefit of the donor o			
	impermissible private benefit?	, , , ,	Yes	☐ No
Par		ganization answered "Yes" on Form 990,	Part IV, line 7	
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (e.g., recreation or e		torically important land area	
	Protection of natural habitat	· 	tified historic structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	of a conservation easement on t	the last
	day of the tax year		Held at the End of	
а	Total number of conservation easements		2a	<u></u>
b	Total acreage restricted by conservation easements		2b	
C	Number of conservation easements on a certified historic stru	ucture included in (a)	2c	
d	Number of conservation easements included in (c) acquired a	• •	ure I	
	listed in the National Register	·	2d	
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	e organization during the tax	
	year >		-	
4	Number of states where property subject to conservation eas	sement is located >		
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements it	holds?	Yes	No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing con	servation easements during the	year
	>			
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserva	tion easements during the year	
	▶ \$			
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	(h)(4)(B)(ı)	
	and section 170(h)(4)(B)(ii)?		Yes	☐ No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement, and balance sheet, a	and
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes	the organization's accounting fo	or
	conservation easements			
Par	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or O	ther Similar Assets.	
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue state	nent and balance sheet works of	f art,
	historical treasures, or other similar assets held for public ext	nibition, education, or research in further	ince of public service, provide, in	n Part XIII,
	the text of the footnote to its financial statements that describe	bes these items		
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statemen	t and balance sheet works of art	, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pu	blic service, provide the followin	g amounts
	relating to these 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 tre-	asures, or other similar assets for financia	al gain, provide	
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items		
а	Revenue included on Form 990, Part VIII, line 1		\$	
b	Assets included in Form 990, Part X		> \$	

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

BETTER BUSINESS BUREAU NORTHWEST

	dule D (Form 990) 2018 & TRE P				•				14023		je ∠
Pai	t III Organizations Maintaining C									_	
3	Using the organization's acquisition, accession	on, and other record	ls, check	any of the f	ollowing that	are a sig	gnificant u	se of its o	collection i	tems	
	(check all that apply)										
а	Public exhibition	C	. .	Loan or exc	hange progra	ams					
b	Scholarly research	6	• 🔲	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	llections and explain	n how th	ey further th	e organizatio	n's exen	npt purpos	se in Part	XIII		
5	During the year, did the organization solicit o			-							
	to be sold to raise funds rather than to be ma								Yes		No
Pai	t IV Escrow and Custodial Arrang	gements. Compl	ete if the	organizatio	n answered '	'Yes" on	Form 990	, Part IV,	line 9, or		
	reported an amount on Form 990, Par			J							
	Is the organization an agent, trustee, custodi	an or other intermed	diary for o	contribution	s or other ass	ets not i	ncluded				_
	on Form 990, Part X?								Yes		No
h	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowina t	able							
	Too, explain the arrangement in the arrangement	and complete the le							Amount		
С	Beginning balance						1c				_
	Additions during the year						1d				
	Distributions during the year						1e				
e	Ending balance						1f				—
f O-	_	arm 000 Dort V line	O1 for a		istadial assa	المحال جميا			Yes	\Box	No.
	Did the organization include an amount on Fo If "Yes," explain the arrangement in Part XIII.	•					ty,		165	품	140
Pai							0		 .		
	2 Zilde Ville Linde Complete	·		rior year	(c) Two year		(d) Three y	ware back	(e) Four	oarc h	ack
٠.	Danuary of man balance	(a) Current year	(0) -	noi year	(C) TWO year	S Dack	(u) Three y	reals back	(e) 1 001	years u	<u> 10N</u>
1a	Beginning of year balance								 		
b	Contributions								<u> </u>		—
C	Net investment earnings, gains, and losses								1		—
d	Grants or scholarships								1		—
е	Other expenditures for facilities								1		
	and programs		ļ						 		
f	Administrative expenses								-		
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1g	j, column (a)) held as						
а	Board designated or quasi-endowment		%								
b	Permanent endowment	%									
С	Temporarily restricted endowment	%									
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%									
За	Are there endowment funds not in the posse	ssion of the organiza	ation tha	t are held ar	nd administer	ed for th	e organiza	ation	_		
	by								`	Yes	<u>No</u>
	(i) unrelated organizations								3a(ı)		
	(ii) related organizations								3a(II)		
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requi	red on S	chedule R?					3b		
4	Describe in Part XIII the intended uses of the		wment f	unds							
Pai	t VI Land, Buildings, and Equipm	ent.									
	Complete if the organization answered	d "Yes" on Form 990	0, Part IV	, line 11a S	ee Form 990	, Part X,	line 10				
	Description of property	(a) Cost or o	other	(b) Cost	or other	(c) A	ccumulate	ed	(d) Book	value	
		basıs (ınvestı	ment)	basis	(other)	de	preciation				
1a	Land										
b	Buildings				6,983.		133,1			,78	
С	Leasehold improvements			35	9,805.		174,43	11.	185	, 39	4.
d	Equipment				2,593.	1,:	248,74	47.	1,073	,84	6.
	Other				3,422.		63,8			,52	
	. Add lines 1a through 1e (Column (d) must e	gual Form 990. Part	X. colum	nn (B), line 1	0c.)			>	1,832	, 55	1.

Schedule D (Form 990) 2018 & THE PACIF	IC		91-	1614623 Page 3
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes" of	on Form 990, Part IV,			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va	aluation Cost or end-o	f-year market value
(1) Financial derivatives	_			
(2) Closely-held equity interests				
(3) Other				
(A)			-	
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	, ,			
Part VIII Investments - Program Related.	<u></u>		·	
Complete if the organization answered "Yes" of				
(a) Description of investment	(b) Book value	(c) Method of va	aluation Cost or end-c	or-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13)				
en version and the second seco	on Form 990, Part IV, I Description ROGRESS	line 11d. See Form 990, I	Part X, line 15	(b) Book value 55,463.
(2) PROPERTY HELD FOR SALE				3,678,529.
(3)				
(4)				
(5)				
(6)				
(7)				
(8)	ı			
(9)				
Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities.	15.)		>	3,733,992.
Complete if the organization answered "Yes" of	on Form 990, Part IV,	line 11e or 11f See Form	990, Part X, line 25	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2) DEFERRED COMPENSATION		597,312.		
(3)		32.,022.		
(4)				
				
(5) (6)				
<u>(6)</u>				
<u>(7)</u>				
(8)				
(9)		F07 212		
Total. (Column (b) must equal Form 990. Part X, col. (B) line		597,312.		
2. Liability for uncertain tax positions. In Part XIII, provide				
organization's liability for uncertain tax positions under	FIN 48 (ASC 740) Ch	eck here if the text of the		
			Schee	dule D (Form 990) 2018

832053 10-29-18

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

BETTER BUSINESS BUREAU NORTHWEST

Open to Public ja Inspection Employer identification number

91-1614623

& THE PACIFIC

Questions Regarding Compensation Part I No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III X Compensation committee X Written employment contract Independent compensation consultant Compensation survey or study X Approval by the board or compensation committee X Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a X 4b b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of a The organization? 5a b Any related organization? If "Yes" on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of a The organization? 6a 6b b Any related organization? If "Yes" on line 6a or 6b, describe in Part III.

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

not described on lines 5 and 6? If "Yes." describe in Part III

For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments

Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the

initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III

If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in

Schedule J (Form 990) 2018

7

8

Regulations section 53 4958-6(c)?

THE PACIFIC

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed Schedule J (Form 990) 2018

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (ii) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(i) (iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(a)-(i)(a)	ın column (B) reported as deferred on prior Form 990
(1) TYLER ANDREW	Ξ	293,480.	45,781.	23,465.	16,500.	39,432.	418,658.	0
PRESIDENT/CEO	Ξ	0	0	• 0	• 0	0	0	0
(2) HEATHER TUTTLE	Ξ	166,40	23,507.	24,792.	0	39,432.	254,131.	0
SVP	Ξ		0.	! I	• 0	1 1		.0
(3) TONY BARLOW	Ξ	50,00	132,783.	24,792.	4,141.	27,418.	239,134.	0.
VP	Ξ	0.	0.	0.	• 0	. 0	0.	.0
(4) DALE DIXON	Ξ	132,00	24,319.	0	8,139.	39,432.	203,890.	0.
CIO	Ξ			• 0	• 0	0	0	0.
(5) TIMOTHY BRYAN	Ξ	5,572.	156,339.	0	9,683.	9,708.	181,302.	0.
BUSINESS DEV REP	(II)			• 0	• 0	•0	0	0
(6) ELIZABETH STEELEY	Ξ	11,677.	130,054.	0	4,341.	8,873.	154,945.	0.
BUSINESS DEV REP	Ξ	0	0	0	0	0	0	0
(7) MICHELLE BALLARD	Ξ	24,128.	149,957.	0	10,351.	8,783.	193,219.	0
PROGRAMS CONSULTANT	<u> </u>	0	0	0	0	0	0	0
(8) LILLAS JEFFERY	Ξ	79,001.	112,013.	0	7,156.	9,665.	207,835.	0.
BUSINESS DEV REP	Ξ	0.		.0	• 0	0.	0.	0.
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BETTER BUSINESS BUREAU NORTHWEST & THE PACIFIC

Page 3

Schedule J (Form 990) 2018 & THE PACIFIC

Part III | Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-F7

Department of the Treasury Internal Revenue Service	▶0	io to v	•			nstructions and the	z. e late	est information.				specti		lic
Name of the organization	BETTER	BU	SINESS B	URE.	AU I	NORTHWEST			Em	ployer	identi	fication	n nu	mber
	& THE										146	23_		
Part I Excess E	Benefit Trans	actio	ons (section 50	D1(c)(3), sect	on 501(c)(4), and 50	01(c)	(29) organizations	only)	1				
Complete if	the organization	ansv	vered "Yes" on F	orm 9	90, Pa	nt IV, line 25a or 25	b, or	Form 990-EZ, Pa	ırt V, I	ne 40	b			
1 (a) Name of disquali	fied person	(b) F	Relationship bety person and or			ıfıed	(c) D	escription of tran	sactio	n		(d) Ye		cted? No
<u> </u>												+''	-	110
												+	1	
												\top		
	·											\top		
2 Enter the amount of	f tax incurred by	the or	rganization man	agers	or disc	ualified persons du	ring	the year under						
section 4958										▶ \$				
3 Enter the amount of	f tax, if any, on li	ne 2, a	above, reimburs	ed by	the org	ganization				▶ \$				
Dort III Lagna to	and/or Fron	a last	avested Dave											
						Part V, line 38a or	Forn	n 990, Part IV, lini	e 26, d	or if th	e orgai	ıızatıo	n	
reported an (a) Name of	amount on Forr				an to or	(a) Organal	Τ,	O Delever due	1-1	. In	(h) App	roved	/-> \A	Initton
interested person	(b) Relatio with organi		(c) Purpose of loan	fron	n the	(e) Original principal amount	"	f) Balance due		In ult?	by boa	ard or	agree	ritten ment?
•				To	From				Yes	No	Yes	No	Yes	No
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			<u> </u>											L
<u>Total</u> Part III Grants of	r Assistance	Don	ofiting Inter	oot o	1 Dor	<u>▶</u> \$					<u> </u>			
······································			_											
	the organization							() 7						
(a) Name of interes	stea person	(b) Relationship interested pers the organiza	on an		(c) Amount of assistance		(d) Type assistan			٠.	Purpe ssista		
		+						 		\dashv				
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2018

BETTER BUSINESS BUREAU NORTHWEST Schedule L (Form 990 or 990 EZ) 2018 & THE PACIFIC 91-1614623 Page 2 Part IV | Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (e) Sharing of (a) Name of interested person (b) Relationship between interested (c) Amount of (d) Description of organization's person and the organization transaction transaction revenues? Yes No RON PRICE 320,988.COACHING BOARD MEMBER Х Part V Supplemental Information. Provide additional information for responses to questions on Schedule L (see instructions) SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: RON PRICE (D) DESCRIPTION OF TRANSACTION: COACHING, PERSONALITY REPORTS FOR EMPLOYEES, INNOVATION PROGRAM

SCHEDULE O

(Form' 990 or 990-EZ)

Department of the Treasury

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.

➤ Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Name of the organization B:

BETTER BUSINESS BUREAU NORTHWEST & THE PACIFIC

Employer identification number 91-1614623

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
AND PROVIDING RATINGS AND BBB BUSINESS REVIEWS TO CONSUMERS, GIVING
SPEECHES AND HOLDING OTHER EVENTS FOR CONSUMERS TO EDUCATE THEM, AND
PROVIDING PRESS RELEASES ON THE LATEST MARKETPLACE SCAMS. BBB SUPPORTS
OUR MISSION THROUGH ACCREDITATION DUES.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PROVIDING PRESS RELEASES ON THE LATEST MARKETPLACE SCAMS. BBB SUPPORTS
OUR MISSION THROUGH ACCREDITATION DUES.
FORM 990, PART VI, SECTION A, LINE 1:
AN EXECUTIVE COMMITTEE, COMPRISED OF MEMBERS OF THE BOARD, ADVISES THE
PRESIDENT/CEO ON ORGANIZATIONAL MATTERS.
FORM 990, PART VI, SECTION A, LINE 6:
MEMBERSHIP IS COMPRISED OF BUSINESSES THAT MEET BBB STANDARDS FOR TRUST.
MEMBERS ARE REFERRED TO AS ACCREDITED BUSINESSES.
FORM 990, PART VI, SECTION A, LINE 7A:
CERTAIN MEMBERS HAVE THE RIGHT TO ELECT THE BOARD.
FORM 990, PART VI, SECTION B, LINE 11B:
A COPY OF THE PROPOSED FILING ALONG WITH OUR ANNUAL AUDIT WILL BE E-MAILED
TO THE BOARD FOR THEIR REVIEW, AND DISCUSSION WILL BE HAD IF NECESSARY.

832211 10-10-18

FORM 990, PART VI, SECTION B, LINE 12C:

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

Schedule O (Form 990 or 990-EZ) (2018)

Employer identification number 91-1614623

ANNUAL DISCLOSURES ARE SIGNED AND REVIEWED AT THE FOURTH QUARTER BOARD

MEETING. WHEN DISCLOSURE OF A CONFLICT IS MADE BY AN EMPLOYEE OR OFFICER,

THE BOARD REVIEWS THE CONFLICT TO DETERMINE IF THE ASSOCIATION/RELATIONSHIP

IS INCOMPATIBLE WITH THE MISSION OF THE ORGANIZATION OR IF IT ADVERSELY

AFFECTS THE ORGANIZATION. IF SO, IT IS DETERMINED WHETHER THE CONFLICT CAN

BE AVOIDED BY RESTRICTING THE DUTIES OF SAID EMPLOYEE OR OFFICER SUCH AS

NON-PARTICIPATION IN ANY REPORTS, REVIEWS OR ACTIONS PERTAINING TO THE

DISCLOSED CONFLICT.

FORM 990, PART VI, SECTION B, LINE 15:

THE CEO'S COMPENSATION IS DETERMINED AND REVIEWED ANNUALLY BY A

COMPENSATION COMMITTEE COMPRISED OF MEMBERS OF THE BOARD OF DIRECTORS. THE

COMMITTEE REVIEWS PERFORMANCE RELATIVE TO CURRENT COMPARABILITY DATA.

MEMBERS OF THE EXECUTIVE TEAM (CIO/SENIOR/VICE PRESIDENTS) RECEIVE ANNUAL PERFORMANCE REVIEWS BY THE CEO/PRESIDENT AT THE END OF EACH CALENDAR YEAR.

FORM 990, PART VI, SECTION C, LINE 19:

WE DO NOT CURRENTLY HAVE THESE AVAILABLE.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CONTRIBUTIONS RECEIVED FOR NET ASSETS ACQUIRED FROM OTHER

BBB 96,292.

FORGIVENESS OF DEBT -441,019.

TOTAL TO FORM 990, PART XI, LINE 9 -344,727.

FORM 990, PART XII, LINE 1:

THE FINANCIAL STATEMENTS HAVE BEEN PREPARED ON THE MODIFIED CASH BASIS

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization BETTER BUSINESS BUREAU NORTHWEST & THE PACIFIC	Employer identification number 91-1614623
OF ACCOUNTING, WHICH IS A COMPREHENSIVE BASIS OF A	CCOUNTING OTHER THAN
ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UN	ITED STATES. THIS
BASIS DIFFERS FROM ACCOUNTING PRINCIPLES GENERALLY	ACCEPTED IN THE
UNITED STATES PRIMARILY IN THAT THE BUREAU RECOGNI	ZES REVENUE WHEN CASH
IS RECEIVED AND EXPENSES ARE RECOGNIZED WHEN CASH	IS PAID, WITH THE
FOLLOWING EXCEPTIONS:	
-PROPERTY AND EQUIPMENT ARE CAPITALIZED WHEN ACQUI	RED, AND
-INVESTMENT ACTIVITY IS RECOGNIZED WHEN INVESTMENT	S ARE PURCHASED AND
SOLD. ALSO, INVESTMENTS ARE REPORTED AT FAIR VALU	JE.

Employer identification number 91–1614623 Open to Public OMB No 1545-0047 2018 Inspection ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships ▶ Go to www.irs.gov/Form990 for instructions and the latest information. ► Attach to Form 990. BETTER BUSINESS BUREAU NORTHWEST & THE PACIFIC Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Part I , Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33

Direct controlling End-of-year assets **e** Total income Legal domicile (state or foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt constructions during the tax year

(a)	(q)	(c)	(p)	(e)	(4)	(6)	7(F)(4.5)
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 3 (2(b))	(c) (c)
of related organization		foreign country)	section	status (if section	entity	entity?	٤
				501(c)(3))		, seX	No
BETTER BUSINESS BUREAU FOUNDATION -							
91-1313983, 12639 W EXPLORER DR, STE 200,					BETTER BUSINESS		
BOISE, ID 83713	CONSUMER EDUCATION	WASHINGTON	501(C)(3)	LINE 11	BUREAU NORTHWEST		×
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

BETTER BUSINESS BUREAU NORTHWEST

& THE PACIFIC

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year Schedule R (Form 990) 2018

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Percentage ownership 3 managing partner? Seneral or 9 Code V.UBI amount in box 20 of Schedule K-1 (Form 1065) Disproportionate ŝ allocations? Ξ Yes Share of end-of-year assets <u>6</u> Share of total Income $\boldsymbol{\varepsilon}$ Predominant income (related, unrelated, excluded from tax under sections 512-514) (e) Direct controlling entity **©** (C)
Legal
domicile
(state or
foreign Primary activity 9 Name, address, and EIN of related organization (a)

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year Part IV

											•
		rion o)(13) olled ity?	No								
	1)	Section 512(b)(13) controlled entity?	Yes								
	(h)	eg d									
		of ear	455615								-
		Share of total income									
	(e)	Type of entity (C corp, S corp,	oi iidsij								
	(p)	Direct controlling entity									
	(၁)	Legal domicile (state or foreign	country)								
,	(q)	Primary activity									
	(e)	Name, address, and EIN of related organization									

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BETTER BUSINESS BUREAU NORTHWEST

& THE PACIFIC Schedule R (Form 990) 2018

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Part V

nttty is listed in Parts II, III, or IV of this schedule	he organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
=	ਲ
plete line 1 if an	ne tax year, d
Note: Comple	1 During th
_	

- Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- - Gift, grant, or capital contribution to related organization(s)
- Gift, grant, or capital contribution from related organization(s) d Loans or loan guarantees to or for related organization(s)
 - - Loans or loan guarantees by related organization(s)
- Dividends from related organization(s)
- Sale of assets to related organization(s)
- Purchase of assets from related organization(s)
- Exchange of assets with related organization(s)
- Lease of facilities, equipment, or other assets to related organization(s)

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Ε 두 9

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- k Lease of facilities, equipment, or other assets from related organization(s)
- Performance of services or membership or fundraising solicitations for related organization(s)
 - m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses
- q Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- s. Other transfer of cash or property from related organization(s)

If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	no must complete the	s line, including covered re	lationships and transaction thresholds
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) BETTER BUSINESS BUREAU FOUNDATION	0	50,879.	
(2) BETTER BUSINESS BUREAU FOUNDATION	껖	441,019.	441,019.LOAN PRINCIPAL
(3)			
(4)			
(5)			
(9)			

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BETTER BUSINESS BUREAU NORTHWEST & THE PACIFIC

Schedule R (Form 990) 2018

Part VI _ Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

Disproportional Code V-UBI | General or Percentage identifications of Schedule K-1 | Darmer ownership ves No | Form 1065) | Yes No | € Yes No end-of-year Share of assets Share of total income (e)
Are all
pariners sec
501(c)(3)
orgs? Predominant income (related, unrelated, excluded from tax under sections 512-514) (state or foreign country) Legal domicile <u>ပ</u> Primary activity 9 Name, address, and EIN of entity