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' Form 990-PF

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

Department of the Treasury Internal Revenue Service

For	alen	dar year 2012 or tax year beginning NOV	8, 2012	, and ending	DEC 31, 2012	
Nar	ne of	foundation *			A Employer identification	number
		۰				
		RICO FAMILY FOUNDATION			46-1237162	
Nun		nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
_ <u>P</u>		BOX 4436			541-779-76	
		own, state, and ZIP code			C If exemption application is p	ending, check here
		FORD, OR 97501			<u>.</u>	
G (heck	all that apply:		ormer public charity	D 1. Foreign organizations	s, check here
		Final return	Amended return		Foreign organizations me check here and attach co	eting the 85% test,
	N I -	Address change	Name change			
H (_	type of organization: X Section 501(c)(3) ex		ston	E If private foundation sta	
<u> </u>			Other taxable private foundaring method: X Cash		under section 507(b)(1)	
		·	ng method: X Cash her (specify)	Accrual	F If the foundation is in a	
	<i>0111 F</i> ∙\$	Part II, col. (c), line 16) 01 17,510. (Part I, colu	mn (d) must be on cash i	basis.)	under section 507(b)(1)	(D), Check here
_	ırt I		(a) Revenue and	(b) Net investment	(a) Adjusted not	(d) Disbursements
		Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	25,000.		N/A	(case same cruy)
	2	Check X if the foundation is not required to attach Sch B	23,000			
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities				
	5a	Gross rents				
	١.	Net rental income or (loss)				
	۱ ـ	Net gain or (loss) from sale of assets not on line 10				
	b	Gross sales price for all assets on line 6a		•		
~®	7	Capital gain net income (from Part IV, line 2)		0.		
مير ميريو	8	Net short-term capital gain				
~ ∨	9	Income modifications				
JAN 3 2 2014 Revenue	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	C	Gross profit or (loss)				
Ž	11	Other income				
<u> </u>	12	Total. Add lines 1 through 11	25,000.	0.		
3	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
19	14	Other employee salaries and wages				
v	15	Pension plans, employee benefits	1 225			4 005
ıse	16a	Legal fees Stmt 1	1,805.	0.	•	1,805.
ive Expenses	þ	Accounting fees Stmt 2	2,585.	0.		2,585.
Ų	_C	Other professional fees				
Š		Interest				
	18	Taxes				
	19	Depreciation and depletion				
	20 21	Occupancy Travel, conferences, and meetings		,		
	1	Printing and publications	100.	0.		100.
,	23	Other expenses	100.	0.		100.
·		Total operating and administrative				
	-7	expenses. Add lines 13 through 23	4,490.	0.		4,490.
	25	Contributions, gifts, grants paid	3,000.	<u> </u>		3,000.
		Total expenses and disbursements.	2,000			2,000.
		Add lines 24 and 25	7,490.	0.		7,490.
	27	Subtract line 26 from line 12:	.,			
		Excess of revenue over expenses and disbursements	17,510.			
		Net investment income (if negative, enter -0-)		0.		
		Adjusted net income (if negative, enter -0-)			N/A	
	~ -				<u> </u>	

<u>Form</u>	990-PF (2012) CARRICO FAMILY FOUNDATI			L237162 Page 2
Par	t II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
T ai	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing		17,510.	<u>17,510.</u>
2	2 Savings and temporary cash investments			
3	Accounts receivable ►			
	Less; allowance for doubtful accounts ▶			
	Pledges receivable ▶			
	Less; allowance for doubtful accounts	1		
١,	Grants receivable			
	Receivables due from officers, directors, trustees, and other			
-) '	disqualified persons			
- 1 '	7 Other notes and loans receivable			
	Less: allowance for doubtful accounts ▶			
7	Inventories for sale or use			
Ass (Prepaid expenses and deferred charges	<u> </u>		
~ 10	Da Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
11	Investments - land, buildings, and equipment, basis			
	Less accumulated depreciation			uus poor
12	2 Investments - mortgage loans			
13	3 Investments - other			
14	Land, buildings, and equipment: basis ▶			
	Less accumulated depreciation			
1!	5 Other assets (describe ►			
'				
11	5 Total assets (to be completed by all filers)	0.	17,510.	17,510.
	7 Accounts payable and accrued expenses			
11				
1				
Liabilities 5		· ·		
i <u>=</u> 20	Loans from officers, directors, trustees, and other disqualified persons			
ia 7	Mortgages and other notes payable			
_ 2	2 Other liabilities (describe >)			
2	3 Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
w	and complete lines 24 through 26 and lines 30 and 31.			
Net Assets or Fund Balances		0.	17,510.	
<u>ia</u> 2	5 Temporarily restricted			
<u>m</u> 20	6 Permanently restricted		<u> </u>	
<u> </u>	Foundations that do not follow SFAS 117, check here			
표	and complete lines 27 through 31.			
ο 2	7 Capital stock, trust principal, or current funds			
26 Set	Paid-in or capital surplus, or land, bldg., and equipment fund			
S 2	Retained earnings, accumulated income, endowment, or other funds			
₹ 30		0.	17,510.	
3	1 Total liabilities and net assets/fund balances	0.	17,510.	
Par	t III Analysis of Changes in Net Assets or Fund B	alances		
1 To	tal net assets or fund balances at beginning of year - Part II, column (a), line	30		
(m	ust agree with end-of-year figure reported on prior year's return)		1	0.
2 En	ter amount from Part I, line 27a		2	17,510.
3 Ot	her increases not included in line 2 (itemize)		3	0.
	d lines 1, 2, and 3		4	17,510.
	creases not included in line 2 (itemize)		5	0.
	tal net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	17,510.
				Form 990-PF (2012)

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

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	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(1948 - 9	see instru	ictio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on lin	ie 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see ins	structions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 📖 and ent	ter 1%	1	 		0.
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 1	12, col. (b). 🕽				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2			0.
3	Add lines 1 and 2		3			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-))	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5			0.
6	Credits/Payments:					
a	2012 estimated tax payments and 2011 overpayment credited to 2012 6a		_			
b	Exempt foreign organizations - tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868)		1 1			
d	Backup withholding erroneously withheld 6d		1			
7	Total credits and payments. Add lines 6a through 6d		7			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	>	9			<u>0.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	, ▶	10			
	Enter the amount of line 10 to be: Credited to 2013 estimated tax	Refunded ▶	11			
Pa	art VII-A Statements Regarding Activities	<u></u>			12.2	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it p	participate or interven-	e in		Yes	_
	any political campaign?			1a	ļ	X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instruc			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of air	ny matenals publish	ed or	}		
	distributed by the foundation in connection with the activities.					ŀ
C	Did the foundation file Form 1120-POL for this year?			1c_		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$	0.	<u>-</u>			}
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impose	ed on foundation		ŀ		
	managers. ► \$0.			ľ	ļ	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	cles of incorporation,	or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	olf "Yes," has it filed a tax return on Form 990-T for this year?		N/	A 4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	ļ	X
	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	at conflict with the stat	e law	1		
	remain in the governing instrument?			6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	If "Yes," complete Part II, col. (c), and Part XV.					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) 🕨					
	OR					[
b	olf the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	l (or designate)				
	of each state as required by General Instruction G? If "No," attach explanation			8b	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3		endar			
	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their page	nes and addresses		10	1	∣ X

	999-PF-(2012) CARRICO FAMILY FOUNDATION rt VII-A Statements Regarding Activities (continued)	46-1237	162	ļ	Page 5
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory p If "Yes," attach statement (see instructions)	rivileges?	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A		13	Х	
14		> <u>541-779</u> ZIP+4 ▶97!		641	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			•	
	and enter the amount of tax-exempt interest received or accrued during the year	15		/A Yes	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,	1	1	res	
	securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign		16		<u>X</u>
	country			l	
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly):				
		es 🗶 No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	I	1		
		es X No			
		es X No es X No			
	 (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available 	ואובבו או			
		s X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"				
	if the foundation agreed to make a grant to or to employ the official for a period after				
		es X No	İ	ļ	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		Ì	-	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	_1b		
	Organizations relying on a current notice regarding disaster assistance check here		ŀ		
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		İ		
	before the first day of the tax year beginning in 2012?	}	1c		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)): 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	_	ŀ	- 1	
a		es X No			
		ŀ			
b	If "Yes," list the years \(\bigsim_\), , , , ,,,,			- 1	
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			-	
	statement - see instructions.)	N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		İ		
	>		ĺ		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
	· ·	es X No	ļ		
0	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons aff May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to d	1	ł		
	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 2012.)	N/A	3b	ŀ	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
	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 2012?		4b		X
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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:			()		}
(1) Carry on propaganda, or otherwise attempt to influence legislation (secti			s X No		
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire				
any voter registration drive?		Ye	es 🗶 No		
(3) Provide a grant to an individual for travel, study, or other similar purpose	es?	Ye	es 🗶 No		
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literar	v. or educational purposes, or t				
the prevention of cruelty to children or animals?	,, 0. 000000000000000000000000000000000		es 🗓 No	}	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u	nder the exceptions described				
section 53.4945 or in a current notice regarding disaster assistance (see inst			N/A	5b	
Organizations relying on a current notice regarding disaster assistance check			►		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		uned	· 🗀		
			es 🔲 No		
expenditure responsibility for the grant?		I/A L Y	:o		
If "Yes," attach the statement required by Regulations section 53.49					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	o pay premiums on	است	੍ਰਿ ਜ		
a personal benefit contract?	-	Y	es X No	_	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		:	6b	<u> </u>
If "Yes" to 6b, file Form 8870.					l
${f 7a}$ At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Y	es 🗶 No		
b If "Yes," did the foundation receive any proceeds or have any net income attri			N/A	7b	
Part VIII Information About Officers, Directors, Trus	tees, Foundation Ma	nagers, Highl	y		
Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their	r companyation				
List an officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	10	Fynanca
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plan and deferred compensation	acc) Expense ount, other lowances
MAGNA CARRICO LOWMAN	_DIRECTOR/PRES	IDENT			
339 ALDER CREEK DR					
MEDFORD , OR 97504	5.00	0.	0	•	0.
JAMES LOWMAN	DIRECTOR/SECF	ETARY			
339 ALDER CREEK DR					
MEDFORD, OR 97504	5.00	0.	o		0.
MONTE D WILLIAMS	DIRECTOR				
339 ALDER CREEK DR	T				
MEDFORD, OR 97504	1.00	0.	0		0.
IDIOND, ON SISOT	1.00	1	"	•	U •
	-				
Compensation of five highest-paid employees (other than those in	cluded on line 1). If none.	enter "NONE."	L		
	(b) Title, and average		(d) Contributions to	. (e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plan and deferred	s acc	Expense ount, other
NONE	devoted to position		compensation	i ai	lowances
NONE	_				
		<u> </u>			
	_				
					
		<u> </u>			
Total number of other employees paid over \$50,000			•		0

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "I	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		▶ 0
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistica number of organizations and other beneficiaries served, conferences convened, research papers produc	I information such as the ed, etc.	Expenses
1 <u>N/A</u>		
2		
3		
4		
Dort IV B O		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on line	es 1 and 2.	Amount
1 N/A		··-
^		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	>	0.
		Form 990-PF (2012)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	<u>0.</u> 21,255.
	Fair market value of all other assets	1c	
	Total (add lines 1a, b, and c)	1d	21,255.
	Reduction claimed for blockage or other factors reported on lines 1a and		
·	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	21,255.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	319.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	20,936.
6	Minimum investment return Enter 5% of line 5 Adjusted for Short Tax Period	6	155.
	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	155.
2a	Tax on investment income for 2012 from Part VI, line 5		
Ь	Income tax for 2012. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	155.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	155.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	155.
=	art XII Qualifying Distributions (see instructions)	1 1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		7,490.
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	7,490.
b	š	1b 2	<u>U•</u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	7 400
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	7,490.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	^
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	7,490.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years.	qualities for t	ne section

Part XIII	Undistributed	i Income	(see instructions)
-----------	---------------	----------	--------------------

,	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,				155.
line 7				1331
2 Undistributed income, if any, as of the end of 2012 a Enter amount for 2011 only			0.	
b Total for prior years:				
b rotal for prior years.		0.		
3 Excess distributions carryover, if any, to 2012:				····
a From 2007				
b From 2008				
c From 2009				
d From 2010				
e From 2011	0.			
f Total of lines 3a through e	<u> </u>			*=====
4 Qualifying distributions for 2012 from				
Part XII, line 4: ► \$ 7,490.			0.	
a Applied to 2011, but not more than line 2a			0.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		<u> </u>		
(Election required - see instructions)	0.			155.
d Applied to 2012 distributable amount	7 225			
e Remaining amount distributed out of corpus	7,335.			0.
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			U.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	7,335.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable		<u></u>		
amount - see instructions		0.		
e Undistributed income for 2011. Subtract line				···
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2012. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2013				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2013.		LANGE		
Subtract lines 7 and 8 from line 6a	7,335.			
10 Analysis of line 9:	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
a Excess from 2008				
b Excess from 2009				
c Excess from 2010				
d Excess from 2011				
e Excess from 2012 7,335.				
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				Form 990-PF (2012)

	FAMILY FOU				237162 Page
Part XIV Private Operating F			II-A, question 9)	N/A	
1 a If the foundation has received a ruling of		• • • •			
foundation, and the ruling is effective fo	r 2012, enter the date of	the ruling	▶ ∟_		
b Check box to indicate whether the found		ng foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	1,0000	<u> </u>
income from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
investment return from Part X for					
each year listed		-			
b 85% of line 2a				ļ	
c Qualifying distributions from Part XII,					
line 4 for each year listed					ļ
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly		1			
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:			ļ		
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,		ļ			
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundatio	n had \$5,000 or m	ore in assets
at any time during t	he year-see instr	ructions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh			tributions received by th	ne foundation before the clo	se of any tax
year (but only if they have contributed n	nore than \$5,000). (See s	section 507(d)(2).)	•		•
None					
b List any managers of the foundation wh	o own 10% or more of th	ne stock of a corporation	(or an equally large por	tion of the ownership of a p	partnership or
other entity) of which the foundation ha	s a 10% or greater interes	st.			
None					
2 Information Regarding Contributi	ion, Grant, Gift, Loan	, Scholarship, etc., P	rograms:		
Check here ▶ ☐ If the foundation of	only makes contributions	to preselected charitable	organizations and does	not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	viduals or organizations i	under other conditions,	complete items 2a, b, c, an	d d
a The name, address, and telephone num	ber or e-mail of the perso	on to whom applications	should be addressed:		
MAGNA CARRICO LOWMAN	i, 541-779-7	641			
839 ALDER CREEK DR,	MEDFORD, OR	97504			
b The form in which applications should b	e submitted and informa	tion and materials they s	hould include:		
FOUNDATION APPLICATI				TS	
c Any submission deadlines:					
NONE					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields	, kınds of ınstitutions, o	other factors:	
NONE					
223601 12-05-12					Form 990-PF (201

Grants and Contributions Paid During the Y		Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	33,11,13	·
a Paid during the year				
ROVIDENCE COMMUNITY HEALTH		NON PROFIT	GENERAL FUND	
OUNDATION				
40 ROYAL AVE, SUITE 410				1,000
EDFORD, OR 97504			-	1,000
		, , , , , , , , , , , , , , , , , , ,		
T ANNE CATHOLIC CHURCH 131 NE 10TH		NON PROFIT	GENERAL FUND	
RANTS PASS, OR 97526				1,000
				,
ILDLIFE IMAGES REHAB AND EDUCATION		NON PROFIT	GENERAL FUND	
ENTER O BOX 36				
ERLIN_ OR 97532				1,000
		:		
Total		<u> </u>	▶ 3a	3,000
b Approved for future payment				3,000
None				
				<u> </u>
	1	i	1	

	Unrelated	business income	Exclu	ded by section 512, 513, or 514	(e)
nter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	,	code	741100111	Tanonon moonio
ā			+		
b		**			
G			 	- · · · · -	
d	1 1		+		
f					
g Fees and contracts from government agencies			<u> </u>		
Membership dues and assessments					
Interest on savings and temporary cash investments		-			
Dividends and interest from securities					
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal property					
7 Other investment income					
B Gain or (loss) from sales of assets other					
than inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory			+		
Other revenue:					
a	-				
b	-		+		
d					
e	_		+		
2 Subtotal. Add columns (b), (d), and (e)	_	0		0.	
			<u></u>	13_	·
				· · · · · · · · · · · · · · · · · · ·	
3 Total. Add line 12, columns (b), (d), and (e))				
B Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)		mplishment of E	xemp	t Purposes	
B Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities	to the Accor	column (e) of Part XVI-			mplishment of
B Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Accor	column (e) of Part XVI-			mplishment of
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3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Accor	column (e) of Part XVI-			mplishment of
B Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Accor	column (e) of Part XVI-			mplishment of
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Total. Add line 12, columns (b), (d), and (e) line worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Accor	column (e) of Part XVI-			mplishment of
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Part XVII	Farm 994	}-PF. (2	012) CARRI	CO FAMILY	Y FOUND	ATI	ON		46-	1237162	Pa	ge 13
1. Did the graphscalen directly or indirectly engage in any of the following within any other organization described in section 501(c) of the Code (other than section 591(c)) organizations) or in section 527, relating to political organizations? 1. Translets from the reporting foundation to a muncharitable exempt organization of: (1) Cash (2) Other assets 3. Differ transactions: (1) Sales of assets for an inoncharitable exempt organization (2) Purchases of assets for an inoncharitable exempt organization (3) Islands or following, equipment, or other assets (3) Loses or lose guarantees (3) Loses or lose guarantees (3) Loses or lose guarantees (3) Islands or lose guarantees (4) Hither among the continuity, or proposed organization or standing lists, other assets, or paid employees (4) If the among the value of the goods, other assets, or paid employees (4) Ithe among the value of the goods, other assets, or paid employees (4) Loses or lose guarantees (5) Loses or lose guarantees (5) Porformance of services or membership or fundrasing solicitations (5) Performance of services or membership or fundrasing solicitations (5) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Interest guarantees (6) Loses or lose guarantees (6) Loses or lose guarantees (6) Loses guarantees (6) Loses guarantees (6) Loses guarantees (6) Amount involved (9) Name of noncharitable exempt organization (9) Description of resistonship (9) Description of resistonship (9) Description of resistonship (9) Description of resistonship (9) Description of resistonship (9) Description of resistonship (9) Description of resistonship (9) Description of resistonship (9) Description of resistonship (1) Print guarantees (1) Loses (1) Print guarantees (1) Loses (1) Print guarantees (1) Loses (1) Print guarantees (1) Loses (1) Print guarantees (1) Loses (1) Print guarantees (1) Loses (1) Loses (1) L			Information Re	egarding Trar				and Relatio				
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(4) Reumbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrassing solicitations 18(6) X 18(6) X 18(6) X 2 c. Sharing of facilities, equipment, maining lists, other assets, or paid employees 3 if the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received. (a) Lie x 3 if the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received. (a) Lie x 5 if the answer to any of the above is "Yes," complete the goods, other assets, or services received. (a) Lie x 5 if the answer to any of the above is "Yes," complete the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of twinters, transactions, and sharing arrangements N/A 19 if Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A 10 if the answer to any of the above is "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A 10 if Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A 10 if Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A 10 if Yes, "complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A 10 if Yes, "complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A 10 if Yes, "complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A 10 if Yes, "complete the following schedule. (a) Name of organization (b) Type of organization (c	(2)	Purch	ases of assets from a no	ncharitable exempt	organization					1b(2)		X
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(6) Loans or loan quarantees (7) Performance of services or membership or fundraising solicitations (8) Performance of services or membership or fundraising solicitations (9) Performance of services or membership or fundraising solicitations (10) Loans or flacilities, equipment, making lists, other assets, or paid employees (11) It is answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received. (12) It is answer to any of the above is "Yes," complete the following schedule. (13) It is answer to any of the above is "Yes," complete the following schedule. (14) Name of noncharitable exempt organization (15) Amount involved (16) Name of noncharitable exempt organization (17) Amount involved (18) Amount involved (19) Name of noncharitable exempt organization (19) Description of trenders, treasections, and sharing arrangements (19) Amount involved (19) Name of noncharitable exempt organizations described in section 50 (c) of the Code (other than section 50 (c)(3)) or in section 52 (r) (19) If "Yes," complete the following schedule. (19) Name of noncharitable exempt organizations described in section 50 (c) of the Code (other than section 50 (c)(3)) or in section 52 (r) (17) Name of noncharitable exempt organizations described in section 50 (c) of the Code (other than section 50 (c)(3)) or in section 52 (r) (19) Type of organization (e) Description of relationship (19) Description of relationship (19) Description of relationship (19) Description of relationship (19) Description of relationship (19) Description of relationship (21) Description of relationship (22) Description of relationship (23) No Type of organization (e) Description of which pragase has any horwholedge in the property of the minimal property of the minimal property of the minimal property of the minimal property of the minimal property of the minimal property of the minimal property of the minimal property of the minimal prope										1b(4)		X
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d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements. N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 50 1(c) of the Code (other than section 50 1(c)(3)) or in section 52?? b if "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that have examined this return, including accompanying schedules and statements, and to the best of my knowledge in and belief, it is two, cornect, and complete Declaration of preparer (other than tax-payer) is based on all information of which preparer has any knowledge in the preparer in the preparer is signature. Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge in the following control of the penalties of perjury. I declare that in the preparer is signature. Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge in the following control of the penalties of perjury. I declare that in the penalties of perjury. I declare that in the penalties of perjury is peased on all information of which preparer has any knowledge. Print's EIN ≥ 20 – 47 4 9 3 6 3				•	-		S					
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(541)779-7641

Phone no.

Firm's address ▶ 839 ALDER CREEK DR.

MEDFORD, OR 97504

Form 990-PF	Legal	Fees	Statement 1		
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
LEGAL	1,805.	0.		1,805.	
To Fm 990-PF, Pg 1, ln 16a	1,805.	0.		1,805.	
Form 990-PF	Accounti	ng Fees	Statement 2		
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
ACCOUNTING	2,585.	0.		2,585.	
To Form 990-PF, Pg 1, ln 16b	2,585.	0.		2,585.	