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Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2012

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)
▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.
▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

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A For the 2012 calendar year, or tax year beginning 2/01, 2012, and ending 1/31, 2013

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C OREGON BEARS, INC. 818 SW 3RD AVE, PMB 1153 PORTLAND, OR 97204	D Employer identification number <u>93-1240458</u>
		E Telephone number <u>(360) 990-1290</u>
		F Group Exemption Number <u>.....</u> ▶

G Accounting Method: Cash Accrual Other (specify) ▶ _____

I Website: ▶ HTTPS://WWW.OREGONBEARS.ORG/

J Tax-exempt status (check only one) – 501(c)(3) 501(c)(7) ◀(insert no.) 4947(a)(1) or 527

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

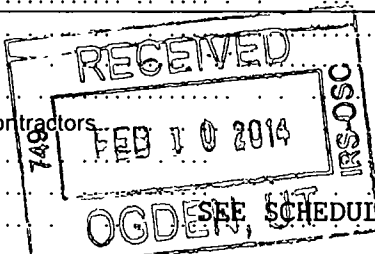
K Check if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions) But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 54,750.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

REVENUE	1 Contributions, gifts, grants, and similar amounts received	1	
	2 Program service revenue including government fees and contracts	2	49,905.
	3 Membership dues and assessments	3	3,161.
	4 Investment income	4	6.
	5a Gross amount from sale of assets other than inventory	5a	
	b Less: cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	b Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
	c Less: direct expenses from gaming and fundraising events	6c	
	d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	
	7a Gross sales of inventory, less returns and allowances	7a	1,138.
	b Less: cost of goods sold	7b	
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	1,138.
	8 Other revenue (describe in Schedule O) SEE SCHEDULE O	8	540.
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	54,750.
EXPENSES	10 Grants and similar amounts paid (list in Schedule O)	10	7,076.
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	
	13 Professional fees and other payments to independent contractors	13	522.
	14 Occupancy, rent, utilities, and maintenance	14	2,022.
	15 Printing, publications, postage, and shipping	15	672.
	16 Other expenses (describe in Schedule O)	16	42,995.
	17 Total expenses. Add lines 10 through 16	17	53,287.
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	1,463.
	NET ASSETS	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19
20 Other changes in net assets or fund balances (explain in Schedule O)		20	
21 Net assets or fund balances at end of year. Combine lines 18 through 20		21	5,722.



BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2012)

P
6

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V. []

Table with columns for question number, description, and Yes/No checkboxes. Includes questions 33 through 41 regarding organizational activities, financials, and state filings.

42a The organization's books are in care of CHRISTIAN BAIR Telephone no. (360) 990-1290 Located at 818 SW 3RD AVE, PMB 1153 PORTLAND OR ZIP + 4 97204

Table for questions 42b and 42c regarding foreign financial accounts and offices. Includes Yes/No columns and a space for foreign country names.

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here [] N/A and enter the amount of tax-exempt interest received or accrued during the tax year. 43 N/A

Table for questions 44a through 45b regarding donor advised funds, hospital facilities, tanning services, and controlled entities.

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I

	Yes	No
46		X

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 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

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If 'Yes,' was the related organization a section 527 organization?

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

	Yes	No
47		
48		
49a		
49b		

(a) Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

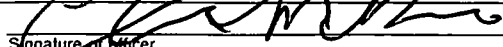
d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A

Yes No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

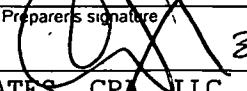
Sign Here

Signature of officer:  Date: 12/31/14

CHRISTIAN BAIR TREASURER

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: CARL W. FOSTER Preparer's signature:  Date: 7/9/13

Firm's name: FOSTER & ASSOCIATES, CPA, LLC Check if self-employed PTIN: P00009266

Firm's address: 9011 SW BEAVERTON-HILLSDALE HWY #1A PORTLAND, OR 97225 Firm's EIN: 46-1881127 Phone no: (503) 297-2610

May the IRS discuss this return with the preparer shown above? See instructions Yes No

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2012

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

▶ Attach to Form 990 or 990-EZ.

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization

OREGON BEARS, INC.

Employer identification number

93-1240458

FORM 990-EZ, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

THE MISSION STATEMENT AND SCOPE OF THE CLUB AND ITS GENERAL MEMBERSHIP IS TO ORGANIZE EVENTS AND ACTIVITIES THAT PROVIDE FOR THE SOCIAL ENJOYMENT AND CAMARADERIE OF ITS MEMBERS, AND TO PROVIDE RESOURCES (FINANCIAL AND OTHERWISE) TO SELECTED CHARITABLE ORGANIZATIONS.

FORM 990-EZ, PART III, LINE 29 - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

BEARS IN BRIDGETOWN - BEARTOWN IS THE OREGON BEARS BIGGEST FUNDRAISING EVENT. THE MONEY RAISED AT BEARTOWN IS DIVIDED UP AMONGST THE CHARITIES THE MEMBERS VOTED ON AND PRESENTED AT THE BEAR & CUB CORONATION EVENT. IT BENEFITS HUNDREDS OF PEOPLE, MEMBERS INCLUDED.

FORM 990-EZ, PART III, LINE 30 - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

HOLIDAY SHOW 2012 - THE HOLIDAY SHOW IS AN EVENT THAT BRINGS TOGETHER SEVERAL FACETS OF THE GAY COMMUNITY. THE PROCEEDS OF THE EVENT WENT TO OUR HOUSE WHICH HELPS PEOPLE WHO ARE LOW INCOME AND HAVE AIDS.

OREGON BEARS, INC.

93-1240458

FORM 990-EZ, PART I, LINE 8
OTHER REVENUE

MEDIATED AGREEMENT	\$ 540.
TOTAL	<u>\$ 540.</u>

FORM 990-EZ, PART I, LINE 16
OTHER EXPENSES

ADVERTISING AND PROMOTION.....	\$ 204.
BANK SERVICE FEES.....	24.
CASH PRIZES.....	250.
CONFERENCES, CONVENTIONS, AND MEETINGS....	94.
ENTERTAINMENT.....	1,823.
FOOD AND BEVERAGES.....	11,811.
GENERAL OPERATIONS.....	1,483.
MEMBER REIMBURSEMENTS.....	272.
MISCELLANEOUS EXPENSES.....	1.
NONCASH PRIZES.....	1,238.
OTHER PROGRAM EXPENSES.....	15,383.
RENT/FACILITY COSTS.....	10,412.
TOTAL	<u>\$ 42,995.</u>

FORM 990-EZ, PART III, LINE 31
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION	GRANTS	PROGRAM SERVICE EXPENSES
<p>SATURDAY BEAR BUSTS - THE MONTHLY BEAR BUST PROVIDES THE MEMBERS WITH A PLACE TO SOCIALIZE WITH A GOOD DEAL ON BEVERAGES. THE BAR BENEFITS FROM THE SALES, THE OREGON BEARS PORTION OF THE FUNDS GOES INTO THE GENERAL FUND OF THE OREGON BEARS WHERE IT IS USED FOR OPERATIONAL EXPENSES.</p>		
<p>INCLUDES FOREIGN GRANTS: NO</p>		
TOTAL		<u>\$ 0. \$ 0.</u>

Application for Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box.
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete Part I only.

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return See instructions	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
	OREGON BEARS, INC.	93-1240458
	Number, street, and room or suite number If a P.O. box, see instructions	Social security number (SSN)
	818 SW 3RD AVE, PMB 1153	
	City, town or post office, state, and ZIP code For a foreign address, see instructions	
	PORTLAND, OR 97204	

Enter the Return code for the return that this application is for (file a separate application for each return). 01

Application Is For	Return Code	Application Is For	Return 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 (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

• The books are in the care of ▶ CHRISTIAN BAIR -----

Telephone No. ▶ (360) 990-1290 ----- FAX No. ▶ -----

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 9/15, 20 13, to file the exempt organization return for the organization named above.
The extension is for the organization's return for:

- ▶ calendar year 20 ____ or
- ▶ tax year beginning 2/01, 20 12, and ending 1/31, 20 13.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a \$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b \$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c \$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.