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## Department of the Treasury Internal Revenue Service

# Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

FOT (	alen	dar year 2011 or tax year	beginning		, and end	ing		
Nar	ne of	foundation					A Employer identification	number
_B	AR	BARA EMILY K	NUDSON FOUN	IDATION			27-2245059	
		nd street (or P O box number if		•	F	Room/suite	B Telephone number	
		7 NE SANDY B	LVD, SUITE	206			503-949-42	
		own, state, and ZIP code TLAND, OR 9	7232				C If exemption application is p	ending, check here
			Initial return	Initial return of a	former public cha	arity	D 1. Foreign organizations	s, check here
			Final return	Amended return			F	salung the RES/ test
			Address change	Name change			2. check here and attach co	emputation
	_	type of organization ction 4947(a)(1) nonexemp		xempt private foundation Other taxable private found	dation		E If private foundation sta under section 507(b)(1)	
Fr		rket value of all assets at e			Accrua		1	
		Part II, col. (c), line 16)		ther (specify)	Accide	17	F If the foundation is in a under section 507(b)(1)	
	·\$	4 <sub>-</sub> 285	. 457 . (Part I. colu	ımn (d) must be on cash	basis.)		under Section 307(b)(1)	(U), Check here
_	ırt f	Analysis of Revenue and	d Expenses	T -	(b) Net inve	etment	(c) Adjusted net	(d) Disbursements
* 5	,, <u> </u>	(The total of amounts in colunnecessarily equal the amount	nns (b), (c), and (d) may not	(a) Revenue and expenses per books	incon		income	for chantable purposes (cash basis only)
_	1	Contributions, gifts, grants			<del>                                     </del>		N/A	(555: 2565 514)
	l '	Check X If the foundation			<del></del>		-77.2-	<b>!</b>
	3	Interest on savings and tempo cash investments						· · · · · · · · · · · · · · · · · · ·
		Dividends and interest from		90,922	90	,922.		STATEMENT 1
	4		in securities	30,322	. 50	1722.		
		Gross rents			<del> </del>			
	۱ ـ	Net rental income or (loss)	· · · · · · · · · · · · · · · · · · ·	78,590	<del></del>		1 DE	the service of the se
ē	Da	Net gain or (loss) from sale of a Gross sales pice for all	2,317,815.	70,330	•	<del></del>	, Kin	PEIVED :
ē	_D	assets on line 6a	<u> </u>	принамения	70	,590.	1	Tel-
Revenue		Capital gain net income (from F			10	, 390.	S AUG	1 3 2017 1 72
	_	Net short-term capital gair	n		<del></del>	····	700	
	9	Income modifications Gross sales less returns					12	
	10a	and allowances			<del> </del>		\$ ***	
	ľ	Less Cost of goods sold				· <del>····································</del>		
	1	Gross profit or (loss)		111	<u> </u>	111.		STATEMENT 2
	l	Other income		160 622		$\frac{111}{623}$ .	<del></del>	STATEMENT Z
_	12	Total. Add lines 1 through		169,623 53,429		<del>,023.</del>		53,429.
	13	Compensation of officers, dire		53,429	•	0.		33,423.
	14	Other employee salaries a	•		<del>.  </del>			
ģ	ı	Pension plans, employee		1,424		0.		1,424.
nses	ı	Legal fees						1,424
ē		Accounting fees	STMT 4	8,826 35,490		,413.	-	4,413. 2,221.
Ü	l	Other professional fees	STMT 5	35,490	• 33	, 209.	<del>                                     </del>	2,221.
and Administrative Expen	l	Interest	CMMM C	E 7E0	1	042		4,716.
stra	l	Taxes	STMT 6	5,758	• <del>                                     </del>	,042.	<del> </del>	4,/10.
ž	19	Depreciation and depletion	n					<u> </u>
튣	20	Occupancy		2 125	<del> </del>	^		2 125
Ϋ́Р	21	Travel, conferences, and r	meetings	2,135	•	0.		2,135.
ā	22	Printing and publications	am: = = =	2 100	-			2 100
perating	23	Other expenses	STMT 7	2,100	•	0.		2,100.
rat	24	Total operating and admi		100 100	1	704		70 430
Dpe		expenses. Add lines 13 th	-	109,162		,724.		70,438.
J		Contributions, gifts, grant		120,000	•			120,000.
	26	Total expenses and disbu	ursements.	1		704		100 400
	ļ	Add lines 24 and 25		229,162	•  38	,724.		190,438.
	27	Subtract line 26 from line	12		1			
	a	Excess of revenue over expens	ses and disbursements	-59,539	•	<del></del>		<b></b>
	b	Net investment income (d	f negative, enter -0-)		130	,899.		
	n	Adjusted net income (if ne	egative enter -0-1	1	1		N/A	1

Form **990-PF** (2011)

LHA For Paperwork Reduction Act Notice, see instructions.

123511 12-02-11

P	art IV Capital Gains	and Loss	es for Tax on Ir	vestment	Income						
			s) of property sold (e g common stock, 200 shs			P	low acc • Purch • Donat	ase	(c) Date (mo , c	acquired lay, yr )	(d) Date sold (mo , day, yr )
1 <u>a</u>	PUBLICLY TRADE	D SECU	RITIES								
b	CAPITAL GAINS	DIVIDE	NDS								<u> </u>
C						-					
<u>d</u>											
е		(f) Dan	sociation allowed	(a) Cos	t or other back	<del></del> _		l	(b) G	ain or (loss	L
	(e) Gross sales price	(0	reciation allowed r allowable)	ptus e	t or other basis xpense of sale	-		<u> </u>		s (f) minus	(g)
<u>a</u>	2,316,963. 852.				2,239,22	3 -					77,738. 852.
<u>b</u>	032.	<u> </u>						··· <del>-</del>			
<u>C</u>											
<u>d</u> e	· ·	<del> </del>		-							
	Complete only for assets showi	na asın ın coli	ımn (h) and owned by	the foundation	on 12/31/69				(I) Gains ((	Col (h) gain	minus
	,	T	Adjusted basis		cess of col (I)			cc	il (k), but	not less tha	n -0-) ar
	(i) F M V as of 12/31/69		of 12/31/69		col (j), if any				Losses	(from col (	(h))
a											77,738.
b											852.
C			<del>-</del>								
d											
е											
	Capital gain net income or (net c Net short-term capital gain or (lo	•	If gain, also enter -0	- ın Part I, line		}	2				78,590.
	if gain, also enter in Part I, line 8	,	i iii 56000115 1222(5) ai	iu (0)		)					
	If (loss), enter -0- in Part I, line 8 art V Qualification U	3	_			<u></u>	3			N/A	<u> </u>
if se Wa	r optional use by domestic prival ection 4940(d)(2) applies, leave s the foundation liable for the se	this part blank ction 4942 tax	on the distributable an	nount of any ye	ear in the base pei		•)				Yes X No
	es," the foundation does not qua Enter the appropriate amount in					29					<u> </u>
<u> </u>	(a)	each column		uctions before	making any entire						(d)
(	Base periód years Calendar year (or tax year beginn	iing in)	(b) Adjusted qualifying dis		Net value of no			use asset			bution ratio yided by col. (c)) • 044565
	2010		11	2,030.			, 31.	3,01	0 •	· · · · · · · · · · · · · · · · · · ·	•044505
	2009								-	-	
_	2008 2007								-		
_	2006			-						_	· · ·
	2000		<del></del>					-			
2	Total of line 1, column (d)								2		.044565
	Average distribution ratio for the	e 5-vear base r	period - divide the total	on line 2 by 5.	or by the number	r of ve	ars				
	the foundation has been in exist			······································		,			3	ĺ	.044565
4	Enter the net value of noncharita	ible-use assets	s for 2011 from Part X,	line 5					4		4,452,721
											100 426
5	Multiply line 4 by line 3								5	+	198,436
_	- 1 40/ 5 1 1 1	(40) .4 D.	A.I. (c. c. 07h.)								1,309
6	Enter 1% of net investment inco	me (1% of Pa	rt I, line 2/b)						6	<del>                                     </del>	1,307
7	Add lines 5 and 6								7		199,745
•	AND HITS J AND U								<u>'</u>	1	
8	Enter qualifying distributions fro	ım Part XII lin									190,438
	If line 8 is equal to or greater tha								8	<u> </u>	190,430

Form **990-PF** (2011)

Part VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions)			(2011) BARBARA EMILY KNUDSON FOUNDATI						2245			Page 4
Dates for fulling or determination letter    Catach capy of letter it inecessary-see instructions    1   2,618.   Domestic foundations that met the section 4940(e) requirements in Part V, check here ▶	Pai	t VI	Excise Tax Based on Investment Income (Section 494)	0(a),	49	40(b), 4940(e)	, or 4	948	- see i	nstru	ıctio	ns)
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here  □ and enter 1%												
of Part I, line 27b 2 Tax under section 511 (domestic section 49x7(a)(1) trusts and taxable foundations only. Others enter -0-) 2 Tax under section 511 (domestic section 49x7(a)(1) trusts and taxable foundations only. Others enter -0-) 3 3 2, 618.  Subtitle A (income) tax (domestic section 49x7(a)(1) trusts and taxable foundations only. Others enter -0-) 4 0. 5 Tax based on investment lincome. Subtract line 4 from line 3 If zero or less, enter -0- 5 Tax based on investment lincome. Subtract line 4 from line 3 If zero or less, enter -0- 5 Tax based on investment lincome. Subtract line 4 from line 3 If zero or less, enter -0- 5 Tax based on investment lincome. Subtract line 4 from line 3 If zero or less, enter -0- 5 Tax based on investment lincome. Subtract line 4 from line 3 If zero or less, enter -0- 5 Tax based on investment lincome. Subtract line 4 from line 3 If zero or less, enter -0- 5 Tax based on investment lincome. Subtract line 4 from line 3 If zero or less, enter -0- 5 Tax based on investment lincome. Subtract line 4 from line 3 If zero or line 4 from line 5 I												
t. All other domestic foundations enter 2% of time 27b. Exempt foreign organizations enter 4% of Part I, lime 12, col. (b)  2	þ	Domest	tic foundations that meet the section 4940(e) requirements in Part V, check here 🕒	<b>-</b>	J and	d enter 1%	<b>)</b>	1			2,6	<u> 18.</u>
2 Tax under section S11 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  Add lines 1 and 2  3 2,618.  4 0.  5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-  6 Be less		of Part I	1, line 27b									
3 2 2, 5.18.  Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-  6 Ceredit/Payments.  2 2 of 18.  8 2 2, 618.  8 2 2, 618.  8 8 62.  9 Tax due with placebor for expensions of time to file (Form 8868)  6 B 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6			· · · · · · · · · · · · · · · · · · ·									_
4 Subtlik 4 (mcome) bx (domestic section 4947(a)(1) trusts and traxable foundations only Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- 5 Credity? Payments.  a 2011 estimated tax payments and 2010 overpayment credited to 2011  b Exempt foreign organizations: -tax withheld at source 6 Tax paid with application for extension of time to file (Form 8868) 6 Bd 7 Total credits and payments. Add lines 6a through 8d 7 Total credits and payments. Add lines 6a through 8d 8 6 2. 7 Total credits and payments. Add lines 6a through 8d 8 6 2. 9 Tax dee. If the total of lines 5 and 8 is more than line? - , refer amount owed 9 2 2, 680 0. 10 Overpayment. If line? 1 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 2012 estimated tax 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or inference in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or inference in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or inference in any political campaign? 1a During the tax year, did the foundation and control of the cartivities 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 the year?  (1) On the foundation in connection with the activities.  c Did the foundation file form 1120-POL for the year?  (1) On the foundation have unrelated by sementic forms year?  (2) On foundation managers ▶ \$ 0 .  Enter the rembursament (flary) by tax to political expenditures (section 4955) imposed during the year?  (1) On the foundation have unrelated by General Instruction T.  6 Enter the rembursament of section 508() (relating to sections 4941 thr			• • • • • • • • • • • • • • • • • • • •	hers e	enter	-0-)		2				
Tax based on Investment Income. Subtract line 4 from line 3 if zero or less, enter-0-6 C credit/Payments. 3 2011 estimated bux payments and 2010 overpayment credited to 2011 B Exempt foreign organizations - tax withheld at source C Tax pad with application for restrictions of time to this (Form 8868) 6 6 6 C Tax pad with application for restriction of time to this (Form 8868) 6 6 6 C Tax pad with application for restriction of time to this (Form 8868) 6 6 6 C Tax pad with application for restriction of the total of lines 5 and 5 is more than line 7, enter amount owed 6 6 6 C Tax pad with it line 7 is more than line 7, enter amount owed 7 0 0. C Enter any panelty for underpayment of estimated tax Check here ☐ if Form 2220 is attached 8 62. C Tax due. If this total of lines 5 and 8 is more than line 7, enter amount owed 9 2 2, 680. C Verrayment, Illine 7 is more than line 10 to be Credited to 2012 estimated tax Part Visit of 10 0. C Verrayment, Illine 7 is more than the total of time 4 mount overpald 1	3	Add line	es 1 and 2					3			2,6	18.
6 Credit/Payments. 2011 estimated tax payments and 2010 overpayment credited to 2011  8 a 2011 estimated tax payments and 2010 overpayment credited to 2011  8 b Exempt foreign organizations - lax withheld at source  1 Tax paid with application for extension of time to file (Form 8668)  8 c 8 c 8 c 8 c 8 c 8 c 8 c 8 c 8 c 8				thers e	enter	r -0-)						
a 2011 estimated tax payments and 2010 overpayment credited to 2011 b Exempt foreign organizations - lax withheld at source  1 Tax paid with application for extension of time to tife (Form 8868) 6 Bob 1 Total credits and payments Add times 6a through 66 7 Total credits and payments Add times 6a through 66 8 Enter any penalty for underpayment of estimated tax. Check here								5	ļ		2,6	18.
b Exempt foreign organizations - fax withhold at source  C Tax paid with application for extension of time to file (Form 8868)  d Backup withholding erroneously withhold  7 Total credits and payments Add lines 6a through 6d  8 6 2 .  9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  8 6 2 .  9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  8 2 . 6 8 .  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed  10 Enter the amount of line 10 to be Credited to 2012 estimated tax ►  11 Enter the amount of line 10 to be Credited to 2012 estimated tax ►  12 Part VII-A   Statements Regarding Activities  13 During the tax year, did the boundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  13 A X  14 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  15 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?  16 If the answers "I'ves" to *Taor *Tb, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in Formal 12-POI, for this year?  16 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  17 On the foundation Ne Form 12-POI, for this year?  18 Enter the amount (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ 0 .  18 Enter the amount and easy changes, not previously reported to the IRS; in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of			-	ı	1							
to Tax paid with application for extension of time to file (Form 8868)  d Backup withholding erroneously withheld  7 Total credits and payments. Add lines 6a through 6d  8 Enter any penalty for underpayment of estimated tax. There is more than the total of lines 5 and 8, enter the amount owed  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 overpald  11 Enter the amount of line 10 to be. Credited to 2012 estimated tax. ►  12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  14 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  15 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  16 Enter the amount (1 any) of tax or 12, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.  17 During the tax in the activities of the activities and copies of any materials published or distributed by the foundation on the connection with the activities.  18 During the foundation in accompance on the activities.  29 List the foundation engaged in any activities that have not previously been reported to the IRS?  19 List the foundation engaged in any activities that have not previously been reported to the IRS?  19 List the foundation base of the				6a	$\bot$							
Backup withholding erroneously withhold   Total credits and payments Add lines 6 althrough 6d   Total credits and payments Add lines 6 althrough 6d   Total credits and payments Add lines 6 althrough 6d   Enter any penalty for underpayment of estimated tax Check here					-							
7 O. 8 Enter any penalty for underpayment of estimated tax Check here ☐ if Form 2220 is attached			•		-	<del> </del>						
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 Intert the amount of line 10 to be Terdited to 2012 estimated tax ▶ Refunded  11 Intert the amount of line 10 to be Terdited to 2012 estimated tax ▶ Refunded  12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  14 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  15 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign.  16 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign.  16 During the any service that a detailed description of the activities.  17 During the toundation file Form 1120-POL for this year?  18 During the tax intervenent of the intervenent of the activities.  19 During the foundation and any activities that have not previously been reported to the IRS?  18 Text the requirement of the service state and participate and foundation and the foundation and the part and the foundation and the part and the foundation and the part and the foundation services and the foundation and the				6d				ŀ				^
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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 2012 estimated tax ▶   10   11				ched								62.
11 Enter the amount of line 10 to be Credited to 2012 estimated tax											2,6	80.
Part VII-A   Statements Regarding Activities			•			ı	<b>&gt;</b>					
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?  11						Refund	ed 🟲	11				
any political campaign?  b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?  If the answer is "Yes" to faor 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?  d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation   ■ \$ 0 . (2) On foundation managers   ■ \$ 0 .  e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers   ■ \$ 0 .  e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers   ■ \$ 0 .  e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers   ■ \$ 0 .  e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers   ■ \$ 0 .  e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers   ■ \$ 0 .  e Enter the activities    d at the foundation made any changes, not previously peored to the IRS?  If "Yes," attach a detailed description of the activities  3 Has the foundation made any changes, not previously reported to the IRS?  If "Yes," attach a detailed description of the activities  3 Has the foundation managers   ■ \$ 0 .  b If "Yes," as it filed a tax return on Form 990-T for this year?  If "Yes," as it filed a tax return on Form 990-T for this year?  If "Yes," as it filed a tax return on Form 990-T for this year?  For a substitute of the statement required by General Instruction of If "No," attach explaination  of each state as required by General Instruction G? If "No," attach explaination  of each state as required											<b>N</b>	<b>N</b> .
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?  If the answer is "Yes" to faor th, 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-P0L for this year?  d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation ► \$ 0 . (2) On foundation managers ► \$ 0.  e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ 0.  Has the foundation engaged in any activities that have not previously been reported to the IRS?  If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?  b If "Yes," attach the statement required by General Instruction T.  A Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "Yes," attach the statement required by General Instruction T.  A Ret the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either  • By language in the governing instrument, or  • By slanguage in the governing instrument, or  • By language in the governing instrument or the fectively amendas the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?  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.  8 Enter the states to which the foundation from the foundation furnished a copy of Form 990-PF to the Attorney General (or des			· · · · · · · · · · · · · · · · · · ·	lation (	or di	id it participate or in	tervene	ın			res	
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orm	990-PF(2011) BARBARA EMILY KNUDSON FOUNDATION 27-224	5059		Page <b>5</b>
	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► HTTP://WWW.GOSW.ORG/SITES/KNUDSONFOUNDATION/			
14	The books are in care of ► THE FOUNDATION Telephone no ► 503-9		218	
	Located at ► 3637 NE SANDY BLVD, SUITE 206, PORTLAND, OR ZIP+4 ►9	7232		<del></del>
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	N/		
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,	, ľ	Yes	No
	securities, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign			
	country	<del></del>	. 1	
Pe	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<del></del>		<u> </u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)  a disqualified person?  X Yes No			
	1 step 1			
	(b) Tallion goods, convicts, or admitted to (c) coosts with the many a single process.			
	(4) 1 by compensation to, or pay or remotion the expenses of, a single-time process.			
	(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			
	101 810 8010110 01 400 074 410 410 111			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)  Yes X No			
	to this last of government of the first of t			
	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	16		X
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	7.10	,	
	Organizations relying on a current notice regarding disaster assistance check here			
(	: Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	10		Х
•	before the first day of the tax year beginning in 2011?  Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
2	defined in section 4942(j)(3) or 4942(j)(5))			
	a At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
•	before 2011?  Yes X No			
	If "Yes," list the years			
	a Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
·	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions ) N/A	2b		
	: If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	<b>&gt;</b>			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	[		
ı	b If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	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 2011.)  N/A	3b		
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b		X

Form **990-PF** (2011)

Drm 990-PF (2011) BARBARA EMILY KNUDSON FO			<u>27-2245</u>	<u> 059</u>	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	on 4945(e))?	Y6	s X No		
(2) Influence the outcome of any specific public election (see section 4955),	or to carry on, directly or indire				
any voter registration drive?			s X No		
(3) Provide a grant to an individual for travel, study, or other similar purpose		Y£	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section				
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?		Y€	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur		ın Regulations	/-		
section 53 4945 or in a current notice regarding disaster assistance (see instr			N/A	5b	
Organizations relying on a current notice regarding disaster assistance check			▶□□		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption					
expenditure responsibility for the grant?	N	I/A L Ye	es 📖 No 🛮		
If "Yes," attach the statement required by Regulations section 53.494	45-5(d).				
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		(T).		
a personal benefit contract?		Ye	es X No		· ·
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b	<u> </u>
If "Yes" to 6b, file Form 8870.			<b>□</b>	.	
7a At any time during the tax year, was the foundation a party to a prohibited tax		Y6	es X No '		
b If "Yes," did the foundation receive any proceeds or have any net income attrit		manaya Himbl		7b	
Part VIII Information About Officers, Directors, Trus Paid Employees, and Contractors	tees, Foundation Ma	inagers, nigni	<b>y</b>		
List all officers, directors, trustees, foundation managers and their	r compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plan and deferred	(e)	Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	, acco	ount, other lowances
	to poortion	<u> </u>			
	7				
SEE STATEMENT 13	7	53,429.	0	•	0.
				1	
	<u> </u>				
		I INONE II			
Compensation of five highest-paid employees (other than those in	(b) Title, and average	, enter "NONE."	(d) Contributions to	) (e)	) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plan and deferred	s acc	ount, other lowances
NONE	devoted to position		compensation	-	owances
NONE					
		<del></del>			
	-			1	
		<del>                                     </del>	-	+	
	-				
				+	
	_				
		<del> </del>			
Total number of other employees paid over \$50,000			<b></b>		0
		<u></u>	For	n <b>990-l</b>	<b>PF</b> (2011)

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundation	ns must complete this	part. Foreign fou	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out char	itable, etc., purposes			
a	Average monthly fair market value of securities	, ,, ,		1a	4,481,929. 38,600.
	Average of monthly cash balances			1b	38,600.
	Fair market value of all other assets			10	
d	Total (add lines 1a, b, and c)			1d	4,520,529.
	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	4,520,529.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amo	ount, see instructions)		4	67,808.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here an	d on Part V, line 4		5	4,452,721.
6	Minimum Investment return. Enter 5% of line 5	·		6	222,636.
P	art XI Distributable Amount (see instructions) (Section 4942(j))(3		ting foundations ar	nd certain	
1	Minimum investment return from Part X, line 6			1	222,636.
2 a	Tax on investment income for 2011 from Part VI, line 5	2a	2,618.		
b	Income tax for 2011 (This does not include the tax from Part VI)	2b			
C	Add lines 2a and 2b			2c	2,618.
3	Distributable amount before adjustments Subtract line 2c from line 1			3	2,618. 220,018.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	220,018.
6	Deduction from distributable amount (see instructions)			6	0.
7_	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on line 5	Part XIII, line 1		7	220,018.
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	190,438.
b	Program-related investments - total from Part IX-B			1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out cha	ritable, 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	190,438.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	190,438.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent year 4940(e) reduction of tax in those years	irs when calculating whet	ner the foundation	qualifies for	the section

Form **990-PF** (2011)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,	Corpus	rears prior to 2010	2010	
line 7				220,018.
2 Undistributed income, if any, as of the end of 2011	······			
a Enter amount for 2010 only			0.	
b Total for prior years	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
		0.		
3 Excess distributions carryover, if any, to 2011				
a From 2006				
b From 2007				
¢ From 2008				
d From 2009				
e From 2010 9,955.	0.055			
f Total of lines 3a through e	9,955.			······
4 Qualifying distributions for 2011 from				
Part XII, line 4 ► \$ 190, 438.			0.	
a Applied to 2010, but not more than line 2a	<del></del>			
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		· · · · · · · · · · · · · · · · · · ·		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)			<del> </del>	190,438.
d Applied to 2011 distributable amount	0.			170/430.
e Remaining amount distributed out of corpus	9,955.	.,		9,955.
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	9,955.			<u> </u>
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' 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 2010. Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2011 Subtract				
lines 4d and 5 from line 1. This amount must				10 625
be distributed in 2012				19,625.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0.			
section 170(b)(1)(F) or 4942(g)(3)	· ·			
8 Excess distributions carryover from 2006	0.			
not applied on line 5 or line 7				
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	0.			
	· · · · · · · · · · · · · · · · · · ·			
10 Analysis of line 9 a Excess from 2007	3			
b Excess from 2008	***************************************			
c Excess from 2009	1			
d Excess from 2010				
e Excess from 2011				

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Ye		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		
a Paid during the year				
ALBANY HELPING HANDS		PUBLIC CHARITY	GENERAL SUPPORT	
619 9TH AVE SE				
ALBANY, OR 97322				5,000.
ALZHEIMER'S NETWORK OF OREGON PO BOX 12701 SALEM, OR 97309		PUBLIC CHARITY	GENERAL SUPPORT	18,000.
BELLONI RANCH 320 CENTRAL AVE, STE 406 COOS BAY, OR 97420		PUBLIC CHARITY	general support	10,000.
BETTER PEOPLE 3711 NE MARTIN LUTHER KING JR BLVD PORTLAND, OR 97211		PUBLIC CHARITY	GENERAL SUPPORT	15,000.
BLUE MOUNTAIN COMMUNITY COLLEGE PO BOX 603 WALLA WALLA, WA 99362-0015		PUBLIC CHARITY		1,000.
Total SEE CON	TINUATION SHE	ET(S)	<b>▶</b> 3a	120,000.
b Approved for future payment  ABC HOUSE PO BOX 68  ALBANY, OR 97321		PUBLIC CHARITY	GENERAL SUPPORT	
EASTERN OREGON COUNCIL ON ALCOHOLISM 216 SW HAILEY AVENUE PENDLETON, OR 97801		PUBLIC CHARITY	GENERAL SUPPORT	
FRIENDS OF SALEM CENTER 50+ 2615 PORTLAND ROAD NE SALEM, OR 97301			GENERAL SUPPORT	
Total SEE CON	NTINUATION SHE	ET(S)	<b>▶</b> 3b	0.

Form 990-PF (2011) BARBARA EMILY KNUDSON FOUNDATION

ter gross amounts unless otherwise indicated	Unrelated I	ousiness income		section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a					
)					
1					
Fees and contracts from government agencies					
Membership dues and assessments					
nterest on savings and temporary cash					
nvestments					
Dividends and interest from securities		····	14	90,922.	
Net rental income or (loss) from real estate					
Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other					
than inventory			18	78,590.	<del></del>
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory			<del>  </del>		
Other revenue				111	
a VENDOR REFUNDS	_		01	111.	
b	_				
G	_		+		
d					
	_	0	+	160 622	
	1 1	U	•	169,623.	169,6
Subtotal Add columns (b), (d), and (e)	L				
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)	<u> </u>			13	169,6
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations		···			169,6
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations		nplishment of I	Exempt Po		169,6
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations  ART XVI-B Relationship of Activitie	es to the Accon			urposes	
Subtotal Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activitie  ne No. Explain below how each activity for which in	es to the Accon	column (e) of Part XVI		urposes	•
Subtotal Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activitie	es to the Accon	column (e) of Part XVI		urposes	
Subtotal Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activitie  ne No. Explain below how each activity for which in	es to the Accon	column (e) of Part XVI		urposes	•
Subtotal Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activitie  le No. Explain below how each activity for which in	es to the Accon	column (e) of Part XVI		urposes	•
Subtotal Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activitie  ne No. Explain below how each activity for which in	es to the Accon	column (e) of Part XVI		urposes	•
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activitie  ne No. Explain below how each activity for which in	es to the Accon	column (e) of Part XVI		urposes	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activitie  ne No. Explain below how each activity for which in	es to the Accon	column (e) of Part XVI		urposes	
Subtotal Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activitie  ne No. Explain below how each activity for which in	es to the Accon	column (e) of Part XVI		urposes	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activitie  ne No. Explain below how each activity for which in	es to the Accon	column (e) of Part XVI		urposes	•
Subtotal Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activitie  ne No. Explain below how each activity for which in	es to the Accon	column (e) of Part XVI		urposes	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activitie  ne No. Explain below how each activity for which in	es to the Accon	column (e) of Part XVI		urposes	•
Subtotal Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activitie  ne No. Explain below how each activity for which in	es to the Accon	column (e) of Part XVI		urposes	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activitie  ne No. Explain below how each activity for which in	es to the Accon	column (e) of Part XVI		urposes	
Subtotal Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activitie  ne No. Explain below how each activity for which in	es to the Accon	column (e) of Part XVI		urposes	
Subtotal Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activitie  ne No. Explain below how each activity for which in	es to the Accon	column (e) of Part XVI		urposes	
Subtotal Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activitie  ne No. Explain below how each activity for which in	es to the Accon	column (e) of Part XVI		urposes	•
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activitie  ne No. Explain below how each activity for which in	es to the Accon	column (e) of Part XVI		urposes	•
ne No. Explain below how each activity for which i	es to the Accon	column (e) of Part XVI		urposes	

123621 12-02-11

orm 990-PF (2	<u>2011)</u> BARBA	RA EMILY KNUDSO	N FOUNDATION		27-224505	59 Pag	ge <b>13</b>
Part XVII	Information Re Exempt Organ	egarding Transfers To izations	and Transactions ar	nd Relationshi	os With Noncharita		
1 Did the or	ganization directly or indi	rectly engage in any of the following	ng with any other organization	n described in section	501(c) of	Yes	No
		)(3) organizations) or in section 5			, ,		•••••
a Transfers	from the reporting founda	ation to a noncharitable exempt of	rganization of				
(1) Cash		·			1a	(1)	X
(2) Other	r assets				1a	(2)	X
<b>b</b> Other tran	sactions						
(1) Sales	of assets to a noncharital	ble exempt organization			16	(1)	X
(2) Purch	hases of assets from a noi	ncharitable exempt organization			16	(2)	X
(3) Renta	al of facilities, equipment,	or other assets			1b	(3)	X
(4) Reim	bursement arrangements				<u>1b</u>	(4)	<u>X</u>
(5) Loans	s or loan guarantees				<u>1b</u>	(5)	<u>X</u>
(6) Perfo	rmance of services or me	mbership or fundraising solicitation	ons		<u>16</u>	(6)	X
-		ılıng lısts, other assets, or paid en	• •		L	C	X
<b>d</b> If the ansv	wer to any of the above is	"Yes," complete the following sch	edule Column (b) should alwa	ays show the fair mar	ket value of the goods, other	assets,	
	-	oundation If the foundation receiv		ın any transaction or	sharing arrangement, show	In	
		other assets, or services received		T :::			
(a) Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of	transfers, transactions, and sharin	g arrangemen	ıts
		N/A					
				<u> </u>			
<del></del> _				<del> </del>			
	-		<del></del>				
	<del></del>				· -		
				<del></del>			
							—
							—
			· · · · · · · · · · · · · · · · · · ·	<del></del>			
·							
ın section	•	rtly affiliated with, or related to, one r than section 501(c)(3)) or in sec edule	. •	ations described		/es X	] No
	(a) Name of org	anization	(b) Type of organization	(c)	Description of relationship		
	N/A						
	<del></del>						
			<u> </u>				
Sign Here	elief, it is true, correct, and con	that I have examined this return, including including the Declaration of preparer (other that the Control of the Con	an taxpayer) is based on all informa	tion of which preparer had	s any knowledge return with shown be	IRS discuss the the prepare elow (see instr	er
Sigr	nature of officer or trustee		Date	Title			=
	Print/Type preparer's na		ston acure		neck if PTIN		
<b>.</b>	JOHN D. HA	WKINS, JD	Ma I ILLI	8/4/12   56	elf- employed	70427	
Paid	CPA			-11/16		78437	
Preparer	Firm's name ► GRO	VE, MUELLER	WANK, JY/C.	F	Firm's EIN ► 93-087	112\	
Use Only	Francis address & A.F.	E COMMACE AND THE	on No. Outmon C	100			
	1	5 COTTAGE STREE	ET NE, SUITE 2	200	. /EA3\E	01 774	00
	J SA	LEM, OR 97301			Phone no (503) 58	_	
					Form 9	<b>90-PF</b> (2	2011)

123622 12-02-11

3 Grants and Contributions Paid During the	<del></del>			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
HEMERETA CC FOUNDATION		PUBLIC CHARITY	SCHOLARSHIP	
O BOX 14007 FALEM OR 97309				2,00
OCC FOUNDATION		PUBLIC CHARITY	SCHOLARSHIP	
800 NW COLLEGE WAY				
END, OR 97701				2,00
LACKAMAS COMMUNITY COLLEGE		DUDI IG GUNDION	COUCL A DOUT D	
9600 MOLALLA AVE		PUBLIC CHARITY	SCHOLARSHIP	
DREGON CITY, OR 97045		<u> </u>		1,00
CLATSOP COMMUNITY COLLEGE		PUBLIC CHARITY	SCHOLARSHIP	
1651 LEXINGTON AVE				1 00
STORIA, OR 97103				1,00
COLUMBIA GORGE CC		PUBLIC CHARITY	SCHOLARSHIP	
400 EAST SCENIC DRIVE				
THE DALLES, OR 97058				2,00
DECCULARIZA CULLI DREN'A DOLDANIATON		DUDI IC CUADIMY	CHARDAL CADDODO	
DESCHUTES CHILDREN'S FOUNDATION		PUBLIC CHARITY	GENERAL SUPPORT	
BEND, OR 97701		<u> </u>		15,00
JACKSON ST YOUTH SHELTER 555 NW JACKSON AVE		PUBLIC CHARITY	GENERAL SUPPORT	
CORVALLIS, OR 97330		<del> </del>		10,00
KLAMATH CC .		PUBLIC CHARITY	SCHOLARSHIP	
7390 SOUTH 6TH STREET KLAMATH FALLS, OR 97601				2,00
MANUAL PRINTS, OR 97001				2,00
LANE CC FOUNDATION		PUBLIC CHARITY	SCHOLARSHIP	
4000 EAST 30TH AVENUE				
ZUGENE, OR 97405				1,00
LINN BENTON COMMUNITY COLLEGE  5500 PACIFIC BLVD SW		PUBLIC CHARITY	SCHOLARSHIP	
ALBANY, OR 97321		1		1,00
Total from continuation sheets				71,00

3 Grants and Contributions Paid During the	Year (Continuation)	<del></del> .		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
MERCY CORPS NORTHWEST		PUBLIC CHARITY	GENERAL SUPPORT	;
43 SW NAITO PARKWAY				
PORTLAND, OR 97204				5,00
MT. HOOD COMMUNITY COLLEGE		PUBLIC CHARITY	SCHOLARSHIP	
26000 SE STARK ST				
GRESHAM, OR 97030				1,00
NEIGHBOR IMPACT		PUBLIC CHARITY	GENERAL SUPPORT	:
20310 EMPIRE AVENUE AllO				
BEND, OR 97701				4,72
OREGON COAST COMMUNITY COLLEGE		PUBLIC CHARITY	SCHOLARSHIP	
400 SE COLLEGE WAY				1.00
NEWPORT, OR 97366				1,00
OREGON HUMANE SOCIETY		PUBLIC CHARITY	GENERAL SUPPORT	
PO BOX 11364				
PORTLAND, OR 97211				1,00
PAW TEAM		PUBLIC CHARITY	GENERAL SUPPORT	
РО ВОЖ 3300				
PORTLAND, OR 97229				5,00
PCC FOUNDATION		PUBLIC CHARITY	SCHOLARSHIP	
PO BOX 19000				
PORTLAND, OR 97280				2,00
ROGUE COMMUNITY COLLEGE		PUBLIC CHARITY	SCHOLARSHIP	
3345 REDWOOD HWY				
GRANTS PASS, OR 97527-9291				1,00
SALEM HARVEST		PUBLIC CHARITY	GENERAL SUPPORT	
SALEM, OR				4,27
SENIOR TOWNHOUSE/MEALS ON WHEELS 685 MARION STREET NE		PUBLIC CHARITY	GENERAL SUPPORT	
SALEM, OR 97301				1,00
Total from continuation sheets				

Part XV **Supplementary Information Grants and Contributions Paid During the Year (Continuation)** If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor SWOCC FOUNDATION PUBLIC CHARITY SCHOLARSHIP 1988 NEWMARK AVENUE 2,000. COOS BAY, OR 97420 TILLAMOOK BAY COMMUNITY COLLEGE PUBLIC CHARITY SCHOLARSHIP 4301 THIRD ST 1,000. TILLAMOOK, OR 97141 TREASURE VALLEY CC PUBLIC CHARITY SCHOLARSHIP 650 COLLEGE BLVD 2,000. ONTARIO, OR 97914 PUBLIC CHARITY SCHOLARSHIP UMPQUA COMMUNITY COLLEGE PO BOX 967 1,000. ROSEBURG, OR 97470 PUBLIC CHARITY GENERAL SUPPORT UNITED METHODIST RETIREMENT CENTER (WILLSON HOUSE) 1625 CENTER STREET NE 1,000. SALEM, OR 97301 PUBLIC CHARITY GENERAL SUPPORT URBAN FARM COLLECTIVE 1,000. PORTLAND, OR Total from continuation sheets

FORM 990-PF DIVIDENT	OS AND	INTER	EST FROM	SECU	JRITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT	)
CHARLES SCHWAB & CO	•		91,774.		852.	90,9	22.
TOTAL TO FM 990-PF, PART I, 1	LN 4		91,774.		852.	90,9	22.
FORM 990-PF	Oʻ	THER II	NCOME			STATEMENT	2
DESCRIPTION		]	(A) REVENUE PER BOOKS	S	(B) NET INVEST- MENT INCOME	(C) ADJUSTE NET INCO	
VENDOR REFUNDS				111.	111	•	
TOTAL TO FORM 990-PF, PART I	, LINE	11	1	111.	111		
FORM 990-PF		LEGAL	FEES			STATEMENT	<u> </u>
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOMI	(D) CHARITA E PURPOS	
LEGAL		1,424.		0 .	•	1,4	24.
TO FM 990-PF, PG 1, LN 16A		1,424.		0.		1,4	24.
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	<u> </u>
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC	EST- COME	(C) ADJUSTED NET INCOM	(D) CHARITA E PURPOS	
					-		
ACCOUNTING FEES		8,826.	4	,413.	•	4,4	13.

FORM 990-PF	OTHER PROFES	SIONAL FEES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INVESTMENT MANAGEMENT OTHER PROFESSIONAL FEES PAYROLL PROCESSING FEES	33,269. 775. 1,446.	33,269.		0. 775. 1,446.	
TO FORM 990-PF, PG 1, LN 16C	35,490.	33,269.		2,221.	
FORM 990-PF	TAXES		STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FOREIGN TAXES PAYROLL TAXES	1,042. 4,716.	1,042.		0. 4,716.	
TO FORM 990-PF, PG 1, LN 18	5,758.	1,042.		4,716.	
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 EXPENSE	2,100.	0.	<del></del>	2,100.	
TO FORM 990-PF, PG 1, LN 23	2,100.	0.		2,100.	

FORM 990-PF U.S. AND STATE/CITY GOVERNM	MENT OBLIGATIONS	STATEMENT 8
	HER V'T BOOK VALUE	FAIR MARKET VALUE
GOVERNMENTAL X	684,522.	684,522.
TOTAL U.S. GOVERNMENT OBLIGATIONS	684,522.	684,522.
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATION	ons	
TOTAL TO FORM 990-PF, PART II, LINE 10A	684,522.	684,522.
FORM 990-PF CORPORATE STO	СК	STATEMENT 9
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
STOCKS	2,265,871.	2,265,871.
TOTAL TO FORM 990-PF, PART II, LINE 10B	2,265,871.	2,265,871.
FORM 990-PF CORPORATE BONI	DS	STATEMENT 10
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
BONDS	749,545.	749,545.
TOTAL TO FORM 990-PF, PART II, LINE 10C	749,545.	749,545.
FORM 990-PF OTHER INVESTMEN	NTS	STATEMENT 11
VALUATION METHOD		FAIR MARKET VALUE
MUTUAL FUNDS AND OTHER FMV	589,520.	589,520.
TOTAL TO FORM 990-PF, PART II, LINE 13	589,520.	589,520.

FORM 990-PF	OTHER ASSETS		STATE	EMENT 12	
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE			
ACCRUED INTEREST PURCHASED	461.	47	77.		
TO FORM 990-PF, PART II, LINE 15	461.	4.7	77.		
	T OF OFFICERS, D FOUNDATION MANA		STATI	EMENT 13	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB		
LEE PETERSON 3637 NE SANDY BLVD, SUITE 206 PORTLAND, OR 97232	EXECUTIVE DIRE	47,903.	0.	0.	
RICHARD MCGINTY 3637 NE SANDY BLVD, SUITE 206 PORTLAND, OR 97232	TREASURER 2.00	600.	0.	0.	
EMILEE PROVOST 3637 NE SANDY BLVD, SUITE 206 PORTLAND, OR 97232	SECRETARY 2.00	2,510.	0.	0.	
STEVE BLOWERS 3637 NE SANDY BLVD, SUITE 206 PORTLAND, OR 97232	DIRECTOR 2.00	802.	0.	0.	
PATRICK MELIUS 3637 NE SANDY BLVD, SUITE 206 PORTLAND, OR 97232	DIRECTOR 2.00	827.	0.	0.	
SHARON SMITH 3637 NE SANDY BLVD, SUITE 206 PORTLAND, OR 97232	DIRECTOR 2.00	787.	0.	0.	
TOTALS INCLUDED ON 990-PF, PAGE 6		53,429.	0.	0.	

#### Form **8868**

(Rev. January 2012)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

OMB No. 1545-1709

 $\triangleright \mathbf{X}$ 

If you a	ire filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of	thıs form).			
Do not co	omplete Part II unless you have already been granted a	an automa	atic 3-month extension on a previous	sly filed Fo	rm 8868.		
Electroni	c filing (e-file). You can electronically file Form 8868 if y	you need a	a 3-month automatic extension of tin	ne to file (	6 months for a corp	oration	
required t	o file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically fi	le Form 8	868 to request an e	xtension	
of time to	file any of the forms listed in Part I or Part II with the ex-	ception of	Form 8870, Information Return for 1	Transfers .	Associated With Ce	rtain	
Personal	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details of	on the elec	ctronic filing of this f	form,	
	urs gov/efile and click on e-file for Chanties & Nonprofits						
Part I	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies ne	eded).			
A corpora	tion required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and	complete	·-		
Part I only					<b>•</b>	. 🔲	
	corporations (including 1120-C filers), partnerships, REM ome tax returns	IICs, and t	rusts must use Form 7004 to reques	st an exter	ision of time		
Type or print	Name of exempt organization or other filer, see instru	ee instructions			Employer identification number (EIN) or		
print	BARBARA EMILY KNUDSON FOUN	ו∩דיית	N	$\mathbf{x}$	: 0		
File by the	Number, street, and room or suite no. If a P O box, s				27-224505 ecurity number (SSN		
due date for filing your	PO BOX 804				carry namber (core	•)	
return See Instructions	City, town or post office, state, and ZIP code. For a for SALEM, OR 97308	oreign add	fress, see instructions.				
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4	
		1					
Applicati	on	Return	Application			Return	
ls For		Code	Is For			Code	
Form 990		01	Form 990-T (corporation)			07	
Form 990	-BL	02	Form 1041-A			08	
Form 990	-EZ	01	Form 4720			09	
Form 990		04	Form 5227			10	
Form 990	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990	-T (trust other than above)	06	Form 8870			12	
	THE FOUNDATION						
	poks are in the care of $\triangleright$ PO BOX 804 - S2	ALEM,					
	one No. ► <u>503-949-0524</u>		FAX No.				
	organization does not have an office or place of busines				•	· 🗀	
	s for a Group Return, enter the organization's four digit	ר					
box ▶ [	. If it is for part of the group, check this box		ach a list with the names and EINs o		ers the extension is	s for.	
1 I re	quest an automatic 3-month (6 months for a corporation	•	•				
		it organiza	tion return for the organization name	ed above.	The extension		
_	or the organization's return for						
►l	X calendar year <u>2011</u> or						
►i	tax year beginning	, an	id ending		_ ·		
2 If th	ne tax year entered in line 1 is for less than 12 months, on the control of the c	check reas	on: Initial return	Final retui	'n		
3a If th	nis application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any				
	refundable credits See instructions.			3a	\$	<u> </u>	
	nis application is for Form 990-PF, 990-T, 4720, or 6069,	•					
	mated tax payments made. Include any prior year overg		<del>''</del>	3b	\$	<u> </u>	
	ance due. Subtract line 3b from line 3a. Include your pa	•	• •				
	using EFTPS (Electronic Federal Tax Payment System)			3c	\$	0.	
	If you are going to make an electronic fund withdrawal			orm 8879			
LHA F	or Privacy Act and Paperwork Reduction Act Notice.	see Instr	uctions.		Form 8868 (R	ev. 1-2012\	