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Form 990-PI

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

OMB No 1545-0052

2011

Department of the Treasury Internal Revenue Service

SCANNED NOV 2 8 2012

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

For cal	<u>endar</u>	r year 2011, or ta	ax year beginning	, 2011	and ending				
ROGU	E FC	OUNDATION				A		entification nur I フ1ちつ	mber
2320 OSU DRIVE NEWPORT, OR 97365					33-1217152 B Telephone number (see the instructions) 503-241-3800				
						С	If exemption	application is	pending, check here
G Che	eck all	I that apply:	Initial return	Initial Return of a for	mer public charity	D	1 Foreign orga	inizations, ched	ck here
		-	Final return Address change	Amended return Name change					ing the 85% test, check
H C	heck	type of organiza		1(c)(3) exempt private f	oundation	1	here and att	ach computation	on ►
	Sec	ction 4947(a)(1)	nonexempt charitable	trust Other taxable p	rivate foundation	E	If private for	undation status in 507(b)(1)(A)	was terminated
		ket value of all asset rt II. column (c), line	s at end of year JAC	counting method: X Counting method:	ash Accrual	_			,
► s	i Uiii i a	, , , , , ,	· L	other (specify) , column (d) must be or	cash basis)	F		ation is in a 60 in 507(b)(1)(B)	-month termination
	٤ Aı	nalysis of Re		(a) Revenue and	(b) Net investme	nt	(c) Adıu	sted net	(d) Disbursements
	E	cpenses (The	total of amounts in	expenses per books	income		inco		for charitable
	co sa	rumns (b), (c), a rily equal the an	and (d) may not neces- nounts in column (a)					1	purposes (cash basis only)
	(50	ee instructions).))	120 000	CELSE WITH CO	4366.0	" de alle 1 . "	E . miliónia	
	2	r-1 - 1	grants, etc, received (att sch) undn is not req to att Sch B	129,000.		***** *\$#*	* 74. Mar. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
	3	_	ings and temporary				3, 34, 34, 2		
	4	cash investment Dividends and inter-		38.	<u></u>	<u> 88.</u>		38.	
	l .	Gross rents.							
		Net rental income or (loss)		· (4) (4) (4) (4) (4) (4)		(j. 19	W NA		
R		Net gain/(loss) from	sale of assets not on line 10.			, c.			
E		Gross sales price for assets on line 6a			1. 1000年第十八年	(\$16) }			
E	To Capital gain net income (from Part IV, line 2). N 8 Net short-term capital gain U 9 Income modifications			TOWNS THE	Re rid	8/1 3 JAB.	2		
U			18 - 3 - 4 - 18 - 18 - 18 - 18 - 18 - 18 - 18	The Charles College	4-3			133,438,038,38	
E	10a	Gross sales less returns and							
) b	allowances Less Cost of	<u> </u>						
		goods sold . : Gross profit/(loss)	(att sch)				- 45-44 - 2-4	*** \$55 - 37 - 27*	
			attach schedule)		5 CAR				CONTRACTOR SOLD
	ł								History W.
		Total. Add lines	s 1 through 11.	129,038.	<u> </u>	<u> 38.</u>	<u> </u>	38.	4 · 人名默特克·美国第二十二年5
	13	Other employee sale							
	15		employee benefits.		RECI	=1/	ED_	7	
A D	16a	Legal fees (attach s	schedule)						
W		Accounting fees (at	•		18 NOA J	_	8		
0 1	1 .	Other prof fees (att	ach sch)		4 MOA I	<u> </u>	2012 0		
P S	17	Interest Taxes (attach schedule)(s	enetre)		0000				
O PERAT	19	Depreciation (a	attach		OGDE	N,	UT		
1 1	20	sch) and deple	tion						
N V G E	20	Occupancy . Travel, confere	nces, and meetings	1,740.	1,74	40.		1,740.	
A E N X D P	22	Printing and pu	ublications						
ĎÊ	23		s (attach schedule) SEE STATEMENT	466.	Δ.	66.		466.	
A EXPENSES	24		g and administrative		3,	 	<u> </u>	400.	
E S	~~	expenses. Add	l lines 13 through 23	2,206.	2,20		738 645 7.00 00	2,206.	
	25		, grants paid STMT 2	99,225.	traction and action	- 16	148 940 mile 1748	rather water of	99,225.
	26	Add lines 24 at	s and disbursements. nd 25	101,431.	2,20	06.		2,206.	99,225.
	1754	Subtract line 2	6 from line 12:	2: 95.4.4. *********************************					
	アグ	a Excess of reve and disbursem	enue over expenses nents	27,607.					
<u>'</u>	1		ome (if negative, enter -0-)	2.第2.2882 2242 28 22 28		0.	914 M 2045		PONTOPEN SAPCIONS
	1 6	C Adjusted net incom	ne (if negative, enter -0-)	EDIA SECURIO	LOWER CHARGE			0.	THE POST OF THE PARTY OF THE PA

Decreases not included in line 2 (itemize).

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

112,120

<u>5</u>

	d Losses for Tax on Investmen) How acquired	(C) Date acquired	(d) Date sold
(a) List and descr 2-story brick wareho	P — Purchase D — Donation	(month, day, year)	(month, day, year)		
la N/A					
b					
c					
<u>d</u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) m	
a					
<u>b</u>					
	- 	 			
<u>d</u> e					
	owing gain in column (h) and owned by	the foundation on 12/31/69		(1) Gains (Colu	ımn (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (ı) over column (ı), if any	g th	pain minus column (F an -0-) or Losses (fr	(), but not less
a					
b					
<u> </u>		·			
<u>d</u>					
2 Capital gain net income or (r	net capital loss) If gain, also If (loss), enti-	enter in Part I, line 7 er -0- in Part I, line 7	. 2		
3 Net short-term capital gain o	or (loss) as defined in sections 1222(5)	and (6):			
If gain, also enter in Part I, II	ine 8, column (c) (see instructions). If (loss), enter -0-	3		
	ler Section 4940(e) for Reduced	Tax on Net Investmen	t Income		
	e this part blank section 4942 tax on the distributable am Lialify under section 4940(e). Do not cor		period?	Yes	X No
1 Enter the appropriate amour	nt in each column for each year; see the	e instructions before making a	iny entries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asset:	s (col	(d) Distributior umn (b) divided	ratio by column (c))
2010	180,410.		751.		8.694039
2009	79,531.		796.		1.208751
2008	5,989.	55,	673.		0.107575
2007 2006					
		·			-
2 Total of line 1, column (d)			2		10.010365
3 Average distribution ratio for number of years the foundat	the 5-year base period — divide the to ion has been in existence if less than 5	tal on line 2 by 5, or by the years	3		3.336788
4 Enter the net value of nonch	naritable-use assets for 2011 from Part	X, line 5	4		34,885.
5 Multiply line 4 by line 3 .			5_		116,404.
6 Enter 1% of net investment	income (1% of Part I, line 27b)		_6		
7 Add lines 5 and 6		·	7		116,404.
8 Enter qualifying distributions			8		99,225.
If line 8 is equal to or greate	er than line 7, check the box in Part VI,	line 1b, and complete that pa	rt using a 19	6 tax rate. See t	he

1 a Exempt of Date of ru	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see legating foundations described in section 4940(d)(2), check here	เเรเรีย	CHON	12)		
Date of ru			2 - 100	10	, *	7.1.54
	herating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1. Ing or determination letter. (attach copy of letter if necessary — see instrs)		<u> </u>	S-8-1	فيدائين	87 × 361
h Domest	ic foundations that meet the section 4940(e) requirements in Part V,	1				0.
	ere Inandienter 1% of Part I, line 27b	•	É PYÉTÉ .		1300	34 P
	lomestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)					
	ler section 511 (domestic section 4947(a)(1) trusts and taxable ons only Others enter -0-).	2		هيني والمساك الأمالات	ARIAL STATE	0.
	es 1 and 2	3				0.
	A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
	ed on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				0.
	Payments:			1.3%	idiai - A	(day: 10)
	nated tax pmts and 2010 overpayment credited to 2011					
	foreign organizations – tax withheld at source 6b					
•	d with application for extension of time to file (Form 8868)					
•	withholding erroneously withheld 6d		retired to			
=	edits and payments. Add lines 6a through 6d	7	ALL DE VIEW	ANTONIA	<u> </u>	0.
	ny penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				_ - -
	If the total of lines 5 and 8 is more than line 7, enter amount owed .	9				0.
	nent. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid .	10				<u> </u>
	amount of line 10 to be Credited to 2012 estimated tax	11				
	Statements Regarding Activities					
	he tax year, did the foundation attempt to influence any national, state, or local legislation or did it			(200)	Yes	No
particip	ate or intervene in any political campaign?			1a		Х
b Did it sp	end more than \$100 during the year (either directly or indirectly) for political purposes			1 b		х
If the a	nswer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials put	lishe	ed			
or distri	buted by the foundation in connection with the activities.		_	1		
	foundation file Form 1120-POL for this year?			1c		_X
	e amount (if any) of tax on political expenditures (section 4955) imposed during the year:		^			
(1) On	the foundation . \$ 0. (2) On foundation managers \$ serion reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed of the control of th	n	0.			
	ion managers . \blacktriangleright \$ 0.	"		8.3	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	foundation engaged in any activities that have not previously been reported to the IRS? .			2	22.22	X
	attach a detailed description of the activities.	•	•	£2450g	(3)	<i>73</i> 00
•	·					
3 Has the	foundation made any changes, not previously reported to the IRS, in its governing instrument, articles poration, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes			3	***************************************	X
	foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	has it filed a tax return on Form 990-T for this year?			4b	N	/A
	a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	attach the statement required by General Instruction T.			級激	983	
	requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			*		
	nguage in the governing instrument, or					
_		£1 4				
● By St	ate legislation that effectively amends the governing instrument so that no mandatory directions that co he state law remain in the governing instrument?	nmcı		6		Х
	undation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV			7	Х	
	ne states to which the foundation reports or with which it is registered (see instructions)			2 332		数 注 数
OR			_			
	wer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	-	_			
בוו מוכים וויש	nate) of each state as required by General Instruction G? If 'No,' attach explanation			8b	Х	
(or desig						

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

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Par	ttWIFAtt 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		X
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address	13	X	
14	Website address ► N/A The books are in care of ► RICK PREST Telephone no. ► 541-	867-3	660	
15	Located at ► 2320 OSU DRIVE NEWPORT OR ZIP + 4 ► 97365 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	. N/A		
15	and enter the amount of tax-exempt interest received or accrued during the year.	. N/P		N/A
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the name of the foreign country ►			
Par	tWIIB 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.	925	Yes	No
1 a	During the year did the foundation (either directly or indirectly)		激激	
	(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?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		1444 1444 1444	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			
t	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b	N	/ <u>A</u>
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?	1c		<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			
ā	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?			
	If 'Yes,' list the years ► 20, 20, 20			
ŧ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions.)	2b	N	/A
(of 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			
3	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
i	o 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.)	3b	N	/A
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
I	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		<u>X</u>
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Form 990-PF (2011) ROGUE FOUNDATION	33-1217	152 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Maand Contractors (continued)	anagers, Highly Paid Em	ployees,
3 Five highest-paid independent contractors for professional services (see instructions)	. If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b)	Type of service	(c) Compensation
NONE		
		
Total number of others receiving over \$50,000 for professional services	>	0
	— 	
PartiX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information s organizations and other beneficiaries served, conferences convened, research papers produced, etc.	uch as the number of	Expenses
1 N/A		
1 1/1		
~		
2		
3		
		
4		
D 14Y5D C		
Part XB Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax	year on lines 1 and 2	Amount
1		
N/A		
2		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<u> </u>	0.
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33-1217152 Form 990-PF (2011) ROGUE FOUNDATION Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. purposes 1 a a Average monthly fair market value of securities. . 1 b **b** Average of monthly cash balances 1 c c Fair market value of all other assets (see instructions) ٦d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 2 n 2 Acquisition indebtedness applicable to line 1 assets 3 35,416. Subtract line 2 from line 1d . . Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) 531. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 34,885. Minimum investment return. Enter 5% of line 5 6 1,744. Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ► and do not complete this part.) 1 Minimum investment return from Part X, line 6 1.744 2a Tax on investment income for 2011 from Part VI, line 5 2a 2b b Income tax for 2011. (This does not include the tax from Part VI.) **2**c c Add lines 2a and 2b. 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 1,744 4 4 Recoveries of amounts treated as qualifying distributions. 5 744 Add lines 3 and 4 Deduction from distributable amount (see instructions)..... 6 7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 1,744 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1 a 99,225. **b** Program-related investments — total from Part IX-B . 1 b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes 2 Amounts set aside for specific charitable projects that satisfy the: За a Suitability test (prior IRS approval required) **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 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 instructions)

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

6 Adjusted qualifying distributions. Subtract line 5 from line 4. . . .

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Part:XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7				1,744.
 Undistributed income, if any, as of the end of 2011. a Enter amount for 2010 only . 			0.	
b Total for prior years. 20, 20, 20	Contraction of the Contraction o	0.		
3 Excess distributions carryover, if any, to 2011:	70t/40th/2017/18/61	Y Z GYSZGY ZOZOS	17.60 34 36 6 6 76 4	\$
a From 2006				
b From 2007 .				
c From 2008 . 3,215.				
d From 2009 76,241.				
e From 2010179, 372.				
f Total of lines 3a through e	258,828.			
4 Qualifying distributions for 2011 from Part				
XII, line 4: ► \$ 99, 225.			0	
a Applied to 2010, but not more than line 2a		### 199 #10 - 1998#### ########	U.	
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus (Election required — see instructions)	0.			
d Applied to 2011 distributable amount			4.4	1,744.
e Remaining amount distributed out of corpus	97,481.	3004 . SAME 2014/3/2	* W/EM 1120	CLY ON NEW YORK
5 Excess distributions carryover applied to 2011	0.			0.
(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:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	356,309.		16.25	
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut- ed 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 instructions			0.	
f Undistributed income for 2011. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012.				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a.	356,309.			
10 Analysis of line 9:				
a Excess from 2007 .				
b Excess from 2008 3, 215.				
c Excess from 2009 . 76, 241.				
d Excess from 2010 179, 372.				
e Excess from 2011 97, 481.	Not the Ball of the Ball of the Ball	。	Programme and Con-	2007年4年6月2日

Part※IV機 Private Operating Foundation	ione (see instri	ictions and Par	t VII-A guestion	9)	N/A
1a If the foundation has received a ruling or of					N/A
is effective for 2011, enter the date of the	ruling		_		14040()(5)
b Check box to indicate whether the foundate		erating foundation (4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year (a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
b 85% of line 2a .					
c 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					
e 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:					
a '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 of minimum investment return shown in Part X, line 6 for each year listed					
c '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	(Camalaka Abia			d ¢E 000	
Supplementary Information assets at any time during the	e year — see in	structions.)	organization na	ia \$5,000 or mor	e in
Information Regarding Foundation Managers at List any managers of the foundation who close of any tax year (but only if they have NONE	nave contributed m e contributed more	than \$5,000). (See	section 507(d)(2))		
b List any managers of the foundation who a partnership or other entity) of which the NONE	own 10% or more of foundation has a 1	of the stock of a co 0% or greater inter	rporation (or an equ rest	ally large portion of	the ownership of
2 Information Regarding Contribution, Gran Check here ► X if the foundation only requests for funds If the foundation make complete items 2a, b, c, and d	nakes contributions	to preselected cha	arıtable organızatıon		
a The name, address, and telephone number	er of the person to	whom applications	should be addresse	d:	
b The form in which applications should be	submitted and infor	rmation and materi	als they should inclu	ude	
c Any submission deadlines:		, <u>, , , , , , , , , , , , , , , , , , </u>			
d Any restrictions or limitations on awards,	such as by geograp	ohical areas, charita	able fields, kinds of	institutions, or other	factors:

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3 Grants and Contributions Paid During the Year or Approved for Future Payment									
5 Grants and Contributions Paid During the Te	If recognish to an industrial	ure raymen	ı						
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or						
	any foundation manager or	status of	Purpose of grant or contribution	Amount					
Name and address (home or business)	substantial contributor	recipient							
a Paid during the year									
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Total	; · 			 					
b Approved for future payment				1					
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	<u> </u>	<u> </u>	<u></u>						
Total			. ► 3t	J					

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

Enter gross amounts unless otherwise indicated.		Unrelat	ed business income	Exclude	d by section 512, 513, or 514	(e)	
1	Progr	am service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)
' a	•						
b							
С					ļ		
d					ļ		
е							
f		and contracts from government agencies					
_		pership dues and assessments			 		
3		t on savings and temporary cash investments			1	38.	
4	Divide	ends and interest from securities					
5		ental income or (loss) from real estate:			\$5. J.4	Werder After	
		financed property.	ļ		ļ.—.		
_		ebt-financed property					
6 7		tal income or (loss) from personal property investment income					
8		(loss) from sales of assets other than inventory					
9		come or (loss) from special events .					
10	Gross	profit or (loss) from sales of inventory .					
11	Other	revenue.					
a							
b							
d							
e							
12	Subto	tal Add columns (b), (d), and (e)	AND HA			38.	
		Add line 12, columns (b), (d), and (e)				. 13	38.
(See	works	heet in line 13 instructions to verify calculation	ons.)				
Par	t XVI	B Relationship of Activities to the	Accompl	ishment of Exemp	t Purp	oses	
Lin	e No. ▼	Explain below how each activity for which in accomplishment of the foundation's exempt	ncome is rep	orted in column (e) of F other than by providing f	Part XVI-	A contributed important such purposes). (See i	ly to the nstructions.)
	I/A		<u> </u>				
	.,						
							
							
							
			·				
							
							For- 002 PF (0011)
BAA	١.		TEE	EA0502L 07/14/11			Form 990-PF (2011)

RaitXVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

de re a Tr (1) (2) b OI (1) (2) (3) (4) (5) (6)	scriber lating the lat	d in section 501(c) o political organiz of from the reportir of assets of assets to a no hases of assets from al of facilities, equipulations or loan guarante of facilities, equipulations of facilities, equipulations of facilities, equipulations of facilities, equipulations	of the Code (ations? on foundation to oncharitable ex om a noncharita uipment, or oth gements ees es or members ment, mailing i	hip or fundraising s ists, other assets, o	501(c)(3) organized exempt organized in the control organized in the co	ation of.	ction 527,	1a (1) X 1a (2) X 1b (1) X 1b (2) X 1b (3) X 1b (4) X 1b (5) X 1b (6) X 1c X
th	e aood	s, other assets, or	services giver	n by the reporting f	oundation. If th	e foundation rece	eived less than fair r	fair market value of market value in
							ssets, or services re	s, and sharing arrangements
(a) Line N/A	no.	(b) Amount involved	(c) Name	of noncharitable exemp	t organization	(a) Description	i di transfers, transaction	s, and snaring arrangements
N/H								
			+					
								
					·			
								
_								
				·····				
						<u> </u>		
de	escribe	undation directly of in section 501(c) complete the follow	of the Code (liated with, or relat other than section	ed to, one or m 501(c)(3)) or in	ore tax-exempt of section 527?	organizations 	Yes X No
<u></u>		Name of organiza			of organization		(c) Description	of relationship
N/A		or organize		1 .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	o. o.go.meanon		1-7 - 300 1 1 1 1 1	o o.a.torioriip
/								
							· <u> </u>	
Sign Here	Under pocorrect,	enalties of perjury, I dec and complete Declarati	clare that I have exa		WISTIT	X Pres	-	May the IRS discuss this return with the preparer shown below (see instructions)?
	Signa	ture of officer or trustee			Date /	Title		X Yes No
		Print/Type preparer's i		Preparer's sign	•	Date	Check [if PTIN
Paid		CATHERINE I	M. ROTE		inch Rot	ع ١١/١4		
Prepa	rer	Firm's name	SCHULTZ &			 	Firm's EIN ► 9	3-1234815
Use C		Firm's address	9700 S.W.	CAPITOL HWY	Y. STE.285	<u> </u>		
		<u> </u>	PORTLAND,	OR 97219			Phone no	(503) 244-8879
BAA								Form 990-PF (2011)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2011

Name of the organization		Employer Identification number
ROGUE FOUNDATION		33-1217152
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	1
	4947(a)(1) nonexempt charitable trust not t	reated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treate	ed as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covere Note. Only a section 501(c)(7), (8),	ed by the General Rule or a Special Rule or (10) organization can check boxes for both the General F	Rule and a Special Rule. See instructions
General Rule		
X For an organization filing Form contributor. (Complete Parts I a	990, 990-EZ, or 990-PF that received, during the year, \$5,00 and II.)	00 or more (in money or property) from any one
Special Rules		
509(a)(1) and $170(b)(1)(A)(vi)$.	ation filing Form 990 or 990-EZ that met the 33-1/3% suppor and received from any one contributor, during the year, a co m 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complet	entribution of the greater of (1) \$5,000 or
total contributions of more than	(10) organization filing Form 990 or 990-EZ that received fro \$1,000 for use exclusively for religious, charitable, scientific dren or animals. Complete Parts I, II, and III.	m any one contributor, during the year, c, literary, or educational purposes, or
contributions for use exclusively	(10) organization filing Form 990 or 990-EZ that received froight of the contribution of the total contributions that were received during the year for the parts unless the General Rule applies to this organization.	ons did not total to more than \$1,000 for an exclusively religious, charitable, etc.
religious, charitable, etc, contrib	outions of \$5,000 or more during the year	► \$
990-PF) but it must answer 'No' on	t covered by the General Rule and/or the Special Rules does Part IV, line 2, of its Form 990; or check the box on line Ho not meet the filing requirements of Schedule B (Form 990,	of its Form 990-EZ or on Part L line 2 of its
BAA For Paperwork Reduction A 990EZ, or 990-PF.	ct Notice, see the Instructions for Form 990,	Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2011)	Page	1 of 1 of Part 1
•	FOUNDATION	1	217152
	Contributors (see instructions) Use duplicate copies of Part I if additional s	pace is needed	
(a) Number	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution
1	ROGUE RIVER BREWING COMPANY 2320 OSU DRIVE NEWPORT, OR 97365	\$129,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2011)

1 to 1 of Part II
Employer identification number

Name of organization

ROGUE FOUNDATION

33-1217152

(a) lo. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
N/A			
		\$\$	
(a) D. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a)	(b)	(c)	(d)
(a) lo. from Part I	Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) o. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
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(a) o. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) lo. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	

	(Form 990, 990-EZ, or 990-PF) (2011)			Page	1to	1 of Part III
	FOUNDATION				33-1217	
Rart III	Exclusively religious, charitable, excreased and compared that total more than	tc, individual contributio \$1,000 for the year.Comple	ns to secti ete cols (a) th	on 501(c)	(7), (8), or (10) og line entry
	For organizations completing Part III, enter contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional	total of exclusively religious, ch (Enter this information once. S			► \$	N/A
(a)	(b)	(c)			(d)	
No. from Part I	Purpose of gift	Use of gift		Des	cription of hov	v gift is held
	N/A					
				ļ		
		(e)		<u>. </u>		
		Transfer of gift				
	Transferee's name, addres	s, and ZIP + 4	Rela	itionship of	transferor to	transferee
			 			
(a)	(b)	(c)			(d)	
No. from Part I	Purpose of gift	Use of gift		Des	cription of hov	v gift is held
	(e)					
		Transfer of gift				
	Transferee's name, addres	s, and ZIP + 4	Rela	tionship of	transferor to	transferee
						
(a)	(b)	(c)			(d)	
No. from Part I	Purpose of gift	Use of gift		Des	cription of hov	v gift is held
		(e)	_	<u> </u>		
		Transfer of gift				
	Transferee's name, addres	Relationship of transferor to transferee				
			·			
						
						
(a)	(b) (c)				(d)	
No. from Part I	Purpose of gift	Use of gift		Des	cription of hov	v gift is held
Parti						
	(e)					
	}					
	Transferee's name, addres	Transfer of gift s, and ZIP + 4	Rela	ationship o	f transferor to	transferee
						

2	n	1	1

11/14/12

FEDERAL STATEMENTS

PAGE 1

CLIENT 65119

ROGUE FOUNDATION

33-1217152

500.

500.

07:26AM

STATEMENT 1 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OFFICE SUPPLIES & POSTAGE TAXES & LICENSES	TOTAL	\$ 241. 225. \$ 466.	\$ 241. 225. \$ 466.	\$ 241. 225. \$ 466.	\$ 0.

STATEMENT 2 FORM 990-PF, PART I, LINE 25 **CONTRIBUTIONS, GIFTS, AND GRANTS**

CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

CLASS OF ACTIVITY:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

DONEE'S NAME:

INDEPENDENCE HOP & HERITAGE FESTIVAL

DONEE'S ADDRESS: 311 MONMOUTH AVENUE INDEPENDENCE, OR 97351

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CHARITABLE

OREGON SPECIAL OLYMPICS

5901 SW MACADAM AVE, SUITE 200

PORTLAND, OR 97239

NONE

501 (C) (3)

NOT PF

ROSE CITY SOFTBALL ASSOCIATION

5710 SE KNIGHT ST PORTLAND, OR 97206

NONE

NOT PF

NONE

5,000.

EDUCATIONAL

OREGON CHEESE GUILD PO BOX 3606

CENTRAL POINT, OR 97502

NONE

CHARITABLE

NEWPORT FISHERMAN'S WIVES 936 SW HURBERT PO BOX 9791

NEWPORT, OR 97365

NONE

NOT PF

OFFICER STEVE DODDS FUND

5,000.

1,000.

CLASS OF ACTIVITY:

DONEE'S NAME:

1011 FEI	DERAL STATEMENTS	PAGE S	
LIENT 65119	ROGUE FOUNDATION		
STATEMENT 2 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS		07.26AI	
ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	;	\$ 300.	
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	NOT PF JAPAN-AMERICAN SOCIETY OF OREGON 221 SW 2ND AVE, #202 PORTLAND, OR 97209		
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE	300.	
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	EDUCATIONAL ROGUE SCHWEPP SCHOLARSHIPS 2320 OSU DRIVE		
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NEWPORT, OR 97365 NONE	18,500.	
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CIVIC TRAVEL SALEM 181 HIGH STREET SALEM, OR 97301		
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE	2,500.	
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	NOT PF ROGUE SOFTBALL TEAM 2320 OSU DRIVE NEWPORT, OR 97365		
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE	1,500.	
	TOTAL 3	\$ 99,225.	
STATEMENT 3 FORM 990-PF, PART III, LINE 3 OTHER INCREASES			
CORRECT COSTING OF PRIOR YRS NON	N-CASH CONTRIBUTIONS	54,679. 54,679.	

Form **8868** (Ret 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.

OMB No. 1545-1709

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Partil : Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions Employer identification number (EIN) or Type or print X 33-1217152 ROGUE FOUNDATION File by the due date for Number, street, and room or suite number. If a P.O. box, see instructions Social security number (SSN) filing your return See 2320 OSU DRIVE instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions NEWPORT, OR 97365 Enter the Return code for the return that this application is for (file a separate application for each return) 04 **Application** Return Application Return Is For Code Is For Code Form 990-T (corporation) Form 990 01 07 Form 990-BL 02 Form 1041-A 80 01 Form 4720 09 Form 990-EZ Form 990-PF 04 Form 5227 10 05 Form 990-T (section 401(a) or 408(a) trust) Form 6069 11 Form 990-T (trust other than above) Form 8870 12 The books are in the care of PRICK PREST Telephone No ► 541-867-3660 FAX No. ► If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, . Fig. 1. If it is for part of the group, check this box.. check this box the extension is for 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until _ 8/15 _ _ _, 20 _12 _, to file the exempt organization return for the organization named above The extension is for the organization's return for: X calendar year 20 11 or tax year beginning ____, 20 ___, and ending 2 If the tax year entered in line 1 is for less than 12 months, check reason. | Initial return Final return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 0. nonrefundable credits. See instructions 3a \$ b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax 3b|\$ payments made. Include any prior year overpayment allowed as a credit 0. c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using 3c \$ EFTPS (Electronic Federal Tax Payment System). See instructions 0. Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for

payment instructions

Form 886	8 (Rev 1-2012)				Page 2
• If you	are filing for an Additional (Not Automatic) 3-Mor	nth Extensio	n, complete only Part II and check	k this box	. ► X
Note. Onl	y complete Part II if you have already been grante	d an automa	atic 3-month extension on a previo	ously filed Form 8868.	
	are filing for an Automatic 3-Month Extension, co				
Partill	Additional (Not Automatic) 3-Month Ext	ension of	Time. Only file the original	(no copies needed)
			Enter filer's	s identifying number, s	
	Name of exempt organization or other filer, see instructions			Employer identification num	ber (EIN) or
Type or				X 33-1217152	
print					
File by the	Number, street, and room or suite number. If a P.O box, see instructions			Social security number (SSN	"
extended due date for	SCHULTZ & CROUSE, P.C.			l	
filing the return See	9700 S.W. CAPITOL HWY. STE.285 City, town or post office, state, and ZIP code For a foreign address, see instructions				
instructions		555, See IIISHUCH	UIS		
	PORTLAND, OR 97219				
Catan tha	Deturn ands for the return that this employees in f	or Hilo o co	earste application for each return)		04
Enter the	Return code for the return that this application is f	or (file a sep	parate application for each return)	• • • • • • • • • • • • • • • • • • • •	04
Annlinetic		Datum	Application		Detum
Application Is For	on	Return Code	Application Is For		Return Code
Form 990		01			
Form 990-	BL	02	Form 1041-A	2 . Com c. 2 2 10 10 10 10 10 10 10 10 10 10 10 10 10	08
Form 990-		01	Form 4720	·	09
Form 990-		04	Form 5227		10
Form 990-	T (section 401(a) or 408(a) trust)	05	Form 6069		11
	T (trust other than above)	06	Form 8870		12
If the oIf thiswhole ground	organization does not have an office or place of but is for a Group Return, enter the organization's four up, check this box. ► If it is for part of the group.	siness in the digit Group	e United States, check this box Exemption Number (GEN).		his is for the
members	the extension is for.	 .			
5 For 6 6 If the 7 State	uest an additional 3-month extension of time until calendar year 2011, or other tax year beginning tax year entered in line 5 is for less than 12 months that year entered in line 5 is for less than 12 months that year entered in detail why you need the extension THE DITIONAL TIME IS THEREFORE REQUE	ths, check re	, 20, and ending eason: Initial return ACCOUNTING HAS NOT YET	BEEN COMPLETE	-
nonr	s application is for Form 990-BL, 990-PF, 990-T, 4 efundable credits. See instructions	::	<u> </u>	8a \$	0.
payn	s application is for Form 990-PF, 990-T, 4720, or 6 nents made. Include any prior year overpayment al Form 8868	llowed as a	iny refundable credits and estimation credit and any amount paid previo	ed tax susly 8b\$	0.
c Bala EFTF	nce due. Subtract line 8b from line 8a. Include you PS (Electronic Federal Tax Payment System). See	ır payment v ınstructions	with this form, if required, by using	. 8c \$	0.
	Signature and Verific	ation mus	st be completed for Part II o	only.	
	es of perjury, I declare that I have examined this form, including accomplete, and that I am authorized to prepare this form		dules and statements, and to the best of my k		
Signature	Carmine M Rote Tille >	CPA		Date	14/12
BAA		FIFZ0502L	07/29/11	Form 8868	(Rev 1-2012)