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

2012

OMB No 1545-0052

BAA For Paperwork Reduction Act Notice, see instructions.

Internal R		Service	Note The fo	undation n	nay be able to use a copy of the	s return to satisfy state re	portin	g requirements	
For cale	endar	year 2012, or	tax year beginn	ing	, 2012	, and ending		,	
							A	Employer identification	number
1001	SE	OUNDATION 9TH AVE 0, OR 9721	14				В	33-1217152 Telephone number (see 503-241-380	
2 01111		, 01. 1.1	-				С	If exemption application	n is pending, check here
<b>G</b> Che	ck all	I that apply	Initial return		Initial return of a form	mer public charity	D	1 Foreign organizations,	check here
			Final return Address cha		Name change			2 Foreign organizations in here and attach compu	meeting the 85% test, check
H CI		type of organization 4947(a)(1	zation X Se ) nonexempt cha		1(c)(3) exempt private f trust Other taxable i	foundation private <u>fo</u> undation	E	If private foundation st	tatus was terminated
	ir mark		ets at end of year		counting method. XC	ash Accrual	F	under section 507(b)(1	a 60-month termination
<b>►</b> \$		53	3,932.	(Part 1	, column (d) must be oi	cash basis)	Ľ.	under section 507(b)(1	)(B), check here
Part I	Ex coi sai	<b>(penses</b> (The lumns (b), (c),	evenue and e total of amoun and (d) may not amounts in colun ))	t neces-	(a) Revenue and expenses per books	(b) Net investmer income	nt	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts	s, grants, etc, received	(att sch)		11/4 6 1, 11/4 1, 19/4 1/4	<u>, 1 5</u>	6 3 30 40 31 30 30	17 海 淋巴流 各产品设建
			foundn is not req to a		後でに 岩 なっこと	600000 6000			2012年2月1日
		cash investme			44.	4	14.	4	4.
Ì	-	Dividends and int	erest from securities						学 等は実験を含める。 「 1 Manual Linux and
		Net rental income				10 14 At 15	33		
R	6 a	or (loss) . Net gain/(loss) from	m sale of assets not o	n line 10	a 200 de de de la constitución d	<b>多时,这种"能力能</b> "		流源學家"RE	CEIVED
CENTÉZES MA	b	Gross sales price t assets on line 6a	for all		\$ \$ 100 mm		60L	起步"等意识"	
É	7	Capital gain net in	come (from Part IV, li	ne 2).	18 1 B 1 1 L 2 5		***	NO	Panta O
N <sub>2</sub>	8	Net short-tern			2 1 1			8 110	
<b>E</b> =	9	Income modif	ications		·并/统一《 · · · · · · · · · · · · · · · · · · ·	1度3級、145年、高さらいで もいことというか	**X		3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Z	iva	Gross sales less returns and allowances.			[\$46] [[1] ([1] [] [] [] [] [] [] [] [] [] [] [] [] []	(2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1		秦·本语。UG	UEN, UTALIES
8	b	Less Cost of goods sold	1.0		The district of the sales	S Charles A Total A T	100	Bur Bake Kirk	
2	С	Gross profit/(loss	s) (att sch)			1.3.			J. J. 1. 2 2 1 3 16 14
NOV	11	Other income	(attach schedule	e)					を含いなり Gara でき
,g	10	Takal Add Ca	an Titheough 11	<del></del>	44		14.		4.
e <del>) -</del>			es 1 through 11 officers, directors, trus	loos els	44.		4.	4	4.
2			alaries and wages	ices, cic					
2013			s, employee ben	efits					
A	16 a	Legal fees (attach							
D M		Accounting fees (		ST 1	3,622.	2	20.	2	4. 3,578.
I N		Other prof fees (a	attach sch)						
O 1 P S E T		Interest .		•					
RR	18 19	Taxes (attach schedule) Depreciation							1 (0 5 5 5 5 5
A A	19	sch) and depl				_			
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	20	Occupancy							
_	21		rences, and mee	tings					
A E N X D P	22 23	Printing and p	es (attach sched	lule)					
D P I	23	Other expens	SEE STATEM		101.				101.
N S	24	Total operation	ng and administ						
E S		expenses. Ad	ld lines 13 throug	gh 23	3,723.		20.	2	4. 3,679.
	25		ts, grants paid STM		84,882.			` '	84,882.
	26	Add lines 24		ments.	88,605.		<u> 20.</u>	2	4. 88,561.
	27		26 from line 12: venue over expe	nses		10 ( ) ( ) ( ) ( ) ( )			
	a	and disburse	ments		-88,561.		٠, ,		
	b	Net investment in	ncome (if negative, en	ter -0-)			24.	<u> </u>	
			ome (if negative, enter		<u> </u>	<u> </u>		<del></del>	0 . Form <b>990-PF</b> (2012)
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П	- II.	Altached schedules and amounts in the description	Beginning of year	End	of year
Par	CHE	Balance Sheets column should be for 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	3,038.	48,932	48,932.
	3	Accounts receivable	r. j. 😸 🖘 🎖 🤻	· · · · · · · · · · · · · · · · · · ·	11/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable		*	1. 1. 1. 1. 1.
		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 sch)		4 13 13 1 31	13 13 W 20164
Α	′	Less allowance for doubtful accounts		Elizabeth and the state of the	استنشت مشرك المساهد والمساهد و
Ş	8	Inventories for sale or use			
A S E T	9	Prepaid expenses and deferred charges			
T S	_	Investments – U S and state government obligations (attach schedule)			
	h	Investments — corporate stock (attach schedule)			
	l .	Investments — corporate bonds (attach schedule)			
		•	S. 124 - T. 13-1	U 78 C 1 18 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 2 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	''	Investments — land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	l	Investments — mortgage loans			<del> </del>
	13	Investments – other (attach schedule)	S 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Extra de la Section de la Sect	400.00.00.00.4
	14	Land, buildings, and equipment basis			TERROR DE LA
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe ► SEE STATEMENT 4)		5,000.	5,000.
	16	Total assets (to be completed by all filers — see the instructions. Also, see page 1, item 1)	3,038.	53,932.	53,932.
<u> </u>	17	Accounts payable and accrued expenses	3,000.	03,302.	
Ī	18	Grants payable			
A B	19	Deferred revenue			
ļ	20	Loans from officers, directors, trustees, & other disqualified persons			THE SHARE STATE AND AND
į	21	Mortgages and other notes payable (attach schedule)			
Ţ	22	Other liabilities (describe ► )			
Ė		`			
_ E _ S	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
NF	24	Unrestricted	3,038.	53,932.	
E U T N	25	Temporarily restricted.			<b>上的人员会是</b> 在人员。
D	26	Permanently restricted			
A B S A E T A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
ĔL	27	Capital stock, trust principal, or current funds		,	
SN	28	Paid-in or capital surplus, or land, building, and equipment fund.	·		
С	29	Retained earnings, accumulated income, endowment, or other funds			
O E R S	30	Total net assets or fund balances (see instructions)	3,038.	53,932.	
•	31	Total liabilities and net assets/fund balances (see instructions)	3,038.	53,932	
Parl		Analysis of Changes in Net Assets or Fund Balanc			
1	Total	net assets or fund balances at beginning of year — Part II, colupt-year figure reported on prior year's return)	umn (a), line 30 (must a	igree with	3,038.
2		r amount from Part I, line 27a		. 2	-88,561.
			ς	3	139, 455.
3 4		Increases not included in line 2 (itemize)  SEE STATEMENT lines 1, 2, and 3	<del></del>	<del>-</del> <del>-3</del>	53, 932.
5		ines 1, 2, and 3 ises not included in line 2 (itemize)		5	33, 332.
-		net assets or fund balances at end of year (line 4 minus line 5)	) - Part II, column (b)		53,932.
_			,	ı <del>•</del>	

(a) List and describ	be the kind(s) of property sold (e.g., reuse, or common stock, 200 shares ML	eal estate,	b) How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a N/A					
b					
c			<del></del>		
d			<del>-</del>	-	
е					
(e) Gross sales price	(f) Deprectation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) m	
а					
b					
d					
е					
	wing gain in column (h) and owned by			(I) Gains (Colu	
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any		ain minus column (k an -0-) or Losses (fr	
<u>b</u>					
<u> </u>					
	<del>                                     </del>				
e				<del></del> -	<del></del>
	(loss) as defined in sections 1222(5)	<del></del>	2		
ın Part I, line 8	e 8, column (c) (see instructions). If (		3		
Part V Qualification Unde	r Section 4940(e) for Reduced	Tax on Net Investmen	t Income		
If 'Yes,' the foundation does not qua	ction 4942 tax on the distributable am ilify under section 4940(e) Do not cor in each column for each year, see the	nplete this part		Yes	X No
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	s (colu	(d) Distribution imn (b) divided t	
2011	153,628.	7,	915.		19.409728
2010	180,410.		751.		8.694039
2009	79,531.	65,	796.	-	1.208751
2008	5,989.	55,	673.		0.107575
2007					
2 Total of line 1, column (d)			2		29.420093
3 Average distribution ratio for ti number of years the foundatio	he 5-year base period — divide the tol n has been in existence if less than 5	al on line 2 by 5, or by the years	3		7.355023
4 Enter the net value of nonchar	ntable-use assets for 2012 from Part 2	K, line 5	4		81,277.
5 Multiply line 4 by line 3			5		597,794.
6 Enter 1% of net investment in	come (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		597 <u>,</u> 794.
8 Enter qualifying distributions for	rom Part XII, line 4		8	<u> </u>	_88,561.
If line 8 is equal to or greater Part VI instructions.	than line 7, check the box in Part VI,	ine 1b, and complete that par	rt using a 1%	tax rate. See th	e
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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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Pa	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		Х
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?	13	X	
	Website address N/A			
14	The books are in care of ► RICK PREST Telephone no ► 541-8	3 <u>67-3</u>	<u>660</u>	
	Localed at ► 2320 OSU DRIVE NEWPORT OR ZIP + 4 ► 97365	<u>NT/7</u>		- <del></del> -
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	N/A		
	and enter the amount of tax-exempt interest received or accrued during the year		Yes	N/A No
16	At any time during calendar year 2012, 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	ies	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	(\$5.7.)		
Par	t VII-B 🕆 Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	٠,٠١	Yes	No
1 a	a During the year did the foundation (either directly or indirectly)	J. 13 4	1. 1/4	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No	18, 4	700	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	1834	Artist I	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	1		
	(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			
			4.3	
	(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			
b	of government service, if terminating within 90 days)  If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> 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		Service Services	
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 2012?	1 c		X
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))			
а	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012?  Yes X No	), 's 's		
	If 'Yes,' list the years ► 20 _ , 20 _ , 20 _		ا بالعا	- ::3
		(A)		
ņ	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)	2 b	N	اندند A
c	to the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	\$5,75%		36,34 g
	► 20 , 20 , 20 , 20	\$3.5°		
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No			
ŀ	of 'Yes,' did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation		1000	
•	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	* ^ .	46.34	
	(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 2012.)	3 ь	N	/A
_				111
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		X
Ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could			1
	peopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4 b		X
ЗДД		orm 99	O-PE (	

Part VII-B. Statements Regarding Activity		n 4720 May Be Rec	quired (continued)	I come and deferred to
5 a During the year did the foundation pay or inc	•	4045135	<b>ا</b> ا	
(1) Carry on propaganda, or otherwise attem		• • • • • • • • • • • • • • • • • • • •	Yes [	No No
<ul> <li>(2) Influence the outcome of any specific pull on, directly or indirectly, any voter registr</li> <li>(3) Provide a great to an individual for travel.</li> </ul>	ation drive?		— <u>—</u> —	No
(3) Provide a grant to an individual for travel	•		[ Yes [	[] No
(4) Provide a grant to an organization other to in section 509(a)(1), (2), or (3), or section	han a charitable, etc, on 4940(d)(2)? (see instr	rganization described uctions)	Yes	No
(5) Provide for any purpose other than religion educational purposes, or for the prevention	ous, charitable, scientific on of cruelty to children	c, literary, or or animals?	Yes	No 6
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or if (see instructions)?	the transactions fail to a current notice regar	qualify under the excep ding disaster assistance	otions e 	5 b N/A
Organizations relying on a current notice rega	ardıng disaster assistanı	ce check here	▶ [	
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	isibility for the grant?		N/A Yes	] No
If 'Yes,' attach the statement required by Reg				
6a Did the foundation, during the year, receive a on a personal benefit contract?			∐Yes [}	No L
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	ctly, on a personal bene	etit contract?	6b X
7a At any time during the tax year, was the foun	dation a party to a prob	ubited tax shelter transa	action? Yes 3	No
<b>b</b> If 'Yes,' did the foundation receive any proces				N/A 7b
Part VIII Information About Officers, Dand Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid	Employees,
1 List all officers, directors, trustees, foundation	n managers and their o	compensation (see inst	tructions).	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
BRIAN SCHWEPPENHEISER 1001 SE 9TH AVE. PORTLAND, OR 97214	PRESIDENT 0	0.	0.	0
BRETT JOYCE	DIRECTOR	0.	0.	0
2320 OSU DRIVE NEWPORT, OR 97365	0			
WARREN ROSENFELD 2424 SW ARDEN ROAD PORTLAND, OR 97201	DIRECTOR 0	0.	0.	0
			•	
2 Compensation of five highest-paid employees (o	ther than those included	on line 1 – see instruction	ns). If none, enter 'NONE	<u>                                     </u>
(a) Name and address of each employee paid more than \$50,000	<b>(b)</b> Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
		-		
		<del></del>		
		li .		1
				}
Total number of other employees paid over \$50,000	<u>                                      </u>		•	. 0
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# All other program-related investments See instructions Total. Add lines 1 through 3

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Ratix Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 201 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 1 a b Average of monthly cash balances 1 b 82,515. c Fair market value of all other assets (see instructions) 1 c 1 d d Total (add lines 1a, b, and c) 82,515. e Reduction claimed for blockage or other factors reported on lines 1a and 1c 1 e ď. (attach detailed explanation) 0 Acquisition indebtedness applicable to line 1 assets 0. 2 3 Subtract line 2 from line 1d 82,515. Cash deemed held for charitable activities Enter 1-1/2% of line 3 1,238. (for greater amount, see instructions) 4 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 81,277. Minimum investment return. Enter 5% of line 5 6 4,064. Part X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Tand do not complete this part.) and certain foreign organizations check here Minimum investment return from Part X, line 6 1 4,064. 2a Tax on investment income for 2012 from Part VI, line 5 2 a 2 b b Income tax for 2012 (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 4,064. Recoveries of amounts treated as qualifying distributions 4 4,064. 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 7 4,064. PartXII 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 88,561. 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 a Suitability test (prior IRS approval required) 3 a 3 b b Cash distribution test (attach the required schedule) Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 88,561

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

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)

Adjusted qualifying distributions. Subtract line 5 from line 4

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88,561.

5

6

#### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	<b>(c)</b> 2011	(d) 2012
Distributable amount for 2012 from Part XI, line 7				4,064.
2 Undistributed income, if any, as of the end of 2012		· . /2		4,004.
a Enter amount for 2011 only	<i>(</i>	. 2, ,	0.	
<b>b</b> Total for prior years 20 , 20 , 20		0.		7 74 3
3 Excess distributions carryover, if any, to 2012		4 4		,
a From 2007	Marie Come Come	STATE OF WAR		
<b>b</b> From 2008 3, 215.				
c From 2009 76, 241.	THE IS .	着 "编红"的。这	The product of a contract	·
<b>d</b> From 2010 179, 372.				A Committee of the Comm
e From 2011 153, 232.	Stanton on	Short Story		ation in the
f Total of lines 3a through e	412,060.			The things
4 Qualifying distributions for 2012 from Part	-4.7.	11 16 1/X		· · · · · · · · · · · · · · · · · · ·
XII, line 4 ► \$ 88,561.		With the second		
a Applied to 2011, but not more than line 2a			0.	
	17, 1 (\$14 4 (\$5), 1	196 x 1 / 4 / 6   552 - X	1 1/201 12/20 1 201 1	- 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2
b Applied to undistributed income of prior years (Election required — see instructions)	23%	0.	44 49	
	(1862) 6 10 1 1 1	30 10 00 00 10 00 00 00 00 00 00 00 00 00	<u>、                                    </u>	11 80 mm 19 19 19 19 19 19 19 19 19 19 19 19 19
c Treated as distributions out of corpus (Election required – see instructions)	0.			
d Applied to 2012 distributable amount		THE COLUMN TWO IN THE COLUMN T	THE PROPERTY OF THE PARTY OF TH	4 064
e Remaining amount distributed out of corpus	84,497.	<del></del>	( N -63	4,064.
5 Excess distributions carryover applied to 2012	04,497.	ON WAR STATE	Andrew Greek Arch	
(If an amount appears in column (d), the	<u> </u>	**************************************	Profite Trailing Agent	0.
same amount must be shown in column (a) )	Sign to the second			
			· 为据经验《编】	
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	496,557.	<b>新文教授会教</b>		
	430,337.	***	7, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	
b Prior years' undistributed income Subtract line 4b from line 2b		0.	对强。其法为秦	
c Enter the amount of prior years' undistribut-	100 00 N	<del></del>		- 300 79 K 5
ed income for which a notice of deficiency		ļ	1. 心态、强力心态。	3. 12 Peter 1985 and
has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
	TOPE OF THE STATE		97 16 18 VASC 1 . 27	<u> </u>
d Subtract line 6c from line 6b Taxable amount — see instructions		0.1		
	· · · · · · · · · · · · · · · · · · ·			- A - A - A - A - A - A - A - A - A - A
e Undistributed income for 2011. Subtract line 4a from line 2a Taxable amount — see instructions	7.		0.	
	Miles	\$ 1 kg 8 cg	.,	
f Undistributed income for 2012. Subtract lines	3, ,			
4d and 5 from line 1. This amount must be distributed in 2013.			, , , , , , ,	0.
7 Amounts treated as distributions out of		12 1 2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	13. 12. 12.
corpus to satisfy requirements imposed		·	<i>'</i>	
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.	E : 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5 3	A feet a feet a
` '			``	
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions).	0.	·	,	
· · ·				
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	496,557.	1.0		
10 Analysis of line 9:				
<b>a</b> Excess from 2008 3, 215.				j
<b>b</b> Excess from 2009 76, 241.				,
c Excess from 2010 179, 372.				
<b>d</b> Excess from 2011 153, 232.				-
e Excess from 2012 84, 497.		ļ		
01/15/.				

3 Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	substantial contributor	Toolpion				
a Paid during the year	Substantial Contributor					
Total	<del></del> -	<u></u>	. ► 3a			
b Approved for future payment  Total			► 3b			

#### 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)
Program service revenue	(a) Business code	(b) Amount	(c) Exclu sion code	(d) Amount	Related or exempt function income (See instructions)
a			Loue		
	<del></del>		+		<del></del>
C C			<del>                                     </del>		<del></del>
d	<del></del>				
е					
f			<del> </del>		
g Fees and contracts from government agencies					
2 Membership dues and assessments.					
3 Interest on savings and temporary cash investments			1	44.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate	22:28:24:X	STATE AND STATES	300	17. 分類に強い動き	X01778.744.750.75
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					<u> </u>
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue	<b>金小种域以</b>	215个种种数位设计设置	30636	之气。 阿维克·维斯克	THE RESIDENCE OF THE PARTY OF T
a					
b					
С					
d					
e					
e Subtotal Add columns (b), (d), and (e)	<b>数 分散</b> 类		₹ <i>₹</i> - 49,≸	44.	
e Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)	<u> </u>		₹e0%	44.	44.
e Subtotal Add columns (b), (d), and (e)	<u> </u>		₹ <sub>₹</sub> - \$\forall \forall \fora		44.
e Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)	ations)	ishment of Exemp		13	44.
e Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculated at XVI-B  Relationship of Activities to the substitution of Activities and Activ	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculated at XVI-B  Relationship of Activities to the substitution of Activities and Activ	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculated at XVI-B  Relationship of Activities to the substitution of Activities and Activ	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcular act XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcular act XVI-B Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	ations )		t Purpo	oses 13	

## Form 990-PF (2012) ROGUE FOUNDATION 33-1217152 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		exempt organi									
d	lescribed	rganization directl d in section 501(c) o political organiza	of the Code (	engage in any o other than section	of the following won 501(c)(3) orga	ith any o	other organizations) or in section	on 527,	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Ye	s No
аΤ	ransfers	from the reportin	g foundation to	o a noncharitabl	e exempt organiz	ation o	f		16		
(	1) Cash									1 a (1)	X
(2	<b>2)</b> Other	r assets								1 a (2)	X
<b>b</b> C	Other tra	nsactions								7. MAR M	的自然
(1	1) Sales	s of assets to a no	ncharitable ex	empt organization	on					1 b (1)	Х
(2	2) Purch	nases of assets fro	om a noncharit	table exempt org	ganization				[	1 b (2)	X
(3	3) Renta	al of facilities, equ	pment, or oth	er assets						1 b (3)	X
(4	4) Reim	bursement arrang	ements							1 b (4)	X
(5	5) Loans	s or loan guarante	es							1 b (5)	X
(6	5) Perfo	rmance of service	s or members	hip or fundraisin	g solicitations					1 b (6)	X
<b>c</b> S	haring o	of facilities, equipn	nent, mailing li	ists, other assets	s, or paid employ	ees			Ĺ	1 c	X
<b>d</b> If th	the ans ne goods ny trans	wer to any of the , other assets, or se action or sharing a	above is 'Yes, ervices given by arrangement, s	' complete the for the reporting four show in column	ollowing schedule indation If the foul (d) the value of the	. Colum ndation i	nn <b>(b)</b> should alv received less that ds, other assets,	vays show th n fair market v or services r	e fair mai value in received	rket value o	of
(a) Line	<del></del>	(b) Amount involved		of noncharitable exe	<del></del>		) Description of trai			ring arrangem	ents
N/A		· · · · · · · · · · · · · · · · · · ·	1		<u> </u>	Ì	<u> </u>				
							-112-2				
			1				*******				
			ļ				<del></del>				
					<u> </u>	<u> </u>	·				
			<u> </u>			<u> </u>					
de	escribed	idation directly or in in section 501(c) omplete the follow	of the Code (c	ed with, or related other than section	to, one or more tand to	ix-exem section	pt organizations n 527?			Yes [	ΧNο
		Name of organizat		<b>(b)</b> Typ	e of organization		(0	) Description	of relatio	nship	
N/A	· · · ·							<u>.                                    </u>			
<u></u> -			<del></del>						<del></del> -		
_											
	Under per	nalties of perjury, I declared on complete Declaration	re that I have exam	nined this return, inclu	iding accompanying so	hedules a	nd statements, and to	the best of my k	nowledge an	d belief, it is tri	ue,
Sign	i concer, e		r or propertor (ourse	- alan taxpayer, is out	,00 011 011 1110 1110 110 11		roporor rao any mion	cugu	Г	May the IRS di	scuss
Here	R				11-15-13		DIRECTOR		1	this return with preparer show	the
inere		re of officer of trube			Date		DIRECTOR  Fitte			(see instruction	ns)?
		Print/Type preparer's na	me	Preparer's			Date	Check	I PT		No
בי בת	ļ	CATHERINE M		1 '	MNEMPE	to	11/14/13	self-employ	□"	0036576	3
Paid	-		. ROTE SCHULTZ &		<del></del>	<u>, u</u>	1		93-123		<u>.                                    </u>
Prepa		_	9700 S.W.	CAPITOL H			<del></del>	rams Env	22 172	4012	
Use O	niy		ORTLAND,	OR 97219	MI. DIE.200	,		Phone no	(503)	244-887	9
BAA			י מאדחדווה,	OK 31213				1. 110116 110		orm <b>990-PF</b>	
									1.4	SIAII SSUFFF	(2012)

STATEMENT 1   FORM 990-PF, PART I, LINE 16B   ACCOUNTING FEES	2012	FEDE	ERAL STATEMENTS	PAGE 1
STATEMENT 1   FORM 990-PF, PART I, LINE 16B   ACCOUNTING FEES	CLIENT 65119C	F	ROGUE FOUNDATION	33-1217152
CA				11 47AN
EXPENSES   INCOME   NOT   NO	FORM 990-PF, PART I, LINE 16B			
TAXES & LICENSES   (A)  EXPENSES  INVESTMENT ADJUSTED PER BOOKS  TOTAL  \$ 101. \$ 101. \$ 0. \$ 101. \$ 0. \$ 101. \$ 0. \$ 101. \$ 0. \$ 101. \$	TAX RETURN PREPARATION	TOTAL	EXPENSES INVESTMENT ADJUSTED C. PER BOOKS INCOME NET INCOME  \$ 3,622. \$ 20. \$ 24. \$	(D) HARITABLE PURPOSES  3,578. 3,578.
TAXES & LICENSES  TOTAL  EXPENSES INVESTMENT ADJUSTED PER BOOKS  \$ 101.	FORM 990-PF. PART I. LINE 23			
CASH GRANTS AND ALLOCATIONS  CLASS OF ACTIVITY: DONEE'S NAME: ORGANIZATIONAL STATUS OF DONEE: ONGANIZATIONSHIP OF DONEE: ONEE'S NAME: DONEE'S ADDRESS:  CLASS OF ACTIVITY: CHARITABLE DONEE'S ADDRESS:  CLASS OF ACTIVITY: DONEE'S ADDRESS:  CHARITABLE DONEE'S ADDRESS:  RELATIONSHIP OF DONEE: ONEE'S NAME: DONEE'S ADDRESS:  CHARITABLE DONEE'S ADDRESS:  RELATIONSHIP OF DONEE: ONEE'S ADDRESS:  CHARITABLE INDEPENDENCE HOP & HERITAGE FESTIVAL 240 MONMOUTH STREET INDEPENDENCE, OR 97351 NONE ORGANIZATIONAL STATUS OF DONEE: CHARITABLE CHARITABLE CHARITABLE	TAXES & LICENSES	TOTAL	EXPENSES INVESTMENT ADJUSTED COMPANY STREET	(D) CHARITABLE PURPOSES  101.
DONEE'S NAME: DONEE'S ADDRESS: DONEE'S ADDRESS: DONEE'S ADDRESS: DONEE'S ADDRESS: DONEE'S ADDRESS: DONEE'S ADDRESS: DONEE: DONEE'S ADDRESS: DONEE'S NAME: DONEE'S NAME: DONEE'S ADDRESS: CHARITABLE DONEE'S ADDRESS: DONEE'S ADDRESS: DONEE'S ADDRESS: DONEE'S ADDRESS: DONEE'S ADDRESS: DONEE: DONEE'S ADDRESS: DONEE: DONEE	FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GR CASH GRANTS AND ALLOCATIONS		- - - -	
AMOUNT GIVEN: \$ 2,00  CLASS OF ACTIVITY: CHARITABLE  DONEE'S NAME: INDEPENDENCE HOP & HERITAGE FESTIVAL  DONEE'S ADDRESS: 240 MONMOUTH STREET  INDEPENDENCE, OR 97351  RELATIONSHIP OF DONEE: NONE  ORGANIZATIONAL STATUS OF DONEE: CHARITABLE	DONEE'S NAME: DONEE'S ADDRESS: RELATIONSHIP OF DONEE:	NEE :	NORTHWEST LEGENDS FOUNDATION PO BOX 1531 EUGENE, OR 97440 NONE	
RELATIONSHIP OF DONEE: NONE ORGANIZATIONAL STATUS OF DONEE: CHARITABLE	AMOUNT GIVEN:  CLASS OF ACTIVITY:  DONEE'S NAME:		\$ CHARITABLE INDEPENDENCE HOP & HERITAGE FESTIVAL 240 MONMOUTH STREET	2,000.
	ORGANIZATIONAL STATUS OF DO	NEE:	NONE	5,000.

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:

CHARITABLE

RAISE YOUR PINTS

PO BOX 1781

JACKSON, MS 39215

NONE

1,000.

EDUCATIONAL

THE BUCKMAN SCHOOL FOUNDATION 320 SE 16TH

PORTLAND, OR 97214

NONE

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CLIENT 65119C	ROGUE FOUNDATION	33-1217152
11/14/13		11 47AM
STATEMENT 3 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND G	RANTS	
AMOUNT GIVEN:	\$	7,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE NEWPORT FISHERMAN'S WIVES 936 SW HURBERT PO BOX 9791 NEWPORT, OR 97365	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF D AMOUNT GIVEN:	NONE	5,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE BRIGHT HORIZONS PO BOX 565 SILETZ, OR 97380	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF D AMOUNT GIVEN:	NONE	1,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	501(C)(3) OREGON COAST HUMANE SOCIETY PO BOX 71 NEWPORT, OR 97365	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF D AMOUNT GIVEN:	NONE	2,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE  NEWPORT POLICE DEPT K-9 UNIT  169 SW COAST HWY  NEWPORT, OR 97365	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DO AMOUNT GIVEN:	NONE	2,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	501(C)(3) ARTHRITIS FOUNDATION OF GREAT WEST 115 NE 100TH ST SEATTLE, WA 98125	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DO AMOUNT GIVEN:	NONE	4,384.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	EDUCATIONAL NEWPORT HIGH SCHOOL 919 NE EADS ST NEWPORT, OR 97365	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DO AMOUNT GIVEN:	NONE	500.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	EDUCATIONAL ROGUE SCHWEPP SCHOLARSHIPS 2320 OSU DRIVE NEWPORT, OR 97365	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF D	NONE	

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CLIENT 65119C	ROGUE FOUNDATION	33-1217152
11/14/13		11 47AM
STATEMENT 3 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS	S	
AMOUNT GIVEN:	\$	5,300.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE BREW CREW PO BOX 14085 PORTLAND , OR 97293	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE	3,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE OREGON BARTENDERS GUILD 8756 N WAYLAND AVE PORTLAND, OR 97203	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE	1,727.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE FRIENDS OF ISSAQUAH SALMON HATCHERY 125 W SUNSET WAY ISSAQUAH, WA 98027	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE	1,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	501(C)(3) WOUNDED WAR PROJECT 2223 ALASKAN WAY #220 SEATTLE, WA 98121	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE 501(C)(3)	7,782.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	501(C)(3) PATHFINDERS OF OREGON 7800 SW BARBUR BLVD PORTLAND, OR 97219	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE	500.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE AMERICAN DISTILLING INSTITUTE PO BOX 577 HAYWARD, CA 94541	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE	10,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	501(C)(3) HELP EVERY LITTLE PAW 1533 NW BLVD COEUR D' ALENE, ID 83814	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:	NONE	

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2012 FEI	DERAL STATEMENTS	PAGE 4
CLIENT 65119C	ROGUE FOUNDATION	33-1217152
11/14/13		11 47AM
STATEMENT 3 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS		
AMOUNT GIVEN:	\$	2,500.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	501(C)(3) OREGON SPORTS ACTION 8725 NE SANDY BLVD PORTLAND, OR	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE	250.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE GREAT AMERICAN DISTILLERS FESTIVAL 6700 SW 105TH AVE, SUITE 213 BEAVERTON, OR 97008	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE CHARITABLE	3,737.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	501(C)(3) OREGON JEWISH COMMUNITY YOUTH FOUNDATION 610 SW BROADWAY, SUITE 407 PORTLAND, OR 97205	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE 501 (C) (3)	1,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE ADAM O'BRIEN MEMORIAL FUND 9776 S. VIRGINIA ST. RENO, NV NONE	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE CHARITABLE	500.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	501(C)(3) BOY SCOUTS OF AMERICA 2525 MLK JR BLVD EUGENE, OR 97401	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE	80.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	501(C)(3) CALDERA ARTS FOR YOUTH 224 NW 13TH AVE, BOX 304 PORTLAND, OR 97209	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE	2,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE PACIFIC COMMUNITIES HEALTH DIST FOUND 930 SW ABBEY NEWPORT, OR 97365	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:	NONE	

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CLIENT 65119C	ROGUE FOUNDATION	33-1217152
11/14/13		11:47AM
STATEMENT 3 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS		
AMOUNT GIVEN:	\$	600.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE CLATSOP COUNTY HUMANE SOCIETY 1315 SE 19TH STREET WARRENTON, OR 97146 NONE CHARITABLE	
AMOUNT GIVEN:		2,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE FRIENDS OF LINCOLN CO ANIMAL SHELTER PO BOX 2264 NEWPORT, OR 97365 NONE	
ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	CHARITABLE	2,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS: RELATIONSHIP OF DONEE:	CHARITABLE LANE COUNTY ANIMAL SHELTER 3050 N DELTA HWY FUCENE OR 97408	
ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	CHARITABLE	2,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHARITABLE LINCOLN CO CHILDREN'S ADVOCACY CENTER 122 NE 47TH STREET NEWPORT. OR 97365	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE	850.
NONCASH GRANTS AND ALLOCATIONS	<u> </u>	
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	501(C)(3) LINCOLN COUNTY HISTORICAL SOCIETY 545 SW 9TH ST NEWPORT, OR 97365	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: FMV OF PROPERTY: DESCRIPTION OF PROPERTY:	NONE 501(C)(3)	657.
DATE OF GIFT: BOOK VALUE: METHOD USED TO DETERMINE BV:	1/13/2012 657. COST	
METHOD USED TO DETERMINE FMV: CLASS OF ACTIVITY:	EDUCATIONAL	
DONEE'S NAME: DONEE'S ADDRESS:	PORTLAND STATE UNIVERSITY PO BOX 751 PORTLAND, OR 97201	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: FMV OF PROPERTY:	NONE	98.
DESCRIPTION OF PROPERTY: DATE OF GIFT:	GIFT BASKET ITEMS 1/21/2012	<i>5</i> 0.

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PAGE 6 2012 FEDERAL STATEMENTS **CLIENT 65119C ROGUE FOUNDATION** 33-1217152 11 47AM 11/14/13 STATEMENT 3 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS BOOK VALUE: 98. METHOD USED TO DETERMINE BV: COST METHOD USED TO DETERMINE FMV: COST CLASS OF ACTIVITY: EDUCATIONAL DONEE'S NAME: BFBC HOMEBREW CHAMPIONSHIPS 31790 US HWY 19 N, #7 DONEE'S ADDRESS: PALM HARBOR, FL 34684 RELATIONSHIP OF DONEE: NONE CHARITABLE ORGANIZATIONAL STATUS OF DONEE: FMV OF PROPERTY: \$ 112. DESCRIPTION OF PROPERTY: MERCHANDISE DATE OF GIFT: 1/25/2012 BOOK VALUE: 112. METHOD USED TO DETERMINE BV: COST METHOD USED TO DETERMINE FMV: COST CLASS OF ACTIVITY: EDUCATIONAL DONEE'S NAME: SWALLOW HILL MUSIC 71 EAST YALE AVE DONEE'S ADDRESS: DENVER, CO 80210 RELATIONSHIP OF DONEE: NONE ORGANIZATIONAL STATUS OF DONEE: CHARITABLE FMV OF PROPERTY: 30. DESCRIPTION OF PROPERTY: MERCHANDISE DATE OF GIFT: 1/27/2012 BOOK VALUE: 30. METHOD USED TO DETERMINE BV: COST METHOD USED TO DETERMINE FMV: COST CLASS OF ACTIVITY: EDUCATIONAL DONEE'S NAME: OSU DEPT OF FISHERIES & WILDLIFE

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

CLASS OF ACTIVITY:

BUUCATIONAL

OSU DEPT OF FISHERIES & WILDLIFE

CORVALLIS, OR 97331

NONE

CHARITABLE

FMV OF PROPERTY: 515.
DESCRIPTION OF PROPERTY: MERCHANDISE

DESCRIPTION OF PROPERTY: MERCHANDISE
DATE OF GIFT: 2/02/2012
BOOK VALUE: 515.
METHOD USED TO DETERMINE BV: COST

METHOD USED TO DETERMINE BY: COST
METHOD USED TO DETERMINE FMV: COST

CLASS OF ACTIVITY: 501(C)(3)
DONEE'S NAME: ST. PATRICK CATHOLIC CHURCH
DONEE'S ADDRESS: 1623 NW 19TH AVE

DONEE'S ADDRESS:

1623 NW 19TH AVE
PORTLAND, OR 97209
RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

501(C)(3)

FMV OF PROPERTY:

DESCRIPTION OF PROPERTY:

MERCHANDISE

DATE OF GIFT: 2/08/2012
BOOK VALUE: 74.
METHOD USED TO DETERMINE BV: COST

METHOD USED TO DETERMINE BV: COST METHOD USED TO DETERMINE FMV: COST

CLASS OF ACTIVITY: 501(C)(3)
DONEE'S NAME: ST. AGATHA SCHOOL

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CLIENT 65119C	ROGUE FOUNDATION	33-1217152
11/14/13		11 47AM
STATEMENT 3 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS	<b>S</b>	
DONEE'S ADDRESS:	7960 SE 15TH AVE. PORTLAND, OR 97202	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:	NONE	\$ 150.
FMV OF PROPERTY: DESCRIPTION OF PROPERTY: DATE OF GIFT: BOOK VALUE: METHOD USED TO DETERMINE BV:		\$ 150.
METHOD USED TO DETERMINE FMV: CLASS OF ACTIVITY:	COST EDUCATIONAL	
DONEE'S NAME: DONEE'S ADDRESS:	LAKE OSWEGO SCHOOL DIST FOUNDATION 2455 SW COUNTRY CLUB ROAD LAKE OSWEGO, OR 97034	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: FMV OF PROPERTY:	NONE	200.
DESCRIPTION OF PROPERTY: DATE OF GIFT: BOOK VALUE:	MERCHANDISE 2/17/2012 200.	200.
METHOD USED TO DETERMINE BV: METHOD USED TO DETERMINE FMV:	COST	
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	EDUCATIONAL LAKE OSWEGO ROWING CLUB FOUNDATION PO BOX 369 LAKE OSWEGO, OR 97034	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: FMV OF PROPERTY:	NONE CHARITABLE	200.
DESCRIPTION OF PROPERTY: DATE OF GIFT: BOOK VALUE:	GIFT BASKET 2/17/2012 200.	
METHOD USED TO DETERMINE BV: METHOD USED TO DETERMINE FMV:	COST	
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	EDUCATIONAL BUCKMAN ELEMENTARY SCHOOL 320 SE 16TH AVE PORTLAND, OR 97214	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: FMV OF PROPERTY:	NONE CHARITABLE	200.
DESCRIPTION OF PROPERTY: DATE OF GIFT: BOOK VALUE:	GIFT BASKET 2/24/2012 200.	
METHOD HIGED TO DETERMINE BY.	COST	

METHOD USED TO DETERMINE BV: COST METHOD USED TO DETERMINE FMV: COST

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS: CHARITABLE

OREGON REPERTORY SINGERS 10725 SW BARBUR BLVD, #120 PORTLAND, OR 97219 RELATIONSHIP OF DONEE: NONE

ORGANIZATIONAL STATUS OF DONEE: CHARITABLE

FMV OF PROPERTY: 432. DESCRIPTION OF PROPERTY: MERCHANDISE

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11/14/13

#### **FEDERAL STATEMENTS**

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**CLIENT 65119C** 

**ROGUE FOUNDATION** 

33-1217152

11 47AM

STATEMENT 3 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

DATE OF GIFT: 2/25/2012
BOOK VALUE: 432.
METHOD USED TO DETERMINE BV: COST
METHOD USED TO DETERMINE FMV: COST

CLASS OF ACTIVITY: 501(C)(3)
DONEE'S NAME: LAKE GROVE PRESBYTERIAN CHURCH

DONEE'S ADDRESS: 4040 SUNSET DRIVE LAKE OSWEGO, OR 97035

RELATIONSHIP OF DONEE: NONE ORGANIZATIONAL STATUS OF DONEE: 501(C)(3)

FMV OF PROPERTY: \$ 172.

DESCRIPTION OF PROPERTY: GIFT BASKET DATE OF GIFT: 2/28/2012 BOOK VALUE: 172.

METHOD USED TO DETERMINE BV: COST METHOD USED TO DETERMINE FMV: COST

CLASS OF ACTIVITY: CHARITABLE

DONEE'S NAME: ST JUDE CHILDEN'S HOSPITAL DONEE'S ADDRESS: 4738 11TH AVE NE, STE 102

RELATIONSHIP OF DONEE: SEATTLE, WA 98105

ORGANIZATIONAL STATUS OF DONEE: CHARITABLE

FMV OF PROPERTY:

DESCRIPTION OF PROPERTY: GIFT BASKET DATE OF GIFT: 2/28/2012 BOOK VALUE: 220.

METHOD USED TO DETERMINE BV: COST METHOD USED TO DETERMINE FMV: COST

CLASS OF ACTIVITY: 501 (C) (3)

DONEE'S NAME:

JUVENILLE DIABETES RESERACH FOUNDATION
TONEE'S ADDRESS:

JUVENILLE DIABETES RESERACH FOUNDATION
TONEE'S ADDRESS:

7000 SW HAMPTON, STE 101

PORTLAND, OR 97223

RELATIONSHIP OF DONEE: NONE ORGANIZATIONAL STATUS OF DONEE: 501(C)(3)

ORGANIZATIONAL STATUS OF DONEE: 501(C)(3)

FMV OF PROPERTY: 200.
DESCRIPTION OF PROPERTY: GIFT BASKET

DESCRIPTION OF PROPERTY:

DATE OF GIFT:

BOOK VALUE:

METHOD USED TO DETERMINE BY:

COST

METHOD USED TO DETERMINE BV: COST METHOD USED TO DETERMINE FMV: COST

CLASS OF ACTIVITY: EDUCATIONAL

DONEE'S NAME: PERRYDALE PARENTS CLUB

DONEE'S ADDRESS: PO BOX 305
DALLAS, OR 97338

RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: CHARITABLE

FMV OF PROPERTY:

DESCRIPTION OF PROPERTY: GIFT BASKET DATE OF GIFT: 2/28/2012

BOOK VALUE: 161.
METHOD USED TO DETERMINE BV: COST
METHOD USED TO DETERMINE FMV: COST

CLASS OF ACTIVITY: CHARITABLE

2012		DACEO
•	EDERAL STATEMENTS	PAGE 9
CLIENT 65119C	ROGUE FOUNDATION	33-1217152
11/14/13  STATEMENT 3 (CONTINUED)  FORM 990-PF, PART I, LINE 25  CONTRIBUTIONS, GIFTS, AND GRAN	тѕ	11 47AM
DONEE'S NAME: DONEE'S ADDRESS:  RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE FMV OF PROPERTY: DESCRIPTION OF PROPERTY: DATE OF GIFT: BOOK VALUE: METHOD USED TO DETERMINE BV: METHOD USED TO DETERMINE FMV:	MERCHANDISE 3/07/2012 360. COST COST	360.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:  RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE FMV OF PROPERTY: DESCRIPTION OF PROPERTY: DATE OF GIFT: BOOK VALUE: METHOD USED TO DETERMINE BV: METHOD USED TO DETERMINE FMV:	: CHARITABLE  GIFT BASKET 3/18/2012 200. COST	200.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:  RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE FMV OF PROPERTY: DESCRIPTION OF PROPERTY: DATE OF GIFT: BOOK VALUE: METHOD USED TO DETERMINE BV: METHOD USED TO DETERMINE FMV:	: CHARITABLE  MERCHANDISE 3/31/2012 102. COST	102.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:  RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE FMV OF PROPERTY: DESCRIPTION OF PROPERTY: DATE OF GIFT: BOOK VALUE: METHOD USED TO DETERMINE BV: METHOD USED TO DETERMINE FMV:	: CHARITABLE  GIFT CERTIFICATES  4/10/2012  152. COST	152.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS: RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE FMV OF PROPERTY:	501(C)(3) LEUKEMIA & LYMPHOMA SOCIETY 19225 NW TANASBOURNE DRIVE HILLSBORO, OR 97214 NONE : 501(C)(3)	591.

2012

11/14/13

#### FEDERAL STATEMENTS

**PAGE 10** 

**CLIENT 65119C** 

**ROGUE FOUNDATION** 

33-1217152

11 47AM

STATEMENT 3 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS

DESCRIPTION OF PROPERTY:

DATE OF GIFT:

BOOK VALUE:

METHOD USED TO DETERMINE BV: METHOD USED TO DETERMINE FMV:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: CHARITABLE

FMV OF PROPERTY:

DESCRIPTION OF PROPERTY:

DATE OF GIFT: BOOK VALUE:

METHOD USED TO DETERMINE BV: METHOD USED TO DETERMINE FMV:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

FMV OF PROPERTY:

DESCRIPTION OF PROPERTY:

DATE OF GIFT:

BOOK VALUE:

METHOD USED TO DETERMINE BV: METHOD USED TO DETERMINE FMV:

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: CHARITABLE

FMV OF PROPERTY:

DESCRIPTION OF PROPERTY:

DATE OF GIFT:

BOOK VALUE: METHOD USED TO DETERMINE BV:

METHOD USED TO DETERMINE FMV:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

FMV OF PROPERTY:

DESCRIPTION OF PROPERTY: DATE OF GIFT:

BOOK VALUE: METHOD USED TO DETERMINE BV: METHOD USED TO DETERMINE FMV:

COST COST

MERCHANDISE

4/12/2012

591. COST

COST

CHARITABLE

APOYEMOS AL ESPANOL 8111 WEST SLOPE DRIVE

PORTLAND, OR 97225

NONE

GIFT BASKET 5/12/2012

60. COST COST

CHARITABLE

OREGON MILITARY MUSEUM 15300 SE INDUSTRIAL WAY CLACKAMAS, OR 97015

NONE

CHARITABLE

MERCHANDISE 5/18/2012

1,517. COST COST

CHARITABLE

FALLEN TROOPER MEMORIAL FOUNDATION

8085 SE DEER CREEK LANE MILWAUKIE, OR 97222

NONE

MERCHANDISE 6/01/2012

200. COST COST

CHARITABLE

HOMEBREW CONTEST 407 HIGH STREET MORGANTOWN, WV 26505

NONE

CHARITABLE

**MERCHANDISE** 

6/01/2012 120.

60.

1,517.

200.

120.

2012

11/14/13

#### FEDERAL STATEMENTS

**PAGE 11** 

**CLIENT 65119C** 

#### **ROGUE FOUNDATION**

33-1217152

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STATEMENT 3 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

FMV OF PROPERTY: DESCRIPTION OF PROPERTY:

DATE OF GIFT:

BOOK VALUE: METHOD USED TO DETERMINE BV:

METHOD USED TO DETERMINE FMV:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

FMV OF PROPERTY:

DESCRIPTION OF PROPERTY:

DATE OF GIFT:

BOOK VALUE:

METHOD USED TO DETERMINE BV: METHOD USED TO DETERMINE FMV:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: CHARITABLE

FMV OF PROPERTY:

DESCRIPTION OF PROPERTY:

DATE OF GIFT: BOOK VALUE:

METHOD USED TO DETERMINE BV: METHOD USED TO DETERMINE FMV:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

FMV OF PROPERTY:

DESCRIPTION OF PROPERTY:

DATE OF GIFT: BOOK VALUE:

METHOD USED TO DETERMINE BV: METHOD USED TO DETERMINE FMV:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: CHARITABLE

PINE RIDGE INDIAN RESERVATION

1000 ALDER STREET EUGENE, OR 97401

NONE

CHARITABLE

MERCHANDISE 6/01/2012

50. COST COST

EDUCATIONAL

GLOBAL ALLIANCE FOR DEVELOPING EDUCATION

5000 N WILLAMETTE BLVD PORTLAND, OR 97203

NONE

CHARITABLE

MERCHANDISE 6/01/2012

120. COST COST

CHARITABLE

TOLEDO FIR DEPARTMENT 285 NE BURGESS ROAD TOLEDO, OR 97391

NONE

MERCHANDISE 6/01/2012

60. COST COST

EDUCATIONAL

SAUVIE ISLAND ACADEMY 14445 NW CHARLTON ROAD PORTLAND, OR 97231

NONE

CHARITABLE

MERCHANDISE 6/01/2012

100. COST COST

CHARITABLE UNIONS FOR KIDS 17101 SE ROYER ROAD DAMASCUS, OR 97089

NONE

CHARITABLE

2012	FEDERAL STATEMENTS	 PAGE 12
CLIENT 65119C	ROGUE FOUNDATION	33-1217152
11/14/13		 11 <b>4</b> 7AM
STATEMENT 3 (CONTINUED FORM 990-PF, PART I, LINE 2 CONTRIBUTIONS, GIFTS, AN	25	
FMV OF PROPERTY: DESCRIPTION OF PROPERTY DATE OF GIFT: BOOK VALUE: METHOD USED TO DETERMIN METHOD USED TO DETERMIN	6/01/2012 200. NE BV: COST	\$ 200.
DONEE'S ADDRESS:	CHARITABLE CAMP TO BELONG 113 N 18TH STREET ELMA, WA 98541 NONE OF DONEE: CHARITABLE	
ORGANIZATIONAL STATUS OF FMV OF PROPERTY: DESCRIPTION OF PROPERTY DATE OF GIFT: BOOK VALUE: METHOD USED TO DETERMIN	7: MERCHANDISE 6/01/2012 200. NE BV: COST	200.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:  RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF FMV OF PROPERTY: DESCRIPTION OF PROPERTY DATE OF GIFT: BOOK VALUE: METHOD USED TO DETERMIN	PORTLAND, OR 9/231 NONE OF DONEE: CHARITABLE  7: GIFT BASKET 11/09/2012 269. NE BV: COST	269.
DESCRIPTION OF PROPERTY DATE OF GIFT: BOOK VALUE: METHOD USED TO DETERMIN METHOD USED TO DETERMIN	JOIN 1435 NE 81ST AVE, SUITE 100 PORTLAND, OR 97213 NONE OF DONEE: CHARITABLE  7: MERCHANDISE 5/15/2012 250. IE BV: COST IE FMV: COST	250.
rmv or Properti:	501(C)(3) CHILDREN'S CANCER ASSOCIATION 19221 S RIDGE ROAD OREGON CITY, OR 97045 NONE OF DONEE: 501(C)(3)  7: GIFT BASKET 6/15/2012 200. COST	200.

2012	FE	DERAL ST	TATEMENT	S			PAGE 13
CLIENT 65119C		ROGUE FO	UNDATION				33-1217152
11/14/13				•			11 47AM
STATEMENT 3 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND	5 GRANTS						
METHOD USED TO DETERMINE	FMV:	COST					
					TOTA	AL <u>\$</u>	84,882.
STATEMENT 4 FORM 990-PF, PART II, LINE 1 OTHER ASSETS	5						
				BOO	OK_VALUE		R MARKET VALUE
RECEIVABLE			TOTA	\$	5,000. 5,000.		5,000. 5,000.
STATEMENT 5 FORM 990-PF, PART III, LINE 3 OTHER INCREASES  CORRECT COSTING OF PRIOR VOIDED CHECKS - PRIOR YE	YRS NON-	-CASH CONTR	RIBUTIONS			\$	127,220.
VOIDED CRECKS - PRIOR TE	ANS				TOTAL	\$	12,235. 139,455.

### Form **8868**

(Rev January 2013)

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

ganization Return OMB No 1545-1709

Department of ti	he Treasury e Service	►File a sep	arate appli	ication for each return.			
If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box							<u>► X</u>
<ul><li>If you ar</li></ul>	e filing for an	Additional (Not Automatic) 3-Mont	h Extensio	n, complete only Part II (on page 2 of th	s form	)	LJ
Do not com	plete Part II un	less you have already been grante	d an auton	natic 3-month extention on a previously f	iled Fo	rm 8868	
request an ex Associated \	required to file dension of time With Certain Pe	Form 990-T), or an additional (not to file any of the forms listed in Part	automatic I or Part II v ust be sent	d a 3-month automatic extension of time ) 3-month extension of time. You can ele with the exception of Form 8870, Information to the IRS in paper format (see instruction Charities & Nonprofits.	ctronic Return	ally file Form for Transfers	1 8868 to
Parell	Automatic	3-Month Extension of Time.	Only sul	omit original (no copies needed).			
A corporatio	n required to fi	le Form 990-T and requesting an a	automatic 6	-month extension - check this box and o	comple	te Part I only	′. ▶ 🗍
All other cor income tax i		ıdıng 1120-C filers), partnerships,	REMICs, ai	nd trusts must use Form 7004 to request Enter filer's identif			
	Name of exempt of	organization or other filer, see instructions		Litter mer 5 identifi		er identification n	
Type or		Again Later of the many obstances					2
print	20000	71				045450	
	ROGUE FOU	JNDATION  nd room or suite number. If a P O box, see in	etructions		33-1217152 Social security number (SSN)		
File by the due date for		•	Structions			CIBI Security fram	ber (CON)
filing your return, See	1001 SE 9	OTH AVE office, state, and ZIP code. For a foreign addr	acc con inclui	clions	<u> </u>		
instructions		•	ess, see msuu	CHOILS			
	PORTLAND,	OR 97214					
Enter the Re	turn code for th	ne return that this application is fo	r (file a sep	parate application for each return)			04
Application Is For			Return Code	Application Is For			Return Code
Form 990 or F	orm 990-EZ		01	Form 990-T (corporation)			07
Form 990-BL			02	Form 1041-A			08
Form 4720 (in	dividual)		03	Form 4720			09
Form 990-PF			04	Form 5227			10
Form 990-T (	section 401(a)	or 408(a) trust)	05	Form 6069			11
	trust other than		06	Form 8870			12
Telephone  If the org.  If this is f check this	or a Group Re	867-3660	dıgıt Group				
		8-month (6 months for a corporation r	equired to f	Ile Form 990-T) extension of time			<del></del>
until The ext ► X  ► I  2 If the ta	8/15_ ension is for th calendar year tax year begin	20 13 _, to file the exempt organic organization's return for: 20 12 or ning, 20 In line 1 is for less than 12 month	nization ret	g, 20	al retur	n	
3a If this a nonrefu	pplication is fo indable credits.	r Form 990-BL, 990-PF, 990-T, 47: See instructions	20, or 6069	, enter the tentative tax, less any	3a	\$	0.
<b>b</b> If this a paymer	pplication is fo its made Inclu	r Form 990-PF, 990-T, 4720, or 60 de any prior year overpayment alle	69, enter a	ny refundable credits and estimated tax credit	3Ь	\$	0.
c Balance EFTPS	<b>due.</b> Subtract (Electronic Fed	line 3b from line 3a Include your deral Tax Payment System). See i	payment w	with this form, if required, by using	3 c	\$	0.
Caution. If you	are going to m	ake an electronic fund withdrawal wit	h this Form	8868, see Form 8453-EO and Form 8879-E	O for		

Form 886	8 (Rev 1-2013)					Page 2
<ul><li>If you</li></ul>	are filing for an Additional (Not Automatic) 3-Mont	th Extensio	n, complete only Part II and check the	ns box.		<u>► X</u>
Note. Onl	y complete Part II if you have already been granted	d an automa	atic 3-month extension on a previous	ly filed For	rm 8868.	ت ا
• If you	are filing for an Automatic 3-Month Extension, cor	mplete only	Part I (on page 1).			
	Additional (Not Automatic) 3-Month E			(no cop	es needec	D.
W. marsen	· · · · · · · · · · · · · · · · · · ·		Enter filer's id			
	Name of exempt organization or other filer, see instructions	· · · · · · · · · · · · · · · · · · ·			ntification number	
	1					
Type or	ROGUE FOUNDATION			33-1217	1159	
print	Number, street, and room or suite number. If a P.O. box, see ins	tructions			number (SSN)	<del></del>
File by the						
extended due date for	date for Deliberation & Exception, 1.C.					
filing your return See	9700 S.W. CAPITOL HWY. STE. 285 City, town or post office, state, and ZIP code. For a foreign addre	ess, see instruct	l	<del></del>		
instructions						
	PORTLAND, OR 97219					
<b></b> 146	Detries and for the return that this analysis is f	or (filo o no	norsets application for each return)			
Enter the	Return code for the return that this application is for	or (file a se	parate application for each return)			04
		T:	<del></del>			<del></del>
Application is For	on	Return Code	Application Is For			Return Code
		<del></del>	IS FOI	Stational action	Tov Trains / Water Market	1
	or Form 990-EZ	01	5 1041 A	A THE STATE OF THE		
Form 990	<u> </u>	02	Form 1041-A			08
	(ındıvıdual)	03	Form 4720			09
Form 990		04	Form 5227			10
	T (section 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above) 06 Form 8870						12
<ul><li>If the</li><li>If this</li><li>whole gro</li></ul>	ooks are in care of ► <u>RICK PREST</u> one No. ► <u>541-867-3660</u> 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 gi	isiness in th r digit Group	e United States, check this box  Exemption Number (GEN)		If this	s is for the
members	the extension is for.	<del></del>			<del></del>	
5 For 6 If th 7 Stat	juest an additional 3-month extension of time until calendar year 2012, or other tax year beginning tax year entered in line 5 is for less than 12 mon Change in accounting period in detail why you need the extension THE DITIONAL TIME IS THEREFORE REQUE	ngths, check r	, 20 , and ending eason: Initial return  ACCOUNTING HAS NOT YET	BEEN C	OMPLETED	'
non	is application is for Form 990-BL, 990-PF, 990-T, 4 refundable credits. See instructions		.,	Ва		0.
	is application is for Form 990-PF, 990-T, 4720, or 6 ments made. Include any prior year overpayment a Form 8868				\$	0.
c Bala EFT	nnce due. Subtract line 8b from line 8a. Include you PS (Electronic Federal Tax Payment System). See	ur payment instruction	with this form, if required, by using s	8c	\$	0.
	Signature and Verific	ation mu	st be completed for Part II on	ıly.		
Under penalt correct, and	ries of perjury, I declare that I have examined this form, including accomplete, and that I am authorized to prepare this form	companying sch	nedules and statements, and to the best of my kn			,
Signature •	- Camerine M. Rote Tille >	CPA		D	ate - 8/1	4/13
BAA		FIFZ0502L	. 01/21/13		Form 8868	(Rev 1-2013)

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