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# SCANNED NOV 2 2 2010

Form **990-PF** 

Department of the Treasury

Internal Revenue Service

## **Return of Private Foundation**

### or Section 4947(a)(1) Nonexempt Charitable Trust **Treated as a Private Foundation**

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

2009

OMB No 1545-0052

For (	alenda	r year 2009, or tax year beginning			, and er	nding		
G	heck all	that apply Initial return		Initial return of a fo		harity	Final return	
		Amended retur	n	X Address chang	ge		Name change	
Use	the IRS	Name of foundation					A Employer identification	number
	abel.							
_	erwise,						26-1469914	<u> </u>
	print	Number and street (or P O box number if n	naıl ıs not de	elivered to street address)		Room/suite	B Telephone number	0.0
	r type. Specifi	109 S 1ST STREET					503/743-31	
	ructions	City of town, State, and ZIP code	7201			'	C If exemption application is p	_
	N I . A		7381				D 1. Foreign organizations 2. Foreign organizations me check here and attach co	s, check here
H (	¬ ′′		_	empt private foundation	.t.a.		check here and attach co	omputation
		on 4947(a)(1) nonexempt charitable truet value of all assets at end of year   J		Other taxable private foundang method Cash	X Accr	<u>.</u>	E If private foundation sta	
		t II, col. (c), line 16)		ther (specify)	LZE ACCI	uai	under section 507(b)(1)	• •
	·\$			mn (d) must be on cash l	basis.)	<del></del>	F If the foundation is in a under section 507(b)(1	
	ert E A	Analysis of Revenue and Expenses		(a) Revenue and	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements
1.3.3	·················· (1	The total of amounts in columns (b), (c), and (d eccessanly equal the amounts in column (a))	may not	expenses per books	INCO		income	for chantable purposes (cash basis only)
	· ·	ontributions, gifts, grants, etc., received					N/A	· · · · · · · · · · · · · · · · · · ·
		neck X If the foundation is not required to atta				······································		
	l a Int	terest on savings and temporary		46,937.	4	6,937.		STATEMENT 1
	1	vidends and interest from securities		91,945.	9	1,945.		STATEMENT 2
	5a Gi	ross rents						
	<b>b</b> Ne	et rental income or (loss)				,,,,,,,		
ō		et gain or (loss) from sale of assets not on line		<815,633.	>			
Revenue	b as	oss sales price for all8 , 777 , 9	968.				<u> </u>	· · · · · · · · · · · · · · · · · · ·
ě		apital gain net Income (from Part IV, line 2)				0.		
_		et short-term capital gain				······		<u> </u>
	۰.	come modifications ross sales less returns				<del></del>		
	10a an	d allowances as Costorgoods spig = FIVED		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<del></del>		
	n Ce	ess Costorgoods spid ECEIVED	78			······		
		the readment	-101				d	<u> </u>
		ntal. Add lines 1 thiroùgh 11 8 2010	100	<676,751.	> 13	8,882.		
		ompensation of officers, directors, trustees, et	الخظ أسوم	0.		0.		0.
	14 01	ther empleyee salāries and wages						
	15 Pe	ension plans, employee benefits						
enses	16a Le	egal fees STM:		39.		0.		39.
per	b Ad	counting fees STM		1,250.		625.		625.
Expe		ther professional fees STM	F 5	9,426.		9,426.		0.
š		terest	n	90.		90.		453.
stra	18 Ta		r o	1,264.		350.	· -	455.
Ë		epreciation and depletion				-		
ρ		ccupancy ravel, conferences, and meetings		_				<del>                                     </del>
ğ		rinting and publications						
<u>a</u>	1	ther expenses STM!	r 7	50.		0.		50.
Operating and Administrative		otal operating and administrative						
er.		penses. Add lines 13 through 23		12,119.	1	0,491.		1,167.
ō		ontributions, gifts, grants paid		187,000.				1,167. 187,000.
		otal expenses and disbursements.						
		dd lines 24 and 25		199,119.	1	0,491.		188,167.
	27 S	ubtract line 26 from line 12						
	a Ex	ccess of revenue over expenses and disburser	nents	<875,870.				·
	b N	et investment income (if negative, enter -	) <del>-</del> )		12	8,391.		
9235		djusted net income (if negative, enter -0-)					N/A	5 000 PE (2000)

n	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
Par	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	9,892.	639.	639.
2	Savings and temporary cash investments	100,285.	24,452.	24,452.
3	Accounts receivable -		"	
	Less: allowance for doubtful accounts			
4	Pledges receivable	1.40		
	Less allowance for doubtful accounts ▶			
5	Grants receivable			
16	Receivables due from officers, directors, trustees, and other			
}	disqualified persons			
١,	Other notes and loans receivable			······································
'	Less: allowance for doubtful accounts			
ی م	Inventories for sale or use			-
<u> </u>				
Y As		1,434,871.	113,970.	117,528.
	amum a	1,520,421.	633,216.	677,003.
1		723,158.	033,210.	0777003.
- 1	c Investments - corporate bonds	123,130.	<del></del>	<del>" ·</del>
יון	Investments - land, buildings, and equipment basis			
	Less: accumulated depreciation			
12	Investments - mortgage loans	640 464	0 000 077	0.075.704
13		640,464.	2,800,277.	2,975,724.
14	Land, buildings, and equipment basis			
	Less. accumulated depreciation			
15	Other assets (describe)			
16	Total assets (to be completed by all filers)	4,429,091.	3,572,554.	3,795,346.
17	Accounts payable and accrued expenses			
18	Grants payable			
ဖ္တ 19	Deferred revenue .			
<u> </u>	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	Mortgages and other notes payable			
그   22	· · ·			
23	Total liabilities (add lines 17 through 22)	0.	0.	
$\top$	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
S 24	· · · · · · · · · · · · · · · · · · ·	4,429,091.	3,572,554.	
<u>e</u> 25	ì	1,123,0320	0,0.2,0010	
	Permanently-restricted			
Net Assets or Fund Balances	Foundations that do not follow SFAS 117, check here			2022
<u>:</u>	· · · · · · · · · · · · · · · · · · ·			· · · · · · ·
ъ- - <u>-</u> -	and complete lines 27 through 31.			
S 27	· · · · · · · · · · · · · · · · · · ·			
SS   28	, , , , , , , , , , , , , , , , , , , ,			
전   29		4 420 001	2 572 554	
ž  30	Total net assets or fund balances	4,429,091.	3,572,554.	
1		4 400 001	2 572 554	
31	Total liabilities and net assets/fund balances	4,429,091.	3,572,554.	······
Par	Analysis of Changes in Net Assets or Fund B	alances		
	· · · · · · · · · · · · · · · · · · ·	<u> </u>		
1 Tot	al net assets or fund balances at beginning of year - Part II, column (a), line	30		
(m	ust agree with end-of-year figure reported on prior year's return)		1	4,429,091. <875,870.>
2 Ent	er amount from Part I, line 27a		2	<875,870.>
3 Oth	er increases not included in line 2 (itemize) <u>UNREALIZED</u>	GAIN	3	19,333.
4 Ad	i lines 1, 2, and 3		4	3,572,554.
5 Dec	creases not included in line 2 (itemize)		5	0.
6 Tot	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	3,572,554.
				Form <b>990-PF</b> (2009)

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	DART FAMILY FOUN				.,	26	6-1469	9914	Page 3
<u> </u>	and Losses for Tax on Ir		Income	(h) Ho	w acquired		<del></del>	(1) D (	
2-story brick wa	nbe the kind(s) of property sold (e g rehouse, or common stock, 200 sh			P - F D - (	w acquired Purchase Donation	(c) Date a (mo , da		( <b>d</b> ) Dat (mo , d	
1a PUBLICLY TRADE	D SECURITIES			<u> </u>				-	
<u>b</u>				<u> </u>					
<u>c</u>				<u> </u>					
8		_							
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				un or (loss) (f) minus (i		
a 8,777,968.			9,593,60	11.		•	-	<815	,633.
b									
C									
<u>d</u>									
Complete only for assets showin	g gain in column (h) and owned by	the foundation	on 12/31/69	-		) Gains (Co	ol (h) gaın ı	miniis	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col (I)		col	(k), but n	ot less than (from col (f	-0-) or	
a	. <del>.</del>	·						<815	,633.
b									
C									
<u>d</u>									
e	C If any also ento	- in Dart Line		$\neg +$					
2 Capital gain net income or (net ca		)- ın Part I, line		<u> </u>	2			<815	<u>,633.</u>
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8,		nd (6)		٦١					
If (loss), enter -0- in Part I, line 8					3		N/A		
Part V   Qualification U	nder Section 4940(e) for	r Reduced	Tax on Net	Inves	stment Inc	ome			
(For optional use by domestic private	foundations subject to the section	4940(a) tax on	net investment in	ncome )					
If section 4940(d)(2) applies, leave th	nis part blank								
Was the foundation liable for the sect	ion 4942 tay on the distributable an	nount of any ve	ear in the hase ne	nod?				☐ Yes	X No
If "Yes," the foundation does not quali			•						
	each column for each year, see instr			es					
(a) Base period years	(b)	atributions.	Maturalus of no	(c)	hla usa sasta	(d) Distribution ratio (col (b) divided by col (c)			
Calendar year (or tax year beginning		8,449.	Net value of no		383,831		COI (b) divi		(c)) 84047
2008	30	0.			422,300				00000
2006									
2005									
2004						<del>                                     </del>		<del></del>	
7. Total of line 1. solume (d)								0	84047
<ul><li>2 Total of line 1, column (d)</li><li>3 Average distribution ratio for the 5</li></ul>	5-year hase period - divide the total	on line 2 by 5	or by the number	r of vears		2			04047
the foundation has been in exister		on mio 2 by 0,	or by the named	or your	•	3		.0	42024
	·						•		
4 Enter the net value of noncharitab	le-use assets for 2009 from Part X,	line 5				4		3,602	<u>,925.</u>
F. Marillanda ben A. Barrian						_		151	,409.
5 Multiply line 4 by line 3						5		131	,403.
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)					6		1	,284.
7 Add lines 5 and 6						7		152	,693.
8 Enter qualifying distributions from	n Part XII. line 4					8		188	,167.
If line 8 is equal to or greater than	line 7, check the box in Part VI, line	e 1b, and comp	lete that part usin	ng a 1%	tax rate		•		•
See the Part VI instructions									

12531105 783673 44826

orn			14699			age 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	<del>  48</del> -	see in	stru	ction	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)	- 1				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1	,		L,28	34.
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)	1				_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3			1,28	34.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			1,2	<u>84.</u>
6	Credits/Payments					
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 6a	1				
b	Exempt foreign organizations - tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868)  6c 2,000.					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments Add lines 6a through 6d	7			2,0	00.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				<u> 28.</u>
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			6	88.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 688. Refunded ▶	11				0.
Pá	ert VII-A Statements Regarding Activities					
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene i	ın			Yes	
	any political campaign?		L	1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		L	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	i or				
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?			1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation ▶ \$ (2) On foundation managers. ▶ \$				- 1	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers ▶ \$ 0 .					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		L	2		<u>X</u>
	If "Yes," attach a detailed description of the activities.		1			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		Ĺ	3		<u>X</u>
48	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		.	4a		X
t	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	N	/A _	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		<u> </u>	5		<u>X</u>
	If "Yes," attach the statement required by General Instruction T.		1			
- 6-	-Are the-requirements of-section-508(e) (relating to sections 4941-through-4945) satisfied either—	<b></b>				
	By language in the governing instrument, or					-
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law				
	remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	If "Yes," complete Part II, col. (c), and Part XV.					
88	Enter the states to which the foundation reports or with which it is registered (see instructions)					
t	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9		ndar	ſ			
-	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		L	g		X

10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses

dill 350-11 (2003) HODDARI FAMILII FOUNDATION 20 140:	<del>, , , , ,</del>		
Part VII-A Statements Regarding Activities (continued)			
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u>X</u>
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
August 17, 2008?	12		<u>X</u>
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
Website address ► N/A			
14 The books are in care of ► THE FOUNDATION Telephone no ►503/8	74 - 1	805	
Located at ▶ 109 S 1ST STREET, SILVERTON, OR ZIP+4 ▶9	7381		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b>•</b>	
and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a During the year did the foundation (either directly or indirectly)			
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
a disqualified person? Yes X No			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
(5) Transfer any income or assets to a disqualified person (or make any of either available			
for the benefit or use of a disqualified person)?			
(6) Agree to pay money or property to a government official? (Exception. Check "No"			
if the foundation agreed to make a grant to or to employ the official for a period after			
termination of government service, if terminating within 90 days )			
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?  N/A	16		
Organizations relying on a current notice regarding disaster assistance check here	12.		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1		
before the first day of the tax year beginning in 2009?	10		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	<u> </u>		
defined in section 4942(j)(3) or 4942(j)(5))	-   '		
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	1 '		
before 2009?	] '		
If "Yes," list the years ▶ ,			
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
statement - see instructions ) N/A	2b		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	ļ		
• With providing an addition to 12/12/12/12 and adding applied to any an analysis in 20, not the years not			
—3a-Did the foundation hold-more than a 2%-direct-or indirect-interest in any business enterprise at any time-	ж		************
during the year?	+~ ~	•	
b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after			
May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose		l~	
of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
Form 4720, to determine if the foundation had excess business holdings in 2009.)  N/A	3ь	[	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			•••••••
had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b	[	Х
			2009)

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Part VIII Information About Officers, Directors, Trustees, Foundate Paid Employees, and Contractors (continued)	ion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	<u> </u>	▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist number of organizations and other beneficianes served, conferences convened, research papers produced.	cal information such as the uced, etc	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on l	ines 1 and 2	Amount
1 N/A		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		0.
		Form <b>QQO-PF</b> (2009)

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	2,991,223. 666,569.
	Average of monthly cash balances	1b	666,569.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	3,657,792.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,657,792.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	54,867.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	3,602,925.
6	Minimum investment return. Enter 5% of line 5	6	180,146.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part )	d certain	
1	Minimum investment return from Part X, line 6	1	180,146.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	1,284.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,284. 178,862.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	178,862.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	178,862.
	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	4.	188,167.
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	-	<del></del>
3	Amounts set aside for specific charitable projects that satisfy the	3a	
a	Suitability test (prior IRS approval required)	<del> </del>	
	Cash distribution test (attach the required schedule)	3b 4	188,167.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	+	100/10/-
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	5	1.284
6	Income Enter 1% of Part I, line 27b	6	1,284. 186,883.
0	Adjusted qualifying distributions. Subtract line 5 from line 4		
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation ( 4940(e) reduction of tax in those years	quannes 101	IIIC SECTION
_	יייייייייייייייייייייייייייייייייייייי		Form <b>QQD_DE</b> (2000)

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Part XIII Undistributed Income (see instructions)

			<del></del>	
	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,	Corpus	Tours prior to 2000	2000	
line 7				178,862.
2 Undistributed income, if any, as of the end of 2009		., ,,,,,,		
a Enter amount for 2008 only	· · · · · · · · · · · · · · · · · · ·		0.	
b Total for prior years				
		0.		<del></del>
3 Excess distributions carryover, if any, to 2009				
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008 137,878.	127 070			
f Total of lines 3a through e	137,878.			
4 Qualifying distributions for 2009 from				
Part XII, line 4 ► \$ 188, 167.			0.	
a Applied to 2008, but not more than line 2a			0.	<del>denderation of the second of </del>
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		V •		<del></del>
Treated as distributions out of corpus	0.			
(Election required - see instructions)	0.			178,862.
d Applied to 2009 distributable amount  e Remaining amount distributed out of corpus	9,305.			170,002.
'	0,303.			0.
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	147,183.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable		_		
amount - see instructions		0.		·····
e Undistributed income for 2008 Subtract line			-	
4a from line 2a Taxable amount - see instr	7	~ ~ ~ ~ · · · · · · · · · · · · · · · ·	0.	
1 Undistributed income for 2009 Subtract				
lines 4d and 5 from line 1. This amount must				0
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0.			
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004	0.			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	147,183.			
10 Analysis of line 9	14//103			
a Excess from 2005				
b Excess from 2006	1			
c Excess from 2007				
d Excess from 2008 137,878.				
e Excess from 2009 9, 305.				
J				5 000 DE (0000)

Part XV Supplementary Information			26-146	9914 Page 11
3 Grants and Contributions Paid During the Ye	-	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year HABITAT FOR HUMANITY/NORTH WILLAMETTE VALLEY - 225 FRANKLIN STREET MT ANGEL, OR	or substantial contributor	PUBLIC CHARITY	APFORDABLE HOUSING	40,000
MIKE SILVA INTERNATIONAL PO BOX 8808 PORTLAND, OR 97207		PUBLIC CHARITY	RELIGIOUS MINISTRY	10,000
LIVINGSTONE ACADEMY 5771 FRUITLAND ROAD NE SALEM, OR 97301		PUBLIC CHARITY	RELIGIOUS MINISTRY	5,000
PROJECT PATCH 2404 E MILL PLAIN BLVD, STE A VANCOUVER, WA 98661		PUBLIC CHARITY	ADOLESCENT THERAPY	120,400
LIVING STONE OUTREACH PO BOX 545 NEWBERG, OR 97132		PUBLIC CHARITY	REDUCING POVERTY	11,600
Total			<b>▶</b> 3a	187,000
b Approved for future payment			33	
NONE				
Total	<u> </u>		<b>▶</b> 3b	0

923611 02-02-10

Form **990-PF** (2009)

Part XVI-A	Analysis	of Income-	Producing	Activities
------------	----------	------------	-----------	------------

Enter gross amounts unless otherwise indicated	Unrelated	business income		by section 512, 513, or 514	(e)
	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue	Business code	Amount	sion	Amount	function income
a					<del></del>
b					
c					
d					·
6					
f			-		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash				46.005	
investments			14	46,937.	
4 Dividends and interest from securities			14	91,945.	· · · · · · · · · · · · · · · · · · ·
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other		•			
than inventory			18	<815,633.>	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue					
a					
b					
C					
d					
e					
2 Subtotal Add columns (b), (d), and (e)		(	0.	<676,751.>	
3 Total. Add line 12, columns (b), (d), and (e)	<del></del>			13	<676,75
(See worksheet in line 13 instructions to verify calculations	)			<del></del>	

# Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)					
923621 02-02-10	Form <b>990-PF</b> (2009					

Forr	n 990-f	PF (20 <u>0</u> 9) HUDDA	RT FAMILY FO	OUNDATION	2	26-1469 <u>914</u>	Page 1 <u>3</u>
	art X\			s To and Transactions	and Relationships With	Noncharitable	)
1	Did th	<del></del>		ion described in section 501(c) of		Yes No	
•		ode (other than section 501(c					
2		fers from the reporting found		- · · · · · · · · · · · · · · · · · · ·			
a	1a(1)	Х					
	1a(2)	X					
	14(2)						
U		transactions	hla aa.a.h aa.a.h.a.a			1,5/1	Х
		ales of assets to a noncharita			•	15(1)	$\frac{x}{x}$
		urchases of assets from a no	· -	auon		1b(2)	$\frac{x}{x}$
		dental of facilities, equipment,				1b(3)	$\frac{x}{x}$
		Reimbursement arrangements				1b(4)	$\frac{X}{X}$
		oans or loan guarantees		alanda Araba a a		1b(5)	X
		erformance of services or me				1b(6)	$-\frac{\lambda}{X}$
C		ng of facilities, equipment, ma					
đ	or se	•	oundation If the foundation	n received less than fair market va	ilways show the fair market value or lue in any transaction or sharing ar	-	ets,
(2)	ine no	(b) Amount involved	<del></del>	haritable exempt organization	(d) Description of transfers, trai	neactions and sharing an	angements
(4)	Jue no	(b) Amount involved	, , , , , , , , , , , , , , , , , , ,	V/A	(u) Description of transfers, trai	risactions, and snaring an	angements
			L	N/A			
		· · · · · · · · · · · · · · · · · · ·					
	-						
		··········					<del> </del>
			_				
							<del></del>
							<del></del>
				<del> </del>			
						<del></del>	
				<del></del>			
			<u> </u>				
2a		foundation directly or indirection 501(c) of the Code (othe		f to, one or more tax-exempt orga or in section 527?	nizations described	Yes	X No
b		s," complete the following sch					
		(a) Name of org		(b) Type of organization	(c) Description	n of relationship	····
		N/A					
					-	-	
				ding accompanying schedules and state based on air information of which prepar	ements, and to the best of my knowledge rer has any knowledge	and belief, it is true, corre	ect,
İ		(Ather)	//	11/2/15			
م	<b>7</b>	TIMAK	MY	11175/10	MA.		
Sign Here	<b>y</b> 8	gnatule officer or trustee	-1: 2	Dyate /	Date Check if	Preparer's identif	vina number
듦	s -	Preparer's	7/11 Man		11-0-10 self-	PMI	,g
Š	Paid Preparer's Use Only	signature	TW CSO	2V	Self- employed ►	<u> </u>	V/4/
	Paid spare se On	Firm's name (or yours GROV	•	SWANK, P.C.	EIN ►		
	F. S.	if self-employed), 475		EET NE, SUITE 2	l	1500:501	7700
$\Box$		address, and ZIP code SALE	EM, OR 97301		Phone no	(503)581	<u> - / /88</u>

FORM 990-PF INTEREST ON SAV	INGS A	ND TEMI	PORARY CA	ASH IN	VESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
UBS FINANCIAL							37.
TOTAL TO FORM 990-PF, PART I	, LINE	3, COI	LUMN A			46,9	37.
FORM 990-PF DIVIDEN	DS AND	INTER	EST FROM	SECUR	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		TAL GAINS	COLUMN (A	.)
UBS FINANCIAL SERVICES WELLS FARGO	•	-	91,067. 878.		0.	91,067	
TOTAL TO FM 990-PF, PART I, LN 4			91,945.		0.	91,945.	
FORM 990-PF	· - · ·	LEGAL	FEES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		
LEGAL FEES		39.	· · · · · · · · · · · · · · · · · · ·	0.			39.
TO FM 990-PF, PG 1, LN 16A		39.	0.				39.
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	4
		A)	(B)		(C)	(D)_	
DESCRIPTION		NSES BOOKS	NET INV		ADJUSTED NET INCOM		
ACCOUNTING FEES	1,250			625.		6	25.
TO FORM 990-PF, PG 1, LN 16B		1,250.		625.	****		25.

FORM 990-PF (	OTHER PROFESSIONAL FEES			STATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
MANAGEMENT FEES	9,426.	9,426.		0.	
TO FORM 990-PF, PG 1, LN 16C	9,426.	9,426.		0.	
FORM 990-PF	TAX	ES	S	ratement 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
FOREIGN TAXES ON DIVIDENDS STATE TAXES AND FEES FEDERAL TAXES	350. 453. 461.	350. 0. 0.		0. 453. 0.	
TO FORM 990-PF, PG 1, LN 18	1,264.	350.		453.	
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 7	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LICENSES	50.	0.		50.	
TO FORM 990-PF, PG 1, LN 23	50.	0.		50.	

FORM 990-PF U.S. AND ST	PATE/CITY GOVERNMENT	OBLIGATIONS	STATEMENT 8
DESCRIPTION	U.S. OTHER GOV'T GOV'T	BOOK VALUE	FAIR MARKET VALUE
GOVERNMENT BONDS	<u>x</u>	113,970.	117,528.
TOTAL U.S. GOVERNMENT OBLIGATION	ions	113,970.	117,528.
TOTAL STATE AND MUNICIPAL GOVE	ERNMENT OBLIGATIONS		
TOTAL TO FORM 990-PF, PART II,	, LINE 10A	113,970.	117,528.
FORM 990-PF	CORPORATE STOCK		STATEMENT 9
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
STOCKS AND OPTIONS		633,216.	677,003.
TOTAL TO FORM 990-PF, PART II,	633,216.	677,003.	
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 10
DESCRIPTION	VALUATION • METHOD	BOOK VALUE	FAIR MARKET VALUE
MUTUAL FUNDS	COST	2,800,277.	2,975,724.
TOTAL TO FORM 990-PF, PART II,	, LINE 13	2,800,277.	2,975,724.

	- LIST OF OFFICERS, S AND FOUNDATION MAN		STATI	EMENT 11
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
JAMES L HUDDART 109 S 1ST STREET SILVERTON, OR 97381	PRESIDENT AND 2.00	TREASURER 0.	0.	0.
MARGARET M HUDDART 109 S 1ST STREET SILVERTON, OR 97381	SECRETARY 2.00	0.	0.	0.
AARON L HUDDART 109 S 1ST STREET SILVERTON, OR 97381	DIRECTOR 2.00	0.	0.	0.
ADAM L HUDDART 109 S 1ST STREET SILVERTON, OR 97381	DIRECTOR 2.00	0.	0.	0.
BRENDA R MASSEY 109 S 1ST STREET SILVERTON, OR 97381	DIRECTOR 2.00	0.	0.	0.
RICK MASSEY 109 S 1ST STREET SILVERTON, OR 97381	DIRECTOR 1.00	0.	0.	0.
KYLER MASSEY 109 S 1ST STREET SILVERTON, OR 97381	DIRECTOR 1.00	0.	0.	0.
KAITIE MASSEY 109 S 1ST STREET SILVERTON, OR 97381	DIRECTOR 1.00	0.	0.	0.
TOTALS-INCLUDED-ON-990=PF, P	AGE-6, PART-VIII-		0.	0.

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FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

NAME OF MANAGER

JAMES L HUDDART
MARGARET M HUDDART

# Form **8868**

(Rev April 2009)

Department of the Treasury Internal Revenue Service

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

► File a separate application for each return

OMB No 1545-1709

• If y	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box		► X
• If y	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form)	
Do n	ot complete Part II unless you have already been granted an automatic 3-month extension on a previously fil	ed For	m 8868
Par	Automatic 3-Month Extension of Time. Only submit original (no copies needed)		
A cor	poration required to file Form 990 T and requesting an automatic 6-month extension - check this box and com	plete	
Part I	l only		▶ □
All of	her corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an	exten	sion of time
to file	income tax returns		
noted (not a you r	tronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronical automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or compust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files and click on e-file for Charities & Nonprofits.	cally if nsolida	(1) you want the additional ted Form 990-T Instead,
Туре	or Name of Exempt Organization	Empl	oyer identification number
print		,	C 14C0014
File by	the HUDDART FAMILY FOUNDATION		6-1469914
due da filing ye			
return instruc	See O402 WIIIBH KOND DE		
	SALEM, OR 97317		
Chec	ck type of return to be filed(file a separate application for each return)		
$\vdash$	Form 990 Form 990-T (corporation) Form 47		
片			
문			
ىما	Form 990-PF		
	THE FOUNDATION		
• Th	ne books are in the care of   6402 WITZEL ROAD SE - SALEM, OR 97317		
Τe	elephone No ► 503/874-1805 FAX No ►		
• If	the organization does not have an office or place of business in the United States, check this box		<b>&gt;</b>
• If	this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If th		
box	If it is for part of the group, check this box 🕨 🔲 and attach a list with the names and EINs of all	memb	ers the extension will cover
	Lawrence and the Company of the Comp	ul.	
1	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unit AUGUST 15, 2010 , to file the exempt organization return for the organization named a		The extension
	is for the organization's return for	DOVE	THE EXTENSION
-	► X calendar year 2009 or	-	
	tax year beginning, and ending		
2	If this tax year is for less than 12 months, check reason Initial return Final return		Change in accounting period
За	If this application is for Form 990-BL, 990-PF, 990 T, 4720, or 6069, enter the tentative tax, less any		
	nonrefundable credits. See instructions	3a	\$ 2,000.
b	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated		
	tax payments made Include any prior year overpayment allowed as a credit	3b	\$ 0.
С	Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required,		
	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)	<u>_</u>	2 000
	See instructions	3c	\$ 2,000.
Caut	ion. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879	EO for payment instructions
LHA	For Privacy Act and Paperwork Reduction Act Notice, see Instructions.		Form <b>8868</b> (Rev 4-2009)

Form 886	88 (Rev. 4-2009)		Page	2	
• If you	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part ii and check this bo	×	▶ X		
-	nly complete Part II if you have already been granted an automatic 3-month extension on a previously filed		3868		
<ul><li>If you</li></ul>	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).				
Part I	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	pies n	eeded)		
Type or	Name of Exempt Organization	Emplo	Employer identification number		
print	HUDDART FAMILY FOUNDATION	26	6-1469914		
File by the extended due date fo filing the	Number, street, and room or suite no. If a P.O box, see instructions.  109 S 1ST STREET	For IR	For IRS use only		
return See	City, town or post office, state, and ZIP code. For a foreign address, see instructions.  SILVERTON, OR 97381			_	
Fo Fo	ype of return to be filed (File a separate application for each return)· rm 990 Form 990·EZ Form 990·T (sec. 401(a) or 408(a) trust) Form 1041·A rm 990·BL X Form 990·PF Form 990·T (trust other than above) Form 4720	=	rm 5227	·o	
STOP! D	o not complete Part II if you were not already granted an automatic 3-month extension on a previous	sly filed	d Form 8868.		
Telep  If the  If this  box  4 I re  Fo  If th  The second of the second	ooks are in the care of ▶ 109 S 1ST STREET - SILVERTON, OR 97381 hone No. ▶ 503/874-1805  organization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this for part of the group, check this box ▶ and attach a list with the names and EINs of all is equest an additional 3-month extension of time until NOVEMBER 15, 2010.  In calendar year 2009, or other tax year beginning , and ending his tax year is for less than 12 months, check reason Initial return Final return ate in detail why you need the extension DITIONAL TIME IS NEEDED TO FILE A COMPLETE AND ACCURE.	membe	ers the extension is for.  Change in accounting perio		
no	his application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nrefundable credits. See instructions his application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	8a	\$ 2,000	<u>) .</u>	
tax	payments made Include any prior year overpayment allowed as a credit and any amount paid eviously with Form 8868.	8b_	\$ 2,000	<u>) .</u>	
	lance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit		_	).	
wit	h FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$	<u>, .</u>	
Under per It is true, c	Signature and Verification  alties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the correct, and compared to the correct, and compared to the correct.	best of	my knowledge and belief,		
Signature	1 1 1 1 X = 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Date	× 8/12/10		
<u>gator 0</u>			Form 8868 (Rev 4-20	09)	