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GOVERNMENT COPY

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047 Open to Public Inspection

ΑI	For the	2012 calendar year, or tax year beginning and	ending	_	
В	Check if applicable	C Name of organization		D Employer identific	ation number
	Addres	PEACETREES VIETNAM			
	Name change	Doing Business As		20-10	051471
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Termin- ated	JUJ OLIVE WAI BIE 1220		(206)	
Ļ	Amend	City, town, or post office, state, and ZIP code		G Gross receipts \$	969,614.
	Applica tion pending	SEATTLE, WA 90101		H(a) Is this a group re	
	. ,	F Name and address of principal officer: MICHAEL AUCH		for affiliates?	Yes X No
_		SAME AS C ABOVE	er [07	H(b) Are all affiliates incl	
		mpt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) ex ► WWW.PEACETREESVIETNAM.ORG	or 527		list. (see instructions)
		organization: X Corporation Trust Association Other	I Voor	H(c) Group exemption	n number ► State of legal domicile: WA
		Summary	L I Gai	or formation. 2004 N	State of legal doffliche. W23
_		Briefly describe the organization's mission or most significant activities: PEAC	ETREES	VIETNAM WO	RKS TO
Activities & Governance		CREATE A SAFE ENVIRONMENT AND ECONOMIC O	PPORTU	NITY IN COM	MUNITIES
rna	_	Check this box if the organization discontinued its operations or dispo			
ove	1	Number of voting members of the governing body (Part VI, line 1a)			14
Ğ		Number of independent voting members of the governing body (Part VI, line 1b)			14
es 2		otal number of individuals employed in calendar year 2012 (Part V, line 2a)			5
ξĖ	6 7	Total number of volunteers (estimate if necessary)		6	116
Act	7a 1	otal unrelated business revenue from Part VIII, column (C), line 12			0.
_	۱d	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
				Prior Year	Current Year
ne		Contributions and grants (Part VIII, line 1h)		872,115.	904,476.
Revenue	1	Program service revenue (Part VIII, line 2g)		94,303.	64,859. 279.
Be	1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		1,385. -2,984.	-11,989.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		964,819.	957,625.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		27,182.	24,105.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
"	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	226,607.	245,392.	
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
þer	h 7	Total fundraising expenses (Part IX, column (D), line 25) \blacktriangleright 45, 2	52.	•	•
Щ		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		677,915.	661,219.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		931,704.	930,716.
	19 F	Revenue less expenses. Subtract line 18 from line 12		33,115.	26,909.
Net Assets or Fund Balances		·		ginning of Current Year	End of Year
sets	20 7	Total assets (Part X, line 16)		327,875.	380,218.
t As	21 7	Total liabilities (Part X, line 26)		32,395.	21,057.
캺	22 1	Net assets or fund balances. Subtract line 21 from line 20		295,480.	359,161.
_	art II	Signature Block			
		ties of perjury, I declare that I have examined this return, including accompanying schedule		· · · · · · · · · · · · · · · · · · ·	knowledge and belief, it is
true	, correct	, and complete. Declaration of preparer (other than officer) is based on all information of w	mich preparer	nas any knowledge.	
C:~	_	Signature of officer		I Date	
Sig		MICHAEL AUCH, EXECUTIVE DIRECTOR			
Her		Type or print name and title			
		Print/Type preparer's name Preparer's signature	I	Date Check	PTIN
Pai		STEVEN L. ELLISON, CPA		if self-employe	P00089259
		Firm's name BRANTLEY JANSON YOST & ELLISON	<u> </u>	Firm's EIN	91-0998786
		Firm's address 1617 SOUTH 325TH STREET			
		FEDERAL WAY, WA 98003-6009		Phone no. 2!	53-838-3484
Ma	v the IR	S discuss this return with the preparer shown above? (see instructions)		1	X Yes No

Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission: PEACETREES VIETNAM IS A SEATTLE-BASED HUMANITARIAN ORGANIZATION
	WORKING IN CENTRAL VIETNAM TO ASSIST THOSE WHOSE LIVES AND LIVELIHOODS
	ARE THREATENED BY THE EXPLOSIVE REMNANTS OF WAR. IT SPONSORS DEMINING
	AND MINE RISK EDUCATION, VICTIM ASSISTANCE, AND COMMUNITY BUILDING
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 621,423 • including grants of \$) (Revenue \$)
	LANDMINE AND UNEXPLODED ORDNANCE REMOVAL:
	PEACTREES VIETNAM SPONSORS THE REMOVAL OF LANDMINES AND UNEXPLODED
	ORDNANCE TO PROMOTE A SAFE AND HEALTHY ENVIRONMENT FOR CHILDREN AND
	FAMILIES IN CENTRAL VIETNAM. THE LANDMINE CLEARANCE TEAMS PROACTIVELY
	CLEAR LAND KNOWN TO BE CONTAMINATED SO THAT IT CAN BE USED PRODUCTIVELY
	FOR FARMING AND COMMUNITY ACTIVITIES. IN ADDITION, THE CLEARANCE TEAMS
	REMOVE UNEXPLODED ORDNANCE NEAR SCHOOLS, COMMUNITY CENTERS, HOMES, AND
	OTHER PUBLIC PLACES BY RESPONDING TO REPORTS RECEIVED THROUGHOUT THE
	YEAR. A TOTAL OF 10,102 ITEMS OF UNEXPLODED ORDNANCE WERE REMOVED IN
	2012, COVERING 39 ACRES OF CLEARED LAND AND BENEFITING 958 FAMILIES.
	ZUIZ, COVERING 39 ACKES OF CHEAKED DAND AND BENEFITING 930 FAMILIES.
415	(Code:) (Expenses \$ 79,453 • including grants of \$) (Revenue \$ 64,859 •)
4b	(Code:) (Expenses \$ /9,453. including grants of \$) (Revenue \$) (Revenue \$)
	PEACETREES CITIZEN DIPLOMACY TRIPS OFFER AN OPPORTUNITY TO EXPERIENCE
	VIETNAM FROM A UNIQUE AND REWARDING PERSPECTIVE. THE PURPOSE OF THE
	TRIPS IS TO BRING AMERICAN AND VIETNAMESE PEOPLE TOGETHER TO WORK AND
	PLAY AS A MEANS OF PROMOTING PEACE, FRIENDSHIP, AND RENEWAL THROUGH
	MUTUAL UNDERSTANDING AND RESPECT. TRAVELERS PLAY A KEY ROLE BY SERVING
	AS VOLUNTARY AMBASSADORS OF FRIENDSHIP AND COOPERATION. IN 2012, THERE
	WAS 63
	TRAVELERS THAT PARTICIPATED IN 5 TRIPS.
	TRAVELENCE THAT TAKTICITATED IN 5 TRITE.
40	(Code:) (Expenses \$ 72,575 • including grants of \$ 24,105 •) (Revenue \$)
40	(Code:) (Expenses \$ /2,5/5 · including grants of \$ 24,105 ·) (Revenue \$) ECONCOMIC DEVELOPMENT AND SCHOLARSHIPS FOR CHILDREN:
	PEACETREES VIETNAM SEEKS TO IMPROVE THE LIVES OF FAMILIES AND CHILDREN
	IN QUANG TRI PROVINCE THROUGH COMMUNITY BUILDING AND ECONOMIC
	DEVELOPMENT ACTIVITIES. IT BUILDS LIBRARIES AND KINDERGARTENS AND
	PROVIDES MICROCREDIT LOANS. ITS IN-COUNTRY SCHOLARSHIP PROGRAMS
	AWARDED BENEFITS BASED ON NEED TO 200 CHILDREN OF VICTIMS OF EXPLOSIVE
	ACCIDENTS. IN 2012, THERE WERE 7,808 VISITORS TO 11 LIBRARIES; 278
	STUDENTS ATTENDING 7 SCHOOLS; AWARDED 50 NEW MICROCREDIT LOANS.
	SIGNERILS WITEMDING / SCHOOLD! WANDED 30 NEW MICKOCKEDII DOWNS.
	Otherwise and in a (Paradite in Orbertale O.)
4d	Other program services (Describe in Schedule O.)
_	(Expenses \$ 6,742 • including grants of \$) (Revenue \$) Total program service expenses \$ 780,193 •
<u>4e</u>	Total program service expenses ► 780 , 193 .

232002 12-10-12

Part IV | Checklist of Required Schedules

1 Is the organization described in section S01(c)(s) or 49AT(s(1)) (either than a private foundation? If Yes, "complete Schedule B, Schedule of Contributions" 2 Is the organization required to complete Schedule B, Schedule of Contributions 3 J X 2 Is the organization required in direct or indexed prolitical campaign activities on behalf of or in opposition to candidates for public office? If Yes, "complete Schedule C, Part II 3 J X 4 Section S01(c)(3) organization. Bit the organization engage in lobbying activities, or have a section 501(f) election in effect of turning the tax year? If Yes, "complete Schedule C, Part II 4 Section S01(c)(3) organization. Bit the organization engage in lobbying activities, or have a section 501(f) election in effect of turning the tax year? If Yes, "complete Schedule C, Part II 5 Is the organization a section S01(c)(4), 501(c)(5), or 501(c)(6) organization that receives memberahip dues, assessments, or similar amounts as defined in Part II and anothers in such turning the text year? If Yes, "complete Schedule D, Part II 6 D of the organization maritatin any donor advised funds or any similar funds or accounts? If Yes, "complete Schedule D, Part II 7 D of the organization maritation or investment of amounts in such funds or accounts? If Yes, "complete Schedule D, Part II 8 D of the organization maritation of works of art, historical treasures, or other similar assess? If Yes, "complete Schedule D, Part II 9 D of the organization maritation and the part II and				Yes	No
2 Is the organization required to complete Schedule of Contributions 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 4 Section 501(c/R) 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 5 Is the organization as ection 501(c/R) os 10(c/R) or 501(c/R) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedule Sel 191 If "Yes," complete Schedule C, Part III 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advise on the distribution or investment and areas, or historic structures? If "Yes," complete Schedule D, Part III 10 Did the organization report an amount in Part X, line 121, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, in provide credit counseling, didot management, credit repair, or debt negotiation services? 11 If the organization report an amount for Irrestments - program related in Part X, line 10 Part X,	1				
3 Life the organization engage in direct to indirect political campaign activities on behalf of or in opposition to candidates for public officer if "Yes," complete Schedule C, Part I					
A Section 501(kg) organizations. Did the organization engage in lobbying activities, or have a section 501(ky) election in effect during the tax year? If "Yes," complete Schedule C, Part II X X X S the organization associan 501(ky), 501(ky), or 501			2	Λ	
4 Sctions 501(c)(3) organizations. Dut the organization engage in lobbying activities, or have a section 501(i)(s) election in effect during the tax year? If "Yes," complete Schedule C, Part II X X S is the organization a section 501(i)(4), 501(i)(5), or 501(i)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-191 If "Yes," complete Schedule C, Part II S X X S S S S S S S	3		_		v
during the tax year / If "Yes," complete Schedule C, Part II 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 88.19? // "Yes," complete Schedule C, Part III 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advise on the distribution or receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures for "Yes," complete Schedule D, Part III	4		3		
Signature Sign	4		1		x
similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III or bright organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II or be determined. It is a such a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures If "Yes," complete Schedule D, Part III or amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV or Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasiendowments? If "Yes," complete Schedule D, Part IV or Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IV or Did the organization report an amount for investments - program related in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 18? If "Yes," complete Schedule D, Part X or Did the organization report an amount for the assets in Part X, line 19 that is 5% or more of its total assets reported in Part X, line 18? If "Yes," complete Schedule D, Part X or Did the organization an amount for the assets in Part X, line 19 that is 5% or more of its total assets reported in Part X, line 19? If "Yes," complete Schedule D, Part X or Did the organization an amount for the assets in Part X, line 19 that is 5% or more of its total assets reported in Par	5		7		
Body Did the organization maintain any donor advised funds or any similar funds or accounts ?!! "Yes," complete Schedule D, Part !! Provide advice on the distribution or investment of amounts in such funds or accounts?!! "Yes," complete Schedule D, Part !! Provide advice on the distribution or investment of amounts in such funds or accounts?!! "Yes," complete Schedule D, Part !! Provide advice on the distribution or investment of amounts to preserve open space, the environment, historic land areas, or historic structures?!! "Yes," complete Schedule D, Part !! Provide advice on the organization collections of works of art, historical treasures, or other similar assets?!! "Yes," complete Schedule D, Part !! Provide advice on 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 dobt negotiation services? !! "Yes," complete Schedule D, Part !! Did the organization report an amount for land, buildings, and equipment in Part X, line 10? !! "Yes," complete Schedule D, Part V! Did the organization report an amount for investments - other securities in Part X, line 10? !! "Yes," complete Schedule D, Part V! Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? !! "Yes," complete Schedule D, Part V! Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? !! "Yes," complete Schedule D, Part V! 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? !! "Yes," complete Schedule D, Part X! Did the organization separate or consolidated financial statements for the tax year? !! "Yes," complete Schedule D, Part X !! Did the organization separate, ind	J		5		х
provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 8	6				
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structure? If "Yes," complete Schedule D, Part III 9 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 9 Did the organization peport an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization disconstruction of the organization answer to any of the following questions is "Yes," then complete Schedule D, Part V, If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 12 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII 13 Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 2 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 VII 2 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 X 2 Did the organization included in consolidated financial statements for the tax year rick and accesses the organization in separate or consolidated financial statements for the tax year rick and accesses the organization included in an accession under Fin A 8		,	6		Х
B Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 12 Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11 D X 11 If the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII 12 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 VII 12 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 X 13 Did the organization in separate, independent audited financial statements for the tax year include a footnote that addresses the organization included in consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X 14 Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X I and XII is optional 15 Did the organization ineport on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any orga	7				
Schedule D, Part III 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII b Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII c Did the organization report an amount for investments - organ related in Part X, line 16? 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 IVIII 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 X 11 If X 12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 13 Is the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X 14 Did the organization obtain separate or consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII is potional 13 Is the organization obtain separate or consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D,		the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V III If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable. 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI III III III III III III III III III	8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, premanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as asplicable. 12 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 13 Did the organization report an amount for investments other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 14 Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 15 Did the organization is separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III X 16 Did the organization is separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III X 17 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 18 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts I and IV 19 Did the organization report at otal of more than \$10,000 of expe		Schedule D, Part III	8		Х
16	9				
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. 12 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII 13 Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 14 Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 15 Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X III 16 Did the organization is a part X, line 16? If "Yes," complete Schedule D, Part X III 17 Did the organization of building to uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X III 18 Did the organization of building to uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X III 19 Did the organization answered "No" to line 12a, then completing Schedule D, Part X III and XII 19 Did the organization answered "No" to line 12a, then completing Schedule D, Part X III and XII 19 Did the organization report an office, employees, or agents outside of the United States? 10 Did the organization organized in action 170(D)(I)(A)(I)(I) (Firs," complete Schedule D, Part X III 19 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III a					
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Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 X	16				37
column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 to and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 X			16		_X_
Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X	17		47		y
1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X	10		17		
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X	10		12	х	
complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X	19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII. line 9a? If "Yes "			
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H			19		х
	20a	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," complete Schedule H			
			20b		

Form **990** (2012)

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
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		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		Х
b	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			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 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		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
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			37
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			37
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			Х
0.5	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Λ
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	0Fh		
00	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	26		Х
27	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		-22
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	3/		- 22
38	Note. All Form 990 filers are required to complete Schedule O	38	x	
	140te: All 1 0111 990 filets are required to complete ochequie 0	30	>	

Form **990** (2012)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	3			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportal	ole gaming			
	(gambling) winnings to prize winners?			1c	Х	
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	5			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns?		2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	author	ity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accour	nt)?	4a	Х	
b	If "Yes," enter the name of the foreign country: ► VIETNAM					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial A	Accour	nts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the					
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribut					
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices p	rovided to the payor?	7a		Х
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	as requ	uired			
	to file Form 8282?			7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontrac	t?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr	act?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 88	99 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation fil	e a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Di	id the sı	upporting			
	$organization, or a donor \ advised \ fund \ maintained \ by \ a \ sponsoring \ organization, \ have \ excess \ business \ holdings \ at$	any tim	e during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
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.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
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					
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c				
				14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	e O		14b	000	(00.15)
				Form	1 990	(2012)

Pai	† VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.	"No" r	espon	se
	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 14			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	X	
	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	_		v
200	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		V	Na
100	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	IUa		
b	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
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			
2	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17 10	List the states with which a copy of this Form 990 is required to be filed WA		.lo	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) of the public inspection. Indicate how you made these available. Check all that apply	avallab	иe	
	for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncial	
13	statements available to the public during the tax year.	u midi	iciai	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion: 🖿	•	
	MICHAEL AUCH, DIRECTOR - (206) 441-6136			
	1201 5 2 2500 25 20101			

232006 12-10-12

Form **990** (2012)

1301 5TH AVE STE 2500, SEATTLE, WA

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

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

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

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

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per	box	not c	ss pe	ition more rson	than	h an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer P	Key employee	Highest compensated employee	ĺ	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) JERILYN BRUSSEAU BOARD MEMBER	30.00	х						0.	0.	0.
(2) LINDA CHEEVER	1.00	<u> </u>				<u> </u>	┢	0.	0.	•
BOARD MEMBER	1.00	X						0.	0.	0.
(3) RAE CHENEY	2.00	1					┢	0.	0.	<u></u>
BOARD MEMBER	2.00	x						0.	0.	0.
(4) CYNTHIA CHIROT	1.00							-	_	
PRESIDENT		x		х				0.	0.	0.
(5) TRACY GARLAND	1.00									
BOARD MEMBER		x						0.	0.	0.
(6) PAUL KENNEL	1.00									
BOARD MEMBER		X						0.	0.	0.
(7) EVIN MORRIS	1.00									
TREASURER		X		Х				0.	0.	0.
(8) THOA NGUYEN	2.00									
BOARD MEMBER		Х						0.	0.	0.
(9) LAM NGUYEN-BULL	1.00									
BOARD MEMBER		X						0.	0.	0.
(10) BOB STOKES	15.00	1						_	_	_
VICE PRESIDENT		Х		Х				0.	0.	0.
(11) ALY VANDER STOEP	3.00								_	
BOARD MEMBER		Х						0.	0.	0.
(12) JOE YENCICH	1.00	ļ								
BOARD MEMBER		Х						0.	0.	0.
(13) RON BEMAN	2.00	١								•
BOARD MEMBER	1 00	Х						0.	0.	0.
(14) KEVIN ESPIRITO	1.00	,,								0
BOARD MEMBER	40.00	Х		_	_	<u> </u>	\vdash	0.	0.	0.
(15) BLAIR BURROUGHS	40.00	-		x				16 220	0.	399.
EXECUTIVE DIRECTOR (16) MICHAEL AUCH	40.00	-		^		\vdash	\vdash	16,329.	0.	333.
EXECUTIVE DIRECTOR	40.00	1		X				68,996.	0.	1,698.
EARCOITVE DIRECTOR	+	-	-	₽		\vdash	\vdash	00,330.	0.	1,090.
		1								
		<u> </u>						1		

Form **990** (2012)

Part	VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	/ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
	(A)	(B)			(0	C)			(D)	(E)			(F)	
	Name and title	Average	(do	Position (do not check more than one					Reportable	Reportable	,	Es	timate	ed
		hours per	box	, unle	ss pe	ss person is both and a director/trustee)			i .	compensation		an	nount	of
		week	_	cer ar	nd a d	irecto	or/trus	tee)	from	from related	t		other	
		(list any	ector						the	organization			pensa	
		hours for	or dir	ao			ated		organization	(W-2/1099-MI	SC)		om the	
		related	stee	truste			bens		(W-2/1099-MISC)			_	anizati	
		organizations below	lal tru	onal		oloye	e com						d relate	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	rmer				orga	anizatio	ons
			르	Ë	Ð	ā.	포 등	윤						
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							Ļ		85,325.				2 0	07
1b 5	Sub-total								0.		0.		2,0	97. 0.
	Total from continuation sheets to Part V								85,325.		0.		2,0	_
	Total (add lines 1b and 1c)								-				Z , U	9 / •
	Total number of individuals (including but n	ot limited to th	ose	liste	ed al	bov	e) wh	าo r	eceived more than \$100	,000 of reportab	·le			0
	compensation from the organization												Yes	No
3 [Did the organization list any former officer,	director or tru	ıeta	o ko	N/ Or	mple	2000	or	highest compensated a	mplovee on	ı		100	110
	line 1a? If "Yes," complete Schedule J for s	•		c, icc	y Ci	пріс	усс	, 01	riigilest compensated e	inployee on		3		Х
	For any individual listed on line 1a, is the su			omn	ensa	atior	 1 and	 to h	her compensation from	the organization				
	and related organizations greater than \$15									ine organization		4		Х
	Did any person listed on line 1a receive or a									dual for services	3	-		
	rendered to the organization? If "Yes," com	-				-			-			5		Х
	on B. Independent Contractors	•											<u>'</u>	
1 (Complete this table for your five highest co	mpensated in	depe	ende	ent c	ont	racto	ors 1	that received more than	\$100,000 of cor	npens	ation f	rom	
t	the organization. Report compensation for	the calendar y	ear	endi	ing v	vith	or w	ithi	n the organization's tax	year.				
	(A)	addraga	3.77	~ ****	_				(B)	om do o o	_	(C		_
	Name and business	address	M	INC	<u> </u>				Description of s	ervices	-	ompe	nsatio	1
								_						
2	Total number of independent contractors (i	ncluding but n	ot li	mite	d to	tho	se li	stec	d above) who received m	nore than				
	\$100,000 of compensation from the organi						0							
												Form	വവ 🍒	040

	t VII	Statement of Revenue Check if Schedule O contains a response	to any question i	in this Part VIII	<u></u>	······	
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f: \$ Total. Add lines 1a-1f	Business Code	904,476.			
Program Service Revenue	b c d e		900099	64,859.	64,859.		
		Total. Add lines 2a-2f		64,859.			
	3	Investment income (including dividends, intercother similar amounts) Income from investment of tax-exempt bond p	proceeds >	279.			279.
	b	Royalties (i) Real Gross rents Less: rental expenses Rental income or (loss)	(ii) Personal				
	d 7 a	Net rental income or (loss) Gross amount from sales of assets other than inventory (i) Securities	(ii) Other				
Other Revenue	c d	Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Gross income from fundraising events (not including \$ 156,824 • of contributions reported on line 1c). See	0				
Other	С	Net income or (loss) from fundraising events Gross income from gaming activities. See	11,989.	-11,989.			-11,989.
	С	Part IV, line 19 a Less: direct expenses b Net income or (loss) from gaming activities Gross sales of inventory, less returns and allowances a	<u> </u>				
		Less: cost of goods sold b Net income or (loss) from sales of inventory Miscellaneous Revenue					
	b c d	All other revenue					
232009 12-10-	12	Total. Add lines 11a-11d Total revenue. See instructions.		957,625.	64,859.	0	-11,710. Form 990 (2012)

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response to any question in this Part IX (B) (D) Do not include amounts reported on lines 6b. Management and general expenses Total expenses Program service Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments. organizations, and individuals outside the 24,105 24,105. United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 85,325 50,842. 24,580. 9,903. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 133,041. Other salaries and wages 79,275. 38,325 15,441. 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 27,026. 16,104. 7,785. 3,137. Payroll taxes 10 Fees for services (non-employees): Management 23,835, 606. 21,435, 1.794. Accounting С Professional fundraising services. See Part IV. line 17 Investment management fees _____ Other. (If line 11g amount exceeds 10% of line 25, 3,526 90. 3,171 265. column (A) amount, list line 11g expenses on Sch O.) 244. 127. 57. 60. Advertising and promotion 12 11,473. 5,973. 2,688. 2,812. 13 Office expenses 6,136.3,194. 1,437. 1,505. Information technology 14 Royalties 15 11,278. 2,642. 5,872. 2,764. 16 Occupancy 81,724. 85,697. 11. 3,962. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 22. 857. 142. <u>693.</u> Conferences, conventions, and meetings 19 20 Payments to affiliates _____ 21 2,062. 2,062. 22 Depreciation, depletion, and amortization 2,311. 1,203. 541. 567. 23 Other expenses, Itemize expenses not covered 24 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.) 456,068. 456,068. VIETNAM CONTRACTORS VIETNAM CONSTRUCTION CO 40,658. 40,658. 4,991. 9,586. POSTAGE AND SHIPPING 2,246. 2,349. 7,487. SMALL EQUIPMENT 7,157. 330. 1. All other expenses 930,716. 780,193. 105,271. 45,252. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. if following SOP 98-2 (ASC 958-720)

Form 990 (2012)

Part X | Balance Sheet

Par	rt X	Balance Sheet						
		Check if Schedule O contains a response to any	y questi	on in this Part X				
					(A) Beginning of year		(B) End of year	
	1	Cash - non-interest-bearing			149,949.	1	186,943.	
	2	Savings and temporary cash investments			117,954.	2	105,735.	
	3	Pledges and grants receivable, net			12,067.	3	14,989.	
	4	Accounts receivable, net			35,576.	4	8,720.	
	5	Loans and other receivables from current and for						
		trustees, key employees, and highest compensations	ated em	ployees. Complete				
		Part II of Schedule L		·		5		
	6	Loans and other receivables from other disquali						
		section 4958(f)(1)), persons described in section	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing					
		employers and sponsoring organizations of sec	•	· · · · ·				
		employees' beneficiary organizations (see instr).				6		
ets	7	Notes and loans receivable, net		10,789.	7	23,906.		
Assets	8	Inventories for sale or use				8	-	
•	9					9		
	10a	Land, buildings, and equipment: cost or other	1 1					
		basis. Complete Part VI of Schedule D	10a	41,248.				
	b	Less: accumulated depreciation	10b		0.	10c	39,186.	
	11	Investments - publicly traded securities		11	-			
	12	Investments - other securities. See Part IV, line		12				
	13	Investments - program-related. See Part IV, line		13				
	14	Intangible assets		14				
	15	Other assets. See Part IV, line 11	1,540.	15	739.			
	16	Total assets. Add lines 1 through 15 (must equ	327,875.	16	380,218.			
	17	Accounts payable and accrued expenses			32,395.	17	21,057.	
	18	Grants payable		18				
	19	Deferred revenue				19		
	20	Tax-exempt bond liabilities				20		
S	21	Escrow or custodial account liability. Complete				21		
Liabilities	22	Loans and other payables to current and former						
abi		key employees, highest compensated employee	es, and	disqualified persons.				
=		Complete Part II of Schedule L				22		
	23	Secured mortgages and notes payable to unrela				23		
	24	Unsecured notes and loans payable to unrelate				24		
	25	Other liabilities (including federal income tax, pa						
		parties, and other liabilities not included on lines	s 17-24).	Complete Part X of				
		Schedule D				25		
	26				32,395.	26	21,057.	
		Organizations that follow SFAS 117 (ASC 958	3), chec	k here ▶ 🐰 and				
es		complete lines 27 through 29, and lines 33 ar	ıd 34.					
anc	27	Unrestricted net assets			267,429.	27	294,338.	
3ak	28	Temporarily restricted net assets			28,051.	28	64,823.	
ΡĘ	29	Permanently restricted net assets				29		
Ξ		Organizations that do not follow SFAS 117 (A	SC 958), check here ▶Ш				
ō		and complete lines 30 through 34.						
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds				30		
Ass	31	Paid-in or capital surplus, or land, building, or ed	quipmen	t fund		31		
Ţ	32	Retained earnings, endowment, accumulated in		f=	00= 100	32	050 151	
<u>ө</u>	ı			20 - 100	22	i วิธีน 1 <i>6</i> 1		
Š	33	Total net assets or fund balances Total liabilities and net assets/fund balances			295,480. 327,875.	33 34	359,161. 380,218.	

Form **990** (2012)

Pa	rt XI Reconciliation of Net Assets				<u> </u>				
	Check if Schedule O contains a response to any question in this Part XI				X				
	· · ·								
1	Total revenue (must equal Part VIII, column (A), line 12)	1		7,6					
2	Total expenses (must equal Part IX, column (A), line 25)	2	93	0,7	<u> 16.</u>				
3	Revenue less expenses. Subtract line 2 from line 1	3	2	6,9	09.				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	29	5,4	80.				
5									
6									
7	Investment expenses	7							
8	Prior period adjustments	8							
9	Other changes in net assets or fund balances (explain in Schedule O)	9	3	6,7	72.				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,								
	column (B))	10	35	9,1	61.				
Pa	rt XII Financial Statements and Reporting								
	Check if Schedule O contains a response to any question in this Part XII				X				
				Yes	No				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х				
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a							
	separate basis, consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
b	Were the organization's financial statements audited by an independent accountant?		2b	X					
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,							
	consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,							
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X					
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.							
За	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit								
	Act and OMB Circular A-133?								
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit							
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	X					

Form **990** (2012)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

PEACETREES VIETNAM

Employer identification number 20-1051471

Pa	rt I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this part	:.) See inst	tructions.					
The	organ	ization is not a	a private foundation	because it is: (For lines 1	1 through	11, check	only one b	ox.)						
1		A church, cor	nvention of churche	s, or association of churc	ches desc	ribed in se	ction 170	(b)(1)(A)(i)).					
2		A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E.)									
3		A hospital or	a cooperative hospi	tal service organization of	described	in section	170(b)(1)	(A)(iii).						
4		A medical res	search organization	operated in conjunction	with a hos	pital desc	ribed in se	ction 170	(b)(1)(A)(ii	i). Enter	the hos	oital's nar	ne,	
		city, and stat	e:											
5		An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or op	perated by	a governi	mental uni	t describ	ed in			
		section 170	(b)(1)(A)(iv). (Comple	ete Part II.)										
6		A federal, sta	ite, or local governm	ent or governmental unit	t described	d in sectio	n 170(b)(1	I)(A)(v).						
7	X	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general	public o	lescribed	in	
		section 170(b)(1)(A)(vi). (Complete Part II.)												
8		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)												
9		An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from												
				nctions - subject to certa										
		income and u	unrelated business t	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nization	after Ju	ne 30, 19	75.	
		See section	509(a)(2). (Complete	e Part III.)										
10				perated exclusively to te	st for publ	ic safety. S	See sectio	n 509(a)(4	1).					
11		An organizati	on organized and or	perated exclusively for th	ne benefit (of, to perfo	orm the fur	nctions of	or to carr	y out the	purpos	es of one	or	
		more publicly	supported organiza	ations described in section	on 509(a)(1) or section	on 509(a)(2	2). See se	ction 509(a	a)(3). Ch	eck the	box that		
		describes the	e type of supporting	organization and comple	ete lines 1	1e through	11h.							
		a Type I	 Ту	ype II 💢 🗀 Ty	ype III - Fu	nctionally	integrated	c	ј 🗀 тур	e III - No	n-functio	onally inte	egrated	
е		By checking	this box, I certify tha	at the organization is not	controlled	I directly o	r indirectly	by one o	r more disc	qualified	persons	other th	an	
		foundation m	anagers and other t	han one or more publicly	y supporte	d organiza	ations des	cribed in s	ection 509	9(a)(1) or	section	509(a)(2)		
f		If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III					
		supporting or	rganization, check th	nis box									🔲	
g		Since August	t 17, 2006, has the o	organization accepted ar										
		(i) A person	n who directly or ind	lirectly controls, either al	one or tog	ether with	persons o	lescribed	in (ii) and (i	iii) below	',	Yes	No	
		the gove	erning body of the s	upported organization?							11	g(i)		
		(ii) A family	member of a persor	n described in (i) above?							119	g(ii)	<u> </u>	
				person described in (i) o								J(iii)	<u> </u>	
h		Provide the fo	ollowing information	about the supported org	ganization	(s).								
(i)	Name	of supported	(ii) EIN	(iii) Type of organization		rganization			(vi) Is organizatio		(vii) Am	ount of mo	onetary	
	orga	anization		(in col. (i) lis			ion in col.	l (i) organiz	ed in the	, ,	support	-	
				above or IRC section (see instructions))	governing document		(, ,	support?	U.S.	.?				
				(0000	Yes	No	Yes	No	Yes	No				
Tota	al													
ΙHΑ	For F	aperwork Re	duction Act Notice	, see the Instructions fo	or				Schedul	e A (For	m 990 c	r 990-EZ	2012	

232021 12-04-12

Form 990 or 990-EZ.

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	509,940.	698,913.	913,417.	853,548.	851,204.	3,827,022.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	509,940.	698,913.	913,417.	853,548.	851,204.	3,827,022.
	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						3,827,022.
	ction B. Total Support					•	•
_	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	509,940.	698,913.	913,417.	853,548.	851,204.	3,827,022.
	Gross income from interest,	-		•	-	-	
_	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	6.	600.	141.	1,385.	295.	2,427.
9	Net income from unrelated business				•		•
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						3,829,449.
	Gross receipts from related activities,	etc. (see instruction	ons)			12	, ,
	First five years. If the Form 990 is for						
	organization, check this box and stor	-			-		
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				············ / ——
14	Public support percentage for 2012 (I	ine 6. column (f) di	vided by line 11. c	olumn (f))		14	99.94 %
	Public support percentage from 2011					15	99.88 %
	33 1/3% support test - 2012. If the o					nore, check this bo	
	stop here. The organization qualifies	•		•		•	
b	33 1/3% support test - 2011. If the o						
	and stop here. The organization qual	•		•		•	
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac	ū					•
	meets the "facts-and-circumstances"		•	•	•	•	
h	10% -facts-and-circumstances tes						
~	more, and if the organization meets the	ū				•	. 270 0.
	organization meets the "facts-and-circ		•				
18	Private foundation. If the organization						
10	Trivate roundation. If the organization	and HOL CHECK a	SON OIT III TO, TO	a, 100, 17a, 01 17k		dule A (Form 990	

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

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

Section A. Public Support		,				
Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						
Section B. Total Support				•	•	
Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)14 First five years. If the Form 990 is for	the organization's	L s first second thir	L d fourth or fifth to	ax vear as a section	1 nn 501(c)(3) organi-	zation
•	ū	•		•		· . 🗀
Section C. Computation of Publi						
15 Public support percentage for 2012 (li			column (f))		15	<u></u> %
16 Public support percentage from 2011					16	%
Section D. Computation of Inves					• •	
17 Investment income percentage for 20	12 (line 10c, colur	nn (f) divided by lir	ne 13, column (f))		17	%
18 Investment income percentage from 2					18	%
19a 33 1/3% support tests - 2012. If the						
more than 33 1/3%, check this box ar	-					
b 33 1/3% support tests - 2011. If the						
line 18 is not more than 33 1/3%, che	ck this box and s f	top here. The orga	anization qualifies	as a publicly supp	orted organization	▶□
20 Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	his box and see in	structions	>

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

Internal Revenue Service

Name of the organization

or 990-PF)
Department of the Treasury

Schedule of Contributors

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

OMB No. 1545-0047

Employer identification number

2012

20-1051471 PEACETREES VIETNAM Organization type (check one): Filers of Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year. contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

PEACETREES VIETNAM

20-1051471

Part I	Contributors (see instructions). Use duplicate copies of Part I if addi	itional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THE SEATTLE FOUNDATION 1200 FIFTH AVE, SUITE 1300 SEATTLE , WA 98101	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	MICROSOFT MATCHING GIFTS PROGRAMS PO BOX 7405 PRINCETON, NJ 08543	\$20,596.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization **Employer identification number**

PEACETREES VIETNAM

20-1051471

Part II	Noncash Property (see instructions). Use duplicate copies of Par	t II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
			i .

Name of organization Employer identification number

PEACETREES VIETNA	M

20-1051471

Part III	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc	ridual contributions to section 501 ne following line entry. For organiza c., contributions of \$1,000 or less f	(c)(7), (8), tions compl or the year.	or (10) organizations that total more than \$1,000 for the leting Part III, enter (Enter this information once.)
(a) No. from Part I	Use duplicate copies of Part III if addition (b) Purpose of gift	al space is needed. (c) Use of gift		(d) Description of how gift is held
		(e) Transfer of g	ift	
-	Transferee's name, address, a	nd ZIP + 4	Re	elationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, ar	(e) Transfer of g		elationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
- - -		(e) Transfer of g	ift	
-	Transferee's name, address, a	nd ZIP + 4	Re	elationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
-		(e) Transfer of g	ift	
-	Transferee's name, address, a	nd ZIP + 4	Re	elationship of transferor to transferee

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2012
Open to Public Inspection

Name of the organization

PEACETREES VIETNAM

Employer identification number 20-1051471

Par	tΙ	Organizations Maintaining Donor Advised	l Funds or Other Similar Fund	s or A	Accounts. Complete if the
		organization answered "Yes" to Form 990, Part IV, line	6.		
			(a) Donor advised funds	((b) Funds and other accounts
1	Total	number at end of year			
2		gate contributions to (during year)			
3		gate grants from (during year)			
4		gate value at end of year			
5		e organization inform all donors and donor advisors in w	riting that the assets held in donor advi	sed fur	nds
	are th	e organization's property, subject to the organization's e	exclusive legal control?		Yes No
6		e organization inform all grantees, donors, and donor ad			
		aritable purposes and not for the benefit of the donor or			
	imper	missible private benefit?			Yes No
Par	t II	Conservation Easements. Complete if the orga			
1	Purpo	se(s) of conservation easements held by the organizatio	n (check all that apply).		
		Preservation of land for public use (e.g., recreation or ed	lucation) Preservation of an hi	istorical	lly important land area
		Protection of natural habitat	Preservation of a cer	tified h	istoric structure
		Preservation of open space			
2	Comp	lete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form	of a co	onservation easement on the last
	day o	f the tax year.			
					Held at the End of the Tax Year
а	Total	number of conservation easements			2a
b	Total	acreage restricted by conservation easements			2b
С	Numb	er of conservation easements on a certified historic stru	cture included in (a)		2c
d	Numb	er of conservation easements included in (c) acquired at	fter 8/17/06, and not on a historic struc	ture	
	listed	in the National Register			2d
3	Numb	er of conservation easements modified, transferred, rele	ased, extinguished, or terminated by the	ne orgar	nization during the tax
	year 🕽				
4	Numb	er of states where property subject to conservation ease	ement is located >		
5		the organization have a written policy regarding the perio			
		ons, and enforcement of the conservation easements it			
6		and volunteer hours devoted to monitoring, inspecting, a			
7		nt of expenses incurred in monitoring, inspecting, and e			
8		each conservation easement reported on line 2(d) above			
		ection 170(h)(4)(B)(ii)?			
9		t XIII, describe how the organization reports conservatio	•		,
		e, if applicable, the text of the footnote to the organization	on's financial statements that describes	s the or	ganization's accounting for
Da		rvation easements.	Aut Historical Transcript	146 a.u	Cimiley Assets
Par	t III	Organizations Maintaining Collections of		otner	Similar Assets.
		Complete if the organization answered "Yes" to Form 9			
1a		organization elected, as permitted under SFAS 116 (ASC	•		·
		ical treasures, or other similar assets held for public exhi		ance of	public service, provide, in Part XIII,
		xt of the footnote to its financial statements that describ			
b		organization elected, as permitted under SFAS 116 (ASC			
		res, or other similar assets held for public exhibition, edu	ucation, or research in furtherance of pi	ublic se	ervice, provide the following amounts
		g to these items:			. .
		evenues included in Form 990, Part VIII, line 1			<u> </u>
_					
2		organization received or held works of art, historical trea		aı gaın,	proviae
_		llowing amounts required to be reported under SFAS 11	· ·		• •
		nues included in Form 990, Part VIII, line 1			
D	Asset	s included in Form 990, Part X			. • • •

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

Pai	t III Organizations Maintaining Col	llections of A	rt, Histo	rical Tr	easures, or	Other	Similar A	sset	S (contin	nued)			
3	Using the organization's acquisition, accession,	, and other record	ls, check a	ny of the	following that a	re a sign	ificant use o	of its c	ollection	n items			
	(check all that apply):												
а	Public exhibition	d	ı L	an or exc	hange program	S							
b	Scholarly research	е	· Ot	her									
С	c Preservation for future generations												
4	Provide a description of the organization's colle	ections and explai	n how the	y further tl	ne organization	's exemp	t purpose ir	n Part	XIII.				
5	During the year, did the organization solicit or re	eceive donations	of art, hist	orical trea	sures, or other	similar as	ssets						
	to be sold to raise funds rather than to be main								Yes	No_			
Pai	t IV Escrow and Custodial Arrange reported an amount on Form 990, Part X		ete if the o	rganizatio	n answered "Ye	es" to Fo	rm 990, Par	t IV, lir	ne 9, or				
	Is the organization an agent, trustee, custodian	or other intermed	diary for co	ntribution	s or other asse	ts not inc	cluded						
									Yes	☐ No			
b	on Form 990, Part X? Yes No b If "Yes," explain the arrangement in Part XIII and complete the following table:												
		•						,	Amount	t			
С	Beginning balance						1c						
	Additions during the year						1d						
	Distributions during the year						1e						
f	Ending balance						1f						
2a	Did the organization include an amount on Forn								Yes	☐ No			
	If "Yes," explain the arrangement in Part XIII. Ch												
Pai	t V Endowment Funds. Complete if the	ne organization an	swered "Y	'es" to Fo	rm 990, Part IV,	, line 10.							
		a) Current year	(b) Pric	r year	(c) Two years b	oack (d)	Three years	back	(e) Four	years back			
1a	Beginning of year balance												
b	Contributions												
С	Net investment earnings, gains, and losses												
d	Grants or scholarships												
е	Other expenditures for facilities												
	and programs												
f	Administrative expenses												
g	End of year balance												
2	Provide the estimated percentage of the curren	it year end baland	e (line 1g,	column (a	a)) held as:								
а	Board designated or quasi-endowment		_%										
b	Permanent endowment	%											
С	Temporarily restricted endowment ▶	%											
	The percentages in lines 2a, 2b, and 2c should	equal 100%.											
За	Are there endowment funds not in the possessi	ion of the organiza	ation that	are held a	nd administere	d for the	organizatio	1	r				
	by:								\longrightarrow	Yes No			
	(i) unrelated organizations								3a(i)				
	(ii) related organizations								3a(ii)				
b	If "Yes" to 3a(ii), are the related organizations lis	sted as required o	n Schedu	le R?					3b				
4	Describe in Part XIII the intended uses of the or												
Pai	t VI Land, Buildings, and Equipmer	nt. See Form 990), Part X, lii	ne 10.									
	Description of property	(a) Cost or o		(b) Cost			ımulated	((d) Bool	k value			
		basis (investr	nent)	basis	(other)	depre	ciation	—					
	Land							4—					
	Buildings							\bot					
	Leasehold improvements	1			1 0 1 2		0.000	\bot					
d	Equipment			4	1,248.		2,062.	\	3.	9,186.			
	Other							₩		. 106			
Tata	Add lines to through to (Column (d) must equ	al Form 990 Part	Y column	(R) line 1	O(c)		_	1	٠, ١	9 186.			

Part VII	Investments - Other Securities. See	e Form 990, Part X, lir	ne 12.		
(a) Descri	ption of security or category (including name of security)	(b) Book value	(c) Method of v	/aluation: Cost or end	-of-year market value
(1) Financi	ial derivatives				
	/-held equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
(I)					
	(b) must equal Form 990, Part X, col. (B) line 12.) ▶				
Part VII	I Investments - Program Related. Se	e Form 990 Part X I	ine 13		
1 0.1 0 11	(a) Description of investment type	(b) Book value		/aluation: Cost or end	-of-year market value
(1)	(1)	(,	(-,		,
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)	//s				
	(b) must equal Form 990, Part X, col. (B) line 13.)	.			
Part IX				1	(h) Dook value
	(a)	Description			(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
	umn (b) must equal Form 990, Part X, col. (B) line			>	
Part X	Other Liabilities. See Form 990, Part X, I	line 25.		i	
<u>1.</u>	(a) Description of liability		(b) Book value		
(1) Fed	deral income taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
	umn (b) must equal Form 990, Part X, col. (B) line	e 25.)			

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Pa	rt XI Reconciliation of Revenue per Audited Financial Statements	With Revenue per R	eturr	า
1	Total revenue, gains, and other support per audited financial statements		1	995,318.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	2a		
b		2b 921.		
С		2c		
d		2d 36,772.		
е			2e	37,693.
3	Subtract line 2e from line 1		3	957,625.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	957,625.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statement	s With Expenses per	Retu	
1	Total expenses and losses per audited financial statements		1	931,637.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a 921.		
b	Prior year adjustments	2b		
С		2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	921.
3	Subtract line 2e from line 1		3	930,716.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	930,716.

Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2: PEACETREES FOLLOWS GAAP FOR FINANCIAL STATEMENT

RECOGNITION AND MEASUREMENT OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN
IN A TAX RETURN. FOR THOSE BENEFITS TO BE RECOGNIZED, A TAX POSITION MUST
BE MORE-LIKELY-THAN-NOT TO BE SUSTAINED UPON EXAMINATION BY TAXING
AUTHORITIES. AS OF DECEMBER 31, 2012, PEACETREES HAS NO MATERIAL UNCERTAIN
TAX POSITIONS TO BE ACCOUNTED FOR IN THE FINANCIAL STATEMENTS. TYPICALLY,
THE U.S. FEDERAL TAX RETURNS ARE OPEN TO EXAMINATION FOR A PERIOD OF THREE
YEARS AFTER THE FILING DATE.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

➤ Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

2012
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification number

Name of the organization					Employer identif	ication number
PEACETREES VIET	'NAM				20-105147	11
		ctivities Ou	tside the United States. Compl	ete if the organ		
to Form 990, Par				oto ii tiio organ	mzation anoworod	. 00
1 For grantmakers. Does	the organization	n maintain recor	ds to substantiate the amount of its gr	ants and other	assistance,	
the grantees' eligibility f	or the grants or a	assistance, and	the selection criteria used to award the	e grants or ass	istance?	Yes No
2 For grantmakers. Desc	cribe in Part V the	e organization's	procedures for monitoring the use of it	ts grants and o	ther assistance out	side the
United States.						
			an be duplicated if additional space is			Т
(a) Region	(b) Number of offices	(c) Number of employees.	(d) Activities conducted in region		vity listed in (d) gram service,	(f) Total expenditures
	in the region	employees, agents, and	(by type) (e.g., fundraising, program services, investments, grants to		e specific type	for and
	l in the region	independent contractors	recipients located in the region)		ce(s) in region	investments in region
		in region				irregion
EAST ASIA AND THE						
PACIFIC -	1		PROGRAM SERVICES	LANDMINE UX	O CLEARANCE	458,377.
EAST ASIA AND THE				L		
PACIFIC -	1		PROGRAM SERVICES	LANDMINE RI	SK EDUCATION	48.
EAST ASIA AND THE						
PACIFIC -	1		PROGRAM SERVICES	CITIZEN DIE	PLOMACY	63,616.
						,
				LIBRARIES,	SCHOOL	
EAST ASIA AND THE				CONSTRUCTIO	ON, AND OTHER	
PACIFIC -	1		PROGRAM SERVICES	ECONOMIC DE	EVELOPMENT	58,110.
T16T 16T1 1VD TVT						
EAST ASIA AND THE	1		DROGRAM GERVIGEG	GIIDIZTIZOD A	TOT OFF ANOTH	E 251
PACIFIC -	1		PROGRAM SERVICES	SURVIVOR AS	SSISTANCE	5,351.
EAST ASIA AND THE				OTHER PROGE	RAM	
PACIFIC -	1		PROGRAM SERVICES	EXPENDITURE	ES	41,842.
						·
EAST ASIA AND THE						
PACIFIC -	1		PROGRAM SUPPORT	LOCAL ADMIN	NISTRATION	63,089.
3 a Sub-total	7	0				690,433.
b Total from continuation						,
sheets to Part I	0	0				0.
c Totals (add lines 3a						

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

0

Schedule F (Form 990) 2012

and 3b)

690,433.

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			recognized as charities by the					<u> </u>
the IRS, or for which t 3 Enter total number of			n 501(c)(3) equivalency letter					

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.							
Part III can be duplicated if additional space is needed.							
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV | Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions for Form 5713)	Yes	X No

Page 5

Part V | Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

SCHEDULE F, PART I, LINE 2: PEACETREES VIETNAM MAINTAINS ITS BOOKS IN ITS SEATTLE OFFICE AND WIRES FUNDS TO THE VIETNAM OFFICE IN QUANG TRI PROVINCE, TO PAY EXPENSES BASED ON WRITTEN REQUESTS, WHICH ARE APPROVED BY THE EXECUTIVE DIRECTOR OR A BOARD OFFICER. ALL REQUESTS FOR FUNDING ARE BASED ON PEACETREES VIETNAM'S CHART OF ACCOUNTS, AND ARE BACKED UP BY DETAILED RECEIPTS AND RECORDS IN VIETNAM AND WRITTEN CONTRACTS WITH ANY ORGANIZATIONS DELIVERING SERVICES FOR PEACETREES. ONCE A WRITTEN REQUEST FOR FUNDS IS APPROVED IN SEATTLE, THE FUNDS ARE WIRED TO PEACETREES' BANK ACCOUNT IN VIETNAM WHERE THEY ARE WITHDRAWN BY THE IN-COUNTRY DIRECTOR FOR USE FOR PROGRAM AND OFFICE EXPENSES. COPIES OF BANK WITHDRAWAL RECEIPTS AND BANK STATEMENTS ARE PROVIDED TO THE SEATTLE OFFICE. COMMERCE IN VIETNAM IS PRIMARILY IN CASH, FUNDS FOR LARGE TRANSACTIONS ARE TRANSFERRED BANK-TO-BANK. SMALLER OBLIGATIONS ARE PAID IN CASH IN CASH ON HAND IS KEPT IN A SAFE IN THE VIETNAM OFFICE UNTIL VIETNAM. RECEIPTS ARE RECEIVED FOR EACH AMOUNT OF CASH DISPENSED. USED. FOR PROGRAM ACTIVIES DELIVERED THROUGH THE DEPARTMENT OF FOREIGN AFFAIRS OF OUANG TRI PROVINCE AND WOMEN'S UNION OF OUANG TRI PROVINCE, DETAILED RECORDS AND RECEIPTS FOR ALL EXPENSES INCURRED AGAINST THE WRITTEN AGREEMENT ARE PROVIDED MONTHLY BY THE PROGRAM PROVIDER AND COMPARED TO THE IN-COUNTRY DIRECTOR PROVIDES OVERSIGHT OF PROGRAM SERVICES BUDGET. TO ASSURE DELIVERY AS PER WRITTEN AGREEMENT. A REPORT IS PROVIDED AT THE END OF ANY CONTRACT, AS WELL AS MONTHLY PROGRESS REVIEWS ON RESULTS ACCOMPLISHED. SEATTLE OFFICE STAFF VISIT SEVERAL TIMES A YEAR AND REVIEW ON SITE RECORDS IN ADDITION TO THE WRITTEN REPORTS AND RECORDS PROVIDED MONTHLY.

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Doen To Public

Department of the Treasury Internal Revenue Service

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

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

Open To Public Inspection

Name of the organization					Employer identification number			
PEACETREES VIETNAM						20-1051471		
Part I Fundraising Activities. required to complete this part	Complete if the organization answe t.	ered "Y	es" to	Form 990, Part IV, li	ne 17	7. Form 990-EZ	filers are not	
 Indicate whether the organization rais a Mail solicitations Mail solicitations Internet and email solicitations Phone solicitations In-person solicitations Did the organization have a written of key employees listed in Form 990, Pablif "Yes," list the ten highest paid indicompensated at least \$5,000 by the 	e Solicitat f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) purs	tion of tion of fundra (includerofess	non-govern govern dising of ding of ional f	overnment grants nment grants events fficers, directors, true undraising services?	stees	Yes		
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have con or con contribu	ustody trol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization	
		Yes	No					
Fotal			•					
List all states in which the organizatio or licensing.			utions	s or has been notified	d it is	exempt from re	egistration	

232081 01-07-13 Schedule G (Form 990 or 990-EZ) 2012

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

		le G (Form 990 or 990-EZ) 2012 PEACETF				-1051471 Page 2
Pa	ırt	Fundraising Events. Complete if the of fundraising event contributions and gr	-		· · · · · · · · · · · · · · · · · · ·	
		or randrating over the obligation of and gr	(a) Event #1 LUNCHEON	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
ø)			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	156,824.			156,824.
	2	Less: Contributions	156,824.			156,824.
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
Se	5	Noncash prizes				
xpense	6	Rent/facility costs	2,110.			2,110.
Direct Expenses	7	Food and beverages	9,879.			9,879.
	8	Entertainment				
	9	Other direct expenses				11 000
		Direct expense summary. Add lines 4 throug			>	11,989,
Pa	11 rt			990 Part IV line 19 or i	reported more than	
		\$15,000 on Form 990-EZ, line 6a.	anoworda 100 to 10111	000,1 4.117, 11.10 10, 011	roportod moro triari	
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rev	1	Gross revenue				
es	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses	No.	V 0/	 	
	6	Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)		>	()
	8	Net gaming income summary. Combine line	1, column d, and line 7		>	
9	En	ter the state(s) in which the organization opera	ates gaming activities:			
		the organization licensed to operate gaming action," explain:		states?		Yes No
	_	· · ·				
10a	— We	ere any of the organization's gaming licenses r	evoked, suspended or te	rminated during the tax	year?	Yes No

Schedule G (Form 990 or 990-EZ) 2012

b If "Yes," explain: _

Sch	edule G (Form 990 or 990-EZ) 2012 PEACETREES VIETNAM 2	0 - 1021		Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	☐ No
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	☐ No
13	Indicate the percentage of gaming activity operated in:			
	The organization's facility	13a		%
	An outside facility			
	Enter the name and address of the person who prepares the organization's gaming/special events books and records		<u> </u>	
••	Enter the hame and address of the person who propares the organization organization of garming special events been and records	•		
	Name ▶			
	Name			
	Address ►			
	Address -			
150	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
100	bocs the organization have a contract with a tring party from whom the organization receives garning revenue:			
h	o If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amoun	+		
	of gaming revenue retained by the third party >			
_				
C	s If "Yes," enter name and address of the third party:			
	Nama 🏲			
	Name			
	Address			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	the		
	organization's own exempt activities during the tax year ▶ \$			
Pa	Irt IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, column	ns (iii) and (v). and	Part III.
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional inform			
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SCHEDULE O

Supplemental Information to Form 990 or 990-EZ

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2012
Open to Public Inspection

Name of the organization

PEACETREES VIETNAM

Employer identification number 20-1051471

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

STILL DEALING WITH THE REMNANTS OF WAR.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PROJECTS IN PARTNERSHIP WITH PEOPLE OF VIETNAM.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

PEACETREES VIETNAM SPONSORS CITIZEN DIPLOMACY TRIPS FOR CITIZENS

INTERESTED IN LEARNING MORE ABOUT VIETNAM, THE AFTEREFFECTS OF THE WAR,

AND PEACETREES' HUMANITARIAN WORK. OTHER PROGRAMS INCLUDE TREE

PLANTING AND ACCIDENT SURVIVOR ASSISTANCE.

EXPENSES \$ 6,742. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 2: RAE CHENEY IS JERILYN BRUSSEAU'S MOTHER.

FORM 990, PART VI, SECTION B, LINE 11: REVIEW OF THE 990 IS INITIALLY

DELEGATED TO THE FINANCE COMMITTEE. EACH BOARD MEMBER IS PROVIDED WITH A

COPY FOR REVIEW AND COMMENT BEFORE FILING. ANY NECESSARY CHANGES ARE MADE

BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C: ALL MEMBERS OF THE BOARD OF

DIRECTORS ARE REQUIRED TO ANNUALLY COMPLETE THE CONFLICT OF INTEREST FORM

AND SIGN AND ABIDE BY THE CODE OF CONDUCT. AT ANY MEETING WHERE A NEW

CONFLICT ARISES, BOARD MEMBERS ARE EXPECTED TO DECLARE ANY NEW CONFLICT AND

RECUSE THEMSELVES FROM DISCUSSION.

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

Schedule O (Form 990 or 990-EZ) (2012)

696020_1

Form 886	8 (Rev. 1-2013)					Page 2	
	are filing for an Additional (Not Automatic) 3-Month Ex	tension o	complete only Part II and check this	hov			
	ly complete Part II if you have already been granted an a						
	are filing for an Automatic 3-Month Extension, comple			leu Foiiii	0000.		
Part II	Additional (Not Automatic) 3-Month E			al (no co	nnies ne	adad)	
I alt II	Additional (Not Adtomatic) 0-Month E	ALCHISIO	•	•	•		
	No.	-41	Enter filer's		•	r, see instructions	
Type or	Name of exempt organization or other filer, see instru	ctions		Employe	ridentifica	tion number (EIN) o	
print	DEACEMPERC ITEMIAN					051471	
File by the due date for	ha far						
Number, street, and room or suite no. If a P.O. box, see instructions. Number, street, and room or suite no. If a P.O. box, see instructions. Social security number, street, and room or suite no. If a P.O. box, see instructions.					iber (SSN)		
instructions.	City, town or post office, state, and ZIP code. For a for SEATTLE, WA 98101	oreign add	lress, see instructions.				
F-446	Debugged of the section that their and limited in the section is facilities.		As a security of the section of the			0 1	
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			[0]±]	
Applicati	on	Return	Application			Return	
Is For		Code	Is For			Code	
Form 990	or Form 990-EZ	01					
Form 990	I-BL	02	Form 1041-A			08	
Form 472	20 (individual)	03	Form 4720			09	
Form 990	I-PF	04	Form 5227				
Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069					11		
Form 990	-T (trust other than above)	06	Form 8870			12	
STOP! D	o not complete Part II if you were not already granted	l an auton	natic 3-month extension on a prev	iously file	ed Form 8	868.	
	mICHAEL AUCH, If the care of \blacktriangleright 1301 5TH AVE States are in the care of $41-6136$			3101			
-	organization does not have an office or place of business	s in the Ur				• •	
	is for a Group Return, enter the organization's four digit						
box ►		1	ich a list with the names and EINs of				
			BER 15, 2013		0,0 1,10 0,1	1011011111	
	calendar year 2012, or other tax year beginning		, and ending	נ			
	ne tax year entered in line 5 is for less than 12 months, c	heck reas		Final r	eturn		
	Change in accounting period						
7 Sta	te in detail why you need the extension						
ΑI	DDITIONAL TIME IS NEEDED TO I	BE AB	LE TO FILE AN ACCU	RATE	AND C	OMPLETE	
_	TURN						
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8a If th	nis application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069. e	nter the tentative tax, less any				
	nrefundable credits. See instructions.	,	,	8a	\$	0.	
	nis application is for Form 990-PF, 990-T, 4720, or 6069,	enter anv	refundable credits and estimated		,		
	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid						
	previously with Form 8868.				\$	0.	
	ance due. Subtract line 8b from line 8a. Include your pa	vment wit	th this form, if required, by using		,		
	FPS (Electronic Federal Tax Payment System). See instru	•	, , ,,,9	8c	\$	0.	
			st be completed for Part II o				
	alties of perjury, I declare that I have examined this form, includ orrect, and complete, and that I am authorized to prepare this fo	ing accomp	•	-	f my knowl	edge and belief,	
Signature	► Title ► 1	EXECU	TIVE DIRECTOR	Date	•		
	11110			2 410	_		

Form **8868** (Rev. 1-2013)

Form 8879-EO

IRS _{e-file} Signature Authorization for an Exempt Organization

For calendar year 2012, or fiscal year beginning	. 2012, and ending

OMB No. 1545-1878

2012

Department of the Treasury Internal Revenue Service

Name of exempt organization ▶ Do not send to the IRS. Keep for your records.

Employer identification number

PEACETREES VIETNAM

20-1051471

Name and title of officer

MICHAEL AUCH

EXECUTIVE DIRECTOR

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a,** or **5a,** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b,** or **5b,** whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than **1** line in Part I.

1a	Form 990 check here X b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	957625
2 a	Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9)	2 b	
За	Form 1120-POL check here b Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5а	Form 8868 check here b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2012 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

X authorize BRANTLEY JANSON YOST & ELLISON	to enter my PIN 69602
ERO firm name	Enter five numbers, b do not enter all zeros
as my signature on the organization's tax year 2012 electronically filed return. If I have indicated v is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I a enter my PIN on the return's disclosure consent screen.	. ,
As an officer of the organization, I will enter my PIN as my signature on the organization's tax year indicated within this return that a copy of the return is being filed with a state agency(ies) regulating program, I will enter my PIN on the return's disclosure consent screen.	•
Officer's signature ▶ Date ▶	
Part III Certification and Authentication	
ERO's EFIN/PIN. Enter your six-digit electronic filing identification	

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

91379200001 do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2012 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ► _____ Date ► _____

ERO Must Retain This Form - See Instructions

Do Not Submit This Form To the IRS Unless Requested To Do So

LHA For Paperwork Reduction Act Notice, see instructions. 223051

Form **8879-EO** (2012)