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SCANNED MAY 2 4 2012]

**50rm** 990-PF Department of the Treasury

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

OMB No 1545-0052

Fo	r cal	endar year 2011 or tax year beginning			12/	01 ,2011	, and endi	ng		12/31,2011
_	Name	of foundation				<del></del>			A Employer identific	ation number
I	WAGI	MORE FOUNDATION AGENCY 0800	15737	770	00				45-3	3660440
	Numb	er and street (or PO box number if mail is not deli	vered to s	ered to street address) Room/su			Room/su	te	B Telephone number	(see instructions)
								İ	(50	3) 275-4327
P O BOX 3168										
_	City o	r town, state, and ZIP code								
									C If exemption application pending, check here	
]	POR'	TLAND, OR 97208							<b>Fg</b> ,	
G	Che	ck all that apply X Initial return			Initial return	of a former p	oublic char	ity	D 1 Foreign organization	ons, check here
		Final return	L		Amended ret	urn			2 Foreign organization	
		Address change			Name change	е			85% test, check he computation	
Н	Che	ck type of organization: X Section 50	1(c <u>)(3)</u> e	exe	mpt private f	oundation			E If private foundation s	status was terminated
	s	ection 4947(a)(1) nonexempt charitable trust		Oth	er taxable pr	vate foundat	ion		under section 507(b)	- i i
ı	Fair	market value of all assets at end JAcc	ounting	m	ethod: X Ca	ashAcc	rual		F If the foundation is in	a 60-month termination
	of ye	ear (from Part II, col. (c), line	Other (s	spe	cify)			_	under section 507(b)	1)(B), check here . >
_	16)	▶ \$ 666. (Part	I, colun	nn (	d) must be or	cash basis ,	) 			
P	art l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	e (a)	) Re	venue and	(b) Net inve	estment	lc	) Adjusted net	(d) Disbursements for charitable
		may not necessarily equal the amounts in	e		enses per oooks	incon		,-	income	purposes
_		column (a) (see instructions).)								(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)  if the foundation is <b>not</b> required to	·		64,000.					
ł	2	Check ► attach Sch B	.							
j	3	Interest on savings and temporary cash investments	<u> </u>		-			· · · · · ·		
	4	Dividends and interest from securities								
i		Gross rents	·							
		Net rental income or (loss)	-							
힂		Net gain or (loss) from sale of assets not on line 10 -Gross.sales price for all								
9	$\supset \square$	assetsjon line 6a	-							
송		Capital gain net income (from Part IV, line 2)	-				<del></del>		<del></del>	
	- 8 <i>1.1.</i> 1√	Net short-term capital gain	·							
	IVI94 ∤ 10 a	Income / rijó difications · · · · · · · · · · · · · · · · · · ·	` <del>                                    </del>							
_		and allowances								
0		Less Cost of goods sold .								<del>.</del>
, <u>1</u>	11	Gross profitor (loss) (attach schedule) Other income (attach schedule)	•							
	12	Total. Add lines 1 through 11			64,000.					
+	13	Compensation of officers, directors, trustees, etc.	1							
	14	Other employee salaries and wages					NONE		NONE	
es	15	Pension plans, employee benefits					NONE		NONE	
Expenses		Legal fees (attach schedule)								
ď	b	Accounting fees (attach schedule)								
		Other professional fees (attach schedule)								
and Administrative	17	Interest				,,,				
stra	18	Taxes (attach schedule) (see instructions)								
ini	19	Depreciation (attach schedule) and depletion								
dm,	20	Occupancy								
Υp	21	Travel, conferences, and meetings					NONE		NONE	
	22	Printing and publications			_		NONE		NONE	<del></del>
ng	23	Other expenses (attach schedule)	.							
Operating	24	Total operating and administrative expenses	i.							
be		Add lines 13 through 23	•				NONE		NONE	
J	25	Contributions, gifts, grants paid			63,334					63,334
_	26_	Total expenses and disbursements Add lines 24 and 2	5		63,334		NONE		NONE	63,334
	27	Subtract line 26 from line 12 <sup>-</sup>							ļ	
	l .	Excess of revenue over expenses and disbursements .			666					
	ı	Net investment income (if negative, enter -0-								
		Adjusted net income (if negative, enter -0-).	. 1			I	l			

Part	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	year
	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
2	Savings and temporary cash investments		666.	<u>666</u> .
3	Accounts receivable			
	Less: allowance for doubtful accounts ▶			
4	Pledges receivable ▶			
	Less allowance for doubtful accounts ▶			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons (attach schedule) (see instructions)			
7	Other notes and loans receivable (attach schedule)			
	Less. allowance for doubtful accounts ▶NONE			
. 8	Inventories for sale or use			
Assets 0 10 %	Prepaid expenses and deferred charges			
S 10 a	Investments - U.S. and state government obligations (attach schedule).			
71	Investments - corporate stock (attach schedule)		·	<u> </u>
	Investments - corporate bonds (attach schedule)			· · · · · · · · · · · · · · · · · · ·
11	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation (attach schedule)		·	
12	Investments - mortgage loans	1	·	
13 14	Investments - other (attach schedule)		-	
'	equipment basis Less accumulated depreciation			
	(attach schedule)			
15	Other assets (describe			
16	Total assets (to be completed by all filers - see the			
	instructions Also, see page 1, item I)		666.	<u>666</u> .
17	Accounts payable and accrued expenses			
18	Grants payable			
<u>s</u> 19	Deferred revenue			
<b>∄</b> 20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities 20 21 22	Mortgages and other notes payable (attach schedule)			
_ 22	Other liabilities (describe			
23	Total liabilities (add lines 17 through 22)			
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
S 24	Unrestricted			
25	Temporarily restricted	· · · · · ·		
g 26	Permanently restricted	_		
Net Assets or Fund Balances 24 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Foundations that do not follow SFAS 117,			
리	check here and complete lines 27 through 31 ▶ X			
ි 27	Capital stock, trust principal, or current funds		666.	
\$ 28	Paid-in or capital surplus, or land, bldg, and equipment fund	-		
S 29	Retained earnings, accumulated income, endowment, or other funds			
30	Total net assets or fund balances (see instructions)		666.	
ž 31	Total liabilities and net assets/fund balances (see			
	instructions)		666.	
	Analysis of Changes in Net Assets or Fund I			
	al net assets or fund balances at beginning of year - Part			
	l-of-year figure reported on prior year's return)			
	er amount from Part I, line 27a		2	666.
	er increases not included in line 2 (itemize)			
	d lines 1, 2, and 3			666.
5 Dec	creases not included in line 2 (itemize)		5	
6 Tot	al net assets or fund balances at end of year (line 4 minus lir	ne 5) - Part II, column (b)	, line 30 6	666.

Part IV	Capital Gains	and Losses for Tax on Inv	restment Income			
	(a) List and 2-story bi	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )		
la						
b			==			
С	_	· · ·		ļ	<u> </u>	
d	·-					
<u>e</u>			-T	ļ		
(e) Gros	s sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	•
<u>a</u>					- "	
<u>b</u>						
<u>c</u> d						
<u>ч                                    </u>						
	te only for assets s	howing gain in column (h) and owned	hy the foundation on 12/31/69	(1)	Carra 10 at 11 a	
	(i) F M V as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col (i) over col (j), if any				Gains (Col. (h) g: (k), but not less t Losses (from co	than -0-) <b>or</b>
			3,, ,		<del></del>	<del></del>
a b						<del></del>
<u>р</u>						<del></del>
d				-		
<u>а</u> е				1		<del></del>
Net short-	so enter in Par	or (loss) as defined in sections 12 t I, line 8, column (c) (see ins	tructions). If (loss), enter -0- in $\}$	2		
				3	N,	
Vas the four	dation liable for t		butable amount of any year in the b	ase period	d?	Yes No
		not qualify under section 4940(e)	Do not complete this part. ; see the instructions before making	ony ontri		
i Enter the	(a)		1	any entri	es (d)	
Calendar year (or	eriod years tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
	010			<del> </del>		<del></del> -
	009			<del> </del>	_	
	008			<del> </del>	<del></del>	
•	007				<del>.</del>	
	006		<u> </u>	<del>                                     </del>		
Average		for the 5-year base period - divide	the total on line 2 by 5, or by the sthan 5 years	3		
Enter the	net value of non-	charitable-use assets for 2011 fro	om Part X, line 5	4	<del></del>	· · ·
Multiply	ine 4 by line 3			5	- <del></del>	
Enter 1%	of net investmen	it income (1% of Part I, line 27b)		6		
Add lines	5 and 6			7	, <u></u>	
B Enter qua If line 8 i Part VI ins	s equal to or gre	ons from Part XII, line 4 eater than line 7, check the box	ın Part VI, line 1b, and complete t	8 that part	using a 1% tax	rate. See th

Refunded >

Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . . . . . . . . .

Enter the amount of line 10 to be Credited to 2012 estimated tax ▶

Part	VII-A Statements Regarding Activities	,		,
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
	or intervene in any political campaign?	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the			
	instructions for definition) <sup>7</sup>	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶\$(2) On foundation managers ▶\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7		<del> </del>
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
Ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	<u>-</u>	ļ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete			Ι,

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

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10

and addresses . . .

X

<u>3b</u>

4a

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise

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)

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . . .

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?

ar a	Statements Regarding Activities for	Which Form 4/	20 May Be Requi	rea (continuea)						
5a	During the year did the foundation pay or incur any amount	nt to								
	(1) Carry on propaganda, or otherwise attempt to influence		4945(e))?	. Yes X No	,					
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on,									
	directly or indirectly, any voter registration drive? Yes X No									
	(3) Provide a grant to an individual for travel, study, or other				.					
	(4) Provide a grant to an organization other than a									
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s				.					
					'					
	(5) Provide for any purpose other than religious, ch				_					
	purposes, or for the prevention of cruelty to children of				1 1					
b	If any answer is "Yes" to 5a(1)-(5), did any of the									
	Regulations section 53.4945 or in a current notice regard			1 1	5b					
	Organizations relying on a current notice regarding disaste									
C	If the answer is "Yes" to question 5a(4), does the			1 1 1 1						
	because it maintained expenditure responsibility for the gi	rant <sup>7</sup>		Yes No	>					
	If "Yes," attach the statement required by Regulations section	ion 53 4945-5(d)								
6a	Did the foundation, during the year, receive any fund	ls, directly or indire	ctly, to pay premium							
	on a personal benefit contract?			. Yes X No	>					
b	Did the foundation, during the year, pay premiums, directl	y or indirectly, on a p	ersonal benefit contrac	t <sup>7</sup>	6b	X				
	If "Yes" to 6b, file Form 8870									
7 a	At any time during the tax year, was the foundation a part	y to a prohibited tax	shelter transaction?	. Yes X No	,					
b	If "Yes," did the foundation receive any proceeds or have a	any net income attribi	utable to the transaction	n <sup>7</sup>	7ь					
	Information About Officers, Directors	, Trustees, Foun	dation Managers,	Highly Paid Empl	oyees,					
	and Contractors  List all officers, directors, trustees, foundation ma	nagare and their	compansation Isaa	inetructions)		<del></del>				
<u> </u>		(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expens	e account				
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allo					
 4:4:3	STATEMENT 1		-0-	-0-		- 0 -				
2	Compensation of five highest-paid employees	lother than thos	se included on line	e 1 - see instruction	ons). If no	ne, enter				
_	"NONE."					·				
		(b) Title, and average	430	(d) Contributions to employee benefit	(e) Expens	e account,				
(a	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred compensation	other allo					
			**	compensation		<del></del>				
703			NONE	NONE	N.	ONE				
101	ID	-,	NONE	NOND		OND				
					<del>-</del>					
		ļ				<del></del>				
		<u></u>		l	<u> </u>	LATONTO				
ota	I number of other employees paid over \$50,000 .					NONE				

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Part VIII	Information About Officers, Directors, Trustees, Foundation Ma and Contractors (continued)	nagers, Highly Paid Emplo	yees,
3 Five I	nighest-paid independent contractors for professional services (see instru	ictions). If none, enter "NONE	n
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			NONE
Total numb	er of others receiving over \$50,000 for professional services	<b>&gt;</b>	NONE
Part IX-A	Summary of Direct Charitable Activities		
	ndation's four largest direct charitable activities during the tax year. Include relevant statistical s and other beneficiaries served, conferences convened, research papers produced, etc	information such as the number of	Expenses
1NONE_			
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see instructions)		
1 NONE	two largest program-related investments made by the foundation during the tax year on lines 1 and	d 2	Amount
2			
All other pro	gram-related investments. See instructions		
3NONE			
Total. Add	ines 1 through 3		5 000 PE (0011)

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreignsee instructions.)	gn foundat	ions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
a	Average monthly fair market value of securities	1a	NONE
b	Average of monthly cash balances	1b	NONE
C	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	NONE
е			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	NONE
4	Subtract line 2 from line 1d  Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
		4	NONE
5	Instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	NONE
6	Minimum investment return. Enter 5% of line 5	6	NONE
Pa	Tt 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 process.	part.)	
1	Minimum investment return from Part X, line 6	1	NONE
2a	Tax on investment income for 2011 from Part VI, line 5		
b			
C	Add lines 2a and 2b	2c	NONE
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	NONE
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	NONE
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		110113
•	line 1 · · · · · · · · · · · · · · · · · ·	7	NONE
		<u>,                                    </u>	
Pa	rt 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	63,334.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
-	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	63,334.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
-	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	63,334.
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when call		
	qualifies for the section 4940(e) reduction of tax in those years.		

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Pai	t XIII Undistributed Income (see instru	ıctions)	17.		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2011 from Part XI,	Corpus	Years prior to 2010	2010	2011
	line 7				NONE
2	Undistributed income, if any, as of the end of 2011				
а	Enter amount for 2010 only			NONE	
b	Total for prior years 20, 20, 20		NONE		
3	Excess distributions carryover, if any, to 2011				
	From 2006 NONE				
b	From 2007 NONE				
C	From 2008				
d	From 2009 NONE				
	From 2010 NONE	270277			
	Total of lines 3a through e	NONE			
4	Qualifying distributions for 2011 from Part XII,				
	line 4 ▶ \$ 63,334.			NONE	
а	Applied to 2010, but not more than line 2a			NONE	<del>-</del>
b	Applied to undistributed income of prior years		NONE		
	(Election required - see instructions)		NOINE		
С	Treated as distributions out of corpus (Election	NONE			
	required - see instructions)	NONE			NONE
	Applied to 2011 distributable amount	63,334.			NONE
е 5	Remaining amount distributed out of corpus	NONE			NONE
J	(If an amount appears in column (d), the same	NONE			110111
	amount must be shown in column (a) )				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e. Subtract line 5	63,334.			
٠ د	Prior years' undistributed income. Subtract				
b	line 4b from line 2b		NONE		
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		NONE		· · · · · · · · · · · · · · · · · · ·
đ	Subtract line 6c from line 6b. Taxable				
	amount - see instructions		NONE		
е	Undistributed income for 2010. Subtract line 4a from line 2a. Taxable amount - see				
	instructions	· -		NONE	
f	Undistributed income for 2011. Subtract lines				
	4d and 5 from line 1. This amount must be				NONE
	distributed in 2012			-	NONE
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	NONE			
		NONE			
8	Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	NONE			
•		NONE			· · · · · · · · · · · · · · · · · · ·
9	Excess distributions carryover to 2012.  Subtract lines 7 and 8 from line 6a	63,334.			
10	Analysis of line 9:	03,331.			
	Excess from 2007 NONE				
	Excess from 2008 NONE				
	Excess from 2009 NONE				
	Excess from 2010 NONE				
	Excess from 2011 63,334.				
_					Form 990-PE /2011)

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Pa	rt XIV Private Oper	ating Foundations	(see instructions and	l Part VII-A, questic	on 9)	NOT APPLICABI
1 a	If the foundation has i	•		• •	9	
	foundation, and the ruling					
b	Check box to indicate whe		private operating foundat	ion described in section	n   4942	j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year	<del> </del>	Prior 3 years		(e) Total
	justed net income from Part I or the minimum investment	(a) 2011	(b) 2010	(c) 2009	(d) 2008	
	return from Part X for each					
	year listed					
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					
е	of exempt activities					
	directly for active conduct of exempt activities Subtract line					
3	2d from line 2c					
_	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying					
	under section					
b	4942(j)(3)(B)(i)			***		
	enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test - enter	· ····				T
	(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 sup-					
	port from an exempt organization					
	(4) Gross investment income.					
Pa			omplete this part	only if the found	ation had \$5,000	or more in assets
		uring the year - se				
1	Information Regarding					
а	List any managers of t before the close of any					ed by the foundation
		tax year (but only if the	icy have contributed in	iore than \$5,000). (S	see section 507(d)(2).)	
_	N/A List any managers of t	d . f. d.d. l	400/			
D	ownership of a partners					large portion of the
	N/A					
2	N/A Information Regarding	Contribution, Grant,	Gift, Loan, Scholarship	o, etc., Programs:		
			makes contributions t			
	unsolicited requests fo other conditions, comp			nts, etc. (see instruct	tions) to individuals o	r organizations under
а	The name, address, and			applications should b	pe addressed	
	SEE STATEMENT 2					
b	The form in which appl			n and materials they	should include:	
	SEE ATTACHED ST	'ATEMENT FOR L	INE 2			
c	Any submission deadling	nes:		······································		

SEE ATTACHED STATEMENT FOR LINE 2 JSA 1E1490 1 000

Form 990-PF (2011)

SEE ATTACHED STATEMENT FOR LINE 2

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

3 Grants and Contributions Paid Durin	of the Vear or Appro	wed for F	Litura Payment	
3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	If recipient is an individual,	Foundation	uture rayment	
Name and address (home or business)	any foundation manager	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor			
,				
SEE STATEMENT 4				
			:	
Total			▶ 3a	63,334.
<b>b</b> Approved for future payment				
Total	<del></del>		▶ 3b	

Part XVI-A Analysis of Income-Produ			1=	5.0 5.0	(a)
Enter gross amounts unless otherwise indicated	(a)	(b)	(c)	(d)	(e) Related or exempt function income
1 Program service revenue.	Business code	Amount	Exclusion code	Amount	(See instructions)
a					
b		······			
<u> </u>	<u></u>		<del>-</del>	-	
d			<del></del>		
e			_		
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments 4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate		<u> </u>	_		
a Debt-financed property	-				
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
Gain or (loss) from sales of assets other than inventory					
Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue a					
b					
c					
d					
e					
ine No. Explain below how each activit accomplishment of the foundation					
	<del></del>				
		1. M. I.			
	74.4				
		NOT APPLICAB	LE		
				****	
					18-
	·				
	<del>.</del>				
	_				

JSA 1E1492 1 000

Form 9	90-PF (2	(011)				4	5-3660440			Pa	ge <b>1</b> :
Part	,XVII	Information F Exempt Orga		ransfers To and	d Transact			os With Non	charit	table	!
1	Did the	e organization direct	tly or indirectly	engage in any of	the followin	g with any	other organiza	tion described		Yes	No
		ion 501(c) of the Co zations?	ode (other than	section 501(c)(3)	organization	s) or in se	ction 527, relat	ing to political			
	_	ers from the reportin	a foundation to	a a nanaharitahla a	wamnt araan	ization of					
		sh	_						1a(1)		Х
									1a(1)		X
		ner assets transactions:	• • • • • • • •		· · · · · · · ·				14(2)	-	
	-	es of assets to a non	scharitable ava	mnt organization					1b(1)		Х
		chases of assets from							1b(2)		X
		ntal of facilities, equi							1b(2)		- <u>X</u>
		mbursement arrange							1b(4)	1	X
		ans or loan guarante							1b(5)		X
		formance of services							1b(6)		X
		g of facilities, equipm							1c		X
		answer to any of th								air m	
		of the goods, other									
		n any transaction of									
(a) Lir		(b) Amount involved	Т	noncharitable exempt o			iption of transfers, tr				
				·	<del>-</del>			·		<u> </u>	
	·								*		
									_		
								····			
			<u> </u>								
2a	ls the	foundation directly	or indirectly a	ffiliated with or re	elated to on	e or more	tay-eyempt ord	nanizations			
		ed in section 501(c)							Ye	s X	No
		" complete the follow							_		•
		(a) Name of organizatio		(b) Type o	f organization		(c) De	scription of relations	hip		
	-										
c:	1	penalties of perjury, I decla t, and complete Declaration o						best of my knowledg	e and be	elief, it	is true
Sign		ROI	8 C-D	1 02 /02 /	0010	NO DET C	mp.	May the IRS	discuss	this	return
Here		J) John	Fr. A	$\frac{03/03}{}$	2012	OFFIC:	<u>ER</u>		eparer s	1	below
	"	nature of officer or trustee	, (	Date		Title		(see instruction	is)? [ <u>X</u>	Yes	No
		Print/Type preparer's	s name	Preparer's sign	ature .	Λ	Date	Chast T	PTIN		
Paid		BECKY NORLAN	מיתוו	Borran	MANIAM	dev	03/03/201	Check If   ' 2 self-employed	DA124	6762	Ω
Prep	arer		S BANK		LIUT IWI	V-1			0841		U
Use	Only	Firm's address > P		8				JI-	UUTI.	00	
	-	1		-			1				

Phone no 503-275-4327 Form **990-PF** (2011)

PORTLAND,

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

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

Schedule of Contributors

OMB No 1545-0047

2011

Department of the Treasury Internal Revenue Service Name of the organization **Employer identification number** WAGMORE FOUNDATION AGENCY 080015737700 45-3660440 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

JSA

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF

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

Name of organization
WAGMORE FOUNDATION AGENCY 080015737700
Employer identification number 45-3660440

Part I	Contributors (see instructions). Use duplicate copies	of Part I if additional space is nee	ded.
(a) <b>N</b> o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	CLADYS G COFRIN  2615 SW 22ND DRIVE  GAINESVILLE, FL 32605	\$64,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(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) No.	(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) No.	(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) No.	(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) No.	(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.)

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:
GLADYS COFRIN
ADDRESS:
2615 NW 22ND DRIVE
GAINESVILLE, FL 32605

OFFICER NAME:
PEGEEN HANRAHAN
ADDRESS:
2615 NW 22ND DRIVE
GAINESVILLE, FL 32605

OFFICER NAME:
ROBERT HUTCHINSON
ADDRESS:
2615 NW 22ND DRIVE
GAINESVILLE, FL 32605

OFFICER NAME:
MARY IPPOLITI-SMITH
ADDRESS:
2615 SW 22ND DRIVE
GAINESVILLE, FL 32605

OFFICER NAME:
US BANK
ADDRESS:
PO BOX 3168
PORTLAND, OR 97208

WAGMORE FOUNDATION AGENCY 080015737700 FORM.990PF, PART XV - LINES 2a - 2d ------

RECIPIENT NAME:

US BANK, PCG CHARITABLE, BILL DOLAN ADDRESS:

PO BOX 3168

PORTLAND, OR 97208

RECIPIENT'S PHONE NUMBER: 503-275-5929

FORM, INFORMATION AND MATERIALS:

CONTACT BILL DOLAN

SUBMISSION DEADLINES:

NONE

RESTRICTIONS OR LIMITATIONS ON AWARDS:

ANIMAL RESCUE

WAGMORE FOUNDATION AGENCY 080015737700 45-3660440 FORM.990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID

\_\_\_\_\_\_\_

RECIPIENT NAME:

GAINESVILLE PET RESCUE

ADDRESS:

5403 SW ARCHER RD

GAINESVILLE, FL 32608

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

15,140. AMOUNT OF GRANT PAID .....

RECIPIENT NAME:

PUPPY HILL FARM

ADDRESS:

PO BOX 1743

MELROSE, FL 32666

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

15,000. AMOUNT OF GRANT PAID .....

RECIPIENT NAME:

HAILES ANGELS PET RESCUE

ADDRESS:

5231 SW 91ST DRIVE

GAINESVILLE, FL 32655

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

AMOUNT OF GRANT PAID ..... 16,894.

WAGMORE FOUNDATION AGENCY 080015737700 45-3660440 FORM. 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

HELPING HANDS PET RESCUE

ADDRESS:

14260 W NEWBERRY RD BOX 140

NEWBERRY, FL 32669

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

TOTAL GRANTS PAID:

63,334.