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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

2012
Open to Public Inspection

Α	For the	₽ 2012 calendar year, or tax year beginning and	ending		
В	Check if applicable	C Name of organization	<u>~_</u> _	D Employer identif	ication number
	Addre	OREGONIANS FOR FOOD AND SHELTER, INC.			
	Name Chang			93-0	775640
F	initial retum Termii	Number and street (or P 0 box if mail is not delivered to street address) 1149 COURT STREET NE	Room/suit		er 8)370-8092
F	ated Amen	1145 COCKI BIREBI NE	L	G Gross receipts \$	646,270.
F	☐retum ☐Applic Ition			H(a) Is this a group re	
	pendi	F Name and address of principal officer SCOTT DAHLMAN		for affiliates?	Yes X No
		SAME AS C ABOVE		H(b) Are all affiliates inc	cluded? Yes No
		empt status: 501(c)(3)X 501(c)(6) ◀ (insert no) 4947(a)(1)	<u>or</u> 52	If "No," attach a	list. (see instructions)
		e: ► WWW.OFSONLINE.ORG		H(c) Group exemption	
		organization X Corporation	L Yea	r of formation 1980	M State of legal domicile OR
	art [Summary	РОМОП	<u> </u>	ENT
Çe		Briefly describe the organization's mission or most significant activities: ${\hbox{{\tt TO}}\ {\tt P}}$ PRODUCTION OF QUALITY FOOD AND FIBER WHI			
Activities & Governance	l .	Check this box If the organization discontinued its operations or dispo			
ove.	i	Number of voting members of the governing body (Part VI, line 1a)		3	35
Ğ		Number of independent voting members of the governing body (Part VI, line 1b)		4	35
ies	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	4
Ξ		Total number of volunteers (estimate if necessary)		6_	0
Act		Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
	<u>b</u>	Net unrelated business taxable income from Form 990-T, line 34		7b	Current Year
•	8	Contributions and grants (Part VIII, line 1h)	-	Prior Year 36,783.	
Į,		Program service revenue (Part VIII, line 2g)		427,647.	1
Revenue		nvestment income (Part VIII, column (A), lines Reand 7d V = D		131.	<261.>
Œ		Other revenue (Part VIII, column (A), lines 5,6d, 8c, 9c, 10c, and 11e)		<563.	> 294.
		Total revenue - add lines 8 through 11 (must equal-PartsVIII, column (A) (the 12)		463,998.	645,947.
	1	Grants and similar amounts paid (Part IX Column (A), lines 1-3)	<u> </u>	200.	1,000.
	14	beliefits paid to or for members (Part IA) column (A), line 4)	<u> </u>	0.	0.
Expenses	15	Salaries, other compensation, employee benefits (Part) (C. Coumh (A), lines 5-10)	-	371,499.	360,257.
pen	1	Professional fundraising fees (Part IX, column (A), line 11e) Fotal fundraising expenses (Part IX, column (D), line 25)	0.	<u> </u>	0.
Ä		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	- •	106,995.	312,239.
		Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		478,694.	
	19	Revenue less expenses. Subtract line 18 from line 12		<14,696.	
Net Assets or Fund Balances			В	leginning of Current Year	End of Year
Sset	20	Total assets (Part X, line 16)	<u> </u>	251,455.	268,308.
nd A	21	Total liabilities (Part·X; line 26)	-	111,910.	
2 6.	22 ert ii	Net assets or fund balances. Subtract line 21 from line 20 Signature Block		139,545.	111,996.
		ties of perjury, I declare that I have examined this return, including accompanying schedule	e and state	ments, and to the heet of m	w knowledge and belief it is
		, and completed Degeration of preparer (other than officer) is based on all information of wi			y knowledge and belief, it is
		WEV -	<u> </u>		3
Sig	n	Signature of officer		Date	
Her	e	SCOTT DAHLMAN, EXECUTIVE DIRECTOR			
		Type or print name and title		Dete	- I Britis
		Print/Type preparer's name Preparer's signature	j	Date Check Street	PTIN
Paid Pron	ŀ	CHARLES A. SWANK Firm's name GROVE, MUELLER & SWANK, P.C.			P00150622 93-0874157
	only	Firm's address 475 COTTAGE STREET NE, SUITE 200	9	Firm's EIN ▶	73-00/413/
-06	J,	SALEM, OR 97301	~	Phone no 5	03-581-7788
Mav	the IF	S discuss this return with the preparer shown above? (see instructions)	· · · · · ·	1, 110110 110	X Yes No
	01 12-10		ons.		Form 990 (2012)

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	rt IV Checklist of Required Schedules	040	<u> </u>	age S
	onecklist of Required ochedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		1.55	-
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	_3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	ĺ		ĺ
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	X	-
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			.
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		X
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	-		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	8		X
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for	-		
•	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?		ļ	1
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	_		
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.	i	•	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,]
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			l
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	<u> </u>	X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	-	Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	1
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111	X	-
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-		Х
	Schedule D, Parts XI and XII	12a		^
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13		13		X
14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	14a	\vdash	X
	Did the organization maintain arronice, employees, or agents outside or the oritics states. Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,		<u> </u>	
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	146		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization		-	
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16_		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			1
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	<u> </u>	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	L	Х

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

_	n 990 (2012) OREGONIANS FOR FOOD AND SHELTER, INC. 93-0775	640	P	age 4
Pa	rt IV Checklist of Required Schedules (continued)			
		<u> </u>	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the	Í		v
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	 	X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			X
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	┝╾┤	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	00		X
04-	Schedule J	23_	-	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	24a		X
.	Schedule K. If "No", go to line 25	24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
G	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
A	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	-	<u> </u>
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	270	╁	
200	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
•	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26]]	Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			-
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			l
	of any of these persons? If "Yes," complete Schedule L, Part III	27	. 1	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			ĺ
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31	igsquare	Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			l
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		1 1	.,
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	\vdash	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
••	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	 	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	ا مم ا		
^-	If "Yes," complete Schedule R, Part V, line 2	36	\vdash	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	2-		Х
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	├──┤	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	1 1	, 1	

Form **990** (2012)

Note. All Form 990 filers are required to complete Schedule O

	Check if Schedule O contains a response to any question in this Part V					لبا					
					Yes	No					
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	10	4							
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	16_	0	1							
C	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eporta	ble gamıng								
	(gambling) winnings to prize winners?	1 1		1c	X	ļ					
2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,										
	filed for the calendar year ending with or within the year covered by this return	_2a	4								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retuined to the control of the control	ns?		2b	X						
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)									
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X					
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		ļ					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other										
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		X					
b	If "Yes," enter the name of the foreign country:										
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accou	nts.			.,					
_	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X					
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?		_5b_		X					
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c							
69	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne orga	inization solicit			v					
	any contributions that were not tax deductible as charitable contributions?		, to	6a		X					
D	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions o	rgiπs								
7	were not tax deductible?			6b		·······					
7	Organizations that may receive deductible contributions under section 170(c).		rouded to the never?	- -		1					
a b	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set if "Yes," did the organization notify the donor of the value of the goods or services provided?	vices p	Tovided to the payor?	7a 7b		 					
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	ae ren	ured	76		-					
·	to file Form 8282?	as req	alled	7c							
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d									
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		t?	7e							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr			7f							
9	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 88	99 as required?	7g							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation fi	le a Form 1098-C?	7h		Ĺ					
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Di	d the s	upporting								
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tim	e during the year?	8		ļ.,. <u>.</u>					
9	Sponsoring organizations maintaining donor advised funds.					ĺ					
a	Did the organization make any taxable distributions under section 4966?			9a							
Ь	Did the organization make a distribution to a donor, donor advisor, or related person?			9b							
10	Section 501(c)(7) organizations. Enter:										
a	Initiation fees and capital contributions included on Part VIII, line 12	10a									
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b									
11	Section 501(c)(12) organizations. Enter:	1 1				1					
	Gross income from members or shareholders	11a									
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against					İ					
	amounts due or received from them.)	11b				İ					
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	,	'	12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			40-		·					
a	Is the organization licensed to issue qualified health plans in more than one state?			13a							
	Note. See the instructions for additional information the organization must report on Schedule O.					İ					
Ь	b Enter the amount of reserves the organization is required to maintain by the states in which the										
	organization is licensed to issue qualified health plans	13b				1					
	Enter the amount of reserves on hand	13c		140		X					
	Did the organization receive any payments for indoor tanning services during the tax year?	. 0		14a 14b							
р	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	, U			990	(0010)					

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI			X								
Sec	tion A. Governing Body and Management											
			Yes	No								
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 35											
	If there are material differences in voting rights among members of the governing body, or if the governing											
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O	[
b	Enter the number of voting members included in line 1a, above, who are independent 1b 35											
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other											
	officer, director, trustee, or key employee?	2		X								
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision											
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X								
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X								
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	v	Х								
6	Did the organization have members or stockholders?	6	X									
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	_	x									
	more members of the governing body?	7a										
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or		х									
•	persons other than the governing body?	7b										
8	8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the followinga The governing body?											
		8a 8b	X									
9	Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	80										
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х								
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	-										
	tion of the decitor b requests minimater about policies not required by the internal november educity		Yes	No								
10a	Did the organization have local chapters, branches, or affiliates?	10a		X								
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,											
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b										
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X								
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.											
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b										
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe											
	in Schedule O how this was done	12c										
13	Did the organization have a written whistleblower policy?	13		<u>X</u>								
14	Did the organization have a written document retention and destruction policy?	14		X								
15	Did the process for determining compensation of the following persons include a review and approval by independent											
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	_	v									
	The organization's CEO, Executive Director, or top management official	15a	<u>X</u>	_								
b	Other officers or key employees of the organization	15b	<u> </u>									
46.	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).											
iva	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	46.	1	Х								
k	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a										
b	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's											
	exempt status with respect to such arrangements?	16b	1									
Sec	tion C. Disclosure	100										
17	List the states with which a copy of this Form 990 is required to be filed NONE											
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le									
	for public inspection. Indicate how you made these available. Check all that apply.											
	Own website Another's website X Upon request Other (explain in Schedule O)											
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	d finan	cıal									
	statements available to the public during the tax year.											
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	ion: 🕨										
	THE ORGANIZATION - 503-370-8092											
	1149 COURT STREET NE, SALEM, OR 97301											
32000		_	000	0040								

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order. Individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average hours per	(do	not c	Pos heck	tion	than	one th an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) DAVID HAMPTON DIRECTOR	1.00	X	ļ					0.	0.	0.
(2) JERRY MARGUTH	1.00							0.	0.	0.
DIRECTOR (3) BRUCE ALBER	1.00	X	 				-			<u> </u>
DIRECTOR	100	X						0.	0.	0.
(4) JERRY ANDERSON	1.00									
DIRECTOR	1.00	X				<u> </u>	ļ	0.	0.	0.
(5) RON BORISCH DIRECTOR	1.00	X						0.	0.	0.
(6) ANDY BRYANT	1.00									
DIRECTOR		X			<u> </u>			0.	0.	0.
(7) ERIC GEYER	1.00	ļ								
CHAIRMAN	1.00	X	-	X		 	<u> </u>	0.	0.	0.
(8) BARRY BUSHUE DIRECTOR	1.00	X						0.	0.	0.
(9) CURT DANNEN	1.00	 					<u> </u>			
DIRECTOR		Х						0.	0.	0.
(10) MIKE DIAMOND	1.00								_	
DIRECTOR	1 00	Х				_		0.	0.	0.
(11) MARK DUNN	1.00	х		Х				0.	0.	0.
VICE CHAIRMAN (12) DEBBIE EGO	1.00	┢		Λ			-			
DIRECTOR		X						0.	0.	0.
(13) MIRE FAHEY	1.00									
DIRECTOR		X						0.	0.	0.
(14) DANELLE FARMER	1.00	١							•	•
DIRECTOR	1 00	X	-				_	0.	0.	0.
(15) CINDY FINLAYSON	1.00	X						0.	0.	0.
DIRECTOR (16) JIM PITZGERALD	1.00	<u> </u>				-	-			
DIRECTOR	1.50	х						_ 0.	0.	0.
(17) JARE GIBBS	1.00									
DIRECTOR		X						0.	0.	0.
232007 12-10-12										Form 990 (2012)

Form 990 (2012) OREGONIAN	NS FOR 1	FO	QC	Al	<u>ND</u>	SI	HE:	LTER, INC.	93-077	<u> 5640</u>	<u> </u>	age 8
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees/	, an	d Hi	ghe	st C	Compensated Employe	ees (continued)			
(A)	(B)				C)			(D)	(E)		(F)	
Name and title	Average	(do	not c		ition		one	Reportable	Reportable	Ε	stimat	ed
	hours per	cod	, unle	ss pe	rson	is bot	th an	compensation	compensation	a	mount	
	week	\vdash	cerar	dad	Irecto	or/trus	T	from	from related		other	
	(list any hours for	ig Ct				<u> </u> _	ŀ	the	organizations	4	npensa	
	related	5	8	ļ	ļ	뵱	ļ	organization (W-2/1099-MISC)	(W-2/1099-MISC)	1	rom th ganıza	
	organizations	age	E SEE		8			(44-27 1099-141100)		1 .	id rela	
	below	individual trustee or director	institutional trustee		l ge	8 E					anızat	
	line)		Tagget 1	G Ge	Key employee	Highest compensated employee	Former					
(18) JEAN GODFREY	1.00						Γ					
DIRECTOR		X	L					0.	. 0	•	_	0.
(19) JERRY HARCHENKO	1.00											
DIRECTOR		X						0.	. 0			_0.
(20) DOUG HOFFMAN	1.00											
SECRETARY/TREASURER		X		Х				0.	. 0	•		0.
(21) MIKE IVERSON	1.00											
DIRECTOR		X				_	<u> </u>	0.	. 0	•		0.
(22) CHRIS JARMER	1.00					l						
DIRECTOR		X	<u> </u>					0.	. 0	•		0.
(23) DAVID PHIPPS	1.00											
DIRECTOR		X						0.	. 0	•		0.
(24) ANDREA VOGT	1.00											
DIRECTOR		X	$oxed{oxed}$				Ĺ.	0.	0	•		0.
(25) BRENDAN MCCARTHY	1.00											
DIRECTOR		X						0.	. 0	•		0.
(26) GREG MILLER	1.00											
DIRECTOR		X	<u> </u>					0.		_		0.
1b Sub-total								0.	0			0.
c Total from continuation sheets to Part VI	, Section A							211,104.			3,4	
d Total (add lines 1b and 1c)								211,104.	0	. 5	3,4	<u>69.</u>
2 Total number of individuals (including but no	ot limited to th	ose	liste	d at	oove	e) wł	no re	eceived more than \$10	0,000 of reportable			
compensation from the organization												<u> </u>
											Yes	No
3 Did the organization list any former officer,	director, or tru	ıste	e, ke	y en	nplo	yee	, or I	highest compensated	employee on			
line 1a? If "Yes," complete Schedule J for so	uch individual									3	ļ	X
4 For any individual listed on line 1a, is the su	m of reportable	le co	omp	ensa	ation	and	to t	her compensation from	the organization			
and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J f	or such individual		4		<u> X</u>
5 Did any person listed on line 1a receive or a	ccrue comper	nsat	on f	rom	any	unr	elat	ed organization or indiv	ridual for services			
rendered to the organization? If "Yes," comp	olete Schedule	e <i>J f</i>	or su	ich j	oers	on				5		X
Section B. Independent Contractors												
1 Complete this table for your five highest cor	=									sation	from	
the organization. Report compensation for t	he calendar y	ear e	endi	ng w	/Ith (or w	<u>ithin</u>	the organization's tax	year.			
(A)								(B)			C)	
Name and business	address 	NC	DNE	<u>:</u>			-	Description of	services	Compe	ensatio	n
									1			
							\dashv					
							\dashv				 	
									ŀ			

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 0
SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2012)

		Check if Schedule O con	tains a response	to any question i		······································		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a				******	
בַּ ק	b	Membership dues	1b					
Am Am	c	Fundraising events	1c					
ar E	d	Related organizations	1d					
E.E	е	Government grants (contribut	tions) 1e					
i Si	f	All other contributions, gifts, gran	nts, and					
혈		similar amounts not included abo	ove 1f	233,517.				
늘	9	Noncash contributions included in lines	s 1a-1f \$					
<u>8 8</u>	h	Total. Add lines 1a-1f		•	233,517.			
ľ				Business Code				
8 2		MEMBER DUES		900099	383,542.			<u> </u>
Program Service Revenue		EDUCATION & COM		611710	17,855.	17,855.		
S all	C	MANAGEMENT & AL	OMIN CHA	541900	11,000.	11,000.		
हूँ <u>व</u>	d							
§ .	e							
<u>-</u>	f	All other program service reve	enue		···			
	g	Total. Add lines 2a-2f			412,397.			
3	3	Investment income (including	dividends, inter	est, and				
i		other similar amounts)		▶	62.			62.
4	4	Income from investment of ta	x-exempt bond p	oroceeds -				
5	5	Royalties			40 - 100 - 100 - 100		· · · · · · · · · · · · · · · · · · ·	
			(ı) Real	(II) Personal				
6	3 a	Gross rents						
	b	•						
		, ,						
		Net rental income or (loss)		•	····			
7	7 a	Gross amount from sales of	(i) Securities	(II) Other		i i		
		assets other than inventory						
	b	Less: cost or other basis		222				
		and sales expenses		323.				
ł		Gain or (loss)		<323.	, ,,,,			-222
	d	Net gain or (loss)		P	<323.			<323.
3	3 a	Gross income from fundraisin	• ,					
Other Reven		including \$	of					
æ		contributions reported on line	1c). See	1				
ē		Part IV, line 18	a					
ੂਰ ∣		Less: direct expenses	. b					
		Net income or (loss) from fund	-	>				-
٩	, a	Gross income from gaming ac						
	L	Part IV, line 19	a					
Į		Less: direct expenses Net income or (loss) from gam	b bene activition			!		1
10								
'0	, а	Gross sales of inventory, less and allowances				Į		
	h	Less: cost of goods sold	a b					
		Net income or (loss) from sale:	_					
	Ü	Miscellaneous Revenu		Rusiness Cods				
111	_	W/C DIVIDEND	<u> </u>	Business Code 900099	294.	294.		1
' '	a b				<u> </u>	2730		
	v			 				
	ن	All other revenue						
		Total. Add lines 11a-11d			294.		11 - 14 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
12		Total revenue. See instructions			645,947.	412,691.	0	<261.
232009 12-10-12	-	TOTAL TOTAL CO. DEC MISTINGUIS			<u> </u>		<u> </u>	Form 990 (2012)

Form 990 (2012) OREGONIANS FOR Part IX Statement of Functional Expenses

Seci	(ion 501(c)(3) and 501(c)(4) organizations must com			omplete column (A)	
	Check if Schedule O contains a respon	(A)	S Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21		- <u>-</u>		
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22	1,000.			·····
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16			·	······································
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	264 572		Ì	
	trustees, and key employees	264,573.		<u> </u>	
6	Compensation not included above, to disqualified]	
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	F 2 6 5 2		ļ. <u> </u>	
7	Other salaries and wages	53,657.			
8	Pension plan accruals and contributions (include	5 440			
	section 401(k) and 403(b) employer contributions)	5,449.			
9	Other employee benefits	13,661.		ļ	
10	Payroll taxes	22,917.	 		
11	Fees for services (non-employees):			1	
а	Management	21 070			
ь	Legal	21,870.		-	
С	Accounting	7,500.			
d	Lobbying		- 10-11-1 1 1-11-1 1-11-1-1-1-1-1-1-1-1-		
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,	4 510			
	column (A) amount, list line 11g expenses on Sch O)	4,519.			
12	Advertising and promotion	20 060		-	
13	Office expenses	30,969.			
14	Information technology	1,101.	<u> </u>		
15	Royalties	15,000.			
16	Occupancy	9,362.		ļ — — —	
17	Travel	9,302.			
18	Payments of travel or entertainment expenses	Į		}	
40	for any federal, state, or local public officials		<u> </u>		
19	Conferences, conventions, and meetings			 	
20	Interest			 	
21	Payments to affiliates	1,898.		 	
22	Depreciation, depletion, and amortization	2,782.			
23	Insurance	2,102.			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line				
	24e amount exceeds 10% of line 25, column (A)	Į.			
_	amount, list line 24e expenses on Schedule 0) SPECIAL PROJECTS - EDUC	217,178.	<u></u>		
a		217,170.			
b					
ر د					
d	All other expanses			 	
	All other expenses	673,496.			
25 26	Total functional expenses Add lines 1 through 24e	0/3/490.			
20	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation	}		}	
	Check here if following SOP 98-2 (ASC 958-720)			<u> </u>	

 OIIII 3	7 9 U \2	2012)	_	
Part	X	Bala	nce S	heet

	n x	Check if Schedule O contains a response to an	y ques	ion in this Part X			
	.,				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			175,442.	1	201,751.
	2	Savings and temporary cash investments		_	50,509.	2	50,572.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net		<u>L</u>	22,750.	4	5,930.
	5	Loans and other receivables from current and for	ormer o	fficers, directors,			
		trustees, key employees, and highest compens	ated er	nployees. Complete			
	1	Part II of Schedule L				5	
	6	Loans and other receivables from other disqual	fied pe	rsons (as defined under			
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sec	tion 50	1(c)(9) voluntary			
s)		employees' beneficiary organizations (see instr).	Comp	lete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net			7_		
Ą	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			525.	9	4,289.
	10a	Land, buildings, and equipment: cost or other		[""			
		basis. Complete Part VI of Schedule D	10a	12,138. 6,372.			
	b	Less: accumulated depreciation	10b	6,372.	2,229.	10c	5,766.
	11	investments - publicly traded securities				11	
	12	investments - other securities. See Part IV, line	1			12	
	13	Investments · program-related. See Part IV, line		13			
	14	intangible assets		14			
	15	Other assets. See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must equi	al line :		251,455.	16	268,308.
	17	Accounts payable and accrued expenses		11,823.	17	6,547.	
	18	Grants payable		18			
	19	Deferred revenue			100,087.	19	149,765.
	20	Tax-exempt bond liabilities				20	
S	21	Escrow or custodial account liability. Complete I	art IV	of Schedule D		21_	_
	22	Loans and other payables to current and former	office	s, directors, trustees,	,		
Liabilities		key employees, highest compensated employee	s, and	disqualified persons.			
		Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrela	ited th	rd parties		23	
	24	Unsecured notes and loans payable to unrelated	d third	parties		24	
	25	Other liabilities (including federal income tax, pa	yables	to related third			
		parties, and other liabilities not included on lines	17-24	. Complete Part X of			
		Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			111,910.	26	156,312.
		Organizations that follow SFAS 117 (ASC 958), chec	k here ▶ X and			
es		complete lines 27 through 29, and lines 33 an	d 34.				
Net Assets of Fund Balances	27	Unrestricted net assets			139,545.	27	111,996.
Sale	28	Temporarily restricted net assets				28	
	29	Permanently restricted net assets				29	
5		Organizations that do not follow SFAS 117 (A	SC 958), check here 🕨 🔲 🥛			
5		and complete lines 30 through 34.					
2	30	Capital stock or trust principal, or current funds				30	
3	31	Paid-in or capital surplus, or land, building, or eq	utpme	nt fund		31	
;	32	Retained earnings, endowment, accumulated inc				32	
Ž	33	Total net assets or fund balances			139,545.	33	111,996.
ĺ		Total liabilities and net assets/fund balances			251,455.	34	268,308.

Form **990** (2012)

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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Form 990 (2012)

Form 990 OREGONIA	NS FOR 1	FOC	<u>DD</u>	<u>Aì</u>	ND	SI	IE.	LTER, INC.	93-077	5640
Part VII Section A. Officers, Directors, Tr	ustees, Key E	mplo	yee	s, a	nd l	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average			Pos	ition			Reportable	Reportable	Estimated
	hours	(cl	heck	all 1	that	арр	ly)	compensation	compensation	amount of
	per week (list any hours for related organizations below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) GEORGE SMITH	1.00	_ ⊆	본	δ	3	Î	- E			
DIRECTOR		X						0.	0.	0 .
(28) KENT PITTARD	1.00					l				
DIRECTOR		X						0.	0.	0.
(29) TED REISS	1.00									
DIRECTOR		X		}				0.		0.
(30) BLAKE ROWE	1.00									
DIRECTOR		X						0.	0.	0.
(31) CAROL RUSSELL	1.00									
DIRECTOR		X				<u> </u>		0.	0.	0.
(32) BRYAN STUART	1.00	1							_	
DIRECTOR		Х					<u> </u>	0.	0.	0
(33) APRIL SNELL	1.00	١								^
DIRECTOR	1 00	Х			<u> </u>		_	0.	0.	0.
(34) LUKE BERGEY	1.00							0.	0.	0.
DIRECTOR (25)	1.00	X						0.		0,
(35) JAMES CURRY DIRECTOR	1.00	Х						0.	0.	0 .
(36) SCOTT DAHLMAN	40.00	Λ			-		 	<u></u>		
EXECUTIVE DIRECTOR	10.00	1		х			l	81,458.	0.	27,369
(37) PAULETTE PYLE	40.00									
GRASS ROOTS DIRECTOR		1		Х				118,875.	0.	18,906
(38) TERRY WITT	40.00									
EXEC. DIRECTOR - 1/1 - 1/31		Ĺ.,		X				10,771.	0.	7,194
							_			
		1								
					_		_		<u> </u>	·
	ļ				<u> </u>	_			<u> </u>	
		-					<u> </u>	<u> </u>		
		ļ								J.
	· · · · · · · · · · · · · · · · · · ·						\vdash			
		1								
	 				-	-	\vdash			-
							1		1	
			\vdash	\vdash			 			
								1		
Total to Part VII, Section A, line 1c								211,104.		53,469

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

	Section 501(c)(4), (5), or (6) organiz	rations: Complete Part III.			
Nar	me of organization			Emp	oloyer identification number
		IANS FOR FOOD AND			93-0775640
P	ert I-A Complete if the o	rganization is exempt un	der section 501(c	or is a section 527	organization.
2	Provide a description of the organ Political expenditures Volunteer hours	nization's direct and indirect politi	cal campaign activities	s in Part IV.	\$
P	art I-B Complete if the o	rganization is exempt un	der section 501/c	1/31	
	Enter the amount of any excise ta			<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	<u> </u>
	Enter the amount of any excise to				♥ \$
	If the organization incurred a sect	• •			Yes No
	Was a correction made?	1011 4333 tax, did it life i 01111 4720	your.		Yes No
	o If "Yes," describe in Part IV.				
-		ganization is exempt un	der section 501(c	, except section 501	(c)(3).
	Enter the amount directly expend		 		
	Enter the amount of the filing orga	· ·			<u> </u>
_	exempt function activities		and, organizations to the	>	\$
3	Total exempt function expenditure	es. Add lines 1 and 2. Enter here	and on Form 1120-POI	L .	
	line 17b				\$
4	Did the filing organization file Form	n 1120-POL for this year?			Yes No
	Enter the names, addresses and	•	EIN) of all section 527 p	olitical organizations to whi	ch the filing organization
	made payments. For each organize				
	contributions received that were p	•			
	political action committee (PAC).	f additional space is needed, pro	vide information in Par	t IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
		(2,7)	(1)	filing organization's	contributions received and
		Ì		funds. If none, enter -0-	
		1	1		delivered to a separate political organization.
					If none, enter -0
		1			
		<u> </u>			

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

Schedule C (Form 990 or 990-EZ) 2012

232041 01-07-13

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Schedule C (Form 990 or 990-EZ) 2012						0775640 Page 2	
Part II-A Complete if the or	_		mpt under section	on 501(c)(3) and fil	ed Form 5768		
(election under sec	ction 50	<u>l(h)). </u>					
A Check 🕨 📖 if the filing organiza	ation belon	gs to an aff	iliated group (and list	in Part IV each affiliated	group member's nai	me, address, EIN,	
expenses, and sha	re of exce	ss lobbying	expenditures).				
B Check L if the filing organize	ation check	red box A a	nd "limited control" pi	rovisions apply.	· ·	,	
		bying Expe leans amou	nditures unts paid or incurred	l.)	(a) Filing organization's totals	(b) Affiliated group totals	
1a Total lobbying expenditures to infl	luence pub	dic opinion ((grass roots lobbying)				
b Total lobbying expenditures to infl						 	
c Total lobbying expenditures (add			dy (direct lobbyling)			 	
d Other exempt purpose expenditures		u 10)				 	
		n 1 n nnd 1 d	٠,		·· ·	 	
e Total exempt purpose expenditure	•		•	Ab - alivera		 	
f Lobbying nontaxable amount. Ent							
If the amount on line 1e, column (a)	or (D) is:		bying nontaxable an				
Not over \$500,000			the amount on line 1e				
Over \$500,000 but not over \$1,00			00 plus 15% of the ex				
Over \$1,000,000 but not over \$1,5		00 plus 10% of the ex					
Over \$1,500,000 but not over \$17	\$225,00	00 plus 5% of the exc	ess over \$1,500,000.				
Over \$17,000,000		\$1,000,	000.				
g Grassroots nontaxable amount (er	nter 25% o	f line 1f)				 	
h Subtract line 1g from line 1a. If zei		•				<u> </u>	
_	i Subtract line 1f from line 1c. If zero or less, enter -0-						
j If there is an amount other than ze			line 1), did the organiz	zation file Form 4720	 -		
reporting section 4911 tax for this			mio in ala mo organi			Yes No	
			eraging Period Unde				
				on do not have to comp			
				es 2a through 2f on pa ear Averaging Period	ge 4.)		
		ying Expe	laitures burning 4- re	Averaging Feriod		<u> </u>	
Calendar year (or fiscal year beginning in)	(a) :	2009	(b) 2010	(c) 2011	(d) 2012	(e) Total	
2a Lobbying nontaxable amount			:				
b Lobbying ceiling amount							
(150% of line 2a, column(e))							
- Traditable and							
c Total lobbying expenditures	 			-	<u> </u>	 	
d Grassroots nontaxable amount							
e Grassroots ceiling amount							
(150% of line 2d, column (e))							
f Grassroots lobbying expenditures							
- Sidoorooto ropojing expenditules	<u> </u>			<u> </u>			

Schedule C (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 2012 OREGONIANS FOR FOOD AND SHELTER, INC. 93-077564

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 93-0775640 Page 3

(election under section 501(h)).

Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? 3 X Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, in answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 5 <20,94 Part IV Supplemental Information	ror ea	nch "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	{t	a)		٠,
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if 'Yes,' enter the amount of any tax incurred under section 4912 c if 'Yes,' enter the amount of any tax incurred by organization managers under section 4912 d if the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A, Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1	of the	lobbying activity	Yes	No	Amo	ount
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or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total Add lines 1c through 1i 2						
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b Carryover from last year c Total 2 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 5 <20,94 Part IV Supplemental Information				2a	25	5,080.
c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 5 <20,94 Part IV Supplemental Information		•				
Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) 5		•			25	080.
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 5 <20,94 Part IV Supplemental Information						
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 5 <20,94 Part IV Supplemental Information			cess			
expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 5 < 20,94 Part IV Supplemental Information						
5 Taxable amount of lobbying and political expenditures (see instructions) 5 <20,94 Part IV Supplemental Information		•	pontiou.	4		
Part IV Supplemental Information		·		—— —	<20	945.
and Part II-B, line 1. Also, complete this part for any additional information.	5 Part	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex- does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information lete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; P	political	4 5	<20), 9

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

2012
Open to Public Inspection

Name of the organization

OREGONIANS FOR FOOD AND SHELTER, INC.

Employer identification number 93-0775640

Pa	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a	·	used only
	for charitable purposes and not for the benefit of the donor o		-
	impermissible private benefit?	, , ,	Yes No
Pa	rt II Conservation Easements. Complete if the org	janization answered "Yes" to Form 990, F	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e		storically important land area
	Protection of natural habitat	_	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	led conservation contribution in the form	of a conservation easement on the last
_	day of the tax year.		
	and the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic stru	icture included in (a)	2c
d	Number of conservation easements included in (c) acquired a		
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased extinguished or terminated by the	
·	year	oused, extinguished, or terminated by the	o organization during the tax
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per		
·	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) abov		
•	and section 170(h)(4)(B)(ii)?	e satisfy the requirements of section 170	Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	
·	include, if applicable, the text of the footnote to the organizat		
	conservation easements.	ion 3 manda statements that describes	the organization a accounting for
Pa	T III Organizations Maintaining Collections of	Art. Historical Treasures, or O	ther Similar Assets.
<u> </u>	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		ment and balance sheet works of art.
	historical treasures, or other similar assets held for public exh	•	•
	the text of the footnote to its financial statements that describ		
h	If the organization elected, as permitted under SFAS 116 (AS		t and halance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	, ,	
		deation, or research in furtherance of pu	one service, provide the following amounts
	relating to these items: (i) Revenues included in Form 990, Part VIII, line 1		▶ €
	(ii) Assets included in Form 990, Part X		
•	• •	neuroe or other similar assets for fine and	d gain, provide
2	If the organization received or held works of art, historical trea		i gairi, provide
_	the following amounts required to be reported under SFAS 11	to (MOC 900) relating to these items:	• •
a	Revenues included in Form 990, Part VIII, line 1		•
Ь	Assets included in Form 990, Part X		> \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2012

Sche	edule D (Form 990) 2012 OREGONI	ANS FOR	FOO	DD AND	SHE	LTER,	INC.		93-07	75640	Page 2
	rt III Organizations Maintaining C	ollections	of Ar	t, Historic	al Tr	easures,	or Oth	er Simil	ar Asse	ts (continu	ed)
3	Using the organization's acquisition, accessi										
	(check all that apply):										
а	Public exhibition		d	Loan	or exc	hange prog	rams				
b	Scholarly research		е	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and	explain	how they fu	rther t	he organiza	tion's exe	empt purpo	ose in Par	t XIII.	
5	During the year, did the organization solicit of	r receive dona	tions o	of art, historic	al trea	sures, or ot	her sımıla	ır assets		_	
	to be sold to raise funds rather than to be ma	aintained as pa	art of th	ne organizati	on's co	ollection?				Yes	No_
Pa	rt IV Escrow and Custodial Arran reported an amount on Form 990, Pa	_	omple	te if the orga	nızatıc	n answered	i "Yes" to	Form 990	, Part IV, I	ine 9, or	
1a	Is the organization an agent, trustee, custod	an or other int	ermedi	ary for contr	bution	ns or other a	ssets no	t included			
	on Form 990, Part X?			·						Yes	No No
b	If "Yes," explain the arrangement in Part XIII	and complete	the foll	lowing table.							
	,	•								Amount	
С	Beginning balance							1c			
d	Additions during the year							1d			
e	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on F	orm 990. Part	X. line 2	217				<u> </u>		Yes	□ No
	If "Yes," explain the arrangement in Part XIII	•			been	provided in	Part XIII				
	t V Endowment Funds. Complete										
		(a) Current y		(b) Prior y		(c) Two ye		(d) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance	(-)	-								
b	Contributions					-					
c	Net investment earnings, gains, and losses										
d	Grants or scholarships										
e	Other expenditures for facilities					 					
_	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curi	rent year end h	alance	e (line 1a. col	umn (a	a)) held as:					
a	Board designated or quasi-endowment	on your one .	Jaianoc	%	(-,,					
ь	Permanent endowment ▶	%									
	Temporarily restricted endowment	 -″	%								
•	The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%	_								
За	Are there endowment funds not in the posse	•		tion that are	held a	nd administ	ered for	he organiz	ration		
	by:		9424							T	es No
	(i) unrelated organizations									3a(i)	
	(ii) related organizations									3a(ii)	
h	If "Yes" to 3a(ii), are the related organizations	s listed as regi	ured or	Schedule B	2					3ь	
4	Describe in Part XIII the intended uses of the										
Pa	t VI Land, Buildings, and Equipm										
<u></u>	Description of property	(a) Cos				or other	(c) A	ccumulate	ed be	(d) Book	value
	bescription of property	basis (ir		I -	•	(other)		preciation		(a) book	
12	Land						† <u> </u>	,			
	Buildings						 				
	Leasehold improvements						 				
c d	Equipment			- +- -	1	2,138.	1	6,3	72.	5	,766.
	Other					_,,	 				<u>,</u>
	. Add lines 1a through 1e. (Column (d) must e	gual Form 990	. Part)	(, column (B)	. line 1	O(c).)				5	,766.

Schedule D (Form 990) 2012

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	· · ·		0.0	0.555.640
	dule D (Form 990) 2012 OREGONIANS FOR FOOD AND SI			0775640 Page 4
1	Total revenue, gains, and other support per audited financial statements	ents with nevenue per i	1	<u> </u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		· · · · · ·	
-	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b	i j	
c	Recoveries of prior year grants	2c	┤ [
d	Other (Describe in Part XIII.)	2d	┤	
	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	1 1	
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
	t XII Reconciliation of Expenses per Audited Financial Staten	nents With Expenses per	Retu	rn
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.			
а	Donated services and use of facilities	2a_	_	
b	Prior year adjustments	2b		
С	Other losses	2c]]	
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e_	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	7	
С	Add lines 4a and 4b		7 4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	_	5	
Par	t XIII Supplemental Information			
Comp	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part	III, lines 1a and 4; Part IV, lines	1b and 2	2b; Part V, line 4; Part
	e 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to RT X, LINE 2: THE ORGANIZATION FOLLOWS THE			ING
STA	ANDARDS CODIFICATION (ASC) ACCOUNTING FOR	UNCERTAINTY IN	INCO	ME TAXES
740	. ASC 740 PRESCRIBES A THRESHOLD FOR DETE	ERMINING WHEN AN	INC	OME TAX
BEN	EFIT CAN BE RECOGNIZED, WHICH IS A HIGHER	R THRESHOLD THAN	THE	ONE
IME	OSED FOR CLAIMING DEDUCTIONS ON INCOME TA	AX RETURNS. THE	ORG	ANIZATION'S
FED	ERAL AND STATE INCOME TAX RETURNS ARE SUE	BJECT TO POSSIBLE	EEX	AMINATION
BY	THE TAXING AUTHORITIES UNTIL THE EXPIRATI	ON OF THE RELATE	ED S	TATUTES OF
LIM	ITATIONS ON THOSE TAX RETURNS. IN GENERAL	, THE FEDERAL AN		TATE INCOME
			ached	www.u.rom.www.2012

Schedule D (Form 990) 2012 OREGONIANS FOR FOOD AND SHELTER, INC. 93-0775640 Page 5 Part XIII Supplemental Information (continued)
TAX RETURNS HAVE A THREE YEAR STATUTE OF LIMITATIONS. THE ORGANIZATION
WOULD RECOGNIZE ACCRUED INTEREST AND PENALTIES ASSOCIATED WITH UNCERTAIN
TAX PROVISIONS, IF ANY, AS PART OF THE INCOME TAX PROVISION. AS OF
DECEMBER 31, 2012, THE ORGANIZATION HAS NO UNCERTAIN TAX POSITIONS THAT
QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS
BASED ON THIS GUIDANCE.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

(Form 990 or 990-EZ)

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Pepartment of the Treasury Internal Revenue Service

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization

OREGONIANS FOR FOOD AND SHELTER, INC.

Employer identification number

OREGONIANS FOR FOOD AND SHELTER, INC. 93-0775640
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PERSONAL PROPERTY AND THE ENVIRONMENT THROUGH THE INTEGRATED,
RESPONSIBLE USE OF PEST MANAGEMENT PRODUCTS, SOIL NUTRIENTS AND
BIOTECHNOLOGY.
FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS MEMBERS THAT
PAY DUES AND ASSESSMENTS.
FORM GGO DARM VI SECUTION A LINE 7A. MUE ORGANIZATION'S MEMBERS FIECT
FORM 990, PART VI, SECTION A, LINE 7A: THE ORGANIZATION'S MEMBERS ELECT THE BOARD OF DIRECTORS.
THE BOARD OF BIRECIORS.
FORM 990, PART VI, SECTION A, LINE 7B: THE DECISIONS OF THE GOVERNING BODY
ARE SUBJECT TO APPROVAL BY THE MEMBERS OF THE ORGANIZATION.
FORM 990, PART VI, SECTION B, LINE 11: THE EXECUTIVE DIRECTOR REVIEWS THE
FORM 990 BEFORE IT IS FILED.
FORM 990, PART VI, SECTION B, LINE 15: THE EXECUTIVE DIRECTOR MEETS WITH
THE EXECUTIVE COMMITTEE TO DISCUSS COMPENSATION OF ALL EMPLOYEES. THE
BUDGET COMMITTEE MEETS TO DISCUSS COMPENSATION OF THE EXECUTIVE DIRECTOR. OCCASIONALLY COMPARABILITY DATA IS USED TO ENSURE SALARIES ARE IN A
REASONABLE RANGE. AFTER RECOMMENDATIONS ARE MADE TO THE FULL BOARD OF
DIRECTORS, THE BOARD VOTES TO ACCEPT OR DECLINE.
Zanadiana, ind botto to nodili on buodina.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION DOES NOT MAKE ITS

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS

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

Schedule O (Form 990 or 990-EZ) (2012)

232211 01-04-13

Name of the organi									Employer identification number 93-0775640
		ORI	EGONIANS	FOR	FOOD	AND	SHELTER,	INC.	93-0775640
AVAILABLE	ТО	THE	PUBLIC.						
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· · · · · · · · · · · · · · · · · · ·					<u>_</u>	<u>.</u>			
									
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<u> </u>		-							

Form **8868**

(Rev. January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

• If y	ou are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box .			- X
• If y	ou are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of	this form)		
Do no	ot complete Part II unless you have already been granted	an automa	atic 3-month extension on a previous	sly filed Fo	orm 8868	
Elect	ronic filing (e-file). You can electronically file Form 8868 if y	you need a	a 3-month automatic extension of tin	ne to file (6 months for a corp	oration
requir	ed to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically f	ıle Form 8	868 to request an e	xtension
of tım	e to file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for	Transfers	Associated With Ce	ertain
Perso	nal Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details of	on the elec	ctronic filing of this	form,
visit w	t I Automatic 3-Month Extension of Time		submit original (no copies ne	eded).		
	poration required to file Form 990-T and requesting an autor				 	
Part I					•	. [
	ner corporations (including 1120-C filers), partnerships, REM income tax returns	IICs, and t	rusts must use Form 7004 to reques	st an exter	nsion of time	
Type or Name of exempt organization or other filer, see instructions Employer identification num print						ber (EIN) or
•	OREGONIANS FOR FOOD AND SHI	ELTER	, INC.		93-07756	40
File by t due dat filing yo	Number, street, and room or suite no If a P O. box, s			Social se	ecurity number (SSN	
return (566	oreign add	ress, see instructions			
			- .			
Enter	the Return code for the return that this application is for (file	e a separa	te application for each return)			0 1
Applie	cation	Return	Application			Return
Is For		Code	Is For			Code
Form	990 or Form 990-EZ	01	Form 990-T (corporation)			07
Form	990-BL	02	Form 1041-A			08
Form -	4720 (Individual)	03	Form 4720			09
Form	990-PF	04	Form 5227			10
Form	990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	990-T (trust other than above)	06	Form 8870			12
	THE ORGANIZATION	NC		-		
• The	books are in the care of b 1149 COURT STRI	EET N	E - SALEM, OR 9730	1		
Tel	ephone No ► 503-370-8092		FAX No. ▶			
• If ti	ne organization does not have an office or place of business	s in the Ur	nited States, check this box			· 🔲
	nis is for a Group Return, enter the organization's four digit			f this is fo	r the whole group, o	check this
box	. If it is for part of the group, check this box	and atta	ch a list with the names and EINs of			
1	request an automatic 3-month (6 months for a corporation					
			tion return for the organization name		The extension	
	is for the organization's return for:		-			
	➤ X calendar year 2012 or					
	tax year beginning	, an	d ending		<u> </u>	
2	If the tax year entered in line 1 is for less than 12 months, c Change in accounting period	heck reas	on. Initial return	Fınal retur	n	
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, 0	or 6060	ntar the tentative tay less any		Γ	
	nonrefundable credits. See instructions.	JI 0008, 61	nto the terrialive tax, less arry	20		Λ
	If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and	3a		0.
	estimated tax payments made Include any prior year overp			3b	\$	0.
	Balance due. Subtract line 3b from line 3a Include your pa	•	· · · · · · · · · · · · · · · · · · ·			
	by using EFTPS (Electronic Federal Tax Payment System).			3c	\$	0.
	on. If you are going to make an electronic fund withdrawal w			orm 8879-	-	
LHA	For Privacy Act and Paperwork Reduction Act Notice,	see instru	uctions.		Form 8868 (R	ev. 1-2013)

10570501 783673 71060

223841 01-21-13

Form 8868 (Rev.	1-2013)					Page 2	
If you are filing	g for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II and check this	box		ightharpoons	
	olete Part II if you have already been granted an a				3868.		
	for an Automatic 3-Month Extension, complete						
Part II A	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no co	opies needed)	
			Enter filer's	identifyin	g number, see i	nstructions	
Type or Nam	e of exempt organization or other filer, see instru	ctions		Employer	identification nu	mber (EIN) or	
print							
	GONIANS FOR FOOD AND SHEI	TER,	INC.		93-0775	<u>540 </u>	
filing your	iber, street, and room or suite no. If a PO box, se	ee instruc	tions	Social sec	curity number (S	SN)	
return See 114	9 COURT STREET NE						
City, town or post office, state, and ZIP code. For a foreign address, see instructions.							
SAL	EM, OR 97301						
Enter the Return	code for the return that this application is for (file	e a separa	te application for each return)			0 1	
		ı <u> </u>	T				
Application		Return	Application			Return	
Is For		Code	Is For			Code	
Form 990 or Form	m 990·EZ	01	5 1041 A				
Form 990-BL		02	Form 1041-A			08	
Form 4720 (indiv	riduai)	03	Form 4720			10	
Form 990-PF	401(5) 55 400(5) 45 (5)	04 05	Form 5227 Form 6069			11	
	. 401(a) or 408(a) trust)	06	Form 8870	12			
	t other than above) omplete Part II if you were not already granted			ioucly file	d Form 9969	12	
STOP: DO HOL CO	THE ORGANIZATIO		nauc 3-month extension on a previ	iousiy iiic	<u>a i omi 3000.</u>		
• The books are	e in the care of > 1149 COURT STR		E - SALEM OR 9730	1			
	50. ► 503-370-8092		FAX No. ►	_			
	ation does not have an office or place of business	s in the Ur	·			▶ □	
	Group Return, enter the organization's four digit (o. check this	
	it is for part of the group, check this box	1	ich a list with the names and EINs of				
			BER 15, 2013.				
•	ar year 2012 , or other tax year beginning		, and ending	a a		•	
	ear entered in line 5 is for less than 12 months, c	heck reas		Final re	eturn		
	nge in accounting period						
	etail why you need the extension						
ADDIT	IONAL TIME IS NEEDED TO I	FILE A	A COMPLETE AND ACC	URATE	RETURN.		
8a If this appli	ication is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any		i		
	able credits. See instructions		<u></u>	8a	\$	0.	
b If this appli	ication is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated	ļ			
tax payme	nts made. Include any prior year overpayment all	owed as a	a credit and any amount paid			_	
previously	with Form 8868			8b	\$	0.	
c Balance d	ue. Subtract line 8b from line 8a. Include your pa	yment wit	h this form, if required, by using			_	
EFTPS (Ele	ectronic Federal Tax Payment System) See instru			8c	\$	<u> </u>	
			st be completed for Part II o				
Under penalties of it is true, correct, a	perjury, I declare that I have examined this form, including complete, and that Lam authorized to prepare this fo	ing accomp irm.	panying schedules and statements, and to	the best o	f my knowledge an	id belief,	
Signature >	Title > C			Date	D 8/6	//3	
S.gridiai o		- <u></u>				(Rev. 1-2013)	

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