



MAY 2024 MEETING
BOARD OF DIRECTORS
THURSDAY, MAY 23, 2024
Addendum A

Contents:

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COMMUNITY ACTION PROMISE

Community Action changes people’s lives, embodies the spirit of hope, improves communities, and makes America a better place to live. We care about the entire community, and we are dedicated to helping people help themselves and each other.

Helping People Changing Lives

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
 Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information.

2022

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning **JUL 1, 2022** and ending **JUN 30, 2023**

B Check if applicable:	C Name of organization MID WILLAMETTE VALLEY COMMUNITY ACTION AGENCY	D Employer identification number 23-7056987
Address change Name change Initial return Final return/terminated Amended return Application pending	Doing business as	E Telephone number (503) 585-6232
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 2475 CENTER ST NE	
	City or town, state or province, country, and ZIP or foreign postal code SALEM, OR 97301	
	F Name and address of principal officer: JIMMY JONES SAME AS C ABOVE	
	G Gross receipts \$ 62,959,531.	
	H(a) Is this a group return for subordinates? Yes <input checked="" type="checkbox"/> No	
	H(b) Are all subordinates included? Yes No If "No," attach a list. See instructions	
	H(c) Group exemption number	
	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527	
	J Website: WWW.MWVCAA.ORG	
	K Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other	L Year of formation: 1967 M State of legal domicile: OR

Part I Summary

	1	Briefly describe the organization's mission or most significant activities: PROVIDING VITAL SERVICES AND RESOURCES; MEETING THE NEEDS OF OUR COMMUNITY	
	2	Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.	
Activities & Governance	3	Number of voting members of the governing body (Part VI, line 1a)	3 11
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4 11
	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5 628
	6	Total number of volunteers (estimate if necessary)	6 707
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a 0.
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b 0.
	Revenue	8	Contributions and grants (Part VIII, line 1h)
9		Program service revenue (Part VIII, line 2g)	399,068. 315,050.
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	18,679. 0.
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0. -9,884.
12		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	64,870,186. 62,878,401.
Expenses		13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	23,184,374. 25,062,264.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0. 0.
	b	Total fundraising expenses (Part IX, column (D), line 25)	0.
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	7,482,139. 8,944,646.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	64,545,983. 55,803,694.
	19	Revenue less expenses. Subtract line 18 from line 12	324,203. 7,074,707.
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 27,493,323. End of Year 39,659,774.
	21	Total liabilities (Part X, line 26)	11,476,805. 16,568,549.
	22	Net assets or fund balances. Subtract line 21 from line 20	16,016,518. 23,091,225.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer JIMMY JONES, EXECUTIVE DIRECTOR	Date
	Type or print name and title	
Paid Preparer Use Only	Print/Type preparer's name RYAN T. PASQUARELLA, CPA	Preparer's signature
	Firm's name REDW LLC	Date 05/13/24
	Firm's address 475 COTTAGE STREET NE, SUITE 200 SALEM, OR 97301	Check if self-employed <input type="checkbox"/> PTIN P01304274
		Firm's EIN 85-0203431
		Phone no. 503.581.7788

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: EMPOWERING PEOPLE TO CHANGE THEIR LIVES AND EXIT POVERTY BY PROVIDING VITAL SERVICES AND COMMUNITY LEADERSHIP

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 28,634,152. including grants of \$ 17,061,679.) (Revenue \$) THE ARCHES PROJECT PROGRAM IS OUR HOUSING AND STREET OUTREACH DIVISION WHERE WE HELP CLIENTS NAVIGATE FROM HOMELESSNESS TO STABLE HOUSING AND BETTER LIVES. OUR APPROACH PROVIDES REFERRALS, HOUSING PLACEMENTS, AND BASIC SERVICES TO PEOPLE EXPERIENCING HOMELESSNESS AND HOUSING INSTABILITY IN MARION AND POLK COUNTIES. ARCHES PROGRAM SERVICE ACCOMPLISHMENTS: SERVED 516 HOUSEHOLDS (1116 UNDUPLICATED INDIVIDUALS) WITH HOUSING ASSISTANCE. SERVED 3086 INDIVIDUALS WITH SHELTER ASSISTANCE.

THE ENERGY SERVICES PROGRAM OPERATES LIHEAP (LOW-INCOME HOME ENERGY ASSISTANCE PROGRAM), OEAP (OREGON ENERGY ASSISTANCE PROGRAM), OLGA (OREGON LOW-INCOME GAS ASSISTANCE PROGRAM), AND LIHWA (LOW-INCOME HOME

4b (Code:) (Expenses \$ 21,661,807. including grants of \$ 4,607,465.) (Revenue \$) PROVIDING PRESCHOOL SERVICES TO 578 PRESCHOOL CHILDREN AND INFANT/TODDLER SERVICES TO 234 INFANTS, TODDLERS, AND EXPECTANT MOTHERS AT 12 OPERATING CENTERS AND 7 FAMILY CHILD-CARE HOMES IN MARION & POLK COUNTIES. OUR GOAL IS TO BUILD ON THE ASSETS OF THE FAMILY, FROM DEVELOPING A LIFE-LONG LOVE OF LEARNING TO MEETING THE SOCIAL, MEDICAL, AND MENTAL HEALTH NEEDS OF THE FAMILY. ALL OF OUR SITES STRIVE TO PROVIDE THE RICHEST LEARNING ENVIRONMENT POSSIBLE WHILE CREATING A STRUCTURE THAT IS ALSO SUPPORTIVE AND WELCOMING TO PARENTS. THROUGH A FULL SPECTRUM OF SERVICES HEAD START PROMOTES THE HEALTH AND WELL-BEING OF THE CHILD AND FAMILY. PROGRAM ACCOMPLISHMENTS: HEAD START SERVED 626 CLIENTS, EARLY HEAD START SERVED 342 CLIENTS.

4c (Code:) (Expenses \$ 796,253. including grants of \$ 127,640.) (Revenue \$ 315,050.) CHILD CARE INFORMATION SERVICES PROVIDES TRAINING TO CHILD CARE PROVIDERS IN MARION, POLK AND YAMHILL COUNTIES.

THE HOME YOUTH SERVICES PROGRAM IS A COMBINED DAY SHELTER AND DROP-IN CENTER FOR NON-ADJUDICATED HOMELESS AND AT-HIGH-RISK YOUTH.

THE RE-ENTRY PROGRAM EASES THE TRANSITION FROM INCARCERATION BACK INTO THE COMMUNITY BY CONNECTING CLIENTS WITH VITAL NEEDS INCLUDING EMPLOYMENT, EDUCATION, HOUSING, THERAPY, TRANSPORTATION, AND MORE, ALL AIMED AT REDUCING THE RATE OF RECIDIVISM.

THE WEATHERIZATION PROGRAM SERVES MARION & POLK COUNTIES HELPING

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 51,092,212.

MID WILLAMETTE VALLEY COMMUNITY ACTION
AGENCY

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
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 Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
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? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c 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? <i>If "Yes," complete Schedule D, Part VIII</i>		X
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? <i>If "Yes," complete Schedule D, Part IX</i>	X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 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? <i>If "Yes," complete Schedule G, Part I.</i> See instructions		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? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b <i>If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?</i>		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

MID WILLAMETTE VALLEY COMMUNITY ACTION
AGENCY

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 X	
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? <i>If "Yes," complete Schedule J</i>	23 X	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
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? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29 X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38 X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a 295	
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a		628
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	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:		
a	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.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
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	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17	

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a	11	
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b	11	
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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
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?		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?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
12c			
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
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?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on 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?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed OR
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records
THE ORGANIZATION - 503-585-6232
2475 CENTER ST NE, SALEM, OR 97301

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

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

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JIMMY JONES EXECUTIVE DIRECTOR	40.00			X			155,644.	0.	15,090.	
(2) KAOLEE HOYLE CHIEF FINANCIAL OFFICER	40.00			X			141,434.	0.	15,729.	
(3) HELANA HAYTAS CHIEF OPERATIONS OFFICER	40.00			X			98,777.	0.	21,659.	
(4) JADE RUTLEDGE BOARD CHAIR	1.00	X		X			0.	0.	0.	
(5) HELEN HONEY DIRECTOR	1.00	X					0.	0.	0.	
(6) ERIKA ROMINE DIRECTOR	1.00	X					0.	0.	0.	
(7) NIKOL RAMIREZ DIRECTOR (THROUGH OCT 2022)	1.00	X					0.	0.	0.	
(8) JEREMY GORDON DIRECTOR	1.00	X					0.	0.	0.	
(9) MELISSA BAURER DIRECTOR (THROUGH NOV 2022)	1.00	X					0.	0.	0.	
(10) KEVIN KARVANDI SECRETARY	1.00	X		X			0.	0.	0.	
(11) SHELASWAW CRIER VICE CHAIR	1.00	X		X			0.	0.	0.	
(12) RW TAYLOR DIRECTOR	1.00	X					0.	0.	0.	
(13) CATHERINE TROTTMAN DIRECTOR	1.00	X					0.	0.	0.	
(14) MICHAEL VASQUEZ DIRECTOR (THROUGH APRIL 2023)	1.00	X					0.	0.	0.	
(15) STEVE MCCOID DIRECTOR	1.00	X					0.	0.	0.	
(16) JASMINE WHITE DIRECTOR (THROUGH JAN 2023)	1.00	X					0.	0.	0.	
(17) CHRISTOPHER LOPEZ DIRECTOR (THROUGH APRIL 2023)	1.00	X					0.	0.	0.	

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) VANESSA NORDYKE DIRECTOR (BEGINNING SEPT 2022)	1.00	X						0.	0.	0.
(19) SILVERIA CAMPA DIRECTOR (BEGINNING DEC 2022)	1.00	X						0.	0.	0.
(20) ROBERT HALE CHIEF INFORMATION OFFICER	40.00			X				0.	0.	0.
1b Subtotal								395,855.	0.	52,478.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								395,855.	0.	52,478.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 2

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
CHS SERVICES INC PO BOX 7272, SALEM, OR 97303	HVAC CONTRACTOR WORK	285,924.
JTR INSULATION LLC 2341 NE COWLS CT, MCMINNVILLE, OR 97128	WEATHERIZATION	263,980.
HOME ENERGY SCIENCES, INC DBA HEAT PUMP STO 11933 NE SUMNER ST, PORTLAND, OR 97220	ENERGY WORK	214,655.
AC + CO ARCHITECTURE / COMMUNITY, 1100 LIBERTY ST SE, SUITE 200, SALEM, OR 97302	HVAC CONTRACTOR WORK	213,933.
JAMES INSULATION MASTERS 2308 NE COWLS CT, MCMINNVILLE, OR 97128	WEATHERIZATION	205,635.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 6

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Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a	7,248.				
	b Membership dues	1b					
	c Fundraising events	1c	25,767.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	56,769,361.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	5,770,859.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 208,946.				
	h Total. Add lines 1a-1f			62,573,235.			
Program Service Revenue	2 a OTHER PROGRAM REIMBURSEMENTS	Business Code					
		624200	270,419.	270,419.			
	b CLASS FEES	624200	44,631.	44,631.			
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f			315,050.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)						
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
				63,893.			
	b Less: rental expenses	6b		63,893.			
	c Rental income or (loss)	6c		0.			
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b					
	c Gain or (loss)	7c					
	d Net gain or (loss)						
8 a Gross income from fundraising events (not including \$ 25,767. of contributions reported on line 1c). See Part IV, line 18	8a		7,353.				
b Less: direct expenses	8b		17,237.				
c Net income or (loss) from fundraising events			-9,884.		-9,884.		
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a	Business Code					
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions			62,878,401.	315,050.	0.	-9,884.	

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Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,013,158.	2,013,158.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	19,783,626.	19,783,626.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	500,027.		500,027.	
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	19,046,175.	17,447,807.	1,598,368.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	563,259.	526,517.	36,742.	
9 Other employee benefits	2,666,851.	2,480,296.	186,555.	
10 Payroll taxes	2,285,952.	2,069,309.	216,643.	
11 Fees for services (nonemployees):				
a Management				
b Legal	44,267.	22,979.	21,288.	
c Accounting	75,500.		75,500.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	1,461,454.	1,454,478.	6,976.	
12 Advertising and promotion	87,919.	43,560.	44,359.	
13 Office expenses	613,947.	552,398.	61,549.	
14 Information technology	283,816.	139,030.	144,786.	
15 Royalties				
16 Occupancy	2,144,858.	1,955,971.	188,887.	
17 Travel	406,101.	386,788.	19,313.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	449,722.	375,544.	74,178.	
20 Interest	184,587.	46,209.	138,378.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	983,644.		983,644.	
23 Insurance	274,790.	266,716.	8,074.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a PROGRAM SUPPLIES	775,970.	707,365.	68,605.	
b LICENSES AND FEES	580,497.	242,887.	337,610.	
c FOOD PURCHASES	577,574.	577,574.		
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	55,803,694.	51,092,212.	4,711,482.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

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Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	2,804,861.	1	116,651.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	7,065,145.	3	9,999,007.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	105,582.	9	531,535.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 32,827,444.		
	b Less: accumulated depreciation	10b 7,096,084.	17,486,203.	10c 25,731,360.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets	30,432.	14	26,484.
	15 Other assets. See Part IV, line 11	1,100.	15	3,254,737.
16 Total assets. Add lines 1 through 15 (must equal line 33)	27,493,323.	16	39,659,774.	
Liabilities	17 Accounts payable and accrued expenses	3,211,492.	17	3,132,197.
	18 Grants payable		18	
	19 Deferred revenue	4,497,229.	19	6,074,263.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	3,768,084.	23	4,108,191.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	0.	25	3,253,898.
	26 Total liabilities. Add lines 17 through 25	11,476,805.	26	16,568,549.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	15,826,756.	27	23,024,243.
	28 Net assets with donor restrictions	189,762.	28	66,982.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	16,016,518.	32	23,091,225.
	33 Total liabilities and net assets/fund balances	27,493,323.	33	39,659,774.

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Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	62,878,401.
2	Total expenses (must equal Part IX, column (A), line 25)	2	55,803,694.
3	Revenue less expenses. Subtract line 2 from line 1	3	7,074,707.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	16,016,518.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	23,091,225.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis Consolidated basis Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		X
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	X	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	X	

Form 990 (2022)

Department of the Treasury
Internal Revenue Service

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.

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

Open to Public Inspection

Name of the organization **MID WILLAMETTE VALLEY COMMUNITY ACTION AGENCY** Employer identification number **23-7056987**

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described 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 agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	29735117.	31956730.	60670882.	64452439.	62573235.	249388403
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	29735117.	31956730.	60670882.	64452439.	62573235.	249388403
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						249388403

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	29735117.	31956730.	60670882.	64452439.	62573235.	249388403
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	27,014.	61,689.	59,856.	85,376.	63,893.	297,828.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						249686231
12 Gross receipts from related activities, etc. (see instructions)					12	1,959,557.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	99.88	%
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	99.89	%
16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			
17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			
b 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			

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

(Complete only if you checked the box on line 10 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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(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 organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
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) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(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 on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2021 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
1		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a The organization satisfied the Activities Test. Complete line 2 below.			
b The organization is the parent of each of its supported organizations. Complete line 3 below.			
c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No	
2a			
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>			
2b			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>			
3a			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>			
3b			

MID WILLAMETTE VALLEY COMMUNITY ACTION
AGENCY

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.**
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).			

MID WILLAMETTE VALLEY COMMUNITY ACTION
AGENCY

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2022		
a	From 2017		
b	From 2018		
c	From 2019		
d	From 2020		
e	From 2021		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2022 distributable amount		
i	Carryover from 2017 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2022 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2022 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2023. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2018		
b	Excess from 2019		
c	Excess from 2020		
d	Excess from 2021		
e	Excess from 2022		

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Name of the organization MID WILLAMETTE VALLEY COMMUNITY ACTION AGENCY	Employer identification number 23-7056987
--	---

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

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, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) 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), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled 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. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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 its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization MID WILLAMETTE VALLEY COMMUNITY ACTION AGENCY	Employer identification number 23-7056987
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>5,081,293.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
2		\$ <u>9,731,926.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
3		\$ <u>8,882,399.</u>	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions.)
		\$ _____	Person Payroll Noncash (Complete Part II for noncash contributions.)
		\$ _____	Person Payroll Noncash (Complete Part II for noncash contributions.)
		\$ _____	Person Payroll Noncash (Complete Part II for noncash contributions.)
		\$ _____	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization MID WILLAMETTE VALLEY COMMUNITY ACTION AGENCY	Employer identification number 23-7056987
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Part II **Noncash Property** (see instructions). Use duplicate copies of Part 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
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____

Name of organization MID WILLAMETTE VALLEY COMMUNITY ACTION AGENCY	Employer identification number 23-7056987
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship 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 gift	
Transferee's name, address, and ZIP + 4	Relationship 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 gift	
Transferee's name, address, and ZIP + 4	Relationship 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 gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization **MID WILLAMETTE VALLEY COMMUNITY ACTION AGENCY** Employer identification number **23-7056987**

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	Yes	No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	Yes	No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year _____

4 Number of states where property subject to conservation easement is located _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 \$ _____

(ii) Assets included in Form 990, Part X \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 \$ _____

b Assets included in Form 990, Part X \$ _____

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2022

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|--------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		888,338.		888,338.
b Buildings		27,179,378.	3,679,631.	23,499,747.
c Leasehold improvements				
d Equipment		1,503,651.	962,609.	541,042.
e Other		3,256,077.	2,453,844.	802,233.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				25,731,360.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) PAYROLL ADVANCES	839.
(2) RIGHT OF USE ASSETS NET OF AMORTIZATION	3,253,898.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	3,254,737.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) RIGHT OF USE LEASE LIABILITY	3,253,898.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	3,253,898.

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	62,750,585.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	81,130.	
e	Add lines 2a through 2d	2e		81,130.
3	Subtract line 2e from line 1		3	62,669,455.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	208,946.	
c	Add lines 4a and 4b	4c		208,946.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	62,878,401.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	55,675,878.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	81,130.	
e	Add lines 2a through 2d	2e		81,130.
3	Subtract line 2e from line 1		3	55,594,748.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	208,946.	
c	Add lines 4a and 4b	4c		208,946.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	55,803,694.

Part XIII Supplemental Information.

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

PART X, LINE 2:

THE AGENCY FOLLOWS THE PROVISIONS ACCOUNTING STANDARDS CODIFICATION (ASC) 740, "ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES". THE AGENCY'S FEDERAL AND STATE INCOME TAX RETURNS ARE SUBJECT TO POSSIBLE EXAMINATION BY THE TAXING AUTHORITIES UNTIL THE EXPIRATION OF THE RELATED STATUTES OF LIMITATIONS ON THOSE TAX RETURNS. IN GENERAL, THE FEDERAL AND STATE INCOME TAX RETURNS HAVE A THREE YEAR STATUTE OF LIMITATIONS. THE AGENCY WOULD RECOGNIZE ACCRUED INTEREST AND PENALTIES ASSOCIATED WITH UNCERTAIN TAX PROVISIONS, IF ANY, AS PART OF THE INCOME TAX PROVISION.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES 63,893.

Part XIII Supplemental Information (continued)

FUNDRAISER EVENTS 17,237.

TOTAL TO SCHEDULE D, PART XI, LINE 2D 81,130.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

NONCASH DONATIONS 208,946.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES 63,893.

FUNDRAISER EVENTS 17,237.

TOTAL TO SCHEDULE D, PART XII, LINE 2D 81,130.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

NONCASH DONATIONS 208,946.

SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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

2022

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of the organization MID WILLAMETTE VALLEY COMMUNITY ACTION AGENCY

Employer identification number 23-7056987

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations, b Internet and email solicitations, c Phone solicitations, d In-person solicitations, e Solicitation of non-government grants, f Solicitation of government grants, g Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

Table with 6 columns: (i) Name and address of individual or entity (fundraiser), (ii) Activity, (iii) Did fundraiser have custody or control of contributions?, (iv) Gross receipts from activity, (v) Amount paid to (or retained by) fundraiser listed in col. (i), (vi) Amount paid to (or retained by) organization. Includes a Total row.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

MID WILLAMETTE VALLEY COMMUNITY ACTION
AGENCY

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		FUNDRAISER GALA		NONE	
		(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	33,120.		33,120.
	2	Less: Contributions	25,767.		25,767.
	3	Gross income (line 1 minus line 2)	7,353.		7,353.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs	4,261.		4,261.
	7	Food and beverages	8,118.		8,118.
	8	Entertainment			
	9	Other direct expenses	4,858.		4,858.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			17,237.
11	Net income summary. Subtract line 10 from line 3, column (d)			-9,884.	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue			
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	Yes _____ % No	Yes _____ % No	Yes _____ % No
	7	Direct expense summary. Add lines 2 through 5 in column (d)			
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)			

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
 b If "Yes," explain: _____

MID WILLAMETTE VALLEY COMMUNITY ACTION AGENCY

- 11 Does the organization conduct gaming activities with nonmembers?
12 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?
13 Indicate the percentage of gaming activity conducted in:
a The organization's facility
b An outside facility
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name

Address

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?
b If "Yes," enter the amount of gaming revenue received by the organization and the amount of gaming revenue retained by the third party
c If "Yes," enter name and address of the third party:

Name

Address

16 Gaming manager information:

Name

Gaming manager compensation \$

Description of services provided

Director/officer Employee Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
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 \$

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization **MID WILLAMETTE VALLEY COMMUNITY ACTION AGENCY** Employer identification number **23-7056987**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
A RAY OF HOPE TODAY 10013 WISEACRE LN NE AURORA, OR 97002	84-3058520	501(C)3	127,433.	0.			EMERGENCY SHELTER SUPPORT
CENTER FOR HOPE AND SAFETY 605 CENTER ST NE SALEM, OR 97301	51-0141214	501(C)3	60,250.	0.			EMERGENCY SHELTER SUPPORT
MICRONESIAN ISLANDER COMMUNITY PO BOX 18606 SALEM, OR 97305	90-0663871	501(C)3	20,496.	0.			EMERGENCY SHELTER SUPPORT
NORTHWEST HUMAN SERVICES 681 CENTER ST NE SALEM, OR 97301	93-0605570	501(C)3	55,000.	0.			EMERGENCY SHELTER SUPPORT
POLK COUNTY FAMILY & COMMUNITY OUTREACH DEPARTMENT - 185 SW ACADEMY ST #220 - DALLAS, OR 97338	TAX EXEMPT		826,919.	0.			EMERGENCY SHELTER SUPPORT
RECOVERY OUTREACH COMMUNITY CENTER 1115 MADISON ST NE #222 SALEM, OR 97301	51-0653159	501(C)3	32,047.	0.			EMERGENCY SHELTER SUPPORT

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **13.**
- 3** Enter total number of other organizations listed in the line 1 table

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule I (Form 990) 2022**

MID WILLAMETTE VALLEY COMMUNITY ACTION AGENCY

23-7056987

Page 1

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SABLE HOUSE PO BOX 783 DALLAS, OR 97338	93-1122800	501(C)3	58,175.	0.			EMERGENCY SHELTER SUPPORT
SALEM HOUSING AUTHORITY 360 CHURCH ST SE SALEM, OR 97301	93-0582087		206,571.	0.			EMERGENCY SHELTER SUPPORT
SALEM INTERFAITH HOSPITALITY NETWORK (FAMILY PROMISE) - 1055 EDGEWATER ST NW - SALEM, OR 97304	93-1234367	501(C)3	216,037.	0.			EMERGENCY SHELTER SUPPORT
SILVERTON SHELTERING SERVICES 345 WESTFIELD ST #304 SILVERTON, OR 97381	82-5182958	501(C)3	135,822.	0.			EMERGENCY SHELTER SUPPORT
ST. FRANCIS SHELTER 1820 BERRY ST SE SALEM, OR 97302	93-0943539	501(C)3	176,574.	0.			EMERGENCY SHELTER SUPPORT
UNITED WAY OF THE MID-WILLAMETTE VALLEY - 455 BLILLER AVE NE - SALEM, OR 97301	93-0395586	501(C)3	60,510.	0.			EMERGENCY SHELTER SUPPORT
SAFETY COMPASS PO BOX 1293 SILVERTON, OR 97381	81-2174742	501(C)3	37,324.	0.			EMERGENCY SHELTER SUPPORT

Schedule I (Form 990)

MID WILLAMETTE VALLEY COMMUNITY ACTION
AGENCY

Part III Continuation of Grants and Other Assistance to Domestic Individuals (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
WEATHERIZATION MATERIALS	290.	1,822,337.	0.		
YOUTH FOOD, SHELTER AND MENTORING	157.	20,666.	0.		

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2022

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization **MID WILLAMETTE VALLEY COMMUNITY ACTION AGENCY** Employer identification number **23-7056987**

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
First-class or charter travel		
Travel for companions		
Tax indemnification and gross-up payments		
Discretionary spending account		
Housing allowance or residence for personal use		
Payments for business use of personal residence		
Health or social club dues or initiation fees		
Personal services (such as maid, chauffeur, chef)		
1b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?		
3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
Compensation committee		
Independent compensation consultant		
Form 990 of other organizations		
Written employment contract		
Compensation survey or study		
<input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?		<input checked="" type="checkbox"/>
b Participate in or receive payment from a supplemental nonqualified retirement plan?		<input checked="" type="checkbox"/>
c Participate in or receive payment from an equity-based compensation arrangement?		<input checked="" type="checkbox"/>
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?		<input checked="" type="checkbox"/>
b Any related organization?		<input checked="" type="checkbox"/>
If "Yes" on line 5a or 5b, describe in Part III.		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?		<input checked="" type="checkbox"/>
b Any related organization?		<input checked="" type="checkbox"/>
If "Yes" on line 6a or 6b, describe in Part III.		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III		<input checked="" type="checkbox"/>
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		<input checked="" type="checkbox"/>
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		

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

Schedule J (Form 990) 2022

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JIMMY JONES EXECUTIVE DIRECTOR	(i) 155,644.	0.	0.	5,680.	9,410.	170,734.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
(2) KAOLEE HOYLE CHIEF FINANCIAL OFFICER	(i) 141,434.	0.	0.	5,746.	9,983.	157,163.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						

Part III Supplemental Information

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

Multiple horizontal lines for supplemental information.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.

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

Name of the organization **MID WILLAMETTE VALLEY COMMUNITY ACTION AGENCY** Employer identification number **23-7056987**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications	X		35.	DONOR VALUE
5 Clothing and household goods	X		50,569.	DONOR VALUE
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory	X	26	156,520.	DONOR VALUE
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (GIFT CARDS)	X	8	1,821.	DONOR VALUE
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? **X**

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? **X**

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? **X**

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31		X
32a		X

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

Schedule M (Form 990) 2022

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Multiple horizontal lines for supplemental information.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization	MID WILLAMETTE VALLEY COMMUNITY ACTION AGENCY	Employer identification number	23-7056987
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FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

WATER ASSISTANCE). ENERGY ALSO ASSISTS COVID-19 HOUSEHOLDS WITH CEAP (COVID- OREGON ENERGY ASSISTANCE PROGRAM). ENERGY EDUCATION IS AVAILABLE TO HELP CLIENTS REDUCE THEIR END CONSUMPTION AND TAKE CONTROL OF THEIR ENERGY USAGE. ENERGY PARTNERS WITH CITY OF SALEM PROVIDING INCOME ELIGIBLE REFERRALS FOR THEIR RATE RELIEF PROGRAM. ENERGY PROGRAM SERVICE ACCOMPLISHMENTS: ASSISTED 7184 NONDUPLICATED HOUSEHOLDS (19,138 INDIVIDUALS) DURING THIS FY.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

THE NUTRITION FIRST USDA FOOD PROGRAM SPONSORS MONTHLY CHILD CARE CASH PAYMENTS TO IN-HOME CHILD CARE PROVIDERS TO PARTIALLY REIMBURSE THEM FOR SERVING APPROVED HEALTHY MEALS TO THE 5,847 CHILDREN ENROLLED IN THEIR CARE. WE SERVE PROVIDERS IN THE FOLLOWING COUNTIES: MARION, POLK, YAMHILL, LINN, BENTON, LANE, LINCOLN, TILLAMOOK, MULTNOMAH, CLACKAMAS AND WASHINGTON. OUR TRILINGUAL STAFF PERFORM IN-HOME MONITORING REVIEWS AND TRAINING TO ALL ACTIVE PROVIDERS THREE TIMES PER YEAR AT MINIMUM. ALL VISITS MUST INCLUDE KIDS AND TWO VISITS MUST INCLUDE AN OBSERVED MEAL SERVICE TO VERIFY COMPLIANCE WITH ALL STATE AND FEDERAL, REGULATION.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

RESIDENTS WHO MEET THE ELIGIBILITY REQUIREMENTS REDUCE THEIR HEATING COSTS WHILE IMPROVING EFFICIENCY, SAFETY, COMFORT, AND THE DURABILITY OF THEIR HOME.

Name of the organization	MID WILLAMETTE VALLEY COMMUNITY ACTION AGENCY	Employer identification number	23-7056987
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FORM 990, PART VI, SECTION B, LINE 11B:

THE AGENCY CFO AND INDEPENDENT CPA WHO PREPARES THE 990 PRESENT THE DRAFT 990 TO THE BOARD EXECUTIVE COMMITTEE FOR THEIR REVIEW. AFTER THE EXECUTIVE COMMITTEE HAS COMPLETED THEIR REVIEW, THE COMMITTEE CHAIR REPORTS TO THE FULL BOARD OF DIRECTORS. THE FULL BOARD OF DIRECTORS RECEIVE THE 990 VIA EMAIL AS ATTACHMENT TO THE FINANCE COMMITTEE REPORT.

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

THE CONFLICT OF INTEREST POLICY IS REVIEWED ANNUALLY BY THE BOARD GOVERNANCE COMMITTEE AND THEN BROUGHT TO THE FULL BOARD AS AN AGENDA ITEM FOR ACCEPTANCE AND ACTION. AFTER DISCUSSION, WHICH INCLUDES WHAT CONSTITUTES A CONFLICT OF INTEREST BASED ON INFORMATION RECEIVED FROM THE COMMUNITY ACTION PARTNERSHIP AND THE CORPORATE ATTORNEY, EACH BOARD MEMBER IS ASKED TO VERBALLY DECLARE CONFLICT OR NO CONFLICT AND SIGN A CONFLICT OF INTEREST FORM WHICH IS RETAINED IN EACH BOARD MEMBERS PARTICIPATION FILE. ALL AGENCY CONTRACTS AND AGREEMENTS ARE REVIEWED BY PROGRAM DIRECTORS, WHICH INCLUDES IDENTIFICATION OF ANY INDIVIDUALS ASSOCIATED WITH THE CONTRACT TO ASSURE THAT NO BOARD MEMBERS ARE RECEIVING BENEFIT CONDUCTING BUSINESS WITH THE AGENCY. IF POTENTIAL CONFLICT IS IDENTIFIED THAT INFORMATION IS BROUGHT TO THE ATTENTION OF THE EXECUTIVE COMMITTEE FOR FOLLOW UP AND APPROPRIATE ACTION.

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

PERIODICALLY THE EXECUTIVE COMMITTEE REVIEWS SALARY COMPARABILITY DATA. THE BOARD, IN EXECUTIVE SESSION WITH NO STAFF PRESENT, REVIEWS THE COMPENSATION STRUCTURE OF THE AGENCY'S TOP MANAGEMENT AND DETERMINES CHANGES TO THE EXECUTIVE DIRECTORS COMPENSATION. OTHER KEY POSITIONS ARE DISCUSSED BY THE BOARD DURING RECRUITMENT AND SELECTION OF EMPLOYEES AND

Name of the organization MID WILLAMETTE VALLEY COMMUNITY ACTION AGENCY	Employer identification number 23-7056987
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THOSE DISCUSSIONS INCLUDE DETERMINING THE SALARY RANGE FOR THE POSITION,
 BASED ON SALARY COMPARABILITY INFORMATION FROM LIKE ORGANIZATIONS.

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

ALL GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST. FINANCIAL STATEMENTS
 ARE PROVIDED TO FUNDERS AS REQUIRED BY OMB CIRCULAR A-133. FUNDERS OFTEN
 REQUEST THESE DOCUMENTS AS PART OF THE MONITORING PROCESS.

Forms included in Electronic Filing

Form 990/990-EZ/990-PF	Form 990-T
EXPORTED ON 05/13/2024 09:47:17 FORM 990	

Oregon Department of Human Services Children's Care Licensing Program

LICENSE #312

CERTIFICATE OF APPROVAL TO OPERATE A CHILD CARING AGENCY

THIS IS TO CERTIFY THAT

Mid-Willamette Valley Community Action

LOCATED AT

2475 Center Street NE, Salem, Oregon 97301

IS AUTHORIZED UNDER PROVISIONS OF OREGON REVISED STATUTES 418.205 to 418.327
AND RELATED STATUTES TO PROVIDE THE FOLLOWING TYPES OF CARE OR SERVICES FOR CHILDREN:

- Homeless, Runaway, & Transitional Living Shelter at 719 Jackson Street E, Monmouth, Oregon 97361; Age 14-18; Capacity 10 (David's House)

ISSUED: May 16, 2024

REVISED: _____

EXPIRES: October 31, 2024



CHILDREN'S CARE LICENSING MANAGER



State of Oregon

Homelessness Response Framework

Background

Oregonians in every part of the state have been clear: our state is in crisis and demands urgent action. According to the 2023 Point in Time Count, approximately 20,000 people are experiencing homelessness across the State of Oregon, and this is likely an undercount. Since her inauguration on January 10, 2023, Governor Kotek has taken bold steps to meaningfully prevent and reduce homelessness across the State of Oregon. She has:

- Declared and is successfully implementing a Homelessness State of Emergency:
 - [Set and exceeded specific goals](#) in the first year of her administration to rapidly expand the state’s low-barrier emergency shelter system, rehouse people experiencing homelessness, and prevent people from becoming homeless statewide;
 - Built an emergency response infrastructure to meaningfully reduce homelessness across Oregon; and,
 - Renewed the homelessness state of emergency for another year with new goals to maintain an outcomes focused homelessness emergency response and begin to plan for a recovery phase so the state can continue to meaningfully reduce homelessness even after the state of emergency has ended.
- Directed outcomes-oriented implementation of \$500 million invested to reduce homelessness during the 2023-2025 legislative session:
 - Worked with the legislature and partners to secure \$500 million across the 23/25 biennium to reduce homelessness; and,
 - At the end of the biennium, the Governor’s Office will report on the outcomes achieved with these \$500 million.
- Improved the State of Oregon’s delivery of homelessness funding:
 - [Evaluated all state homelessness](#) programs to identify opportunities to improve and coordinate the state’s delivery of homelessness and housing funding; and,
 - Refreshed the inter-agency council on homelessness to drive improvements to the state’s delivery of homeless services in a coordinated way that breaks down unnecessary silos in state government.

Strategic Pillars (2024)

Through the implementation of the homelessness state of emergency, legislative investments to reduce homelessness, and the Governor's Office evaluation of all state homelessness programs, the Governor has refined and expanded her homelessness initiatives. Across all these initiatives, the State of Oregon will:

- **Outcomes:** Set clear outcomes and goals to reduce homelessness, and transparently report on progress towards those goals at the end of the biennium;
- **Racial Equity:** Center racial equity by evaluating outcomes by race and ethnicity, and by adjusting program and budget implementation to improve outcomes;
- **Administrative Improvements:** Reduce unnecessary administrative burden for partners delivering homeless services;
- **Population-Specific Action Plans:** Develop and implement population specific plans to improve housing outcomes for youth, and people exiting carceral settings;
- **Tribal Sovereignty:** Across all strategic pillars, consult and collaborate with the nine federally recognized and sovereign tribes in Oregon; and,
- **Coordination:** Across all strategic pillars, break down silos in State government, coordinate across relevant agencies, and coordinate with local and regional partners to maximize homelessness reduction.

Pillar 1. Statewide Homelessness Outcomes

The Governor's Office will convene partners, including different levels of government, to align how we are defining and reporting homelessness outcomes to increase transparency about outcomes being achieved statewide, regardless of the funding source. In addition, the Governor's Office will work with state agencies to expand the outcomes-oriented focus of the homelessness emergency to all state funded homelessness programs so the State of Oregon can transparently establish goals at the beginning of each budget cycle, and report on the outcomes achieved with state resources by:

- A. Aligning how outcomes are defined (cross-jurisdictional): The Governor's Office will work with jurisdictional partners at the local and regional level to make sure we are defining key outcomes (shelter capacity, re-housing, and homelessness prevention) in the same way;
- B. Reporting statewide outcomes (cross-jurisdictional): The Governor's Office will convene a conversation with jurisdictional partners to explore how we can collaborate on reporting equity focused homelessness outcomes associated with local, regional, and state resources to increase public transparency about the impact of the homelessness response system statewide;
- C. Setting outcomes for state investments (2023/25 biennium): The Governor's Office will report on the goals and outcomes achieved with all homelessness resources invested this

biennium to expand the outcomes-oriented and equity focus of the homelessness emergency across state homelessness programs;

- D. Outcomes-oriented budget development (25/27): The Governor’s Office and OHCS will work with partners to develop the Governor’s Recommended Budget (GRB) for housing and homelessness to make certain we do not lose ground on the state homelessness response. To achieve this, the Governor’s Office and Oregon Housing and Community Services (OHCS) will work with partners to determine the “current service level” budget of state funded homeless services in the state, the associated outcomes of those investments, and the specific impacts if they are not maintained. Any new programs or program expansions that may be included in the GRB will have clear associated outcomes;
- E. Data collection improvements: The State of Oregon will explore creating a standardized practice of consistent data collection, storage, and analysis for state programs serving people experiencing or at risk of homelessness to improve data quality and reporting reliability related to homelessness outcomes, including establishing a coordinated data infrastructure to deliver on outcome reporting, tracking and coordinated data analysis;
- F. Data sharing improvements: The State of Oregon will set up infrastructure and data-sharing agreements between primary state agencies working to reduce homelessness (OHCS, OHA, and ODHS) to support reliable and community informed data analysis and data-informed decision making in a way that protects personally identifiable information (PII); and,
- G. Culturally specific provider capacity: Culturally specific providers are critical partners in advancing equitable outcomes in Oregon. In addition to implementation of the culturally responsive organization set asides in core homelessness programs, the Governor’s Office will develop recommendations to support the capacity building of culturally specific organizations (CSOs) to administer state homelessness programs funded by the 25/27 budget.

Pillar 2. Core Program Improvements

Shelter and Transitional Housing

This project will work to stabilize and improve the state’s emergency shelter and transitional housing systems which are critical infrastructure to serve people experiencing homelessness by:

- A. Maintain operations of shelter beds created and supported by the state via the homelessness state of emergency and other state investments allocated by the legislature to prevent shelter closure during the 2023-25 biennium;
- B. Developing a program framework to create a housing focused state shelter program. This program framework should increase transparency in the system and reduce administrative burden of providers currently braiding multiple state funding sources to operate existing shelters. The program development process should explore different levels of funding for different levels of services, including a strategy to connect people exiting state institutions with state-funded shelter and/or transitional housing, including assessing

feasibility of including the category of recovery housing, and track housing focused outcomes; and,

- C. Assessing current geographic and population specific inequities in the emergency shelter and transitional housing systems to inform potential legislative action to increase shelter and transitional housing capacity.

Permanent Supportive Housing (PSH)

This project will work to stabilize and improve the state's permanent supportive housing system, which is a housing type intended to serve people who have experienced or are at risk of chronic homelessness, by:

- A. Working with other public funders of permanent supportive housing to align key outcome metrics for PSH;
- B. Developing a program framework to create a tiered permanent supportive housing program at the state that provides different levels of funding for different levels of services, explores scattered site PSH opportunities, includes a strategy to connect people exiting state institutions with state-funded supportive housing, tracks housing retention outcomes, and improves the process of connecting people with the type of PSH that is most in alignment with their needs, including culturally specific PSH. This program framework should also explore an integrated behavioral health PSH model as one of the program tiers that is a true step down from licensed behavioral health settings. Finally, the program framework should explore alignment of potentially overlapping state programs (PSH and behavioral health housing); and,
- C. Assessing current geographic and population specific inequities in the supportive housing systems to inform potential administration of additional supportive housing resources allocated by the legislature for the 25/27 biennium.

Re-housing

This project will build on the state's first re-housing program administered by Oregon Housing and Community Services (OHCS) to serve two key subpopulations of people experiencing homelessness more effectively by:

- A. Creating the two following distinct re-housing programs:
 - o People experiencing chronic homelessness: Support local coordination of the homeless services, behavioral health, and health care systems to provide needed wrap around services to people experiencing chronic homelessness; and,
 - o People experiencing short-term/economic homelessness: Support local coordination of workforce employment boards and homeless services system, including employment supports as an eligible use to help reduce the risk that a short experience of homelessness will become chronic.

Pillar 3. Population Specific Action Plans

These population specific action plans align with broad populations served by the state across various systems of care and institutional settings. Within these populations, there is immense

diversity, and it will be necessary to have culturally specific strategies to effectively improve the housing outcomes of lgbtqia+ people, Black and brown people, and Indigenous, Native American, American Indian, or tribal people. Separately, all aspects of these initiatives will be informed by tribal consultation, recognizing the sovereignty of the nine federally recognized tribes in Oregon.

Youth

This project will strengthen programs serving youth experiencing or at risk of homelessness, including improving the housing outcomes of youth who are transitioning out of state institutions or systems of care by:

- A. Creating equitable housing outcomes for programs serving youth and families with children;
- B. Analyzing existing release practices and exits from state youth programs or facilities to inform recommendations to change release practices to improve housing outcomes;
- C. Develop a method and coordinated standards for tracking housing outcomes for youth exiting or transitioning out of state carceral settings or aging out of foster care, which may include any necessary coordination with local or regional entities for data collection and data governance, collection, and reporting on housing outcomes;
- D. Implementing a “housing plan” as part of transition procedures for each youth exiting state institutional settings or aging out of foster care;
- E. Developing a plan to improve housing outcomes of youth transitioning out of state institutional settings, which may include changes to release practices, changes to release policies;
- F. Developing a plan to improve housing outcomes of youth transitioning or aging out of foster care which may include changes to program practices and/or policies; and,
- G. Maintaining the on-going services funded through youth programs administered during the 23/25 biennium, including Emergency Housing Account (EHA) for youth, youth experiencing homelessness program (YEHP), long term rental assistance for youth (RAY). Explore aligning potentially duplicative elements of these youth focused programs; and,

Adults exiting the criminal justice system

This project will improve the housing outcomes of adults exiting the criminal justice system by:

- A. Creating equitable housing outcomes for adults exiting the criminal justice system;
- B. Establish a method and coordinated standards for tracking housing outcomes for adults transitioning out of the criminal justice system, which may include any necessary coordination with local or regional entities for data collection;
- C. Analyzing existing release practices and exits from carceral settings or facilities to inform recommendations to change release practices to improve housing outcomes;
- D. Implementing a “housing plan,” which would explore viable housing opportunities ahead of release or discharge as part of release procedures for each adult exiting the criminal justice system;

- E. Developing a plan to improve housing outcomes of people exiting the criminal justice system which may include additional changes to release practices, changes to release policies; and,
- F. Explore changes to the “Valid with Previous Photo” program to allow for DMV to issue IDs with current photo or to provide other opportunities for an updated photo to adults exiting the criminal justice system immediately upon release or discharge to reduce barriers to accessing housing.

Veterans

This project will improve the housing outcomes of the veteran population by:

- A. Assessing who is eligible for veteran services funded through either federal or state sources, if veteran status is defined differently across state programs, and if eligibility requirements preclude participation in any of the ODVA-administered programs;
- B. Explore expanding the ODVA Incarcerated Veterans services to additional ODOC facilities, including anticipated housing outcomes associated with the recommended investment level;
- C. Assess the feasibility of tracking housing outcomes and connections to other state and federal veterans’ benefits for veterans housed in state-funded housing;
- D. Develop a plan to include set-asides for veterans, including women, LGBTQIA+, and formerly incarcerated veterans, in state-funded shelters or housing.
- E. Explore a program that provides one-time funding or grants to incarcerated veterans prior to release with existing housing related debt to reduce barriers to accessing housing and improve housing outcomes; and,
- F. Analyze existing successful veteran permanent supportive housing and transitional housing to inform the development of a veteran specific strategy within the permanent supportive housing program framework above.

Pillar 4. Cross System Alignment

People experiencing homelessness on state owned or managed property

This project will result in consistent policies and practices related to people experiencing homelessness on state owned or managed properties to improve connections to homeless services and housing by:

- A. Developing a framework for consistent policies and practices across state agencies that own or manage land regarding how to connect people engaging in survival activities on the land or property to services such as housing, navigation, or street outreach.

Behavioral health, health and housing, and homelessness systems alignment

This project will support system-wide integration of behavioral health, health, and homelessness systems by:

- A. Analyzing the status quo of state contract requirements of Coordinated Care Organizations (CCOs) and Community Mental Health Programs (CMHPs) to understand current requirements to provide health and behavioral health services to people experiencing homelessness where they are in the housing to homelessness continuum;
- B. Analyzing the status quo of CCO, CMHP, and Federally Qualified Health Center (FQHC) practices to identify promising practices to support expansion of provision of health and behavioral health services to people experiencing homelessness where they are in the homelessness to housing continuum;
- C. Analyze best practices of local and national strategies that maximize billable services to provide health and behavioral health services to people experiencing homelessness where they are on the homelessness to housing continuum;
- D. As part of the homelessness state of emergency (EO 24-02), working with multi agency coordinating groups (MACs) that we stood up as homelessness response infrastructure to identify high priority shelters or transitional housing to pilot enhanced coordination with CCOs for the purpose of providing health and behavioral health services on site (e.g., medical respite model). Identify how those supports and services can be paid for, including exploring how to maximize Medicaid reimbursement; and,
- E. As part of the Homelessness State of Emergency (EO 24-02) implementation, develop a Behavioral Health and Homelessness pilot to support local alignment of behavioral health and homeless services to support re-housing households with behavioral health needs.

State of Oregon

Housing Production Framework

(Draft)

Background

Oregonians in every part of the state have been clear: our state is in crisis and demands urgent action. According to the most recent [Oregon Housing Needs Analysis](#), addressing the state's current housing shortage and keeping pace with future demand would require the development of 36,000 new homes each year for the next 10 years. This severe housing shortage is the root cause of the state's homelessness crisis. We simply must build more homes to meet the need and ensure every Oregonian has a home they can afford.

Since her inauguration on January 9, 2023, Governor Kotek has taken bold steps to meaningfully increase housing production across the State of Oregon. She has:

- Set an ambitious statewide housing unit production target of 36,000 units per year, which is the level of production necessary to address the housing shortage. Meeting this target will require an all-hands-on deck approach from every sector: all levels of government, philanthropic partners, business partners, and non-profit partners;
- Established the Housing Production Advisory Council (HPAC), which developed a robust set of [recommendations](#) to increase housing production for the Governor's consideration;
- Worked with the Legislature to secure almost \$1 billion to support housing production across all levels of affordability, especially housing affordable to people earning low or moderate incomes;
- Directed the State's housing finance agency, Oregon Housing and Community Services (OHCS), to streamline their funding processes in order to maximize production; and
- Passed an omnibus housing production package (SB 1537) with a suite of policy tools to encourage housing production, including addressing common barriers to production like land supply.

Strategic Imperatives (2024)

Through the development and implementation of the Governor's priority housing production legislation (SB 1537), review of the Housing Production Advisory Council (HPAC) recommendations, consideration of stakeholder and agency feedback on the HPAC recommendations, and implementation of legislative investments to improve housing production outcomes, the Governor has refined and expanded her production framework for the State of Oregon. Across all of the strategic pillars of her production framework, the State of Oregon will focus on the following:

- **Outcomes:** Set clear outcome goals to increase housing production facilitated by state resources and transparently report on progress toward those goals at the end of the 2023-25 biennium.
- **Coordination:** Across all strategic pillars, break down silos in State government, coordinate across relevant executive branch agencies local, and regional partners to maximize housing production.
- **Racial Equity:** Center racial equity by ensuring that the implementation of Oregon’s land use system housing goal (Goal 10) affirmatively furthers fair housing, requiring racial equity impact analyses for all aspects of this framework that receive state funding, and ensuring that state affordable housing resources are accessible to culturally-specific organizations developing affordable housing.
- **Tribal Sovereignty:** Across all strategic pillars, consult and collaborate with the nine federally recognized and sovereign tribes in Oregon.

Pillar 1. Statewide Housing Production Outcomes

The Governor’s Office will ensure that the State estimates and allocates housing needs across the State and work with local jurisdictions to develop and implement effective housing production strategies to maximize these outcomes. In addition, the Governor will ensure that the State develops a housing production strategy alongside local jurisdictions, as all levels of government must do their part to remove barriers to development and increase housing production.

- Report statewide production outcomes compared to the annual statewide goals: Oregon Housing and Community Services (OHCS) will create an initial publicly available housing production dashboard by January 1, 2025, that compares housing production goals and outcomes for cities above 10,000. The agency will fully populate the dashboard with complete data by January 1, 2026, and will annually update the dashboard thereafter. This will create transparency for Oregonians about the statewide housing production goals for cities above 10,000, related outcomes, and any gaps between housing goals and outcomes.
- Track the impact of state programs on new housing production: The Governor’s Office will direct the Department of Land Conservation and Development (DLCD) to explore the creation of a dashboard that shows how many housing units, types, and tenures have been produced by state programs and investments, including the Housing Accountability and Production Office (HAPO).
- Focus on equitable outcomes: OHCS will develop, track, and publicly report on equity indicators in new housing production to increase public transparency about whether the housing units being produced statewide are advancing equity in the State.
- Establish and report outcomes for state investments: At the end of the biennium, the Governor’s Office will report on the outcomes achieved with all housing production resources invested this biennium to expand the outcomes-oriented strategic pillar.
- Develop an outcomes-oriented budget: The Governor’s Office and OHCS will work with partners to develop the Governor’s Recommended Budget to make certain we do not lose ground on the housing undersupply crisis by losing the existing affordable housing we have. In addition, the Governor will ensure that any new programs or program expansions that may be included will have clear associated production outcomes and

have a racial equity impact analysis to understand the racial equity impacts of each potential investment.

Pillar 2. Maintain Existing Housing Investments

Preserve and Stabilize Existing Affordable Housing

The State of Oregon has invested in tens of thousands of units, supporting an expanding portfolio of regulated affordable housing. Expiring affordability agreements, capital preservation needs, operational shortfalls, and other issues put past investments at risk. This project will work to preserve and stabilize affordable and moderate-income housing units that have been financed or funded by the federal, state, and local government. This will be accomplished through the following actions:

- A. An analysis and intervention framework for forecasting the State's preservation need for the next 10 years.
- B. The establishment and capitalization of a state-funded first loss risk pool (partial insurance) for regulated affordable housing and public housing in order to facilitate lower premiums when acquiring insurance for properties, in alignment and coordination with the permanent supportive housing risk mitigation work in the Governor's 2024 Homelessness Response Framework.
- C. Interventions to support properties experiencing operational challenges as a result of the pandemic or changing market conditions in order to stabilize regulated affordable housing and public housing, as well as prevent affordable housing program withdrawal, prevent foreclosure and loan forfeiture, or address necessary life and safety repairs.
- D. Interventions to preserve manufactured home parks.

Achieve Affordability through Acquisition

Unique, current market conditions are creating a rare opportunity to acquire market rate or unregulated affordable rental housing and convert it into regulated affordable housing at half the cost per unit of new development. These market conditions are supporting this conversion work happening three to four years faster than new development. This project will identify opportunities to leverage this strategy.

- A. The Governor's Office and OHCS will identify the current program and funding barriers to support the acquisition of existing housing and conversion to affordability, as well as identify program and funding options.

Pillar 3. Land and Land Readiness for Housing Production

Land for New Housing

As sites zoned for residential development have built out, housing authorities, affordable housing developers, and market-rate housing developers are challenged by a lack of residentially zoned

land where housing development is feasible or where land is development ready. The State of Oregon will take targeted action to increase available land and support land readiness.

- A. Through the Oregon Housing Needs Analysis implementation, the Department of Land Conservation and Development (DLCD) will incorporate development feasibility into the requirements and guidance for determining residential buildable land inventories. This will aim to ensure the land counted for housing production is reasonably expected to occur.
- B. DLCD will support local jurisdictions and housing developers in utilizing the one-time site addition to urban growth boundaries that are authorized in Senate Bill 1537 (2024).
- C. DLCD and the Department of State Lands (DSL) will identify program options to provide technical assistance funding to cities for local wetlands inventories and delineations that facilitate the removal of wetlands as residentially zoned lands in a city's 20-year available land inventory.
- D. DSL will identify how to extend wetland mitigation credits to voluntary wetland projects under ORS 196.623, including Oregon Watershed Enhancement Board funded programs, and enable the department to support and create wetland mitigation opportunities (which avoid, minimize, or compensate for impacts to these natural resources) throughout Oregon in order to enhance and preserve key ecosystem functions. This will include a focus on serving urban development where local jurisdictions identify and justify the need for wetland credits (funds that restore or enhance wetlands or waters) to support housing production goals, while investing in climate resilience.
- E. The Governor's Office will work with the Department of Administrative Services (DAS) to evaluate state owned and leased properties and identify which may be suitable for housing development to create a pipeline of housing development opportunities across the state. Creating an equitable, low-barrier disposition process for land can achieve rapid housing production on these properties. Entering into low-cost or long-term leases would reduce land costs for affordable housing developers and create a mechanism to keep public properties affordable for the long term.
- F. Business Oregon will recapitalize and expand Oregon's brownfield property revitalization and redevelopment fund with specific funding for the production of new housing. These options will include additional eligible uses addressing site readiness, such as gradation or public nuisance issues.
- G. OHCS will assess the financial sustainability of their land acquisition program, options for expanding the program for affordable and moderate-income housing, and the alignment of the program with Oregon Housing Needs Analysis requirements associated with housing production targets and local housing production strategies.

Pillar 4. Less Complexity and Cost for Housing Development

Understand and Address Process Barriers

Housing development land use entitlement and permit review has become longer, more complex, and involves more local, state, and public entities. In order to address this, the Housing Accountability and Production Office (HAPO) created by SB 1537 (2024) will:

- A. Complete a land use and permitting process study, as well as a public works and building permit study to assess current conditions in Oregon, best practices, and opportunities for improving the efficiency or lowering the cost of the housing development process.
- B. Identify the drivers and impact of franchise utility process requirements and timelines on major housing development projects, as well as intervention options to mitigate impacts to cost or delay.

Improvements to the State of Oregon's Process

State agencies have a significant role in reviewing and approving many proposed housing development projects in communities across Oregon. The objective of this project is to improve the State's involvement with the housing development review and approval process. This will be accomplished through the following actions:

- A. Establish major housing project priority review staff at Oregon Department of Transportation (ODOT), Department of Environmental Quality (DEQ), and Department of State Lands (DSL). Major housing project review teams will provide a single point of contact for each agency for a project's permit review and approval process and give the project priority review status over other projects.
- B. Modernize the Land Use Board of Appeals (LUBA) process with electronic filing and systems in order to help expedite appeals.
- C. Provide funding for an ongoing statewide training institute for planners, permit reviewers, and developers of residential housing projects on changes in state statute and rule and LUBA decisions.
- D. The DEQ will work with municipalities and housing development stakeholders to refine and align the post-construction stormwater standards in Oregon in a manner that facilitates housing production and protects water quality.

Tools for Local Jurisdictions and Housing Developers

Local jurisdictions and their housing development partners have highlighted the need for additional tools and support to work through issues that fully implement middle housing statutes and increase housing production. This project will provide initial tools and identify others as needed. This will be accomplished through the following actions:

- A. DSL will develop a program that supports funding for local jurisdictions to start wetlands in-lieu fee programs (projects that are restoring or enhancing wetlands or waters) as a mechanism to better align and expedite housing production projects with wetland preservation and mitigation objectives to enhance and preserve key ecosystem functions.
- B. DLCD will establish model housing development codes for use by small, medium, and large cities, with best practices for development standards for single unit detached dwellings, accessory dwelling units, middle housing including cottage clusters and townhouses, and multi-unit attached dwellings.
- C. The Governor's Office and DLCD will work with stakeholders to explore potential changes needed to Oregon statutes or rules to fully implement the intent of middle housing. This includes addressing barriers to additional accessory dwelling units, single room occupancy units, cottage cluster housing, attached townhouses, and other for rent and for sale middle housing types in all communities in the state.

Pillar 5. Funding and Programs Supporting Housing Production

Ongoing Funding for Housing Development

- A. Continue to maximize LIFT funding, low-income housing tax credits, and private activity bond allocations for affordable rental and homeownership development.
- B. Explore a dedicated, time-limited revenue stream (10 years) to provide consistent additional funding to reduce the cost of low- and moderate-income housing development.

Ongoing Infrastructure for Housing Programs

Infrastructure is a critical need in communities across Oregon to support increased housing production. This project will provide funding and an ongoing role for state government in supporting this need. This will be accomplished through the following actions:

- A. The Governor's Office and Business Oregon will develop a program that supports readying existing land for new affordable and moderate-income housing development with infrastructure programs to support water, wastewater, stormwater, and transportation infrastructure.
- B. System development charges are critical tools to fund infrastructure for municipal services. The Governor's Office will identify options to incentivize payment deferrals or provide offsets for targeted waivers, while maintaining these essential local funding sources.

Strengthen and Expand the State Housing Finance Agency

Oregon's housing production needs are changing, and the state's housing finance agency must change based on conditions on the ground. This project will identify and implement changes to continue to grow the number of housing units. This will be accomplished through the following actions:

- A. Assess the financial sustainability of the Oregon Housing and Community Services (OHCS) predevelopment financing program and options for expanding the program for affordable and moderate-income housing.
- B. Identify options to establish a Tribal housing block grant, to support Tribes in meeting their housing production and affordability needs while providing funding certainty without having to compete with other municipalities or housing developers for funding.
- C. Explore changes to OHCS programs and structure to better support its role as a state housing finance agency. Changes to explore include structural or operational changes, direct lending and loan servicing, pass through bond financing, among other options.

Pillar 6. Workforce for Housing Planning, Permitting, and Construction

Maintain and Expand Successful Initiatives

- A. The Oregon Building Codes Division will identify options and work to expand state and local capacity for plan review and site inspections for housing.

- B. Develop options for the continuation of current pre-apprenticeship funding and programming for housing construction and development.
- C. Establish interventions for targeted outreach, recruitment, and retention plans to support apprentices from priority populations and to support the capacity and participation of employers who are committed to hiring underrepresented and/or underserved populations in licensed trade apprenticeships.
- D. Identify options to expand the Central Oregon Construction Sector Partnership to other interested regions of Oregon.

Understand and Address Workforce Needs

- A. Using existing resources, the Higher Education Coordinating Commission, in cooperation with the Oregon Employment Department and the Oregon Department of Education (*high school CTE*), will complete an in-depth assessment of housing production planning, permitting, and construction workforce needs – looking at specific occupation types and regional needs – and catalogue existing training programs, strategies, and national best practices. Local government and industry stakeholders will be included in scoping and reviewing assessment and findings.
- B. Use the assessment (*above*) to establish program options for the 2025 Legislative Session that include targeted interventions to support the most needed occupations and training programs for different regions of Oregon.