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Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-1150

2009

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

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

► The organization may have to use a copy of this return to satisfy state reporting requirements

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Inspection

A For the 2009 calendar year, or tax year beginning

, 2009, and ending

B Check if applicable	C	D Employer identification number
<input type="checkbox"/> Address change	Peter W. Stott Foundation	93-1261580
<input type="checkbox"/> Name change	c/o OCF 1221 SW Yamhill #100	
<input type="checkbox"/> Initial return	Portland, OR 97205	
<input type="checkbox"/> Termination		
<input type="checkbox"/> Amended return		
<input type="checkbox"/> Application pending		

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method Cash Accrual
Other (specify) ►

I Website: ► N/A

H Check ► if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)J Tax-exempt status (check only one) — 501(c) (3) (insert no) 4947(a)(1) or 527

K Check ► if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$ 447,320.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

1 Contributions, gifts, grants, and similar amounts received	1	432,207.
2 Program service revenue including government fees and contracts	2	
3 Membership dues and assessments	3	
4 Investment income	4	83.
5a Gross amount from sale of assets other than inventory	5a	
b Less cost or other basis and sales expenses	5b	
c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here ► <input type="checkbox"/>	6a	
a Gross revenue (not including \$ _____ of contributions reported on line 1)	6b	
b Less direct expenses other than fundraising expenses	6c	
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	7a	
7a Gross sales of inventory, less returns and allowances	7b	
b Less cost of goods sold	7c	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	8	15,030.
8 Other revenue (describe ► See Statement 1)	9	447,320.
9 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	10	297,719.
10 Grants and similar amounts paid (attach schedule)	11	
11 Benefits paid to or for members	12	
12 Salaries, other compensation, and employee benefits	13	45.
13 Professional fees and other payments to independent contractors	14	
14 Occupancy, rent, utilities, and maintenance	15	150.
15 Printing, publications, postage, and shipping	16	2,231.
16 Other expenses (describe ► See Statement 3)	17	300,145.
17 Total expenses. Add lines 10 through 16	18	147,175.
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	19	8,335.
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	20	
20 Other changes in net assets or fund balances (attach explanation)	21	155,510.
21 Net assets or fund balances at end of year Combine lines 18 through 20		

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	8,335.22	155,510.
23 Land and buildings	23	
24 Other assets (describe ► _____)	24	
25 Total assets	8,335.25	155,510.
26 Total liabilities (describe ► _____)	0.26	0.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	8,335.27	155,510.

BAA For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Form 990-EZ (2009)

GJW //

Part III Statement of Program Service Accomplishments (See the instructions.)

What is the organization's primary exempt purpose? See Statement 4

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title

Expenses
(Required for section 501(c)(3) and (4) organizations and section 4947(a)(1) trusts, optional for others)

28 The foundation made grants to 25 nonprofit organizations totaling \$297,719.

(Grants \$ 297,719.) If this amount includes foreign grants, check here

28a 297, 719.

29

11. *What is the primary purpose of the following statement?*

(Grants \$) If this amount includes foreign grants, check here ►

29 a

30

(Grants \$) If this amount includes foreign grants, check here

30 a

31 Other program services (attach schedule)

11. *What is the primary purpose of the following statement?*

37. Other program services (attach schedules) (Grants \$) If this amount includes foreign grants, check here ▶

31 a

32 Total program service expenses (add lines 28a through 31a) ▶ 32 297,719

Part V Other Information (Note the statement requirements in the instrs for Part V.) See Statement 5

33 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity

	Yes	No
33	X	
34	X	

34 Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes

35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T

a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?

b If 'Yes,' has it filed a tax return on **Form 990-T** for this year?

36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N

37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a 0.

b Did the organization file **Form 1120-POL** for this year?

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?

b If 'Yes,' complete Schedule L, Part II and enter the total amount involved

39 Section 501(c)(7) organizations Enter

a Initiation fees and capital contributions included on line 9

b Gross receipts, included on line 9, for public use of club facilities

40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ► 0. ; section 4912 ► 0. , section 4955 ► 0.

b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I

c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ► 0.

d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ► 0.

e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T

41 List the states with which a copy of this return is filed ► None42a The organization's books are in care of ► Brenda VanKanegan Telephone no ► 503-227-6846
Located at ► 1221 SW Yamhill St Portland OR ZIP + 4 ► 97205

b 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)?

If 'Yes,' enter the name of the foreign country. ►

	Yes	No
42b	X	

See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of a Foreign Bank and Financial Accounts

c At any time during the calendar year, did the organization maintain an office outside of the U.S.?

If 'Yes,' enter the name of the foreign country. ►

42c X

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** – Check here and enter the amount of tax-exempt interest received or accrued during the tax year► N/A
43 N/A

44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ

	Yes	No
44	X	

45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ

	Yes	No
45	X	

Part VI

Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I

	Yes	No
46	X	
47	X	
48	X	
49a	X	
49b		

47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If 'Yes,' was the related organization a section 527 organization?

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
None				

f Total number of other employees paid over \$100,000 ►

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving over \$100,000 ►

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

8/12/10

► Gregory A. Chaille

Date

Type or print name and title

Asst Secr/Treas

Paid Preparer's Use Only

Preparer's signature ►

Date

Check if self employed ►

Preparer's Identifying Number (See instructions)
N/A

Firm's name (or yours if self-employed), address, and ZIP + 4

► OREGON COMMUNITY FOUNDATION

EIN

► N/A

► 1221 SW YAMHILL ST STE 100

Phone no

► (503) 944-2106

► Portland, OR 97205-2108

May the IRS discuss this return with the preparer shown above? See instructions

BAA

► Yes No

Form 990-EZ (2009)

SCHEDULE A
(Form 990 or 990-EZ)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.

OMB No. 1545-0047

2009**Open to Public
Inspection**

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

Name of the organization

Peter W. Stott Foundation

Employer identification number

93-1261580**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 11, 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)
 3 A hospital or 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 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)
 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III – Functionally integrated d Type III – Other
 e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
 f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box
 g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 (ii) a family member of a person described in (i) above?
 (iii) a 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g (i)		X
11g (ii)		X
11g (iii)		X

h Provide the following information about the supported organizations

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?		(vii) Amount of Support
			Yes	No	Yes	No	Yes	No	
The Oregon Community Foundation	23-7315673	8	X						297,719.
Total									297,719.

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

Schedule A (Form 990 or 990-EZ) 2009

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Statement 1
Form 990-EZ, Part I, Line 8
Other Revenue

Grant repayments	\$ 15,000.
Subpoena	30.
	Total \$ 15,030.

Statement 2
Form 990-EZ, Part I, Line 10
Grants and Similar Amounts Paid

Class of Activity:	Nuture Children&Families
Donee's Name:	Catholic Charities
Donee's Address:	231 SE 12th Avenue
	Portland, OR 97214
Cash Amount Given:	\$ 10,000.
Class of Activity:	Nuture Children&Families
Donee's Name:	OHSU Foundation
Donee's Address:	1121 SW Salmon St # 200
	Portland, OR 97205
Cash Amount Given:	\$ 30,000.
Class of Activity:	Nuture Children&Families
Donee's Name:	St. Mary's Home for Boys
Donee's Address:	16535 SW Tualatin Valley Highway
	Beaverton, OR 97006
Cash Amount Given:	\$ 26,500.
Class of Activity:	Education
Donee's Name:	Jefferson Scholars Foundation
Donee's Address:	P.O. Box 400891
	Charlottesville, VA 22904
Cash Amount Given:	\$ 100,000.
Class of Activity:	Education
Donee's Name:	Jesuit High School
Donee's Address:	9000 SW Beaverton-Hillsdale Highway
	Portland, OR 97225
Cash Amount Given:	\$ 26,000.
Class of Activity:	Education
Donee's Name:	Portland State University Foundation
Donee's Address:	P.O. Box 243
	Portland, OR 97207
Cash Amount Given:	\$ 14,269.
Class of Activity:	Cultural Opportunities
Donee's Name:	Portland Art Museum
Donee's Address:	1219 SW Park Ave
	Portland, OR 97205
Cash Amount Given:	\$ 10,000.

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**Statement 2 (continued)
Form 990-EZ, Part I, Line 10
Grants and Similar Amounts Paid**

Class of Activity:	Cultural Opportunities
Donee's Name:	Portland Center Stage
Donee's Address:	1111 SW Broadway
	Portland, OR 97205
Cash Amount Given:	\$ 10,000.
Class of Activity:	Citizen Involvement
Donee's Name:	Mazamas
Donee's Address:	527 SE 43rd Ave
	Portland, OR 97215
Cash Amount Given:	\$ 10,000.
Class of Activity:	Citizen Involvement
Donee's Name:	SOLV
Donee's Address:	5193 NE Elam Young Parkway, Suite B
	Hillsboro, OR 97124
Cash Amount Given:	\$ 10,000.
Class of Activity:	Citizen Involvement
Donee's Name:	Portland Marathon
Donee's Address:	1000 SW Broadway, Suite 1900
	Portland, OR 97205
Cash Amount Given:	\$ 30,000.
Donee's Name:	Grants \$5000 and under
Cash Amount Given:	\$ 20,950.

**Statement 3
Form 990-EZ, Part I, Line 16
Other Expenses**

OCF fees	\$ 2,068.
Office Expenses	38.
State fees	125.
Total	<u>\$ 2,231.</u>

**Statement 4
Form 990-EZ, Part III
Organization's Primary Exempt Purpose**

The Peter W. Stott Foundation is a supporting organization of The Oregon Community Foundation. (OCF). The Foundation makes grants that further the mission of OCF which is to improve life in Oregon and to promote effective philanthropy.

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**Statement 5
Form 990-EZ, Part V
Regarding Transfers Associated with Personal Benefit Contracts**

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? No