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

2010

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

			and ending		_		
G	Check	all that apply Initial return Initial re	turn of a former public	charity	l L	Final return	
		Amended return Add	ress change	Name	change		
		oundation			A Emp	loyer identification nur	nber
-		IC HEALTH MICROBIOLOGY			94	<u>-321639</u> 9	
	CHAR	ITABLE TRUST			B Telep	hone number (see page	10 of the instructions)
N	lumber a	and street (or P O box number if mail is not delivered to street address	ss) Ro	oom/suite	54:	1-753-8356	
:	<u> 1863</u>	NW LESTER AVE			C If exe	mption application is pen	ding, check here
C	ity or tow	vn, state, and ZIP code			D 1. Fo	reign organizations, chec	ck here
_(CORV	ALLIS OR 97330			2. Fo	oreign organizations meet	ing the
Н	Check	type of organization Section 501(c)(3) exempt private	foundation			i% test, check here and a	-
_	Section	n 4947(a)(1) nonexempt charitable trust X Other taxable	le private foundation		E If priv	ate foundation status was	·
1 1	air mai	rket value of all assets at J Accounting method	X Cash Acc	rual	section	on 507(b)(1)(A), check he	re 🕨 🗎
•	end of y	rear (from Part II, col. (c), Other (specify)			F If the	foundation is in a 60-moi	nth termination
1	ine 16)	▶ \$ 27,654 (Part I, column (d) must	be on cash basis)		unde	r section 507(b)(1)(B), ch	eck here
F	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net in		(c) Adjusted net	for charitable
		the amounts in column (a) (see page 11 of the instructions))	books	inco	me	income	purposes (cash basis only)
\sum	1	Contributions, gifts, grants, etc , received (attach schedule)	1,300				
<u> </u>	2	Check ► X if the foundation is not required to attach Sch B	· ·				
	3	Interest on savings and temporary cash investments	19		19		
7,71/17	4	Dividends and interest from securities	270		270		
5.	5a	Gross rents					
		Net rental income or (loss)					
Revenue	6a	Net gain or (loss) from sale of assets not on line 10		· · · · · · · · · · · · · · · · · · ·			
ē	Ь	Gross sales price for all assets on line 6a					
چ ر	7	Capital gain net income (from Part IV, line 2)			0		
,	8	Net short-term capital gain				0	
	9	Income modifications					
	10a	Gross sales less returns & allowances					
	Ь	Less Cost of goods sold					
	6	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	1,589		289	0	
	13		0				
	1	Compensation of officers, directors, trustees, etc					
	14	Other employee salaries and wages				-	
		Pension plans, employee benefits					
		Legatiges (attach schedule) Adcounting rees (attach schedule) STMT 1	700				700
	٦		, 30				1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
	\$	Other professional fees (attach schedule)					
	187	Interest 2 7 2012	10		10		
	118	Taxes (attach schedule) (see page 4 of the instructions) STMT 2	497	<u></u>	497		
	195	Depreciation (attach schedule) and depletion STMT 3	437				
	1	Occupation, U	844				844
	7 21	Travel, conferences, and meetings	544				044
	22	Printing and publications Other expenses (att. sch.) STMT 4	428				428
	23	Outor expenses (all early	428		<u>.</u>		428
	₹24	Total operating and administrative expenses.	2 470		507	o	1,972
7	25	Add lines 13 through 23	2,479		507		
Ŏ	25	Contributions, gifts, grants paid	1,500		EAG	0	1,500
	26	Total expenses and disbursements. Add lines 24 and 25	3,979	<u> </u>	507		3,472
	27	Subtract line 26 from line 12	0 300				
	a	Excess of revenue over expenses and disbursements	-2,390			······································	
	b	Net investment income (if negative, enter -0-)	-		0		
	<u> </u>	Adjusted net income (if negative, enter -0-)					- 000 55
	-	work Reduction Act Notice, see page 30 of the instruction	ons.			Y L	Form 990-PF (2010)
DA	4					1 - (~)	77
						U	

	D-PF-(2010)—PUBLICHEALTH-MICROBIOLOGY	94-321639	99	Page
Part I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	f year_
Faiti	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Çash—non-interest-bearing	25	25	2!
2	Savings and temporary cash investments	7,599	5,207	5,20
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 (attach schedule) (see page 15 of the			
	instructions)			
7	Other notes and loans receivable (att. schedule)			. <u> </u>
1 ′	Less allowance for doubtful accounts 0		j	
م ا				
8 9	Inventories for sale or use			
	Prepaid expenses and deferred charges		-	
(10a	Investments—U S and state government obligations (attach schedule)			
b	Investments—corporate stock (attach schedule) SEE STMT 5	12,398	12,398	22,42
С	Investments—corporate bonds (attach schedule)			
11	Investments—land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach sch) ▶			
12	Investments—mortgage loans			
13	Investments—other (attach schedule)			
14	Land, buildings, and equipment basis ▶ 2,218			
	Less accumulated depreciation (attach sch) ▶ STMT 6 1,722	494	496	
15	Other assets (describe ▶)			
16	Total assets (to be completed by all filers—see the			
	instructions Also, see page 1, item I)	20,516	18,126	27,65
17	Accounts payable and accrued expenses			
40	Grants payable			
19 20 21	Deferred revenue			
20	Loans from officers, directors, trustees, and other disqualified persons			
20				
21	Mortgages and other notes payable (attach schedule)			
22	Other liabilities (describe)	 	0	
23	Total liabilities (add lines 17 through 22)	<u> </u>	<u>_</u>	
	Foundations that follow SFAS 117, check here			
š	and complete lines 24 through 26 and lines 30 and 31.			
≦ 24	I Improving the of			
51	Unrestricted	20,516	18,126	
25	Temporarily restricted	20,516	18,126	
25 26		20,516	18,126	
25 26 26	Temporarily restricted Permanently restricted Foundations that do not follow SFAS 117, check here ▶	20,516	18,126	
25 26	Temporarily restricted Permanently restricted	20,516	18,126	
25 26 26 27	Temporarily restricted Permanently restricted Foundations that do not follow SFAS 117, check here ▶	20,516	18,126	
25 26 26 27 27 28	Temporarily restricted Permanently restricted Foundations that do not follow SFAS 117, check here ▶ and complete lines 27 through 31.	20,516	18,126	
25 26 26 27 27 28 29	Temporarily restricted Permanently restricted Foundations that do not follow SFAS 117, check here ▶ and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund	20,516	18,126	
25 26 27 28 29 30	Temporarily restricted Permanently restricted Foundations that do not follow SFAS 117, check here ▶ and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds	20,516	18,126	
25 26 27 28 29 30	Temporarily restricted Permanently restricted Foundations that do not follow SFAS 117, check here ▶ j and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg , and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see page 17 of the			
26 27 28 29 30	Temporarily restricted Permanently restricted Foundations that do not follow SFAS 117, check here ▶ j and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see page 17 of the instructions)	20,516	18,126	
25 26 27 28 29 30 31	Temporarily restricted Permanently restricted Foundations that do not follow SFAS 117, check here ▶ j and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see page 17 of the instructions) Total liabilities and net assets/fund balances (see page 17	20,516	18,126	
J.	Temporarily restricted Permanently restricted Foundations that do not follow SFAS 117, check here ▶ and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see page 17 of the instructions) Total liabilities and net assets/fund balances (see page 17 of the instructions)			
Part I	Permanently restricted Foundations that do not follow SFAS 117, check here ▶ and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see page 17 of the instructions) Total liabilities and net assets/fund balances (see page 17 of the instructions) II Analysis of Changes in Net Assets or Fund Balances	20,516	18,126	
Part I	Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see page 17 of the instructions) Total liabilities and net assets/fund balances (see page 17 of the instructions) II Analysis of Changes in Net Assets or Fund Balances net assets or fund balances at beginning of year—Part II, column (a), line 30 (mustine)	20,516	18,126	20.51
Part I 1 Total end-c	Permanently restricted Foundations that do not follow SFAS 117, check here ▶ and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see page 17 of the instructions) Total liabilities and net assets/fund balances (see page 17 of the instructions) II Analysis of Changes in Net Assets or Fund Balances net assets or fund balances at beginning of year—Part II, column (a), line 30 (mustof-year figure reported on prior year's return)	20,516	18,126	
Part I 1 Total end-c 2 Enter	Permanently restricted Foundations that do not follow SFAS 117, check here ▶ and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see page 17 of the instructions) Total liabilities and net assets/fund balances (see page 17 of the instructions) II Analysis of Changes in Net Assets or Fund Balances net assets or fund balances at beginning of year—Part II, column (a), line 30 (must) of-year figure reported on prior year's return) or amount from Part I, line 27a	20,516	18,126	
Part I 1 Total end-c 2 Enter 3 Othe	Temporarily restricted Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see page 17 of the instructions) Total liabilities and net assets/fund balances (see page 17 of the instructions) II Analysis of Changes in Net Assets or Fund Balances net assets or fund balances at beginning of year—Part II, column (a), line 30 (mustof-year figure reported on prior year's return) r amount from Part I, line 27a r increases not included in line 2 (itemize) ▶	20,516	18,126 18,126	-2,39
Part I 1 Total end-c 2 Enter 3 Othe 4 Add I	Temporarily restricted Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg , and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see page 17 of the instructions) Total liabilities and net assets/fund balances (see page 17 of the instructions) II Analysis of Changes in Net Assets or Fund Balances net assets or fund balances at beginning of year—Part II, column (a), line 30 (mustof-year figure reported on prior year's return) amount from Part I, line 27a r increases not included in line 2 (itemize) lines 1, 2, and 3	20,516	18,126 18,126	-2,39
Part I 1 Total end-c 2 Enter 3 Othe 4 Add I 5 Decre	Temporarily restricted Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see page 17 of the instructions) Total liabilities and net assets/fund balances (see page 17 of the instructions) II Analysis of Changes in Net Assets or Fund Balances net assets or fund balances at beginning of year—Part II, column (a), line 30 (mustof-year figure reported on prior year's return) r amount from Part I, line 27a r increases not included in line 2 (itemize) ▶	20,516 20,516 st agree with	18,126 18,126	20,51 -2,39 18,12

Form-990-PF-(2010)—PUBL-I					94-3216399		Page 3
Part IV Capital Gains	and Los	ses for Tax on Investi	ment Incor	ne			<u> </u>
(a) List and des 2-story bлск w	cribe the kind varehouse, or	d(s) of property sold (e g , real esta r common stock, 200 shs MLC Co	ate, o)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a N/A							·
b							
С							Ī
d		<u></u>					
_е							
(e) Gross sales price		(f) Depreciation allowed (or allowable)	(other basis nse of sale	` '	ı or (loss)) mınus (g)
<u>a</u>							
b							
С			_				
d		<u> </u>					
<u>e</u>							
Complete only for assets show	ving gain in	<u>*</u>	e foundation o	n 12/31/6	i9 		(h) gain minus
(i) F M V as of 12/31/69		(j) Adjusted basis as of 12/31/69			s of col (i) (j), if any		less than -0-) or om col (h))
а							
b		····					
С							
d							
е	_						
2 Capital gain net income or (ne	t capital los	If gain, also enter if (loss), enter -0-				2	
3 Net short-term capital gain or	(loss) as de	efined in sections 1222(5) and	l (6)	_			
If gain, also enter in Part I, line		(c) (see pages 13 and 17 of t	the instruction	is)			
If (loss), enter -0- in Part I, line						3	
		ection 4940(e) for Red				me	
(For optional use by domestic priv	ate foundat	tions subject to the section 49	940(a) tax on r	et investi	ment income)		
If section 4940(d)(2) applies, leave	this part b	lank					N/A
Was the foundation liable for the s	ection 494	2 tay on the distributable amo	unt of any ves	ar in the h	ase period?		Yes No
If "Yes," the foundation does not q					ase period.		1c3 110
Enter the appropriate amount	-				efore making any en	tnes	
(a)	III Cach Col		10 of the man	uctions b		T T	(d)
Base penód years Calendar year (or tax year beginn	ing in)	(b) Adjusted qualifying distribut	tions	Net value o	(c) of nonchantable-use ass		nbution ratio livided by col (c))
2009							
2008		···			<u> </u>		
2007		· · · · · ·					
2006					<u> </u>		
2005						1	
2. Total of line 1. column (d)						2	
2 Total of line 1, column (d)3 Average distribution ratio for the	ne 5.vear h	ase period—divide the total of	n line 2 by 5	or by the			· · · · · · · · · · · · · · · · · · ·
number of years the foundation	=		-	or by the		3	
number of years the loundation	ii iias beeii	in existence in less than 5 year	a13				
4 Enter the net value of nonchar	ritable-use	assets for 2010 from Part X, li	ine 5			4	
5 Multiply line 4 by line 3						5	
6 Enter 1% of net investment in	come (1% c	of Part I, line 27b)				6	
7 Add lines 5 and 6						7	
8 Enter qualifying distributions fi						8	
If line 8 is equal to or greater t	han line 7,	check the box in Part VI, line	1b, and comp	lete that p	part using a 1% tax r	ate See the	
Part VI instructions on page 1	B				<u>.</u>		
							Form 990-PF (2010

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- <u>Form</u>	1-990-PF-(2010)—PUBLIC HEALTH MICROBIOLOGY 94-3216399		P	age 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)			
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)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			
	here ▶ and enter 1% 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)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
3	Add lines 1 and 2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			0
6	Credits/Payments			
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a			
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			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2011 estimated tax ▶ Refunded ▶ 11			
<u>Pa</u>	art 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		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published 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 ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			<u> </u>
	on foundation managers ▶ \$.
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	3		x
4-	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes." has it filed a tax return on Form 990-T for this year? N/A	4a 4b		
þ	If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		х
5	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			
0	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	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
, 8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	<u>.</u>		
Ja	instructions) > OR			
b	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	8ь	x	1
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
-	4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page			
	27)? 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	<u>~</u>		<u> </u>
	names and addresses	10		х
			<u> </u>	

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Pa	art 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 page 20 of the instructions)			11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before					
	August 17, 2008?			12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applications.	ation?		13	X	
	Website address ► N/A					
14		ohone no 🕨	541-7	53-	835	6
	1863 NW LESTER AVE					
	Located at ► CORVALLIS OR	ZIP+4 ▶	97330)		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here					▶ _
	and enter the amount of tax-exempt interest received or accrued during the year	▶ _	15			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority				Yes	No
	over a bank, securities, or other financial account in a foreign country?			16		X
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter					
	the name of the foreign country ▶					
Pa	irt 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?	Yes	X No			
	(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?	Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(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)?	Yes	X No			
	(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		(50)			
	termination of government service, if terminating within 90 days)	Yes	X No	İ		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulat	tions		4.		v
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?		► (77)	1b		X
_	Organizations relying on a current notice regarding disaster assistance check here					
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			4.		x
2	were not corrected before the first day of the tax year beginning in 2010? Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			1c		
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
•	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and					
а	6e, Part XIII) for tax year(s) beginning before 2010?	Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20					
ь	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 page 22 of the instructions)		N/A	2ь		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		•			
	▶ 20 , 20 , 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise					
	at any time during the year?	Yes	X No			
ь	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or	1-1				
_	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 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 2010)		N/A	3ь		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purpose	es?		4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	s				
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2	010?		4b		X_
			_	00		

om	1990-PF-(2010)—PUBLIC -HE	ALTH MICROBIOLOGY	94-3	<u> </u>			Page-6
Pa	ırt VII-B Statements Reg	arding Activities for Which For	m 4720 May Be R	Required (con	tinued)		
5a	During the year did the foundation p	ay or incur any amount to					
	(1) Carry on propaganda, or otherw	ise attempt to influence legislation (secti	on 4945(e))?		Yes 🗓 No		
	(2) Influence the outcome of any sp	ecific public election (see section 4955),	or to carry on,				
	directly or indirectly, any voter re	egistration drive?			Yes 🔀 No		
	(3) Provide a grant to an individual	for travel, study, or other similar purpose	s?		Yes 🗓 No		
	(4) Provide a grant to an organization	on other than a charitable, etc , organiza	tion described in		-		
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions)						
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational						
	purposes, or for the prevention	of cruelty to children or animals?			Yes 🗓 No		
b	If any answer is "Yes" to 5a(1)-(5),	did any of the transactions fail to qualify	under the exceptions d	lescribed in			
	Regulations section 53 4945 or in a	current notice regarding disaster assista	ince (see page 22 of th	e instructions)?	N/A	5b	
	Organizations relying on a current n	otice regarding disaster assistance chec	k here		▶ []		
C	If the answer is "Yes" to question 5a	(4), does the foundation claim exemptio	n from the tax		_		
	because it maintained expenditure r	esponsibility for the grant?		N/A []	Yes No		
	If "Yes," attach the statement requir	ed by Regulations section 53 4945-5(d)				1	
6a	Did the foundation, during the year,	receive any funds, directly or indirectly, t	to pay premiums				
	on a personal benefit contract?	- ·		<u> </u>	Yes 🔀 No		
b	Did the foundation, during the year,	pay premiums, directly or indirectly, on a	a personal benefit conti	ract?		6b	X
	If "Yes" to 6b, file Form 8870						
7a	At any time during the tax year, was	the foundation a party to a prohibited ta	x shelter transaction?	, i	Yes X No		
b	If Yes, did the foundation receive an	y proceeds or have any net income attri	butable to the transacti	on?	N/A	7b	
Pa	rt VIII Information About	Officers, Directors, Trustees,	Foundation Mana	agers, Highly	Paid Employ	ees,	
	and Contractors						
1 L	ist all officers, directors, trustees,	foundation managers and their compe	nsation (see page 22	of the instruction	ns).		
			(b) Title, and average	(c) Compensation	(d) Contributions to	1.55	
	(a) Name	and address	hours per week	(if not paid, enter	employee benefit plans and deferred		ense account, allowances
			devoted to position	-0-)	compensation	<u> </u>	
WI	LLIAM R FORD	CORVALLIS	CO-TRUSTEE				
18	63 LESTER AVE	OR 97330	1.00		0	<u> </u>	0
JA	NNA E FORD	CORVALLIS	CO-TRUSTEE				
18	63 LESTER AVE	OR 97330	1.00	0	0		0
				1			
						<u> </u>	
						1	
	·					<u> </u>	
2		l employees (other than those include	d on line 1 — see pag	e 23 of the instru	ctions).		
	If none, enter "NONE."		·-··	r	·-	,	
			(b) Title, and average		(d) Contributions to employee benefit	(a) Evr	ense account,
	(a) Name and address of each	employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		allowances
			- devotes to position	ļ	compensation	<u> </u>	
NC	NE						
						├ ─	
_						—	
				Ì]		
						-	
			_			—	
				<u> </u>	<u> </u>	<u> </u>	
ota	I number of other employees paid over	er \$50,000					0
					Fo	m 99()-PF (2010)

Form-990=PF-	(2010)—PUBLIC-HEALTH—MICROBIOLOGY—————	94-321 6399	Page-7
Part VIII	Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	ion Managers, Highly Paid Em	ployees,
3 Five hig	hest-paid independent contractors for professional services (see page 23 o	f the instructions). If none, enter "NO	NE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
Total number	of allows are all the control of the		
lotal number	of others receiving over \$50,000 for professional services		<u> </u>
Part IX-A	Summary of Direct Charitable Activities		
	ation's four largest direct charitable activities during the tax year. Include relevant statistical inf and other beneficiaries served, conferences convened, research papers produced, etc.	formation such as the number of	Expenses
1 SEE	STATEMENT 7		
2			1,500
2			
3			
-			
4			
Part IX-B	Summary of Program-Related Investments (see page 24	of the instructions)	
	wo largest program-related investments made by the foundation during the tax year on lines 1	and 2	Amount
1 N/A			
2			
All other progra	am-related investments See page 24 of the instructions		
3			
Total Add line	a 1 through 2		

Forr	n 990-PF (2010)—PUBLIC - HEALTH_MICROBIOLOGY 94-3216399		Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. For	eign	foundations,
	see page 24 of the 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	0
þ	Average of monthly cash balances	1b	0
С	Fair market value of all other assets (see page 25 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	0
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	_2	0
3	Subtract line 2 from line 1d	3	0
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Pá	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of	perati	na
	foundations and certain foreign organizations check here		J
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010 (This does not include the tax from Part VI)	1	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	<u> </u>	
•	line 1	7	o
		<u>'</u>	
Pa	art XII Qualifying Distributions (see page 25 of the 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	3,472
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	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	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	3,472
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 (see page 26 of the instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,472
	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 4940(e) reduction of tax in those years		

	irt Aiii Undistributed income (see page 26 of	the instructions)			
1	Distributable amount for 2010 from Part XI,	(a) Corpus	(b) Years pnor to 2009	(c) 2009	(d) 2010
	line 7				0
2	Undistributed income, if any, as of the end of 2010				
а	Enter amount for 2009 only				
b	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2010				
	From 2005				
	- · 				
	From 2006 1,066				
С	From 2007 6,536				
d	From 2008 4,393				
е	From 2009 2,144				
f	Total of lines 3a through e	14,139			
4	Qualifying distributions for 2010 from Part XII,				
•	line 4 ▶ \$ 3,472				
_					-
	Applied to 2009, but not more than line 2a		-		
D	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)				<u> </u>
C	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)				
d	Applied to 2010 distributable amount				
	Remaining amount distributed out of corpus	3,472			
5	Excess distributions carryover applied to 2010		,		
•					
	(If an amount appears in column (d), the same				
_	amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	17,611			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	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				
d	Subtract line 6c from line 6b Taxable				
	amount—see page 27 of the instructions				<u></u>
е	Undistributed income for 2009 Subtract line				
	4a from line 2a Taxable amount—see page				
	27 of the instructions				
f	Undistributed income for 2010 Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2011				0
7					
•	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				-
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)				
8	Excess distributions carryover from 2005 not				
	applied on line 5 or line 7 (see page 27 of the				
	instructions)				
9	Excess distributions carryover to 2011.			· · · · · · · · · · · · · · · · · · ·	
•	Subtract lines 7 and 8 from line 6a	17,611			-
^	_	17,011			
0	Analysis of line 9				
а	Excess from 2006 1,066]
b	Excess from 2007 6,536				1
С	Excess from 2008 4,393				
d	Excess from 2009 2,144				1
е	Excess from 2010 3,472				

orr	n`990-PF (2010) PUBLIC HEALT	H MICROBIO	LOGY	94-32163		5/23/2011 9 20 AM Pg 1 Page 10
	art XIV — Private Operating Fou					
1a	If the foundation has received a ruling or foundation, and the ruling is effective for 2	determination letter th	at it is a private opera			·· · · · · · · · · · · · · · · · · · ·
b	Check box to indicate whether the founda			bed in section 1 49	42(j)(3) or 4942	(ı)(5)
2a	Enter the lesser of the adjusted net	Tax year	-	Prior 3 years		
	income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
	investment return from Part X for					-
	each year listed			ŀ		
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3		i - 1			
	of minimum investment return shown in					
	Part X, line 6 for each year listed					
С	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties) (2) Support from general public					
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
Pa	art XV Supplementary Inform	ation (Complete	this part only if	the foundation ha	d \$5,000 or more	in assets at
	any time during the ye	ar—see page 28	of the instruction	ns.)		
1	Information Regarding Foundation Man	agers:				
а	List any managers of the foundation who	have contributed mor	e than 2% of the total	contributions received t	by the foundation	
	before the close of any tax year (but only N/A	of they have contribute	ed more than \$5,000)	(See section 507(d)(2))	
b	List any managers of the foundation who	own 10% or more of t	he stock of a corporat	ion (or an equally large	portion of the	
	ownership of a partnership or other entity) N/A	of which the foundat	on has a 10% or grea	ter interest		
2	Information Regarding Contribution, Gr	ant, Gift, Loan, Scho	larship, etc., Progran	ns:		
	Check here ▶ If the foundation only	makes contributions	to preselected charitat	ole organizations and d	oes not accept	
	unsolicited requests for funds. If the found	lation makes gifts, gr	ants, etc. (see page 28	3 of the instructions) to	individuals or	
	organizations under other conditions, com	iplete items 2a, b, c,	and d			
а	The name, address, and telephone numb	er of the person to wh	om applications shou	d be addressed		
	OREGON STATE UNIVERS	ITY 541-73	7-0123			
	DEPT OF MICROBIOLOGY	CORVALLIS	OR 97333			
b	The form in which applications should be $\mathbf{N/A}$	submitted and inform	ation and materials the	ey should include		
С	Any submission deadlines					

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

SEE STATEMENT 8

Page 11

Part XV Supplementary Information (co	ontinued)			
3 Grants and Contributions Paid During the	e Year or Approved for F	uture Payment		
` Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year	NONE	SC	HOLARSHIP	1,500
Total			▶ 3a	1,500
b Approved for future payment N/A				
Total			▶ 3b	···

_	Part AVI-A						
		ounts unless otherwise indicated	(a) Business code	(b) Amount	(c) Exclusion code	d by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See page 28 of
1	Program se	rvice revenue					the instructions)
			_		-		
	D		-		-		
			-		+		
			-	<u> </u>	 		
	·		-		+		
	- Food on	d contracts from government agencies	_		+		· · · · · · · · · · · · · · · · · · ·
2	_	o dues and assessments			+		
	•	savings and temporary cash investments			14	19	
		nd interest from securities			14	270	
		come or (loss) from real estate	-		1	270	
Ŭ		anced property			† · · · ·		
		t-financed property	-				·
6		come or (loss) from personal property			 		
		ment income			<u> </u>		
8	Gain or (loss	s) from sales of assets other than inventory			1		
		or (loss) from special events			 		
		or (loss) from sales of inventory					
11	Other reven	ue a					
	b						
	_						
	e						
12	Subtotal Ad	ld columns (b), (d), and (e)		(<u> </u>	289	
		ne 12, columns (b), (d), and (e)				13	289
		in line 13 instructions on page 29 to verify calculat					
F	Part XVI-B	Relationship of Activities to the A	<u>Accomplishm</u>	ent of Exempt P	urpose	es	
	Line No.	Explain below how each activity for which incom	•	, ,			
	▼	accomplishment of the foundation's exempt purp	poses (other thar	by providing funds for	or such pi	urposes) (See page 29	of the
		instructions)	TTO EMPLE	MADE FOR C			
		TWO SOLICITATIONS OR CA					
		APPLICATIONS WERE APPRO				ANOR G FORD	
	-	MEMORIAL SCHOLARSHIP WA BY THE DEPARTMENT CHAIR					
		AT OREGON STATE UNIVERS	TTV CU	E IS OF CO	TIDGE	TCKOPIOTOGI	
		OUTSTANDING AND DESERVI					, <u>-</u>
		SCHOLARSHIP SHE WOULD H					
				OLARSHIPS I			
_		MAJORING IN MICROBIOLOG					-
		UNDERGRADUATE DEGREE AN					
		AREA OF PUBLIC HEALTH.					
					_		
							<u></u> _

Form 990	PF (201	0) PUBLIC H	EALTH	MICROBIOL	OGY	94-3216399			Pa	œ 13
	(VII	information Rega	arding Tra			ns and Relationships W	ith Noncharitab	le		.,
4 Did		Exempt Organiz		as in any of the fol	llowing with any	other organization described		, 	Yes	No
				-		ction 527, relating to political			1,55	1 740
	anizations		Ci didii oco	on out(c)(c) organ	inzadoris) or iii sc	con ozr, relating to political		1	1	ł
•		om the reporting found	lation to a n	oncharitable exem	ot organization o	.		{	i	ĺ
	Cash				pr organization o			1a(1)	1	x
• •	Other as	ssets	••		• •-			1a(2)		X
b Oth	er transa	actions:	• • •			• • • • • • • • • • • • • • • • • • • •	••			
(1)	Sales of	assets to a noncharit	table exempt	organization				16(1)	İ	X
		es of assets from a n					•	1b(2)		X
(3)	Rental o	of facilities, equipment,	or other as	sets				1b(3)		X
(4)	Reimbur	sement arrangements	s					1b(4)	L	X
(5)	Loans o	r loan guarantees						1b(5)		X
(6)	Performa	ance of services or m	embership o	or fundraising solic	ntations			1b(6)		X
	_	acılities, equipment, m		•	• •			1c		X
					-	mn (b) should always show the				
					-	the foundation received less that				
vail. (a) Lin		(b) Amount involved		nt, snow in column of nonchantable exer		the goods, other assets, or ser (d) Description of transfers, t				
N/A		(b) Amount involved	(c) Name	or noncramable exer	mpt organization	(u) Description of transfers, t	ransactions, and snanng	arrang	ements	•
M/ A.			 							
		- <u></u>								
					· · · · · · · · · · · · · · · · · · ·					
										
					· · · · · · · · · · · · · · · · · · ·					
	_									
							· · · · · · · · · · · · · · · · · · ·			
								,		
2a Isti	he found	ation directly or indirec	affiliated	with, or related to,	one or more tax	exempt organizations		_	_	_
		section 501(c) of the		than section 501(c)(3)) or in sectio	n 527?		Y _ℓ	es 🛂	No
<u>b f "</u>		nplete the following so	hedule.		 .					
N/A		Name of organization		(b) Type of	organization	(c) Descri	ption of relationship			
14/2	3				· · · · · · · · · · · · · · · · · · ·					
	·	····							-	
										
		· · · · · · · · · · · · · · · · · · ·		1						
T	Under ne	natties of periury 1 dectar	e that I have a	examined this return	ndudina accompan	ring schedules and statements, and	to the hest of my knowle	edge on		
Sian	belief, it is	s true, correct, and comple	ete Declaratio	n of preparer (other the	han texpayer or fidu	ciary) is based on all information of t	which preparer has any	knowled	ge	
Sign Here		Soldiam R. Ford 15/23/11 CO-TRUSTEE								
nere	Sign	ature of officer or trustee	<u> </u>		Date	Title				
	Print/Ty	pe preparer's name			Preparer's signa	ture	Date	1	Ī	\Box
Paid	'				1 1	.			Check sett-en	
Preparer	HEATH	ER L. MCGOWA	N		Heatt	ur McGaran,	CPA 05/2	3/11		,,
Use Only	Firm's	name JOHNS	ON MC	SOWAN & A	SSOCIATES	LLP		0092	066	5
	Firm's	address > 200 (DIA ST. S			Firm's EIN ▶26-			
		ALBAN	Y, OR	97321-22	250		Phone no 541	L-92	8-3	354
							Fr	om 99	0-PF	(2010)

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Adjust
10 \$ -
10 \$ - Depreciation
- Depreciation
Current Year Net Investment
Life Depreciation Income
5 \$ 198 \$ 198
5 299 299

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FYE: 12/31/2010

Statement 5 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Des	cript	tion

		Beginning of Year		End of Year	Basis of Valuation	Fair Market Value		
400 SHS HEWLETT PACKARD	^	7 207	^	7 207		_	16.040	
200 SHS MICROSOFT CORP	Þ	7,387	Ş	7,387	COST	Ş	16,840	
		5,011		5,011	COST	_	5,582	
TOTAL	\$_	12,398	\$	12,398		\$	22,422	

· ·		
5/23/2011 9:20 AM Page 4		ď
	End Accumulated Depreciation \$ 1,722 \$ 1,722 \$	
ements	Statement 6 - Form 990-PF, Part II, Line 14 - Land, Building, and Equipment Beginning	
Federal Statements	Beginning Net Book	
03767 Public Health Microbiology 94-3216399 FYE: 12/31/2010	Description s TOTAL	

03767 Public Health Microbiology 94_3216399

Federal Statements

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FYE: 12/31/2010

Statement 7 - Form 990-PF, Part IX-A, Line 1 - Summary of Direct Charitable Activities

Description

UNDER THE FOUNDATION'S PRIMARY PURPOSE, NO GRANTS WERE AWARDED DURING 2010. AN ADDITIONAL CONTRIBUTION TO THE ELEANOR G FORD MEMORIAL SCHOLARSHIP WAS MADE TO INCREASE THE ENDOWMENT AT OREGON STATE UNIVERSITY IN THE AMOUNT OF \$1,500.

03767 Public Health Microbiology 94-3216399

Federal Statements

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FYE: 12/31/2010

Statement 8 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

RECIPIENTS MUST BE STUDENTS OF MICROBIOLOGY AT OREGON STATE UNIVERSITY

Form 4562

<u>Depreciation_and_Amortization-</u>

OMB No 1545-0172

(Including Information on Listed Property) 20

Department of the Treasury Internal Revenue Service

► See separate instructions.

Attach to your tax return.

tachment 67

Name(s) shown on return

PUBLIC HEALTH MICROBIOLOGY CHARITABLE TRUST

Identifying number 94-3216399

Business or activity to which this form relates INDIRECT DEPRECIATION Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I. 1 500,000 Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 2 2,000,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If marned filing separately, see instructions 5 5 6 (a) Description of property (b) Cost (business use only) (c) Elected cost Listed property Enter the amount from line 29 7 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 9 Carryover of disallowed deduction from line 13 of your 2009 Form 4562 10 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2011 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 250 during the tax year (see instructions) 14 15 Property subject to section 168(f)(1) election 15 Other depreciation (including ACRS) 16 16 Part III MACRS Depreciation (Do not include listed property.) (See instructions.) 198 17 17 MACRS deductions for assets placed in service in tax years beginning before 2010 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recover (business/investment use only-see instructions) (f) Method (a) Classification of property placed in service (e) Convention (g) Depreciation deduction penod 19a 3-year property 249 5.0 200DB 49 HY b 5-year property 7-year property d 10-year property 15-year property 20-year property S/L 25 yrs 25-year property 27 5 yrs S/L Residential rental MM property MM S/L 27 5 yrs 39 yrs MM S/L Nonresidential real property MM S/L Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System 20a Class life 12 yrs S/L 12-year S/L 40-year 40 vrs C Part IV Summary (See Instructions) Listed property Enter amount from line 28 21 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 497 and on the appropriate lines of your return Partnerships and S corporations—see instructions 22 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

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Form 88	168—-			nsion_of_Time_T				
(Rev. January 2011) Exempt Organization Return								OMB No 1545-1709
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Electronic fili	ng (e-file). Yo	ou can electronically file Form 8868 if you	ı need a 3-m	onth automatic extensio	n of time to file	(6 months	for	
a corporation	required to file	Form 990-T), or an additional (not auto	matic) 3-moi	nth extension of time. Yo	u can electroni	cally file F	orm	
8868 to reque	st an extensio	n of time to file any of the forms listed in	Part I or Pa	rt II with the exception of	Form 8870, Inf	ormation		
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filing your return See	1863	NW LESTER AVE						
instructions		or post office, state, and ZIP code. For a	-					
	CORVA	LLIS OR	97330	<u> </u>				
Enter the Retu	urn code for th	ne return that this application is for (file a	separate ap	plication for each return)	RFC	FIVE	-D] 04
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		1863 NW LESTER AVE						
The books a	are in the care o	f ► CORVALLIS					OR	97330
		11-753-8356	FAX No	•	•	•	-	. • / • • • • • • • • • • • • • • • • •
If the orga	nization does	not have an office or place of business	in the United	States, check this box				▶□
If this is for	r a Group Re	turn, enter the orga <u>niz</u> ation's four digit G	roup Exemp	tion Number (GEN)	If	this is	•	_
for the whole g	group, check t	this box If it is for part of	the group, c	heck this box	and atta	ch		
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		. See instructions.				3a	\$	0
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<u>estimate</u>	ed tax paymer	its made. Include any prior year overpay	ment allowe	d as a credit.		3b	\$	0

(Electronic Federal Tax Payment System) See instructions.

c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for

Form 8868 (R	Rev 1-2011)					Page 2		
If you are	filing for an Additional (Not Automatic) 3-Month E	Extension, co	mplete only Part II and check this box			▶ X		
Note. Only co	implete Part II if you have already been granted an	automatic 3-r	nonth extension on a previously filed Fo	rm 8868				
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Part II	Additional (Not Automatic) 3-Month	Extension	of Time. Only file the original	(no cop	<u>ies neede</u>	d).		
Type or	Name of exempt organization			Employ	yer identifica	ation number		
print	PUBLIC HEALTH MICROBIOLOGY							
File by the extended	CHARITABLE TRUST			94-3	<u>3216399</u>			
due date for	Number, street, and room or suite no If a P O b	ox, see instru	ctions					
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return See instructions	City, town or post office, state, and ZIP code Fo	_						
- Instructions	CORVALLIS	R 97330	<u> </u>					
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Form 990-E	Z	03	Form 4720			09		
Form 990-P	F	04	Form 5227			10		
Form 990-T	(sec 401(a) or 408(a) trust)	05	Form 6069			11		
	(trust other than above) t complete Part II if you were not already granted	06	Form 8870			12		
Telephone If the orga If this is for the whole go Ist with the na I reques For cale If the tax Ci T State in ADDI	are in the care of ▶ CORVALLIS A No ▶ 541-753-8356 A Inization does not have an office or place of busines For a Group Return, enter the organization's four digit Group, check this box ▶ ☐ If it is for put A initial and additional 3-month extension of time until 13 A indar year 2010, or other tax year beginning The year entered in line 5 is for less than 12 months, or The hange in accounting period A detail why you need the extension TIONAL TIME IS REQUESTED ACCURATE RETURN.	t Group Exemart of the ground 1/15/11 ang check reason	ption Number (GEN) If this p, check this box p, check this box , and ending Initial return Final return	attach a		97330 ▶ □		
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	of perjury, I declare that I have examined this form, including complete, and that I am authorized to prepare this form	_		of my knowl	ledge and belie	ef, it is		
Signature >		Tı	tte ▶		Date D	08/10/11		
						8868 (Rev 1-2011		