## Form **99**

## Return of Organization Exempt from Income Tax

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

OMB No 1545-0047 2003

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements. For the 2003 calendar year, or tax year beginning . 2003, and ending D Employer Identification Number Check if applicable PUGET SOUNDKEEPER ALLIANCE 91-1285783 Address change IRS label or print or type. See 4461 LEARY WAY NW Telephone number Name change SEATTLE, WA 98107 297-7002 Initial return specific instruc-Accounting Cash X Accrual Final return tions. Other (specify) Amended return Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). Application pending H and I are not applicable to section 527 organizations H (a) Is this a group return for affiliates?... H (b) If 'Yes,' enter number of affiliates G Web site: ► N/A H (c) Are all affiliates included?.... Organization type (If 'No,' attach a list See instructions ) ► X 501(c) 3 ◀ (insert no.) (check only one). . . . H (d) Is this a separate return filed by an Check here ► I if the organization's gross receipts are normally not more than organization covered by a group ruling? Yes \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return. Group Exemption Number Check ► If the organization is not required Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ► 305, 270. to attach Schedule B (Form 990, 990-EZ, or 990-PF). Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Instructions) Contributions, gifts, grants, and similar amounts received: 182,905. a Direct public support.... 10,164. 1 c Government contributions (grants). Total (add lines 186,754. noncash \$ 6,315.) 193,069. 30,292. 2 Program service revenue including government fees and contracts (from Part VII, line 93) 2 3 Membership dues and assessments 3 10,400. Interest on savings and temporary cash investments 3,185. 4 4 5 Dividends and interest from securities. .... 5 6a Gross rents 6a b Less: rental expenses .... 2 9 2004 c Net rental income or (loss) (subtract line 6b from line 6a)... 6b 6c 7 Other investment income (describe. ... 7 (B) Other 8a Gross amount from sales of assets other 8a than inventory ...... 8Ь **b** Less: cost or other basis and sales expenses . . . . . . c Gain or (loss) (attach schedule)...... d Net gain or (loss) (combine line 8c, columns (A) and (B)) 8d 9 Special events and activities (attach schedule), if any amount is from gaming, check here. a Gross revenue (not including \$ reported on line 1a)..... 67,986. **b** Less: direct expenses other than fundraising expenses... 9Ы 20.174. .... Statement. 1 47,812. c Net income or (loss) from special events (subtract line 9b from line 9a) . . . . . 9с 10a Gross sales of inventory, less returns and allowances ..... 10 a **b** Less: cost of goods sold . . ... . .. ..........

13

19

20

10 c Other revenue (from Part VII, line 103) 338. 11 **Total revenue** (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) 285,096. 12 218,944. Program services (from line 44, column (B)) . . . . . . . 13 33,305. Management and general (from line 44, column (C)). ..... 14 15 Fundraising (from line 44, column (D)) ..... 15 33,696. 16 Payments to affiliates (attach schedule). 16 285,945. Total expenses (add lines 16 and 44, column (A)).... 17 Excess or (deficit) for the year (subtract line 17 from line 12) . . . . . 18 -849. 286,546. Net assets or fund balances at beginning of year (from line 73, column (A)). 19

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

Net assets or fund balances at end of year (combine lines 18, 19, and 20)

20

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

	Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (att sch)				*	
	(cash \$				1	
	non-cash \$)	22			·	
23 24	Specific assistance to individuals (att sch)	23			*	
25	Benefits paid to or for members (att sch)	25				
26	Other salaries and wages	26	133,135.	93,195.	22,633.	17,307.
27	Pension plan contributions	27				
28	Other employee benefits	28	12,039.	8,427.	2,047.	1,565.
29	Payroll taxes	29	12,895.	9,027.	2,192.	1,676.
30	Professional fundraising fees	30				
31	Accounting fees	31				
32	Legal fees	32				
33	Supplies	33	27,602.	27,164.	248.	190.
34	Telephone	34	3,558.	2,495.	602.	461.
35	Postage and shipping	35	2,006.	1,406.	340.	260.
36	Occupancy	36	12,597.	8,832.	2,134.	1,631.
37	Equipment rental and maintenance	37	2,468.	1,731.	417.	320.
38	Printing and publications	38	15,039.	13,651.	787.	601.
39	Travel	39	3,968.	3,968.		
40	Conferences, conventions, and meetings	40				
41	Interest	41				
42	Depreciation, depletion, etc (attach schedule)	42	1,282.	899.	217.	166.
43	Other expenses not covered above (itemize).					
8	See Statement 2	43a	59,356.	48,149.	1,688.	9,519.
Ŀ		43b				
c		43c				
c		43d				
•		43e				
44	Total functional expenses (add lines 22 - 43) Organizations completing columns (B) - (D), carry these totals to lines 13 - 15.	44	285,945.	218,944.	33,305.	33,696.
Join	Costs. Check . ► If you are following	SOP 9				
	iny joint costs from a combined educational			citation reported in (B) P	rogram services?	► Yes X No
	s,' enter (i) the aggregate amount of these				nount allocated to Progr	
\$_		ocated	to Management and gen	eral \$	; and <b>(iv)</b> the	e amount allocated
	ndraising \$ .			· · · · · · · · · · · · · · · · · · ·		
Par						
	is the organization's primary exempt purpo		Protect and	Enhance Puget	Sound	Program Service Expenses
All or clien	ganizations must describe their exempt pui is served, publications issued, etc. Discuss ns and 4947(a)(1) nonexempt charitable tri	rpose a	achievements in a clear a rements that are not mea:	and concise manner. Sta surable. (Section 501(c))	te the number of	(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)
zatio	ns and 4947(a)(1) nonexempt charitable tri	usts m	ust also enter the amoun	it of grants & allocations	to others.)	optional for others)
a	<u>Puget Soundkeeper - monit</u>	ors	and advocates :	for the health	of Puget	
	Sound.					
			<del></del>	allocations \$	<u> </u>	138,704.
Ŀ	Pollution Prevention - He			erstand_and_com	ply_with	
	water quality laws and re	gula	tions.			
			(Grants and	allocations \$	<u> </u>	80,240.
C						
			(Grants and	allocations \$	<u> </u>	
c						
				allocations \$	)	
	Other program services			allocations \$	)	010 011
f	Total of Program Service Expenses (shou	ıld equ	iai iine 44, column (B), P	rogram services)	, , , , , , , <b>&gt;</b>	218,944.

Part IV Balance Sheets (See Instructions)

Note:	Wh col	nere required, attached schedules and amounts within turns should be for end-of-year amounts only.	the de	scription	<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	45	Cash – non-interest-bearing			62,570.	45	21,475.
	46	Savings and temporary cash investments			220,039.	46	266,607.
	4	A	<u></u> 1	1 (50			
			47 a	1,650.	7 700	_	1 (50
1	0	Less: allowance for doubtful accounts	47 b		7,702.	47c	1,650.
ļ	48 a	Pledges receivable	48a				
İ			48b			48c	
ļ	49					49	
A	50	Receivables from officers, directors, trustees, and key employees (attach schedule)	<b>/</b>			50	
SET	51 a	Other notes & loans receivable (attach sch)			<del></del>		
Ī		Less: allowance for doubtful accounts				51 c	
	52	Inventories for sale or use				52	
	53	Prepaid expenses and deferred charges			2,916.	53	3,343.
	54	Investments – securities (attach schedule)			258.	54	596.
İ	55 a	ı Investments – land, buildings, & equipment: basis.	55 a				
	b	Less: accumulated depreciation (attach schedule)	55 b			55 c	
	56	Investments - other (attach schedule)				56	
		· · · · · · · · · · · · · · · · · · ·	57 a	22,692.		77	
	b	Less: accumulated depreciation (attach schedule) Statement.3	57 b	20,373.	1,516.	57 c	2,319.
	58	Other assets (describe > See Statement 4	0, 5	)	1,000.	58	1,500.
	59	Total assets (add lines 45 through 58) (must equal line	e 74)		296,001.	59	297,490.
	60	Accounts payable and accrued expenses			9,455.	60	11,793.
ř.	61	Grants payable		[		61	<u> </u>
Å	62	Deferred revenue				62	
B	63	Loans from officers, directors, trustees, and key employees (attach s	chedule	)		63	
L T	64 a	Tax-exempt bond liabilities (attach schedule)			-	64 a	
1	b	Mortgages and other notes payable (attach schedule)				64b	
E S		Other liabilities (describe ►.				65	
_		Total liabilities (add lines 60 through 65)			9,455.	66	11,793.
N C	rgani	izations that follow SFAS 117, check here > X and	d com	olete lines 67			
Ĕ	C-3	through 69 and lines 73 and 74.			222 619	_	244 744
A S	67 68	Unrestricted	•		232,618. 53,928.	67 68	244,744. 40,953.
Anomi-o	69	<b>5</b>	• • • •		55, 920.	69	40, 333.
م ا		zations that do not follow SFAS 117, check here ►		nd complete lines		03	
R		70 through 74.	ш,	na complete imas		,	
£ 020	70	Capital stock, trust principal, or current funds				70	
	71	Paid-in or capital surplus, or land, building, and equip				71	
Ž	72	Retained earnings, endowment, accumulated income,				72	
BALAZOEN	73	Total net assets or fund balances (add lines 67 through 72; column (A) must equal line 19; column (B) must equal line 19; co	gh 69 e equal l	or lines 70 through ine 21)	286,546.	73	285,697.
•		Total liabilities and net assets/fund balances (add line			296,001.	74	297,490.

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

BAA

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations?......

Ye:

X No

If 'Yes,' attach schedule - see instructions.

▶ 92

N/A

and enter the amount of tax-exempt interest received or accrued during the tax year.

	Allarysis of mediae i roda		d business income		ection 512, 513, or 514	(E)
Note: Ente	er gross amounts unless Indicated	(A) Business code	<b>(B)</b> Amount	(C) Exclusion code	<b>(D)</b> Amount	Related or exempt function income
	ogram service revenue:					30,292.
b	JIICIACO INCOMO					
ď				-		· · · · · · · · · · · · · · · · · · ·
- e	,					
	dicare/Medicaid payments					
-	s & contracts from government agencies					
	embership dues and assessments					10,400.
	rest on savings & temporary cash invmnts		· · · · · · · · · · · · · · · · · · ·			3,185.
-	vidends & interest from securities		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	rental income or (loss) from real estate:		`.		,	
	bt-financed property			ļ		
	t debt-financed property					
	rental income or (loss) from pers prop			ļ		<del></del>
	ner investment income		<del></del>			
100 Ga	in or (loss) from sales of assets ner than inventory					
	income or (loss) from special events					47,812.
	ss profit or (loss) from sales of inventory					
	ner revenue: a	, , , , , , , , , , , , , , , , , , , ,		<b>†</b>		***************************************
	ther Income	••••				
	realized Gain on In					338.
d <u>0.</u>	11 001 11 011 111					
e						···
· · · · · · · · · · · · · · · · · · ·	ototal (add columns (B), (D), and (E))			*****		92,027.
	tal (add line 104, columns (B), (D), a	nd (E))			▶	92,027.
	105 plus line 1d, Part I, should equa					
	Relationship of Activities to			xempt Purpos	Ses (See instructions.)	
Line No. ▼	Explain how each activity for which of the organization's exempt purpo	income is rei	ported in column (E) o	of Part VII contrib	uted importantly to the a	accomplishment
93g	Contracts for business	s assista	nce and publi	c education	programs.	****
101	Special events promote					aters of
	Puget Sound.			F		
	Tuget Bound:	<del> </del>	<del></del>			h
Day IV	Information Regarding Tax	able Subci	idiaries and Disre	garded Entiti	AS (See Instructions )	
FRILIA	(A)	(B)		C)	(D)	(E)
		i				
Name,	, address, and EIN of corporation, rtnership, or disregarded entity	Percentage ownership int		f activities	Total income	End-of-year assets
N/A	thership, or disregarded entity	Ownership in	8		indonio	40000
N/A		+	8			
		<del></del>	8			
<del></del>		+	8			
Part Y	Information Regarding Tra	nefers Ass		sonal Benefit	Contracts (See instr	uctions )
	e organization, during the year, receive any fur					Yes X No
						— — — —
	he organization, during the year, pay	•	•	i a personai bene	ant contracts	Yes X No
Note:	If 'Yes' to (b), file Form 8870 and For	m 4/20 (see i	instructions).		1	
	Under penalties of perjury declare that I have true, correct, and complete Declaration of pro-	e examined this r sparer (other than	return, including accompanyi officer) is based on all infor	ng schedules and state mation of which prepar	ments, and to the best of my k er has any knowledge.	nowledge and belief, it is
					7.	122/04
			<del></del>		Date //	-/-
			TIUE	DIRECTOR		<del>,</del>
			1106	A LIVE CLOSE		

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

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

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

Supplementary Information — (See separate instructions.)

2003

OMB No 1545-0047

Department of the Treasury Internal Revenue Service MUST be completed by the above organizations and attached to their Form 990 or 990-EZ. Employer identification number Name of the organization 91-1285783 PUGET SOUNDKEEPER ALLIANCE Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See instructions. List each one. If there are none, enter 'None.') (d) Contributions to employee benefit plans and deferred (e) Expense (c) Compensation (a) Name and address of each (b) Title and average account and other employee paid more than \$50,000 hours per week allowances devoted to position compensation None Total number of other employees paid over \$50,000 Compensation of the Five Highest Paid Independent Contractors for Professional Services Part II (See instructions. List each one (whether individuals or firms). If there are none, enter 'None.') (c) Compensation (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service None Total number of others receiving over \$50,000 for professional services

Schedule A (Form 990 or 990-E2) 2003 FUGET SOUNDREFER ALLIANCE 91-120	5765		age z
Part III : Statements About Activities (See Instructions.)		Yes	No
During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities \$ \$ 1,285.			
(Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1	X	
	· · · · · · · · · · · · · · · · · · ·		-
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking 'Yes,' must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			,
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with at taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principle beneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions')	ny . al		
a Sale, exchange, or leasing of property?	2a		X
<b>b</b> Lending of money or other extension of credit?.	2b		Х
c Furnishing of goods, services, or facilities? .	. 2с		Х
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		Х
e Transfer of any part of its income or assets?	<u>2</u> e		Х
3a Do you make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an explanation of how you determine that recipients qualify to receive payments.)	За		Х
b Do you have a section 403(b) annuity plan for your employees?	3b	_	X
Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4		х
Part IV Reason for Non-Private Foundation Status (See instructions.)			
The organization is not a private foundation because it is: (Please check only <b>ONE</b> applicable box.)  A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).  A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)  A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).  A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospit and state   An organization operated for the benefit of a college or university owned or operated by a governmental unit. Sec (Also complete the <b>Support Schedule</b> in Part IV-A.)  An organization that normally receives a substantial part of its support from a governmental unit or from the gene Section 170(b)(1)(A)(vi). (Also complete the <b>Support Schedule</b> in Part IV-A.)  An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, from activities related to its charitable, etc, functions — subject to certain exceptions, and (2) no more than 33-1/3 from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acq organization after June 30, 1975. See section 509(a)(2). (Also complete the <b>Support Schedule</b> in Part IV-A.)  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a) (3).)  Provide the following information about the supported organizations. (See instructions.)	eral public.  , and gross % of its su juired by the organizatio (a)(2). (See	o(1)(A) s receipport	pts
(a) Name(s) of supported organization(s)		m abo	
14 An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)			

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Parl	IV-A Support Schedule (C	Complete only if you o	hecked a box on line	10, 11, or 12.) Use c	ash method of account of accounting	ting.
		1				(e)
begir	ndar year (or fiscal year nning in)	(a) 2002	<b>(b)</b> 2001	<b>(c)</b> 2000	<b>(d)</b> 1999	<b>(e)</b> Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.).	101 746	158,472.	261,064.	168,715.	769,997.
		181,746. 13,560.	15,408.	8,853.	7,410.	45,231.
<u>16</u>	Membership fees received	13,360.	13,400.	0,000.	7/220	
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc, purpose	48,932.	60,311.	65,838.	98,870.	273,951.
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	14,931.	3,528.	1,554.	781.	20,794.
19	Net income from unrelated business activities not included in line 18					
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.					
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets See . Stmt 8.	36,117.	50,812.	40,436.	24,849.	152,214.
23	Total of lines 15 through 22	295,286.	288,531.	377,745.	300,625.	1,262,187.
24		246,354.	228,220.	311,907.	201,755.	988,236.
25	Enter 1% of line 23.	2,953.	2,885.	3,777.	3,006.	
26			er 2% of amount in c	olumn (e), line 24	N/A ► 26a	
ı	Prepare a list for your records to show the supported organization) whose total gifts return. Enter the total of all these excess	name of and amount contri or 1999 through 2002 excee amounts	ded the amount shown in i	me 204. Do not me tais as	► <u>26b</u>	
(	Total support for section 509(a)(1	) test: Enter line 24, o	column (e)		► <u>26c</u>	
•	d Add: Amounts from column (e) fo			19	26d	<i>"</i> , ',
		22		26b		<u> </u>
•	Public support (line 26c minus lin					
27	Public support percentage (line 2 Organizations described on line	12.			<u> </u>	<u></u>
	For amounts included in lines 15 name of, and total amounts rece	, 16, and 17 that were ived in each year fron	n, each disquaimed p	ocisoni. Do not me un	is hist mary our rotain	
	(2002) 0.	(2001)	0(2000) _		) <u>. (1999)</u>	
	b For any amount included in line show the name of, and amount r \$5,000. (Include in the list organ computing the difference between	17 that was received the eceived for each year izations described in the amount received	from each person (other, that was more than unes 5 through 11, as dand the larger amou	ner than 'disqualified p the <b>larger</b> of (1) the a well as individuals.) I unt described in (1) or	persons'), prepare a ligamount on line 25 for the control of the c	st for your records to the year or <b>(2)</b> In your return. After these differences
	(2002)0.	(2001)	<u>-</u> <u>0</u> . (2000) -		7 • (1999)	
	(the excess amounts) for each y (2002) 0 . c Add: Amounts from column (e) f 17 d Add: Line 27a total	or lines: 15 _ 273,951. 20	769,997.	16 <u>45</u> 21	27c	1,089,179.
	<b>d</b> Add: Line 27a total	0. a	and line 27b total		<u>0.</u> 27 d	0. 1,089,179
	e Public support (line 27c total mir	nus line 27d total)			<u>&gt; 27e</u>	1,089,179
	d Add: Line 27a total  e Public support (line 27c total mir  f Total support for section 509(a)(  g Public support percentage (line	2) test: Enter amount	from line 23, column	(e) . ► 27f	1,262,187.	00.00
	g Public support percentage (line	27e (numerator) divid	led by line 27f (denon	ninator))	> 27 g	
	h investment income percentage (	line 18, column (e) (n	umerator) divided by	line 27f (denominator	)) ► 27h	<del></del>
28	Unusual Grants: For an organizatist for your records to show, for nature of the grant. Do not file to					

	Private School Questionnaire (See instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/A		,
		· · · · ·	Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		ļ
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs,	, ,		
	and scholarships?	30	-	
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If 'Yes,' please describe; if 'No,' please explain. (If you need more space, attach a separate statement.)		1	
		-  -	3.73	
		- ,		<b>.</b> ,
32	Does the organization maintain the following:	] ``	[A. N	``.''
8	Records indicating the racial composition of the student body, faculty, and administrative staff?	32 a	<u> </u>	<u> </u>
k	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32 b		
	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	32.0		
•	with student admissions, programs, and scholarships?	32 c	<u> </u>	<u> </u>
•	Copies of all material used by the organization or on its behalf to solicit contributions?	32 d		
	If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.)	-		
33	Does the organization discriminate by race in any way with respect to:	*		,
8	Students' rights or privileges?	33a		
k	Admissions policies?	33b		
•	Employment of faculty or administrative staff?	33c		
C	Scholarships or other financial assistance?	33d		
6	Educational policies?	33e		
f	Use of facilities?	33f		
ç	Athletic programs?	33g		
ŀ	Other extracurricular activities?	33h		
	If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.)			, , ,
		F ,		, ,
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34 a		
,	Has the organization's right to such aid ever been revoked or suspended?	34 b		
	If you answered 'Yes' to either 34a or b, please explain using an attached statement.	37.0		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation.	35		

	<u>`</u> `	ted <b>ONLY</b> by an eligible or	ganization that filed Fo	orm 5768)	ctions.)			_	N/A
Che	ck ► a If the organ	ızatıon belongs to an affilia	ted group. Check	<b>▶ b</b> If you	checke			contro	oi' provisions apply.
		<b>Limits on Lobbying I</b> n 'expenditures' means an	•	4)		Affiliate	a) ed grou tals	р	(b) To be completed for ALL electing
26	<u> </u>	rures to influence public op	<u> </u>	· · · · · · · · · · · · · · · · · · ·	36				organizations
36 37		ures to influence public of ures to influence a legislat			37				
38		ures (add lines 36 and 37)	• •		38				
39	,	expenditures			39				
40		expenditures (add lines 38			40				
41		mount. Enter the amount f	•			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
	If the amount on line 40		bbying nontaxable am		,			ŧ	
	Not over \$500,000 .	20% o	• •					I	
	Over \$500,000 but not over \$1	,000,000 \$100,00	0 plus 15% of the excess ov	er \$500,000				I	•
	Over \$1,000,000 but not over	\$1,500,000 \$175,00	0 plus 10% of the excess ov	er \$1,000,000 📙	41				
		\$17,000,000 \$225,00							, ;
	Over \$17,000,000		),000			54	•	1	
42		amount (enter 25% of line	•		42				
43	Subtract line 42 from lii	ne 36. Enter -0- if line 42 is	s more than line 36		43				
44		ne 38. Enter -0- if line 41 is			44				<del></del>
	Caution: If there is an	amount on either line 43 o	r line 44, you must file	Form 4720		<del></del>		-1	
	(Some orga	nizations that made a sec	veraging Period L tion 501(h) election do the instructions for lin	not have to com	iplete a	( <b>h)</b> all of the fiv	ve colu	mns b	elow.
			Lobbying Expend	itures During 4 -	Year A	veraging P	eriod		
	Calendar year (or fiscal year beginning in) ►	(a) 2003	<b>(b)</b> 2002	<b>(c)</b> 2001			<b>d)</b> )00		<b>(e)</b> Total
45	Lobbying nontaxable amount								
46	Lobbying ceiling amount (150% of line 45(e))					·	•	`	
47	Total lobbying expenditures								
48	Grassroots non- taxable amount						***********		
	Grassroots ceiling amount		· 1		- 1	,			
49	(150% of line 48(e))					<del></del>			
50	(150% of line 48(e)) Grassroots lobbying expenditures								
50	(150% of line 48(e)) Grassroots lobbying expenditures	activity by Nonelecting	ng Public Charitie	es VI-A) (See instru	uctions	)			
50 Par	Grassroots lobbying expenditures  VI-B Lobbying A (For reporting			<del></del>			Yes	No	Amount
50 Par	Grassroots lobbying expenditures  VI-B Lobbying A (For reporting	ctivity by Nonelecting only by organizations that nization attempt to influen only on a legislative matter.	ce national, state or lo er or referendum, thro	<del></del>			Yes	No X	Amount
50 Par Durii	Grassroots lobbying expenditures  **YI-B** Lobbying A  (For reporting on the year, did the organity to influence public on the property of the property of the property of the property of the public	ctivity by Nonelecting only by organizations that nization attempt to influen only on a legislative matter.	ce national, state or lo er or referendum, thro	ocal legislation, it ough the use of:	ncludin	g any	Yes		Amount
50 Par Ourii	Grassroots lobbying expenditures  **YI-B** Lobbying A  (For reporting on the year, did the organity to influence public on the property of the property of the property of the property of the public	nctivity by Nonelectire only by organizations that nization attempt to influen pinion on a legislative mation.  ent (Include compensation	ce national, state or lo er or referendum, thro	ocal legislation, in ough the use of:  on lines <b>c</b> throu	ncluding gh <b>h.</b> )	g any		Х	Amount
50 Pari	Grassroots lobbying expenditures  VI-B Lobbying A (For reporting of the year, did the orgampt to influence public of a Volunteers  b Paid staff or managemic Media advertisements	nctivity by Nonelectire only by organizations that nization attempt to influen pinion on a legislative mation.  ent (Include compensation	ce national, state or lover or referendum, thro	ocal legislation, in ough the use of:  on lines <b>c</b> throu	ncluding gh <b>h.</b> )	g any		X X X	Amount
50 Pari	Grassroots lobbying expenditures  TVI-B Lobbying A (For reporting of the year, did the organite to influence public of a Volunteers  Department of Paid staff or management of Media advertisements of Mailings to members, le	nctivity by Nonelecting only by organizations that nization attempt to influen point on a legislative mathematic of the compensation on the compensation of the compen	ce national, state or lover or referendum, thro	ocal legislation, in ough the use of: on lines <b>c</b> through	gh <b>h.</b> )	g any		X X X X	Amount
50 Duriii Atter	Grassroots lobbying expenditures  TVI-B Lobbying A (For reporting and the organization of the control of the co	nctivity by Nonelecting only by organizations that inization attempt to influent point on a legislative matter.  ent (include compensation egislators, or the public led or broadcast statement ations for lobbying purpos	ce national, state or loter or referendum, through the contraction of	ocal legislation, in ough the use of: on lines c through the contract of t	gh <b>h.</b> )	g any	Х	X X X	
During the state of the state o	Grassroots lobbying expenditures  TVI-B Lobbying A (For reporting or r	cctivity by Nonelectire only by organizations that nization attempt to influen punion on a legislative matter of the compensation of the compensation of the public attentions for lobbying purpossistators, their staffs, govern	oce national, state or locer or referendum, through the contraction of	ocal legislation, in ough the use of:  on lines c through the control of the con	gh <b>h.</b> )	g any		X X X X	Amount 1,285.
During the state of the state o	Grassroots lobbying expenditures  TVI-B Lobbying A (For reporting or r	nctivity by Nonelecting only by organizations that inization attempt to influent point on a legislative matter.  ent (include compensation egislators, or the public led or broadcast statement ations for lobbying purpos	oce national, state or locer or referendum, through the control of	ocal legislation, in ough the use of: on lines c through continues c through sistative body any other means	gh <b>h.</b> )	g any	Х	X X X X	

Page 6

Schedule A (Form 990 or 990-EZ) 2003 PUGET SOUNDKEEPER ALLIANCE Fart VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See Instructions)

51 Did th	he reporting organization of	directly or inc	directly engage in any of the followin ganizations) or in section 527, relati	g with any other organization described no to political organizations?	ın section	1 501(d	;)
			a noncharitable exempt organization		[	Yes	No
	Cash				51a (i)		X
• •					a (ii)		X
• • •	r transactions:						
(i)S	Sales or exchanges of ass	ets with a no	encharitable exempt organization		b (i)		<u> X</u>
• • • • • • • • • • • • • • • • • • • •	_		ble exempt organization		b (ii)		X
• •	Rental of facilities, equipm				b (iii)		X
	-				b (iv)		X
(v)L	oans or loan guarantees				b (v)		X
(vi)F	Performance of services of	r membershi	p or fundraising solicitations		b (vi)		X
c Shari	ing of facilities, equipment	t, mailing list	s, other assets, or paid employees.		<u> </u>	لـبِـا	X
<b>d</b> If the the g any to	e answer to any of the abo loods, other assets, or ser ransaction or sharing arra	ve is 'Yes,' o vices given l ngement, sh	complete the following schedule. Col by the reporting organization. If the color in column (d) the value of the go	umn (b) should always show the fair man organization received less than fair mark ods, other assets, or services received:	et value i	or in	
(a) Line no.	<b>(b)</b> Amount involved		(c) noncharitable exempt organization	(d) Description of transfers, transactions, and s			s
N/A	1						
	<u></u>						
				<del> </del>			
	·			ļ			
		<del></del>					
_	<del> </del>	<del> </del>					
desc	ribed in section 501(c) of t	the Code (ot	nated with, or related to, one or mor her than section 501(c)(3)) or in sect	e tax-exempt organizations ion 527?	► ☐ Ye	s X	No
D IT TE	es,' complete the following  (a)	scriedule.	(b)	(c)			
	Name of organization		Type of organization	Description of relation	ship		
N/A		<del></del>					
·· <del>·</del>	<del></del>						
· · · · · · · · · · · · · · · · · · ·							
				•			

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

OMB No. 1545-1709

Department of the Treasury Internal Revenue Service

File a separate application for each return.

• If you are	filing for an Automatic 3-Month	Extension, complete only Part I and check this bo	x		► X
		matic) 3-Month Extension, complete only Part II (			+
Note: Do not Form 8868.	complete Part II unless you have	already been granted an automatic 3-month exte	ension on a previo	usly filed	
		sion of Time — Only submit original (no copies		7. 7%	
Note: Form S	<b>990-T corporations</b> requesting an	automatic 6-month extension – check this box an	d complete Part I	only	▶ [
All other corp	porations (including Form 990-C fi trusts must use Form 8736 to rec	lers) must use Form 7004 to request an extension Juest an extension of time to file Form 1065, 1066,	of time to file inc	ome tax returns Pa	ırtnerships,
	Name of Exempt Organization	and an extension of time to me to other roce, roce,	, 01 10+1	Employer Identification	number
Type or					
print File by the	PUGET SOUNDKEEPER AL	LIANCE		91-1285783	
due date for	Number, street, and room or suite number	. If a P.O box, see instructions	· · · · · · · · · · · · · · · · · · ·		
filing your return. See	4461 LEARY WAY NW				
instructions.	City, town or post office. For a foreign add	ress, see instructions		state ZIP code	1
	SEATTLE, WA 98107				
Check type o	f return to be filed (file a separate	application for each return):		<del> </del>	
X Form 990		Form 990-T (corporation)	Form 472	20	
Form 990	-BL	Form 990-T (Section 401(a) or 408(a) trust)	Form 522	27	
Form 990	-EZ	Form 990-T (trust other than above)	Form 606	69	
Form 990	-PF	Form 1041-A	Form 887	70	
		or place of business in the United States, check t			▶ 🔲
<ul><li>If this is fe</li></ul>	or a <b>Group Return,</b> enter the orga	anization's four digit Group Exemption Number (Gl	EN) If	this is for the whole	a group,
check this	s box ► 🔲 . If it is for part of th	ne group, check this box . 🕨 🗌 and attach a list	with the names a	nd EINs of all memb	pers
	sion will cover.				
-	•	, for <b>990-T corporation</b> ) extension of time until		20 <u>04</u> ,	
		the organization named above. The extension is f	for the organization	n's return for:	
	calendar year 20 <u>03</u> or				
	tax year beginning	, 20, and ending, 2i	°·		
2 If this ta	x year is for less than 12 months	, check reason: Initial return Final	return C	Change in accounting	g period
<b>3a</b> If this ap nonrefu	oplication is for Form 990-BL, 990 ndable credits. See instructions .	-PF, 990-T, 4720, or 6069, enter the tentative tax,	, less any	\$	0.
<b>b</b> If this at Include	oplication is for Form 990-PF or 9 any prior year overpayment allow	90-T, enter any refundable credits and estimated red as a credit	tax payments mad	de. \$	0.
c Balance coupon	<b>Due.</b> Subtract line 3b from line 3 or, if required, by using EFTPS (	a. Include your payment with this form, or, if requ Electronic Federal Tax Payment System). See ins	ired, deposit with	FTD \$	0.
		Signature and Verification			
Under penalties o	f perjury, I declare that I have examined this	return, including accompanying schedules and statements, and	to the best of my knowl	ledge and belief, it is true,	correct, and
complete, and tha	aum aumorized to prepare this form.	$\circ$			
	Klassol	Aug.		da.	170/
Signature >	Color AA A	1 ide -		Date ► 7 14	. 1 44 .
BAA For Pap	erwork Reduction Act Notice, se	e instructions.		Form <b>88</b>	<b>58</b> (12-2000)

003	Federal Statements	Page
	PUGET SOUNDKEEPER ALLIANCE	91-12857
07/04		. 05:01F
Statement 1 Form 990, Part I, Line 9 Net Income (Loss) from Special	Events	
Special Events	Less Less Gross Contri- Gross Direct <u>Receipts butions Revenue Expenses</u>	Net Income (Loss)
Oyster Day and Others Tot	al $\frac{67,986}{\$ 67,986}$ $\frac{0.}{\$ 67,986}$ $\frac{67,986}{\$ 67,986}$ $\frac{20,174}{\$ 20,174}$	47,812 47,812
Statement 2 Form 990, Part II, Line 43 Other Expenses		
	(A) (B) (C) Program Management Total Services & General Fun	(D) draising
Bank Charges Boat Expenses Fees and Subscriptions	482. 50. 7,193. 7,193. 310. 310.	432.
Fundraising Expenses Insurance and Licenses Legal Fund Costs Professional Services	7,912. 2,510. 1,690. 508. 15,644. 15,644. 6,668. 4,675. 1,130.	7,912. 312. 863.
Program Services Volunteer Support	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	9,519.
Statement 3 Form 990, Part IV, Line 57 Land, Buildings, and Equipment		
Category		ook lue
Furniture and Fixtures	Total $\frac{$}{22,692}$ . $\frac{$}{20,373}$ . $\frac{$}{5}$	2,319. 2,319.
Statement 4 Form 990, Part IV, Line 58 Other Assets		
Rent Deposit		1,500. 1,500.

003	Federal Statemen	nts		Page
	PUGET SOUNDKEEPER AL	LIANCE		91-12857
07/04				05:53
Statement 5 Form 990, Part IV-A, Line b(4) Other Amounts				
Event Expenses			Total \$	20,174 20,174
Statement 6 Form 990, Part IV-B, Line b(4) Other Amounts				
Event Expenses			Total \$	20,174 20,174
Obstance A 7	<del></del>			
Statement 7 Form 990, Part V List of Officers, Directors, Trustee	es, and Key Employees			
Name and Address	Title and Average Hours Per Week Devoted	Compen-	Contri- bution to EBP & DC	Account/
Mary D411am	Desaidant	<b>A</b> 0		
Tom Diller PO Box 3805 Bellevue, WA 98009	President 1	\$ 0.	\$ 0.	Ş
PO Box 3805	Treasurer	0.	0.	
PO Box 3805 Bellevue, WA 98009 Suzie Burke 4401 Leary Way NW	1 Treasurer	·	•	
PO Box 3805 Bellevue, WA 98009 Suzie Burke 4401 Leary Way NW Seattle, WA 98107 Marilyn Heiman 4401 Leary Way NW	1 Treasurer 1 Legal	0.	0.	
PO Box 3805 Bellevue, WA 98009 Suzie Burke 4401 Leary Way NW Seattle, WA 98107 Marilyn Heiman 4401 Leary Way NW Seattle, WA 98107 Tom Putnam 4401 Leary Way NW	Treasurer 1 Legal	0.	0.	
PO Box 3805 Bellevue, WA 98009  Suzie Burke 4401 Leary Way NW Seattle, WA 98107  Marilyn Heiman 4401 Leary Way NW Seattle, WA 98107  Tom Putnam 4401 Leary Way NW Seattle, WA 98107  Paul Grutzner 4401 Leary Way NW	Treasurer 1 Legal 1 Fundraising	0. 0.	0. 0.	
PO Box 3805 Bellevue, WA 98009  Suzie Burke 4401 Leary Way NW Seattle, WA 98107  Marilyn Heiman 4401 Leary Way NW Seattle, WA 98107  Tom Putnam 4401 Leary Way NW Seattle, WA 98107  Paul Grutzner 4401 Leary Way NW Seattle, WA 98108  Jim Frush 4401 Leary Way NW	Treasurer 1 Legal 1 Fundraising 1	<ul><li>0.</li><li>0.</li><li>0.</li></ul>	0. 0. 0.	\$

003 Federal Statements				Page 3
	PUGET SOUNDKEEPER ALL	IANCE		91-1285783
7/07/04				05:53PM
Statement 7 (continued) Form 990, Part V List of Officers, Directors, Trusto	ees, and Key Employees			
Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
Lee Moyer 4401 Leary Way NW Seattle, WA 98107	Programs 1	\$ 0.		
Mayor Greg Nickels 4401 Leary Way NW Seattle, WA 98107	Director 1	0.	0.	0.
David Sale 4401 Leary Way NW Seattle, WA 98107	Programs 1	0.	0.	0.
Michael Mondello 4401 Leary Way NW Seattle, WA 98107	Director 1	0.	0.	0.
Kate Pflaumer 4401 Leary Way NW Seattle, WA 98107	Legal 1	0.	0.	0.
Glen Sims 4401 Leary Way NW Seattle, WA 98107	Legal 1	0.	0.	0.
Bea Kelleigh 4401 Leary Way NW Seattle, WA 98107	Programs 1	0.	0.	0.
Jess Trenholme 4401 Leary Way NW Seattle, WA 98107	Legal 1	0.	0.	0.
	Total	<u>\$ 0.</u>	<u>\$</u>	<u>\$ 0.</u>
Statement 8 Schedule A, Part IV-A, Line 22 Other Income				
Description	(a) 2002 (b) 2001	(c) 2000	(d) 1999	(e) Total
Fund Raising and Miscellan Tot	eous \$ 36,117. \$ 50,812. al \$ 36,117. \$ 50,812.	\$ 40,436. \$ 40,436.	24,849. 24,849.	\$ 152,214. \$ 152,214.

**\*** 

Form **5768** 

(Rev December 1996)

Department of the Treasury

## Election/Revocation of Election by an Eligible Section 501(c)(3) Organization To Make Expenditures To Influence Legislation

(Under Section 501(h) of the Internal Revenue Code)

For	IRS	
Use	Only	ì

ILITELLIAI KEVELIUE SELVICE	tonder Section 30 i(n) of the int	ernai kevenue Code)	Use Only -		
Name of organization P以のと	t Soundkeeper Allian	nce	Employer identification number 91:1285783		
Number and strescor P	0. box no , if mail is not delivered to street address)		Room/suite		
City, town or post office,		ZIP -	4		
expenditures to	eligible organization, we hereby elect to hinfluence legislation, apply to our tax year end ax years until revoked.		23 and		
Note: This election	on must be signed and postmarked within the	first taxable year to which it applie	es.		
<b>Revocation—</b> As an eligible organization, we hereby revoke our election to have the provisions of section 501(h) of the Code, relating to expenditures to influence legislation, apply to our tax year ending					
·	and an arrange in ground in ground in a party is that in		th, day, and year)		
Note: This revoc	ation must be signed and postmarked before	the first day of the tax year to which	ch it applies.		
Under penalties of	perjury, I declare that I am authorized to mal	xe this (check applicable box) ▶	election revocation		
Aura	we named organization.  MYBUND Sura	nnell Burke Irease	rer 7/12/2002		
	ture of officer or trustee)	(Type or print name and title)	(Date)		

### **General Instructions**

Section references are to the Internal Revenue Code.

Section 501(c)(3) states that an organization exempt under that section will lose its tax-exempt status and its qualification to receive deductible charitable contributions if a substantial part of its activities are carried on to influence legislation. Section 501(h), however, permits certain eligible 501(c)(3) organizations to elect to make limited expenditures to influence legislation. An organization making the election will, however, be subject to an excise tax under section 4911 if it spends more than the amounts permitted by that section. Also, the organization may lose its exempt status if its lobbying expenditures exceed the permitted amounts by more than 50% over a 4-year period. For any tax year in which an election under section 501(h) is in effect, an electing organization must report the actual and permitted amounts of its lobbying expenditures and grass roots expenditures (as defined in section 4911(c)) on its annual return required under section 6033. See Schedule A (Form 990). Each electing member of an affiliated group must report these amounts for both itself and the affiliated group as a whole.

To make or revoke the election, enter the ending date of the tax year to which the election or revocation applies in item 1 or 2, as applicable, and sign and date the form in the spaces provided.

Eligible Organizations.—A section 501(c)(3) organization is permitted to make the election if it is not a disqualified organization (see below) and is described in:

- 1. Section 170(b)(1)(A)(ii) (relating to educational institutions),
- Section 170(b)(1)(A)(iii) (relating to hospitals and medical research organizations),
- Section 170(b)(1)(A)(iv) (relating to organizations supporting government schools),
- Section 170(b)(1)(A)(vi) (relating to organizations publicly supported by charitable contributions),
- Section 509(a)(2) (relating to organizations publicly supported by admissions, sales, etc.), or
- Section 509(a)(3) (relating to organizations supporting certain types of public charities other than those section 509(a)(3) organizations that support section 501(c)(4), (5), or (6) organizations).

**Disqualified Organizations.**—The following types of organizations are not permitted to make the election:

 Section 170(b)(1)(A)(i) organizations (relating to churches),

- An integrated auxiliary of a church or of a convention or association of churches, or
- c. A member of an affiliated group of organizations if one or more members of such group is described in a or b of this paragraph.

Affiliated Organizations.—Organizations are members of an affiliated group of organizations only if (1) the governing instrument of one such organization requires it to be bound by the decisions of the other organization on legislative issues, or (2) the governing board of one such organization includes persons (i) who are specifically designated representatives of another such organization or are members of the governing board, officers, or paid executive staff members of such other organization, and (ii) who, by aggregating their votes, have sufficient voting power to cause or prevent action on legislative issues by the first such organization.

For more details, see section 4911 and section 501(h).

**Note:** A private foundation (including a private operating foundation) is not an eligible organization.

**Where To File.**—Mail Form 5768 to the Internal Revenue Service Center, Ogden, UT 84201-0027.