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Form 990-PF

Department of the Treasury

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

			y be able to use a copy of this					
			L 1, 2009	, and ending	JUN 3	_	2010	
G C	heck	all that apply. Initial return		ormer public charity	Nome sheet		inal return	l
		Amended return	Address chan	ige	Name chang	-		
Use	the i	RS Name of foundation			A Employe	eride	entification	number
	abel	CORPON FILMOOD FOIDING	MT ON		0.2	1 2	<i>c</i> 7071	ı
	erwis	e, GORDON ELWOOD FOUNDA Number and street (or P O box number if mail is not		Room/suite			67972	·
	print type	· ·	delivered to street address)	Tround suite	B Telephor		1111Der 82-06	12
	Spec	FO BOX 4189 City or town, state, and ZIP code						ending, check here
Instr	uctio	MEDFORD, OR 97501						s, check here
H C	heck		exempt private foundation	· · · · · · · · · · · · · · · · · · ·				eeting the 85% test,
	_	tion 4947(a)(1) nonexempt charitable trust	Other taxable private found	ation	1			
I Fa			nting method: X Cash	Accrual				tus was terminated (A), check here
		art II, col. (c), line 16)	Other (specify)					60-month termination
	\$	6 , 750 , 547 . (Part I, co	lumn (d) must be on cash	basis))(B), check here
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Ad	- Ijuste	d net	(d) Disbursements for charitable purposes
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	l in	rcom	e -	(cash basis only)
1	1	Contributions, gifts, grants, etc., received	14,175.		N	/A		
	2	Check It the foundation is not required to attach Sch. B			<u> </u>			
	3	Interest on savings and temporary cash investments	39,381.	39,381.	· 			Statement 1
	4	Dividends and interest from securities	107,580.	107,580.	\			Statement 2
		Gross rents			 			
1		Net rental income or (loss)	0.047	[01-01-0
ne	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	<9,047.	<u>></u>	 			Statement 3
Revenue		assets on line 6a		0.	 			
Re		Capital gain net income (from Part IV, line 2)		0.	'		REC	EIVED
		Net short-term capital gain Income modifications			+	ſ		18
		Gross sales less returns and allowances			1	2	nct	2 5 2010
		Less Cost of goods sold	 			Ö		20 2010
		Gross profit or (loss)						=======================================
		Other income					OGI	DEN, UT
	12_	Total Add lines 1 through 11	152,089.	146,961				
	13	Compensation of officers, directors, trustees, etc	82,515.	0.				82,515
	14	Other employee salaries and wages	38,804.	0.				38,804
ß		Pension plans, employee benefits	16,659.	0.	•			16,659
JSe		Legal fees						
iad		Accounting fees Stmt 4	9,107.					9,107
ű	L	Other professional fees Stmt 5	52,078.	46,552	•			5,526
ijĶ	ı	Interest	15,191.	2,950	-		-	12,241
stre		Taxes Stmt 6	16,609.	2,950				14,441
iriju		Depreciation and depletion Occupancy	10,009.		1			
Adn	ı	Travel, conferences, and meetings	2,388.	0.	1			2,388
ď	ı	Printing and publications	1,414.	0.				1,414
Operating and Administrative Expenses	ł	Other expenses Stmt 7	41,959.	Ö				41,959
atin	í	Total operating and administrative						
per		expenses. Add lines 13 through 23	276,724.	49,502				210,613
Õ	25	Contributions, gifts, grants paid	171,308.					171,308
	26	Total expenses and disbursements						
		Add lines 24 and 25	448,032.	49,502	•		·	381,921
	27	Subtract line 26 from line 12:			1			
	a	Excess of revenue over expenses and disbursements	<295,943.					<u> </u>
	1	Net investment income (if negative, enter -0-)		97,459		. , -		
0225	C	Adjusted net income (if negative enter -0-)	<u></u>	<u> </u>	N	<u>[/A</u>		

923501 02-02-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

For	n 99	0-PF (2909) GORDON ELWOOD FOUNDATION				
D	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	<u> </u>	
<u> </u>	art	column should be for end-of-year amounts only	(a) Book Value		(c) Fair Market Value	
_ [1	Cash - non-interest-bearing	17,152.	11,032.	11,032.	
- 1	2	Savings and temporary cash investments				
	3	Accounts receivable ►				
		Less; allowance for doubtful accounts ▶				
	4	Pledges receivable >				
		Less; allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons				
	7	Other notes and loans receivable				
		Less allowance for doubtful accounts ▶				
g	8	inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
Ä	10a	Investments - U.S and state government obligations				
	b	Investments - corporate stock				
		Investments - corporate bonds				
		Investments - land, buildings and equipment basis				
		Less accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other Stmt 9	5,965,697.	6,297,484.	6,297,484.	
		Land, buildings, and equipment basis \blacktriangleright 506,177. Less accumulated depreciation Stmt 10 \blacktriangleright 64,146.	459,354.	442,031.	442,031.	
	15	Other assets (describe)				
	"					
	16	Total assets (to be completed by all filers)	6,442,203.	6,750,547.	6,750,547.	
		Accounts payable and accrued expenses				
	18	Grants payable				
s	19	Deferred revenue				
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities	21	Mortgages and other notes payable				
ڌ		Other liabilities (describe ► Statement 11)	3,338.	5,720.		
		,				
	23	Total liabilities (add lines 17 through 22)	3,338.	5,720.		
_		Foundations that follow SFAS 117, check here				
		and complete lines 24 through 26 and lines 30 and 31				
Ses	24	Unrestricted	6,438,865.	6,744,827.		
and	25	Temporarily restricted				
Net Assets or Fund Balances	26	Permanently restricted				
pu		Foundations that do not follow SFAS 117, check here				
Ξ		and complete lines 27 through 31				
Ş Q	27	Capital stock, trust principal, or current funds				
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
Asi	29	Retained earnings, accumulated income, endowment, or other funds				
let	30	Total net assets or fund balances	6,438,865.	6,744,827.		
_						
	31	Total liabilities and net assets/fund balances	6,442,203.	6,750,547.		
<u>_</u>			lances			
	art					
1		I net assets or fund balances at beginning of year - Part II, column (a), line 3	0			
	(mu	st agree with end-of-year figure reported on prior year's return)		1	6,438,865.	
2		r amount from Part I, line 27a	2	<u><295,943.</u> >		
3	Othe	er increases not included in line 2 (itemize) UNREALIZED G	AIN	3	601,905.	
4	Add	lines 1, 2, and 3		4	6,744,827.	
5		reases not included in line 2 (itemize)		5	0.	
<u>6</u>	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	umn (b), line 30	6	6,744,827.	

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GORDON EDWOOD FOONDALLOR	GORDON	ELWOOD	FOUNDATION
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(a) List and desc 2-story brick w	cribe the kii arehouse;	nd(s) of property sold (e.g or common stock, 200 shs	., real estate, s_MLC Co.)		1, b	How acq - Purcha - Donat	ase	(c) Date a (mo., d		(d) Date sold (mo., day, yr.)
la					_					
<u> NC</u>	NE				 -				-	
<u>c</u>					1			-		
<u>d</u>							-			
<u>e</u>	/6\ [Pepreciation allowed	(a) Coc	t or other basis	1			(b) G:	ain or (loss	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
(e) Gross sales price	(1)	(or allowable)		xpense of sale					(f) minus	
<u> </u>										
<u> </u>			 			_				
1										
		1.00								
Complete only for assets show	ng gain in (column (h) and owned by	the foundation	on 12/31/69			(1) Gains (C	ol (h) gain	minus
	(j) Adjusted basis	(k) Ex	cess of col. (I)			còl		ot less tha	
(i) F.M V as of 12/31/69	 	as of 12/31/69	over	col. (j), if any		_		Losses	(from col. ((n))
a										
b										
C										
<u> </u>										
<u> </u>			<u> </u>							
Capital gain net income or (net c	apıtal loss)	$\begin{cases} If gain, also enter \\ If (loss), enter -0 \end{cases}$	r in Part I, line i	7 7	}	2				
,		•		•	1				-	
Net short-term capital gain or (lo If gain, also enter in Part I, line 8			וט (ס)		٦					
If (loss) enter -0- in Part I, line 8	}	•			}	3				
Part V Qualification \	Jnder S	ection 4940(e) for	Reduced	Tax on Net	Inv	estm	ent Inc	ome		
section 4940(d)(2) applies, leave as the foundation liable for the set "Yes," the foundation does not quality the appropriate amount in	ction 4942	tax on the distributable an	omplete this pa	rt						Yes X N
Enter the appropriate amount in (a)	each colui		actions before	making any end			-			(d)
Base periód years		(b) Adjusted qualifying dis	tributions	Net value of no	(c) oncha		se assets		Distrib	bution ratio vided by col. (c))
Calendar year (or tax year beginn	iing in)	, , , , ,	1,016.				981		(col. (b) un	• 06660
2008 2007	-	42	8,107.				1,106			.05581
2006			0,629.				,612			.04128
2005			7,860.				,575			.05173
2004			2,941.				,098			.04726
							•			
Total of line 1, column (d)								2		.26270
Average distribution ratio for the	5-year bas	e period - divide the total	on line 2 by 5,	or by the numbe	r of ye	ears				
the foundation has been in exist	ence if less	than 5 years						3		.05254
Enter the net value of noncharita	hle-use as	sets for 2009 from Part X.	line 5					4		6,512,396
and the state of t	,0 200 401	2022 10111 21274								<u> </u>
Multiply line 4 by line 3								5		342,161
Enter 1% of net investment inco	me (1% of	Part I, line 27b)						6		975
Add lines 5 and 6								7		343,136
Enter qualifying distributions fro	m Part XII.	line 4						8_	_	381,921
If line 8 is equal to or greater that See the Part VI instructions.			th, and comp	lete that part usi	ng a 1	% tax ra	te.			

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Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e),	or 494	<u>3 - se</u>	<u>e instru</u>	ctior	<u>15)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here \(\bigs \) and enter "N/A" on line 1					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗓 and enter 1%			_	<u> </u>	<u>75.</u>
	of Part I, line 27b	ļ				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) \rightarrow	}				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	<u>:</u>			0.
3	Add lines 1 and 2	3	,		9	75.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	Ц_			0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5	<u> </u>		9	<u>75.</u>
6	Credits/Payments:					
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1,0	00.				
b	Exempt foreign organizations - tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868)					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments Add lines 6a through 6d	7	<u>' </u>		<u>1,0</u>	00.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		<u> </u>			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ _ 9	9			
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶ 1	0			<u> 25.</u>
	Enter the amount or line 10 to be: Credited to 2010 estimated tax ▶ 25. Refunde	d ▶ 1	<u> 1 </u>			0.
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interest of the state of the stat	ervene in			Yes	
	any political campaign?			1a		_X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)	ion)?		1b		_X_
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials pu	blished o	r			
	distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?			10		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. ▶ \$	<u>0.</u>				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	า				
	managers. ► \$0.			}		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorpora	ation, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	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	ne state lav	V			
	remain in the governing instrument?			6	X	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	<u> </u>
	If "Yes," complete Part II, col. (c), and Part XV					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	_		_		
	OR			_		
b	o 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	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)	for calenda	īL			
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes " attach a schedule listing their names and addresses	<u> </u>		10	L	X
				Form 990	-PF	(2009)

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had not been removed from jeopardy before the first day of the tax year beginning in 2009?

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					T
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y6	s X No)	-
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,			
any voter registration drive?			s X No	-	
(3) Provide a grant to an individual for travel, study, or other similar purposes'	?	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y6	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				
the prevention of cruelty to children or animals?	,,		s X No		ĺ
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ler the exceptions described i				
section 53.4945 or in a current notice regarding disaster assistance (see instru		riogalations	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h			▶ □	-	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ined			
expenditure responsibility for the grant?			s No		
		1/ A 10	.5 NO		Ì
If "Yes," attach the statement required by Regulations section 53 4945 6a. Did the foundation, during the year, receive any funds, directly or indirectly, to					
	Jay premiums on	[] v.	s X No		1
a personal benefit contract?	avannal hannefit anntrant?	Tt	IS LAL NO	CL	₹.
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal denent contract?		<u> </u>	6b	X
If "Yes" to 6b, file Form 8870	h - lt - u tt0		s X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y6		-	
b If yes, did the foundation receive any proceeds or have any net income attribute		manana Idiahli	N/A	7b	
Part VIII Information About Officers, Directors, Truston Paid Employees, and Contractors	ees, Foundation Ma	magers, migni	,		
List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e)	Expense
(a) Name and address	hours per week devoted	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deterred	accor	unt, other
	to position	enter-0-)	compensation	allu	wances
7 05		00 515	0.764		^
See Statement 12	-	82,515.	8,764.	+	0.
		 			
	ļ	ļ		ļ	
·				Ì	
		<u> </u>	L		
Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	Τ.,	<u></u>
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred	acco	Expense unt, other
	devoted to position		compensation	allo	wances
NONE	N.				
		<u>_</u>		<u> </u>	
)	
		<u> </u>		<u> </u>	
		<u>L</u>	L	1	_
				T	
					_
Total number of other employees paid over \$50,000					0

8
_
_
8

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NONE

Part VIII

Part IX-B	Summary of Program-Related Investments

1 SEE FOOTNOTES STATEMENT 8

N/A other program-related investments See instructions.	Amount
Il other program-related investments See instructions.	
Il other program-related investments. See instructions.	
Il other program-related investments. See instructions.	
All other program-related investments. See instructions.	

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Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
	Average monthly fair market value of securities	1a	6,591,680.
	Average of monthly cash balances	1b	19,890.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	6,611,570.
	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	6,611,570.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	99,174.
5	Net value of noncharitable-use assets Subtract line 4 from line 3 Enter here and on Part V, line 4	5	6,512,396.
6	Minimum investment return Enter 5% of line 5	6	325,620.
P	art XI 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.)	nd certain	
1	Minimum investment return from Part X, line 6	1	325,620.
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	<u> </u>
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	324,645.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	324,645.
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	324,645.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	381,921.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	<u>381,921.</u>
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b	5	975.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	380,946.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies :	for the section

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4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				
ine 7				324,645.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			302,423.	
b Total for prior years:				
,		0.		
3 Excess distributions carryover, if any, to 2009:			,	
a From 2004		ĺ		
b From 2005				
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ▶ \$ 381,921.				
a Applied to 2008, but not more than line 2a			302,423.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				-
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				79,498.
e Remaining amount distributed out of corpus	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.			0.
6 Enter the net total of each column as indicated below				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'		<u>_</u>		
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.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				245,147.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.		_	
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9 [.]				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007			[
d Excess from 2008				
e Excess from 2009				
				Form 990-PF (2009)

12441011 759688 25080320

Name and address (name or business) a Paed during the year See Statement 14 Total None Name and address (name or business) Amount Salus of recommunion Salus of recommunion Facilities Salus of recommunion Amount Salus of recommunion Facilities Salus of recommunion Facilities Salus of recommunion Amount Salus of recommunion Facilities Salus of recommunion Facilities Salus of recommunion Facilities Salus of recommunion Facilities Amount None	3 Grants and Contributions Paid During the Ye	ear or Approved for Future I	Payment	<u> </u>	
See Statement 14 Total Approved for future payment None	Recipient	it recipient is an individual, show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
See Statement 14 Total b Approved for future payment None	Name and address (nome of business)	or substantial contributor	recipient		
Total Discrete Approved for future payment None		or substantial contributor	recipient		
Total Discrete Approved for future payment None			1		
Total Discrete Approved for future payment None	See Statement 11				
None None				▶ 3a	171.308
None					
Total Data And Data A					
Total Date of the state of the					
Total Date of the Control of the Con					
Total					
Total D					
	Total		l	▶ 3b	0

Part XVI-A Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated.	Unrelated t	usiness 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
-	3333				
· · · · · · · · · · · · · · · · · · ·	_				
•					
d		*		-	
d					
f	-	·			
g Fees and contracts from government agencies	_				
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	39,381.	
Dividends and interest from securities			14	107,580.	
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					
B Gain or (loss) from sales of assets other					
than inventory			18	<9,047.>	
9 Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a		_			
b	_				
С	i I				
d	1 1				
e					
2 Subtotal. Add columns (b), (d), and (e)			0.	137,914.	
3 Total. Add line 12, columns (b), (d), and (e)				13	
See worksheet in line 13 instructions to verify calculations.)				

Part XVI-B	Relationship of Activities to the Accomplishment of Exempt Purposes
------------	---

Ine No	s exempt purposes (o				o the accomplishing	
			 			
_	 *****		 	·		
	 		 			
			 			**
_	 -		 			
-	 		 		-	
	 	 	 		**	
	 				·	
	 		 			
+	 		 .			

923621 02-02-10

P	Part XVII Information Regarding Transfers Exempt Organizations	To and Transactions an	d Relationships With Nonch	naritable	
1		ollowing with any other organization	described in section 501(c) of	Ye	s No
•	the Code (other than section 501(c)(3) organizations) or in sec				
а	a Transfers from the reporting foundation to a noncharitable exe				
	(1) Cash			1a(1)	x
	(2) Other assets			1a(2)	X
Ь	b Other transactions:				
	(1) Sales of assets to a noncharitable exempt organization			1b(1)	X
	(2) Purchases of assets from a noncharitable exempt organization	ation		1b(2)	X
	(3) Rental of facilities, equipment, or other assets			1b(3)	X_
	(4) Reimbursement arrangements			1b(4)	X
	(5) Loans or loan guarantees			1b(5)	X
	(6) Performance of services or membership or fundraising so	licitations		1b(6)	X
C	c Sharing of facilities, equipment, mailing lists, other assets, or p	aid employees		1c	X
đ	d If the answer to any of the above is "Yes," complete the following				
	or services given by the reporting foundation. If the foundation	received less than fair market value	in any transaction or sharing arrangemen	it, show in	
	column (d) the value of the goods, other assets, or services rec				
(a)	Line no (b) Amount involved (c) Name of nonch	aritable exempt organization	(d) Description of transfers, transactions, a	and sharing arrange	ments
	N	/A			
		 			
28	ls the foundation directly or indirectly affiliated with, or related	to, one or more tax-exempt organiza	tions described		
	in section 501(c) of the Code (other than section 501(c)(3)) or	in section 527?		Yes	X No
t	b If "Yes," complete the following schedule				
	(a) Name of organization	(b) Type of organization	(c) Description of relation	onship	
	N/A				
		<u> </u>			
		-			
	Under penalties of perjury, I declare that I have examined this return, include	ing accompanying schedules and statemen	ate and to the best of my knowledge and belief	it is true correct	
	and complete Declaration of preparer (other than taxpayer or fiduciary) is b			N 10 11 00, 00,1001,	
	1. VATANA	LINIKDAN	· Explative Direct	tor	
ē	Signature of officer or trustee	Date	Title		
훈	Signature of officer of trustee	Date		parer's identifying	number
Sign Here	Preparer's Signature		self- employed >		
Ś	-= ≥O TOTON MODOODO T		EIN >		
	Firm's name (or yours ISLER MEDFORD, 1		LIN		
	address and ZIP code MEDFORD, OR 9750		Phone no. (54	1)779-7	641
	FEBRUARY OR 5750	· =	1. 110110 110. (32	<u> </u>	

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

Employer identification number Name of the organization 93-1267972 GORDON ELWOOD FOUNDATION Organization type (check one) Filers of: Section: Form 990 or 990-EZ ___ 501(c)() (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, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III 🔟 For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF) Schedule B (Form 990, 990-EZ, or 990-PF) (2009) LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

GORDON ELWOOD FOUNDATION

93-1267972

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	MEDFORD SCHOOLS FOUNDATION 670 SUPERIOR COURT MEDFORD, OR 97504	\$2,340.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	START MAKING A READER TODAY (SMART) 670 SUPERIOR COURT MEDFORD, OR 97504	\$ 11,250.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	NETCORP 670 SUPERIOR COURT #108 MEDFORD, OR 97504	\$585.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$Schedule B /Form	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Employer identification number

GORDON ELWOOD FOUNDATION

93-1267972

art II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	IN-KIND SUPPORT FOR OFFICE SPACE, UTILITIES, OFFICE MACHINES AND CONFERENCE ROOM.		06/30/10
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	IN-KIND SUPPORT FOR OFFICE SPACE, UTILITIES, OFFICE MACHINES AND CONFERENCE ROOM.		_06/30/10
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	IN-KIND SUPPORT FOR OFFICE SPACE, UTILITIES, OFFICE MACHINES AND CONFERENCE ROOM.		06/30/10
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Buildings #COMETOR TOWNO 1228065L 39.0017 475,276. # 475,276. # 475,276. # 30,975. # 12,187. # 12,187. # 10,000000 1228065L 39.0017 21,245. # 21,245. # 3,275. # 3,975. # 3,716. # 3,716. # 3,0000000 1228065L # 3,000 17 21,245. # 3,213. # 0. 15,903. # 3,716. # 3,000 17 21,245. # 21,245. # 3,213. # 0. 15,903. # 2,200. #	, ,	Description	Date Acquired M	Method	Life	No No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction	
COOLING (2) (2) (2) (2) (2) (2) (2) (2) (3) (496,521. 10400SL 7.00 17 600. SE BOARD 061401SL 7.00 17 428. EARL X MACHINE 102204SL 7.00 17 2,500. OF FILE ORS, PRINTER (10260SL 5.00 17 750. R ATION NCE CALL SYS080607200DB7.00 17 520. FY & Equipm Total Pg 1 Depr (D) Asset disposed			122806SI				5,276			5,276	0,975		12,187.	
## 496,521. ### PG 1 Total ### April		C00I (2)	11050720) 0 DB 7			1,245			1,245	,238		3,716.	
ERASE BOARD 061401SL 7.00 17 428. ST PEARL 070802SL 3.00 17 5,750. WARE 021504SL 7.00 17 2,500. ERROOF FILE 021505SL 7.00 17 629. NITORS, PRINTER, 011006SL 5.00 17 750. PUTER 060606SL 5.00 17 750. STERENCE CALL SYS080607200DB7.00 17 520. 12,156. LPF PG 1 Depr 500.	-	990-PF Pg uildings achinery & quipment					96,52			6,521	9,213	0	15,903.	
ERASE BOARD 061401SL 7.00 17 428. ST PEARL 070802SL 3.00 17 5,750. KEROX MACHINE 102204SL 7.00 17 2,500. EPROOF FILE 021505SL 7.00 17 629. NUTORS, PRINTER, 01006SL 5.00 17 750. FERENCE CALL SYS080607200DB7.00 17 520. TOTAL OF FILE 12,156. TOTAL 1			01040051							.009			0	_
EWARE FEROX MACHINE 102204SL 7.00 17 2,500. EPROOF FILE 021505SL 7.00 17 629. NITORS, PRINTER, 060606SL 5.00 17 750. PUTER 060606SL 5.00 17 750. 12,156. 12,156. PPF Pg 1 Total Almery & Equipm cand Total PF Pg 1 Depr (D) Asset disposed	\sim	ERASE	061401SI							28	428.		0	
EPROOF FILE O21505SL 7.00 17 2,500. INET O21505SL 7.00 17 629. O11006SL 5.00 17 750. PUTER O60606SL 5.00 17 979. NDSTATION FERENCE CALL SYS080607200DB7.00 17 520. Ainery & Equipm Ainery & Equipm Land Total -PF Pg 1 Depr OD-Asset disposed		FIRST FEARL SOFTWARE	07080251				,750			,750	,750		0	
INET O11006SL 7.00 17 629. DNITORS, PRINTER, 011006SL 5.00 17 750. PUTER NDSTATION SERENCE CALL SYS080607200DB7.00 17 520. ainery & Equipm rand Total -PF Pg 1 Depr OD: Asset disposed	~	(D) XEROX MACHINE	102204SI				-			,500	, 607	·	179.	
PUTER DOMINORS, FRINTER, 011006SL 5.00 17 750. DOSTATION FERENCE CALL SYS080607200DB7.00 17 520. Junery & Equipm rand Total -PF Pg 1 Depr (D) -Asset disposed	10						629.			629.			.06	
17 520. 12,156. 508,677.	(0	ONTTORS,					2			5	506.		150.	
12,156. 508,677.		COMPUTER	060606	_			_		_	7	\vdash		196.	
chinery & Equipm Grand Total 0-PF Pg 1 Depr (D) Asset disposed	•	SOUNDSTATION CONFERENCE CALL SYS	08060720) 0 DB			520.		-	20			91.	
1 Total Pg 1 Depr (D) Asset disposed		990-PF Pg chinery &					2,1			2,156	,110		706.	
		1 Tota Pg 1				· ·	508,677.	_		, 677	9,323		16,609.	
						7 ê	Asset disposed) I	, Section 179, Salv	age, Bonus, Com	nercial Revital	zation Deduction	

Form 990-PF Interest on Savi	ings and Te	emporary Co	ash Investments	Statement	1
Source				Amount	
DA DAVIDSON MORGAN STANLEY SMITH BARNEY				17,5 21,8	
Total to Form 990-PF, Part I,	, line 3, 0	Column A		39,3	81.
Form 990-PF Dividend	ls and Inte	erest from	Securities	Statement	2
Source	Gros	ss Amount	Capital Gains Dividends	Column (A Amount	.)
DA DAVIDSON MORGAN STANLEY SMITH BARNEY		59,657. 47,923.	0.	59,6 47,9	
Total to Fm 990-PF, Part I, 1	ln 4	107,580.	0.	107,5	80.

Form 99	0-PF 0	Sain or (Loss) f	rom Sale	of	Assets	Stat	tement 3
Descrip	(a) otion of Property	,			Manner Acquired	Date Acquired	Date Sold
XEROX M	ACHINE	_			Purchased	10/22/04	12/31/09
	(b) Gross	(c) Cost or	(d) Expense	of	(e)		(f)
	Sales Price	Other Basis	Sale		Deprec	. Gain	or Loss
	0.	2,500.		0.	1,78	36.	<714.
Descrip	(a) otion of Property	,			Manner Acquired	Date Acquired	Date Sold
MORGAN	STANLEY SMITH BA	 ARNEY			Purchased	Various	Various
	(b) Gross	(c) Cost or	(d) Expense	of	(e)		(f)
	Sales Price	Other Basis	Sale		Deprec	. Gain	or Loss
	682,011.	594,791.		0.	•	0.	87,220.
Descrip	(a) otion of Property	,			Manner Acquired	Date Acquired	Date Sold
MORGAN	STANLEY SMITH BA	ARNEY			Purchased	Various	Various
	(b) Gross	(c) Cost or	(d) Expense	of	(e)		(f)
	Sales Price	Other Basis	Sale		Deprec	. Gain	or Loss
	1,649,606.	1,846,362.		0.		0.	<196,756.

(a) Description of Proper	rty				Manner Acquire		Date cquired	Date	Sold
DA DAVIDSON					Purchase	d V	arious	Vari	ous
(b)		(c)	(d)		(e)			(f)	
Gross Sales Price		st or E Basis	xpense Sale	OI	Depre	c.	Gain	or Lo	SS
2,238,248	3. 2,	094,858.		0.		0	•	143,	390.
(a) Description of Proper	cty				Manner Acquire		Date cquired	Date	Sold
DA DAVIDSON					Purchase	d V	arious	Vari	ous
(b)		(c)	(d)	o.f	(e)			(f)	
Gross Sales Price		st or E Basis	xpense Sale	OI	Depre	c.	Gain	or Lo	ss
1,298,92	1. 1,	341,108.		0.		0	•	<42,	187.
Net Gain or Loss from	m Sale of	Assets						<9,	047.
Capital Gains Divider	nds from	Part IV						· · ·	0.
Total to Form 990-PF	, Part I,	line 6a						<9,	047.
Form 990-PF		Accounti	ng Fee	s			Sta	tement	4
Description		(a) Expenses Per Books	Net I					(d) Charit Purpo	able
ACCOUNTING FEES	_	9,107.		<u></u>	0.				107.
To Form 990-PF, Pg 1	_ , ln 16b	9,107.	·		0.				107.

Form 990-PF (Other Profes	sional Fees	S	tatement 5
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
INVESTMENT MANAGEMENT PROPERTY MANAGEMENT FEES	46,552. 5,526.	46,552.		0. 5,526.
To Form 990-PF, Pg 1, ln 16c	52,078.	46,552.		5,526.
Form 990-PF	Tax	es	S	tatement 6
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
FEDERAL TAXES FOREIGN TAXES CORPORATE FEE PAYROLL TAXES STATE TAXES	1,221. 2,950. 50. 10,362. 608.	0. 2,950. 0. 0.		1,221. 0. 50. 10,362. 608.
To Form 990-PF, Pg 1, ln 18	15,191.	2,950.		12,241.
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
OFFICE SUPPLIES POSTAGE INSURANCE TELECOMMUNICATIONS BOARD MEETING EXPENSES DUES & SUBSCRIPTIONS MILEAGE REIMBURSEMENT PROFESSIONAL DEVELOPMENT COMMUNITY DEVELOPMENT UTILITIES IN-KIND EXPENSES EQUIPMENT REPAIR & MAINT INTERNET AFFINITY GROUP	1,178. 366. 2,445. 2,892. 4,331. 4,121. 2,583. 2,370. 3,291. 2,006. 14,175. 460. 1,233. 508.	0. 0. 0. 0. 0. 0. 0.		1,178. 366. 2,445. 2,892. 4,331. 4,121. 2,583. 2,370. 3,291. 2,006. 14,175. 460. 1,233. 508.
To Form 990-PF, Pg 1, ln 23	41,959.	0.		41,959.

Footnotes

Statement

ACTIVITY ONE

IN-KIND SUPPORT FOR OFFICE SPACE, UTILITIES, OFFICE MACHINES AND CONFERENCE ROOM FOR THREE TENANTS: START MAKING A READER TODAY (SMART) VALUED AT MEDFORD SCHOOLS FOUNDATION VALUED AT NETCORP VALUED AT

11,250.

2,340.

585.

IN-KIND VALUE

14,175.

ACTIVITY TWO

COMMUNITY ENGAGEMENT STAFFING SUCH AS CONVENING, FACILITAT-ING, TRANSCRIBING, CORRESPONDING, AND LEVERAGING MULTI-SECTOR REPRESENTATION AND RELATIONSHIPS INTO COLLABORATIVE WITH WIDER AUDIENCE OF KEY STAKEHOLDERS FOR INITIATIVES IN ALIGNMENT WITH FOUNDATION GOALS. RECOGNIZED VALUE TO THE COMMUNITY IN 2009-10:

114,100.

PROJECTS INCLUDE:

- JACKSON COUNTY METH TASK FORCE, REPRESENTING PARTICIPANTS FROM LAW ENFORCEMENT, RECOVERY PROGRAMS, PUBLIC HEALTH, CHILDREN'S SERVICES, FAITH GROUPS, NON-PROFITS, UNITED WAY AND MENTAL HEALTH SERVICES.
- JACKSON COUNTY LEARNING COMMUNITY PROJECT, TRAINING 40-125 INDIVIDUALS/COMMUNITY LEADERS 1-4 TIMES A YEAR TO BROADEN SKILLS NEEDED IN ADDRESSING COMPLEX ISSUES THAT AFFECT THE WHOLE COMMUNITY.
- HISPANIC ACADEMIC OUTREACH, A COLLABORATION OF ROGUE VALLEY COMMUNITY COLLEGE, SOUTHERN OREGON UNIVERSITY, SOUTHERN OREGON EDUCATION SERVICE DISTRICT, MEDFORD 549C SCHOOL DISTRICT, NORTH AND SOUTH HIGH SCHOOL ELL TEACHERS, MEMBERS OF CLUB LATINO AND INTERESTED BUSINESSES AND NON-NON-PROFITS THROUGHOUT THE DISTRICT, TO CREATE WAYS OF HELPING HISPANIC YOUTH IN THE ROGUE VALLEY GRADUATE FROM HIGH SCHOOL, PREPARE FOR COLLEGE OR OTHER POST-SECONDARY EDUCATIONAL OPPORTUNITIES, AND THE WORKFORCE. THE FOCUS BEGINS WITH 9TH & 10TH GRADE HISPANIC STUDENTS.
- LATINO EDUCATION ACTION PLANNING SUMMIT 2009, CO-CONVENING WITH OREGON COMMUNITY FOUNDATION IN SUPPORT OF NON-PROFIT SERVICE PROVIDERS, EDUCATORS, EDUCATIONAL SERVICE DISTRICT, ROGUE COMMUNITY COLLEGE AND SOUTHERN OREGON UNVERSITY TO BRING TOGETHER ALL PARTS OF BUSINESS, EDUCATION AND GOVERN-MENT SECTORS TO BETTER UNDERSTAND HISPANIC/LATINO STUDENT AND FAMILY DYNAMICS AND SURFACE OPPORTUNITIES FOR INCREASING EDUCATIONAL SUPPORT AND OUTCOMES OF THIS GROWING PART OF OUR

COMMUNITY.

- ROGUE VALLEY REGIONAL NURSING WORKFORCE PROJECT, COORDIN-ATING AND FACILITATING EFFORTS OF TWO-COUNTY AREA TO CREATE A REGIONAL PLAN THAT ADDRESSES THE NURSING NEEDS OF THE REGION FROM PRESENT DAY INTO THE NEXT DECADE. COLLABORATIVE PARTNERS INCLUDE PUBLIC, PRIVATE AND NON-PROFIT SECTOR EMP-LOYEES, EDUCATIONAL INSTITUTIONS AND WORKFORCE TRAINING PRO-GRAMS.
- JEFFERSON REGIONAL HEALTH ALLIANCE, INITIATING A COLLABOR-ATION OF REGIONAL COMMUNITY LEADERS FROM ALL SECTORS TO IMPROVE THE HEALTH AND HEALTH CARE RESOURCES OF SOUTHERN OREGONIANS. IN FY 2009-2010 THE FOUNDATION PROVIDED STAFF MEETING PLANNING, COORDINATION, TRANSCRIPTION, AND CORRESPONDENCE AMONG MEMBERS.
- SOUTHERN OREGON GRANT MAKERS AFFINITY GROUP/Jeff, PLANNING AND CONVENING MEETINGS OF AND MAINTAINING CORRESPONDENCE BE-TWEEN REGIONAL FUNDERS MAINTAINING CONNECTION BETWEEN SOUTH-ERN OREGON AND THE REGIONAL ASSOCIATION OF GRANT MAKERS IN PORTLAND. ACT AS CONDUIT BETWEEN NATIONAL COUNCIL OF FOUND-ATIONS, PHILANTHROPY NORTHWEST, GRANTMAKERS OF OREGON AND INTERESTS OF SOUTHERN OREGON FUNDERS. THE SOUTHERN OREGON GRANT MAKERS AFFINITY GROUP/JEFFERSON e FUNDERS FORUM IS OF SERVICE TO GRANT MAKING ORGANIZATIONS THAT GRANT FOR THE PURPOSE OF:
 - 1. BUILDING LEADERSHIP, RESOURCES AND CAPACITY TO SUPPORT THE NONPROFIT SECTOR.
 - 2. SHARING INFORMATION AND PERSPECTIVES ON LOCAL PHILANTH-ROPY AND THE INTERSECTION WITH PUBLIC FUNDING STREAMS.
 - 3. COOPERATIVELY EXPLORING AND DEVELOPING COMPREHENSIVE AND EFFECTIVE APPROACHES TO FUNDING VIABLE COMMUNITY PROGRAMS OR PROJECTS.
 - 4. SHARING EXPERIENCES AND LEVERAGING IMPACT ON THE COMMUN-ITIES WE REPRESENT AND SUPPORT.
 - 5. BRINGING TOGETHER REPRESENTATION FROM ALL ASPECTS OF PHILANTHROPY FOR THE PURPOSE OF COMMUNICATING NEEDS, AND BRINGING ABOUT CHANGE AND SHARED RESPONSIBILITY IN AND FOR OUR COMMUNITY.
- HOMELESS YOUTH SERVICES IN JACKSON COUNTY, CONVENING YOUTH SERVICES PROVIDERS AND WORKING WITH INDIVIDUAL DIRECTORS AND BOARD MEMBERS AND NEEDED/REQUESTED TO MOVE TOWARD SHARED VISION FOR HOMELESS YOUTH SERVICES IN JACKSON COUNTY.
- BOARD DEVELOPMENT AND ORGANIZATIONAL ASSISTANCE, WORKSHOP FACILITATION, LEADERSHIP COACHING AND STRATEGIC THINKING PROVIDED TO THE NON-PROFITS WINTERSPRING, ROGUE VALLEY DEVELOPMENT PROFESSIONALS, MAGDALENE HOME, THRIVE, ROGUE RETREAT, NAO, MEDFORD SCHOOLS FOUNDATION, THE JOB COUNCIL,

- . COMMISSION ON CHILDREN & FAMILIES, COMMUNITY WORKS, FEMA, FOOD & FRIENDS, SENIOR DISABLED SERVICES, WILD RIVERS COMMUNITY FOUNDATION, SMART AND OTHERS.
- ARRA FEDERAL STIMULUS NONPROFIT CAPACITY BUILDING PROJECT, ASSIST IN DEVELOPMENT OF STATEWIDE APPLICATION WITH MULTIPLE PARTNERS INCLUDING TACS, RURAL DEVELOPMENT INITIATIVES, AND THE FORD FAMILY FOUNDATION, TO BUILD CAPACITY OF NON-PROFITS WITH ANNUAL BUDGETS OF LESS THAN \$500,000.

ACTIVITY THREE

CASH SUPPORT FOR ACTIVITIES RELATED TO ORGANIZATIONS AND PROJECTS LISTED IN ACTIVITY ONE AND TWO, AS WELL AS SCHOLAR-SHIPS FOR SELECTED GRANTEES TO ATTEND TRAINING AND SEMINARS.

3,291.

Form 990-PF Other	er Investments		Statement 9
Description	Valuation Method	Book Value	Fair Market Value
SMITH BARNEY BALANCED ACCOUNT	FMV	0.	0.
SSB-SBAM MID/SM CAP GROWTH	FMV	0.	0.
SSB-BRANDES ALL CAP VALUE	FMV	0.	0.
SSB-K2 ACCOUNT	FMV	0.	0 .
SSB-DELAWARE INTERNATIONAL	FMV	0.	0 .
SSB-NFJ ACCOUNT	FMV	0.	0
SSB-VOYAGEUR LARGE CAP GROWTH	FMV	0.	0
SSB-WINSLOW LG CAP GROWTH	FMV	0.	0.
DA DAVIDSON - VANTAGE	FMV	1,738,486.	1,738,486.
DA DAVIDSON - ATALANTA SOSNOFF	FMV	424,186.	424,186
DA DAVIDSON - NJF	FMV	697,654.	697,654
DA DAVIDSON - CLEARBRIDGE MULTI	FMV	543,694.	543,694
DA DAVIDSON - BRANDES ALL CAP VALU		610,417. 525,247.	610,417
DA DAVIDSON - WINSLOW DA DAVIDSON - THORNBURG	FMV FMV	178,031.	525,247 178,031
DA DAVIDSON - THORNBURG DA DAVIDSON - ADVISOR ACCOUNT	FMV	1,152,447.	1,152,447
DA DAVIDSON - MGD ASSETS DIA	FMV	427,322.	427,322
Total to Form 990-PF, Part II, line	e 13	6,297,484.	6,297,484.
Form 990-PF Depreciation of Asse	ts Not Held for	r Investment	Statement 10
Description	Cost or Other Basis	Accumulated Depreciation	Book Value
			
FILE CABINET	600.	600.	0.
DRY ERASE BOARD	428.	428.	0
FIRST PEARL SOFTWARE	5,750.	5,750.	0
FIREPROOF FILE CABINET	629.	495.	134
2 MONITORS, PRINTER, FAX	750. 979.	656. 809.	9 4 170
COMPUTER	3/3.	009.	1/0
108-208 SUPERIOR COURT OFFICE	475,276.	43,162.	432,114
SOUNDSTATION CONFERENCE CALL	_ · • • • - · • •	, _ -	,
SYSTEM	520.	292.	228
HEATING COOLING SYSTEMS (2)	21,245.	11,954.	9,291
Total To Fm 990-PF, Part II, ln 14	506,177.	64,146.	442,031

Form 990-PF	Other Liabilities		State	ement 11	
Description		BOY Amount	EOY A	EOY Amount	
PAYROLL LIABILITIES Total to Form 990-PF, Part II, line 22		3,33	38.	5,720.	
		3,33	38.		
	- List of Officers, I es and Foundation Mana		State	ement 12	
Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	Expense Account	
MICHAEL R. HEVERLY PO BOX 4189 MEDFORD, OR 97501	VICE CHAIR 2.00	0.	0.	0.	
JANET J. MURPHY PO BOX 4189 MEDFORD, OR 97501	TRUSTEE & PRES	SIDENT EMERIT 0.	0.	0.	
JOHN HARMON PO BOX 4189 MEDFORD, OR 97501	CHAIR 2.00	0.	0.	0.	
KATHY BRYON PO BOX 4189	EXECUTIVE DIRE	ECTOR 82,515.	8,764.	0.	
MEDFORD, OR 97501 DAN KOSMATKA PO BOX 4189 MEDFORD, OR 97501	TREASURER 1.00	0.	0.	0.	
STEPHANIE JOHNSON PO BOX 4189 MEDFORD, OR 97501	SECRETARY 1.00	0.	0.	0.	
BURKE RAYMOND PO BOX 4189 MEDFORD, OR 97501	TRUSTEE 1.00	0.	0.	0.	
ANNETTE SERGANT BATZER PO BOX 4189 MEDFORD, OR 97501	TRUSTEE 1.00	0.	0.	0.	

GORDON ELWOOD FOUNDATION			93-1267972		
JOHN DUKE PO BOX 4189 MEDFORD, OR 97501	TRUSTEE 1.00	0.	0.	0.	
Totals included on 990-PF, Page 6	, Part VIII	82,515.	8,764.	0.	

Form 990-PF

Grant Application Submission Information Part XV, Lines 2a through 2d

Statement 13

Name and Address of Person to Whom Applications Should be Submitted

KATHY BRYON, EXECUTIVE DIRECTOR; GORDON ELWOOD FOUNDATION PO BOX 4189 MEDFORD, OR 97501

Telephone Number

541 282-0643

Form and Content of Applications

GRANT APPLICATIONS MUST BE RECEIVED ON THE APPLICATION FORM OF THE FOUNDATION. A COPY IS AVAILABLE BY WRITING TO THE ADDRESS ABOVE OR BY VISITING WWW.GORDONELWOODFOUNDATION.ORG

Any Submission Deadlines

GRANT DEADLINES ARE MARCH 1 AND SEPTEMBER 1

Restrictions and Limitations on Awards

DISTRIBUTION OF FUNDS LIMITED FOR EDUCATIONAL, HUMAN SERVICES, AND OTHER CHARITABLE PURPOSES TO QUALIFIED NON-PROFIT, TAX-EXEMPT, CHARITABLE ORGANIZATIONS IN GEOGRAPHIC AREAS OF JACKSON, JOSEPHINE, KLAMATH, COOS & CURRY COUNTIES, OREGON.

	and Contributions During the Year	State	ement 14
Recipient Name and Address	Recipient Relationship and Purpose of Grant		Amount
JEFFERSON REGIONAL HEALTH ALLIANCE 670 SUPERIOR COURT MEDFORD, OR 97501	GRANT 552	HUMAN SERVICES	2,000.
RURAL DEVELOPMENT INITIATIVES 2620 RIVER ROAD EUGENE, OR 97404	GRANT 553	NON PROFIT	2,500.
WILD RIVERS COMMUNITY FOUNDATION 501 H STREET SUITE 5 CRESCENT CITY, CA 95531	GRANT 577	NON PROFIT	2,000.
KIDS UNLIMITED 821 N RIVERSIDE MEDFORD, OR 97501	GRANT 521	NON PROFIT	25,000.
SCIENCE WORKS HANDS-ON MUSEUM 1500 E MAIN STREET ASHLAND, OR 97520	GRANT 574	NON PROFIT	5,000.
ROGUE VALLEY FAMILY YMCA 522 WEST SIXTH STREET MEDFORD, OR 97501	GRANT 569	NON PROFIT	10,000.
FAMILY NURTURING CENTER 212 N OAKDALE MEDFORD, OR 97501	GRANT 558	HUMAN SERVICES	7,500.
LIVING OPPORTUNITIES PO BOX 1105 MEDFORD, OR 97501	GRANT 565	NON PROFIT	1,000.

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GORDON ELWOOD FOUNDATION		9:	3-1267972
KLAMATH FALLS CITY SCHOOLS 1336 AVALON STREET KLAMATH FALLS, OR 97603	GRANT 564	EDUCATION	5,000.
NORTHWEST YOUTH CORPS 2621 AUGUSTA STREET EUGENE, OR 97403	GRANT 557	HUMAN SERVICES	6,808.
COMMUNITY WORKS 900 EAST MAIN STREET MEDFORD, OR 97501	GRANT 560	NON PROFIT	8,000.
SUNNY WOLF YOUTH SERVICES, INC. PO BOX 233 WOLF CREEK, OR 97497	GRANT 554	HUMAN SERVICES	7,000.
EDUCATIONAL SOLUTIONS 2575 CAMPUS DRIVE KLAMATH FALLS, OR 97601	GRANT 570	EDUCATION	10,000.
THE SALVATION ARMY - MEDFORD CITADEL PO BOX 757 MEDFORD, OR 97501	GRANT 335	HUMAN SERVICES	15,000.
OREGON COMMUNITY FOUNDATION 1221 SW YAMHILL STREET #100 PORTLAND, OR 97205	GRANT 579	NON PROFIT	2,500.
SOASTC 715 SW RAMSEY AVENUE GRANTS PASS, OR 97527	GRANT 524	HUMAN SERVICES	10,000.
CONSUMER CREDIT COUNSELING SERVICE 820 CRATER LAKE AVENUE MEDFORD, OR 97504	GRANT 580	NON PROFIT	5,000.
HEALTH CARE COALITION OF SOUTHERN OREGON	GRANT 581	NON PROFIT	5,000.

PO BOX 1419 MEDFORD, OR 97501

GORDON ELWOOD FOUNDATION		93	3-1267972
ROOTS AND WINGS CHILD DEVELOPMENT 1801 E JACKSON MEDFORD, OR 97504	GRANT 584	HUMAN SERVICES	2,500.
SOUTH COAST WATERSHEDS PO BOX 1614 GOLD BEACH, OR 97444	GRANT 585	NON PROFIT	10,000.
COMMUNITY HEALTH CENTER, INC. 19 MYRTLE STREET MEDFORD, OR 97501	GRANT 586	HUMAN SERVICES	5,000.
KLAMATH FAMILY HEAD START 1940 SOUTH 6TH STREET KLAMATH FALLS, OR 97601	GRANT 587	HUMAN SERVICES	10,000.
KLAMATH COMMUNITY COLLEGE FOUNDATION 7390 SOUTH 6TH STREET KLAMATH FALLS, OR 97601	GRANT 588	EDUCATION	2,000.
PORT ORFORD ARTS COUNCIL PO BOX 771 PORT ORFORD, OR 97465	GRANT 589	NON PROFIT	2,500.
CHILOQUIN VISIONS IN PROGRESS PO BOX 204 CHILOQUIN, OR 97624	GRANT 590	HUMAN SERVICES	5,000.
CASA OF JACKSON COUNTY 613 MARKET STREET MEDFORD, OR 97504	GRANT 593	HUMAN SERVICES	5,000.
Total to Form 990-PF, Part XV, 1	ine 3a		171,308.