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Return of Private Foundation

OMB No 1545-0052

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Department of the Treasury
Internal Revenue Service

For calendar year 2013 or tax year beginning , and ending

| Nam | e of foundation | | | A Employer identification | n number |
|----------------|--|------------------------------------|------------------------------|---|---|
| ~- | | | | 26-2020553 |) |
| | FORMS FAMILY FOUNDATION per and street (or P O box number if mail is not delivered to street a | addraga) | Room/suite | | |
| | | B Telephone number 503-227-51 | 171 | | |
| | MB 325, 25 N.W. 23RD PLACE | | <u> </u> 6 | | · |
| | or town, state or province, country, and ZIP or foreign po ORTLAND, OR 97210 | ostal code | | C If exemption application is p | pending, check here |
| G CI | neck all that apply: Initial return | Initial return of a fo | rmer public charity | D 1. Foreign organization | s, check here |
| | Final return | Amended return | | 2 Foreign organizations m | esting the 95% test |
| | Address change | Name change | | Foreign organizations m check here and attach c | omputation Street |
| H C | neck type of organization: X Section 501(c)(3) exc | | | E If private foundation sta | |
| <u></u> | | Other taxable private founda | | under section 507(b)(1 |)(A), check here |
| | r market value of all assets at end of year J Accountir | - | Accrual | F If the foundation is in a | _ [[|
| | om Part II, col (c), line 16) | ner (specify) | | under section 507(b)(1 |)(B), check here |
| | | nn (a) must be on cash b | | | (4) - |
| Pa | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
| | Contributions, gifts, grants, etc., received | 0. | | N/A | (odd), oddio omyj |
| j | 2 Check X if the foundation is not required to attach Sch B | | | | |
| | Interest on savings and temporary | 36,060. | 36,060. | | STATEMENT 1 |
| | cash investments Dividends and interest from securities | 184,917. | 184,917. | - | STATEMENT 2 |
| Ī | 5a Gross rents | 104/51/0 | | | |
| | b Net rental income or (loss) | | | | |
| | · · · · · · · · · · · · · · · · · · · | 435,526. | | | |
| Ē | 6a Net gain or (loss) from sale of assets not on line 10 b Gross sale price for all 3,583,516. | | | | |
| Revenue | 7 Capital gain net income (from Part IV, line 2) | | 435,526. | | |
| 8 B | 8 Net short-term capital gain | | | | 1 |
| | 9 Income modifications | | | | |
| | 10a and allowances | | | | |
| | D Less Cost of goods sold | | | | |
| | c Gross profit or (loss) | | | | |
| | 11 Other income | 19,329. | 0. | | STATEMENT 3 |
| | 12 Total. Add lines 1 through 11 | 675,832. | 656,503. | | |
| | 13 Compensation of officers, directors, trustees, etc | 92,500. | 13,875. | | 78,625. |
| | 14 Other employee salaries and wages | | | | |
| | 15 Pension plans, employee benefits | | | | |
| enses | 16a Legal fees STMT 4 | 540. | 0. | | 540. |
| E I | b Accounting fees STMT 5 | 2,565. | 0. | | 2,565. |
| Exp | c Other professional fees | 35,856. | 35,856. | | 0. |
| ive | 17 Interest | | | | |
| Administrative | 17 Interest 18 Taxes 7 | 4,215. | 1,531. | | 0. |
| nis | | | | | |
| Ë | 20 Occupancy | 0 245 | | | 0 247 |
| Α̈́ | 21 Travel, conferences, and neetings | 8,347. | 0. | | 8,347. |
| ano | 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications | 249. | 0. | | 249. |
| Operating and | 23 Other expenses | 4,749. | 0. | | 4,749. |
| rati | 24 Total operating and administrative | 140 001 | E1 060 | | 95,075. |
| odc | expenses. Add lines 13 through 23 | 149,021. | 51,262. | | 401,764. |
| • | 25 Contributions, gufts, grants paid | 401,764. | · | | 401,/04. |
| | 26 Total expenses and disbursements. | 550 705 | 51 262 | | 496,839. |
| | Add lines 24 and 25 | 550,785. | 51,262. | | 430,033. |
| | 27 Subtract line 26 from line 12: | 125,047. | | | |
| | Excess of revenue over expenses and disbursements | 145,04/. | 605,241. | | |
| | b Net investment income (if negative, enter -0-) | | 003,241. | N/A | |
| 3235 | c Adjusted net income (if negative, enter -0-) | 1 | L | 14/17 | Form QQD_DF (2013) |

Page 2

Form **990-PF** (2013)

| Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | | Balance Sheets Attached schedules and amounts in the description | Beginning of year | End of | End of year | | | |
|--|------|--|--------------------|----------------|---|--|--|--|
| P | aπ | column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value | | | |
| \Box | 1 | Cash - non-interest-bearing | 1,774. | 2,084. | 2,083. | | | |
| | 2 | Savings and temporary cash investments | 504,052. | 185,174. | 185,174. | | | |
| | 3 | Accounts receivable | | | | | | |
| | | Less, allowance for goubtful accounts | | | | | | |
| | 4 | Pledges receivable ► | | | | | | |
| | | Less: allowance for doubtful accounts ▶ | | | | | | |
| | 5 | Grants receivable | | | | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | | | | |
| | | disqualified persons | | | | | | |
| | 7 | Other notes and loans receivable | | | | | | |
| | | Less: allowance for doubtful accounts ▶ | | | | | | |
| ţ | 8 | Inventories for sale or use | | | | | | |
| Assets | | Prepaid expenses and deferred charges | | | | | | |
| Ř | 10a | Investments - U.S. and state government obligations STMT 9 | 554,184. | 359,310. | 345,653. | | | |
| | b | Investments - corporate stock STMT 10 | 4,023,259. | 4,684,970. | 6,313,903. | | | |
| | C | Investments - corporate bonds STMT 11 | 832,985. | 826,917. | 810,723. | | | |
| | 11 | Investments - land, buildings, and equipment basis | | | | | | |
| | | Less accumulated depreciation | | | | | | |
| | 12 | Investments - mortgage loans | | | | | | |
| | 13 | Investments - other STMT 12 | 1,087,977. | 1,070,823. | 1,229,278. | | | |
| | 14 | Land, buildings, and equipment basis ▶ | | | | | | |
| | | Less accumulated depreciation | | | | | | |
| | 15 | Other assets (describe ►) | | | | | | |
| | 16 | Total assets (to be completed by all filers - see the | | | | | | |
| | | instructions. Also, see page 1, item 1) | 7,004,231. | 7,129,278. | 8,886,814. | | | |
| | 17 | Accounts payable and accrued expenses | | | | | | |
| | 18 | Grants payable | | | | | | |
| es | 19 | Deferred revenue | | | | | | |
| Liabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | _ | | | | |
| jab | 21 | Mortgages and other notes payable | | | | | | |
| _ | 22 | Other liabilities (describe) | | | i | | | |
| | | | | | | | | |
| _ | 23 | Total liabilities (add lines 17 through 22) | 0. | 0. | | | | |
| | | Foundations that follow SFAS 117, check here | | | | | | |
| ç | | and complete lines 24 through 26 and lines 30 and 31. | 7 004 221 | 7 120 270 | | | | |
| nces | - | Unrestricted | 7,004,231. | 7,129,278. | | | | |
| Fund Balar | 25 | Temporarily restricted | | | | | | |
| d B | 26 | Permanently restricted | | | | | | |
| Ë | | Foundations that do not follow SFAS 117, check here | | | ' | | | |
| | | and complete lines 27 through 31. | | | , | | | |
| şţs | 27 | , | | | • | | | |
| Net Assets or | 28 | , | | | | | | |
| at A | 29 | Retained earnings, accumulated income, endowment, or other funds | 7,004,231. | 7,129,278. | | | | |
| ž | 30 | Total net assets or fund balances | 7,004,231. | 7,129,270. | 1 | | | |
| | ١,, | Total liabilities and net assets/fund balances | 7,004,231. | 7,129,278. | | | | |
| _ | 31 | | • | 7,125,270 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| P | art | III Analysis of Changes in Net Assets or Fund B | alances | | | | | |
| 1 | Tota | net assets or fund balances at beginning of year - Part II, column (a), line | 30 | | | | | |
| • | | st agree with end-of-year figure reported on prior year's return) | | 1 | 7,004,231. | | | |
| 2 | • | r amount from Part I, line 27a | | 1 2 | 125,047. | | | |
| | | r increases not included in line 2 (itemize) | | 3 | 0. | | | |
| | | lines 1, 2, and 3 | | 4 | 7,129,278. | | | |
| | | eases not included in line 2 (itemize) | | 5 | 0. | | | |
| | | I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | olumn (b), line 30 | 6 | 7,129,278. | | | |

See the Part VI instructions.

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.

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|-------------|--|---|-----------|-------------|----------|----------|-------------|
| Part | | (e), or 4 | 948 | - see ir | ıstru | ction | ns) |
| 1a Ex | xempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. |) | | | | | 1 |
| | ate of ruling or determination letter: (attach copy of letter if necessary-see instructions) | | | | | | / |
| b Do | omestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗓 and enter 1% | } | 1 | <u> </u> | | 6,0 | <u>52.</u> |
| of | FPart I, line 27b | | | | | | |
| C ÁI | if other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) | J | | | | | |
| 2 Ta | ax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | 2 | _ | | | 0. |
| 3 Ac | dd lines 1 and 2 | | 3 | | | 6,0 | <u>52</u> . |
| 4 St | ubtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | 4 | | | | 0. |
| 5 Ta | ax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | | 5 | | | 6,0 | 52. |
| 6 Cr | redits/Payments: | | | | | | |
| a 20 | 013 estimated tax payments and 2012 overpayment credited to 2013 6a 2 | ,564. | | | | | 1 |
| b Ex | xempt foreign organizations - tax withheld at source 6b | | 1 | | | | ! |
| c Ta | ax paid with application for extension of time to file (Form 8868) | | 1 | | | | |
| d Ba | ackup withholding erroneously withheld 6d | | 1 | | , | | |
| 7 To | otal credits and payments. Add lines 6a through 6d | | 7 | | | 2,5 | 64. |
| | nter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | | 8 | | | | |
| | ax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | • | 9 | | | 3,4 | 88. |
| | verpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | • | 10 | | | * | |
| | | unded | 11 | | | | |
| | VII-A Statements Regarding Activities | | | | | | |
| | uring the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate | or intervene | ın | | | Yes | No |
| | ny political campaign? | | | Ì | 1a | | X |
| | id it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the | e definition |)? | | 1b | | X |
| | the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materia | | • | ļ | | | |
| | istributed by the foundation in connection with the activities. | , | | | 1 | | |
| | id the foundation file Form 1120-POL for this year? | | | | 1c | | X |
| | nter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | | | - | |
| | 1) On the foundation. ► \$ 0 • (2) On foundation managers. ► \$ | 0. | | | | | 1 |
| • | nter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | • | | | | |
| | nanagers. ►\$ 0. | | | | | | |
| | as the foundation engaged in any activities that have not previously been reported to the IRS? | | | | | | X |
| | "Yes," attach a detailed description of the activities. | | | ļ | | | |
| | as the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of inco | rooration, o | r | | | | į |
| | ylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | • | İ | 3 | | X |
| | id the foundation have unrelated business gross income of \$1,000 or more during the year? | | | ļ | 4a | | X |
| | "Yes," has it filed a tax return on Form 990-T for this year? | | N | 1/A | 4b | | |
| | /as there a liquidation, termination, dissolution, or substantial contraction during the year? | | | , i | 5 | | Х |
| | "Yes," attach the statement required by General Instruction T. | | | ļ | | | |
| | re the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | | | | |
| | By language in the governing instrument, or | | | | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict w | uth the state | law | | | | 1 |
| | emain in the governing instrument? | | | | 6 | | X, |
| | id the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), a | nd Part XV | , | ŀ | 7 | X | |
| | to the state of th | | | ŀ | | | <u> </u> |
| 8a Fr | nter the states to which the foundation reports or with which it is registered (see instructions) | | | | | | |
| | OR | | | | | | |
| _ | the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or design | ate) | | | | | |
| | f each state as required by General Instruction G? If "No," attach explanation | , | | ļ | 8b | X | |
| | s the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j |)(5) for cale | ndar | | <u> </u> | | |
| | ear 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV | ,, 5, 151 0010 | ,,,,,,,,, | İ | 9 | | X |
| - | ild any persons become substantial contributors during the tax year? If "yes," attach a schedule listing their names and addi | esses | | | 10 | | X |
| | | | | | | | |

| orm | 990-PF (2013) STORMS FAMILY FOUNDATION 2 | 26-2020 | 553 | F | age 5 |
|-----|---|-------------------|---------------|-------------|---------------|
| | rt VII-A Statements Regarding Activities (continued) | | | | |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of | | | | |
| | section 512(b)(13)? If "Yes," attach schedule (see instructions) | | 11 | | X |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory pro | vileges? | | | |
| | If "Yes," attach statement (see instructions) | | 12 | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | | 13 | Х | |
| | Website address WWW.STORMSFAMILYFOUNDATION.ORG | | | | |
| 14 | The books are in care of ► ANNA STORMS INGRAM Telephone no. ► | | 227 | <u>-51'</u> | 74 |
| | Location at P 1000 | ZIP+4 ▶ 97 | <u> 210</u> | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | | | ▶ | Ш |
| | and enter the amount of tax-exempt interest received or accrued during the year | 15 | | /A | |
| 16 | At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank, | | | Yes | No |
| | securities, or other financial account in a foreign country? | | 16 | | <u>X</u> |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign | | | | 1 |
| | country | | | | i |
| Pa | rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | V | <u> </u> |
| | 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). | s X No | | | |
| | (1) | ; LAL NO | | | 1 |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | s X No | | | ; |
| | | s X No | | İ | 1 |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes | _ | | ł | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | , 140 | | | 1 |
| | for the benefit or use of a disqualified person)? | s X No | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | , [22] | | | |
| | If the foundation agreed to make a grant to or to employ the official for a period after | | | | |
| | termination of government service, if terminating within 90 days.) | s X No | | | į |
| ŀ | o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | , | | | ; |
| • | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | | 1b | | X |
| | Organizations relying on a current notice regarding disaster assistance check here | ightharpoons | | | |
| | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | | | | |
| | before the first day of the tax year beginning in 2013? | | 1c | | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation | | 1 | | |
| | defined in section 4942(j)(3) or 4942(j)(5)): | | i | | 1 |
| a | a At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning | | | | 1 |
| | before 2013? | s 🗶 No | | | ; |
| | If "Yes," list the years | | | | 1 |
| t | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect | | | | 1 |
| | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach | 37/3 | | [| |
| | statement - see instructions.) | N/A | 2b | | |
| | of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | | | |
| _ | a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | | |
| 3 | | s X No | | | Ì |
| | | | | | į |
| 1 | o If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dis | | | | 1 |
| | 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, | | | | ŧ |
| | Form 4720, to determine if the foundation had excess business holdings in 2013) | N/A | 3b | | |
| A. | a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | , | 4a | | X |
| | b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose | that | <u> </u> | - | _ |
| ' | had not been removed from jeopardy before the first day of the tax year beginning in 2013? | | 4b | | X |
| | | Fo | m 99 0 |)-PF | |

| Form 990-PF (2013) STORMS FAMILY FOUNDATION | | | 26-20205 | 53 Page 6 |
|--|---|-------------------|--|-------------------------------|
| Part VII-B Statements Regarding Activities for Which | Form 4720 May Be F | Required (continu | ued) | |
| 5a During the year did the foundation pay or incur any amount to: | | | | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | n 4945(e))? | Y€ | s X No | |
| (2) Influence the outcome of any specific public election (see section 4955); of | or to carry on, directly or indire | ectly, | 1 | 1 |
| any voter registration drive? | | Ye | s X No | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | ? | Ye | es X No | |
| (4) Provide a grant to an organization other than a charitable, etc., organizatio | n described in section | | | |
| 509(a)(1), (2), or (3), or section 4940(d)(2)? | | Ye | s X No | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | or educational purposes, or f | | | |
| the prevention of cruelty to children or animals? | | Y6 | es X No | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un | der the exceptions described i | ın Regulations | - | |
| section 53.4945 or in a current notice regarding disaster assistance (see instru | ictions)? | | N/A | 5b |
| Organizations relying on a current notice regarding disaster assistance check t | nere | | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f | rom the tax because it mainta | ined | | |
| expenditure responsibility for the grant? | N | 1/A Ye | es L No | |
| If "Yes," attach the statement required by Regulations section 53.494 | 5-5(d). | | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to | pay premiums on | | | |
| a personal benefit contract? | | Ye | es 🛣 No 📙 | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | personal benefit contract? | | | 6b X |
| If "Yes" to 6b, file Form 8870 | | | | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | shelter transaction? | Ye | es 🗶 No 📙 | |
| b If "Yes," did the foundation receive any proceeds or have any net income attrib | | | | 7b |
| Part VIII Information About Officers, Directors, Trust | ees, Foundation Ma | nagers, Highly | 1 | |
| Paid Employees, and Contractors | | | <u></u> | |
| 1 List all officers, directors, trustees, foundation managers and their | | (c) Compensation | (d) Contributions to | (e) Expense |
| (a) Name and address | (b) Title, and average hours per week devoted | ` (If not paid, | (d) Contributions to employee benefit plans and deferred | account, other |
| SUZANNE STORMS MILLIS | to position PRESIDENT | enter -0-) | compensation | allowances |
| PMB 325, 25 N.W. 23RD PLACE, STE 6 | FKESIDEMI | | | |
| PORTLAND, OR 97210 | 15.00 | 32,500. | 0. | 0. |
| ANNA STORMS INGRAM | TREASURER | 32,300. | • | |
| PMB 325, 25 N.W. 23RD PLACE, STE 6 | - TREATE OFFER | | | |
| PORTLAND, OR 97210 | 12.00 | 30,000. | 0. | 0. |
| ROSEMARY STORMS MONTGOMERY | SECRETARY | 30,000. | - 0. | |
| PMB 325, 25 N.W. 23RD PLACE, STE 6 | DECKLITACI | | | |
| PORTLAND, OR 97210 | 8.00 | 30,000. | 0. | 0. |
| TORTHUM OR STATE | | 30,0000 | | <u>.</u> |
| | † | | | |
| | 1 | | | |
| 2 Compensation of five highest-paid employees (other than those in | | enter "NONE." | | |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average | (c) Compensation | (d) Contributions to employee benefit plans and deferred | (e) Expense account, other |
| | devoted to position | (C) compensation | and deferred compensation | allowances |
| NONE | | | | |
| | | | | |
| |] | | | |
| | | | | |
| | 1 | | | |
| · · · · · · · · · · · · · · · · · · · | | ļ | | |
| | 1 | | | |
| | | ļ | | |
| | 4 | | | |
| Total number of other employees paid over \$50,000 | L | I | | 0 |
| Total number of other employees paid over \$50,000 | | | Form | 990-PF (2013) |
| | | | ,,,, | - \/ |

| Form 990-PF (2013) STORMS FAMILY FOUNDATION | 26-2 | 2020553 Page 7 |
|--|---------------------|------------------|
| 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 "l | NONE." | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | | > 0 |
| 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 product N/A | | Expenses |
| 2 | | |
| 3 | | |
| 4 | | |
| 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. | | |
| Total. Add lines 1 through 3 | • | 0. |

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 7,933,186. a Average monthly fair market value of securities 1a 200,119. 1b b Average of monthly cash balances c Fair market value of all other assets 1c 8,133,305. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 2 3 Subtract line 2 from line 1d 122,000. 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 8,011,305. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 400,565. Minimum investment return. Enter 5% of line 5 6 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here \blacktriangleright and do not complete this part.) 400,565. Minimum investment return from Part X, line 6 1 6,052 2a Tax on investment income for 2013 from Part VI, line 5 2a b Income tax for 2013. (This does not include the tax from Part VI.) 2b 6.052 c Add lines 2a and 2b 2c 394,513. Distributable amount before adjustments. Subtract line 2c from line 1 3 3 19,329. 4 Recoveries of amounts treated as qualifying distributions 413,842. 5 Add lines 3 and 4 Ō. 6 Deduction from distributable amount (see instructions) 413,842. 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 496,839 a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B 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) За **b** Cash distribution test (attach the required schedule) 3b 496,839. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 4 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 5 6,052 income. Enter 1% of Part I, line 27b Adjusted qualifying distributions. Subtract line 5 from line 4 6 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form **990-PF** (2013)

4940(e) reduction of tax in those years.

Page 9

Part XIII Undistributed Income (see instructions)

STORMS FAMILY FOUNDATION

| | (a) Corpus | (b) Years prior to 2012 | (c) 2012 | (d) 2013 |
|---|---|----------------------------|----------------------------|---------------------------|
| 1 Distributable amount for 2013 from Part XI, | | | | |
| une 7 | | | | 413,842. |
| 2 Undistributed income, if any, as of the end of 2013 | | | | |
| a Enter amount for 2012 only | | | 0. | |
| b Total for prior years: | | | | |
| | | | | |
| 3 Excess distributions carryover, if any, to 2013: | | | | |
| a From 2008 2,054. | | | | |
| bFrom 2009 8,080. | | | | |
| c From 2010 33,577. dFrom 2011 5,203. | | | | |
| | | | | |
| | 145,965. | | | |
| f Total of lines 3a through e 4 Qualifying distributions for 2013 from | 143,303. | | | |
| Part XII, line 4: ▶\$ 496,839. | | | | |
| a Applied to 2012, but not more than line 2a | | | ₀ • | , |
| b Applied to undistributed income of prior | | | | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | , |
| d Applied to 2013 distributable amount | | | | 413,842. |
| e Remaining amount distributed out of corpus | 82,997. | | | |
| 5 Excess distributions carryover applied to 2013 | 0. | | | 0. |
| (If an amount appears in column (d), the same amount must be shown in column (a)) | | | | |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 228,962. | | | |
| 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. | | |
| dSubtract line 6c from line 6b. Taxable | | _ | | |
| amount - see instructions | <u>. </u> | 0. | | |
| e Undistributed income for 2012. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2013. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2014 | | | | 0. |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | 0. | | | |
| section 170(b)(1)(F) or 4942(g)(3) | | | | |
| 8 Excess distributions carryover from 2008 | 2,054. | | | |
| not applied on line 5 or line 7 9 Excess distributions carryover to 2014. | 2,034. | | | |
| Subtract lines 7 and 8 from line 6a | 226,908. | ! | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2009 8,080. | | | | |
| b Excess from 2010 33,577. | | | | |
| c Excess from 2011 5, 203. | | | | |
| d Excess from 2012 97,051. | | | | |
| e Excess from 2013 82,997. | | | | |
| | | | | Form 990-PF (2013) |

| Form 990-PF (2013) STORMS | FAMILY FOUN | DATION | | 26-20 | 20553 Page 10 |
|---|------------------------------|-----------------------------|---------------------------|------------------------------|--------------------|
| Part XIV Private Operating F | oundations (see in: | structions and Part VII | A, question 9) | N/A | |
| 1 a If the foundation has received a ruling o | r determination letter that | it is a private operating | | | |
| foundation, and the ruling is effective fo | r 2013, enter the date of t | he ruling | > | | |
| b Check box to indicate whether the found | lation is a private operatir | ig foundation described i | | 4942(j)(3) or 49 | 42(1)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| income from Part I or the minimum | (a) 2013 | (b) 2012 | (c) 2011 | (d) 2010 | (e) Total |
| investment return from Part X for | | | | | |
| each year listed | | | | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, | | | | | |
| line 4 for each year listed | | | | | |
| d Amounts included in line 2c not | | , | | | |
| used directly for active conduct of | | | | | |
| exempt activities | | | | | |
| e Qualifying distributions made directly | | | | | |
| 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: | | | | | |
| (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, | | | | | |
| 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 foundation | had \$5,000 or mo | re in assets |
| at any time during t | | | | | |
| 1 Information Regarding Foundation | on Managers: | | | | |
| a List any managers of the foundation wh | - | than 2% of the total cont | ributions received by the | foundation before the clos | e of any tax |
| year (but only if they have contributed r | | | · | | • |
| NONE | | | | | |
| b List any managers of the foundation wh | o own 10% or more of th | e stock of a corporation (| or an equally large porti | on of the ownership of a pa | rtnership or |
| other entity) of which the foundation ha | | | . , , , , , | | · |
| NONE | | | | | |
| 2 Information Regarding Contribut | ion, Grant, Gift, Loan | Scholarship, etc., Pr | ograms: | | |
| _ - | | | - | not accept unsolicited requi | ests for funds. If |
| the foundation makes gifts, grants, etc. | (see instructions) to indiv | viduals or organizations u | nder other conditions, c | omplete items 2a, b, c, and | d. |
| a The name, address, and telephone num | ber or e-mail address of t | the person to whom apple | cations should be addre | ssed: | |
| | | | | | |
| SEE STATEMENT 13 | | | | | |
| b The form in which applications should l | pe submitted and informa | tion and materials they sh | nould include: | | |
| c Any submission deadlines: | | | | | |
| A | a such as by assert-t | ol arong obaritable fields | kında of institutions === | other feeters: | |
| d Any restrictions or limitations on award | s, such as by geographic | ai ai cas, chantadie neids, | kinus of institutions, or | omer laciols. | |
| | | | | | |

0.

▶ 3b

Total

| Enter gross amounts unless otherwise indicated. | Unrelated t | ousiness income | Excluded b | y section 512, 513, or 514 | (e) |
|--|-------------------------|-----------------------|-------------------------------|----------------------------|-----------------------------------|
| Program service revenue: | (a) Business code | (b) Amount | (C) Exclu- sion code | (d) Amount | Related or exempt function income |
| ā | | | <u> </u> | - | |
| b | | | | | · |
| C | | | | | |
| d | _ | - | | | |
| e | | | | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | | | <u> </u> |
| investments | | | 14 | 36,060. 184,917. | |
| 4 Dividends and interest from securities | | | 14 | 184,917. | |
| 5 Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | | | | | <u> </u> |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other | | | | 425 506 | |
| than inventory | | | 18 | 435,526. | |
| 9 Net income or (loss) from special events | | | | | |
| O Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue: | | | | | 10 220 |
| a GRANT REFUNDS | | | | | 19,329 |
| b | | | | | |
| <u> </u> | _ | | | | |
| d | | . . | | | |
| 6 O Subtotal Add columns (b) (d) and (e) | - | |) | 656,503. | 19,329 |
| 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) | | | / • | 13 | 675,832 |
| See worksheet in line 13 instructions to verify calculations | ١ | | | | 0.0,002 |
| | | | | | |
| Part XVI-B Relationship of Activitie | s to the Accon | nplishment of | Exempt P | urposes | |
| Line No. Explain below how each activity for which is | ncome is reported in a | column (e) of Part XV | 'I-A contributed | importantly to the accomp | olishment of |
| the foundation's exempt purposes (other th | nan by providing fund | s for such purposes). | | | |
| 11A REFUND OF PRIOR YEAR | | | | | |
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the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

| | | from the reporting founda | ition to a noncharitable e | exempt org | anization of: | | | 1 10 10 10 10 10 10 10 10 10 10 10 10 10 | |
|--------|--------------|--------------------------------|-------------------------------|--------------|--|--|-----------------------------------|---|-------------------|
| • |) Cash | | | | | | | 12(1) | $\frac{X}{X}$ |
| • |) Other | | | | | | | 1a(2) | |
| _ | | sactions; | | | | | | | |
| • | • | of assets to a noncharital | | | | | | 1b(1) | X |
| • | • | ases of assets from a nor | , , | nization | | | | 1b(2) | X |
| • | • | l of facilities, equipment, | or other assets | | | | | 1b(3) | X |
| • | • | oursement arrangements | | | | | | 1b(4) | X |
| (5 | i) Loans | s or loan guarantees | | | | | | 1b(5) | X |
| (6 | 6) Perfo | rmance of services or me | mbership or fundraising | solicitatio | าร | | | 1b(6) | X |
| c St | haring of | f facilities, equipment, ma | iling lists, other assets, o | or paid emp | oloyees | | | 1c | X |
| | | - | | _ | dule. Column (b) should alv | | | | |
| | | | | | d less than fair market valu | ie in any transaction | or sharing arrangement, s | how in | |
| | |) the value of the goods, | | | | | | | |
| a)Line | no | (b) Amount involved | (c) Name of non | | exempt organization | (d) Description | of transfers, transactions, and s | haring arrange | ments |
| | | | | N/A | | | | | |
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| On lo | the face | adation diversity or indiversi | the officets of with or rolet | | or more thy event ereen | antions described | | | |
| | | · | • | | or more tax-exempt organi | zations described | <u></u> | Yes [| X No |
| | | 501(c) of the Code (other | | or in sect | on 527? | | <u>L</u> | Yes L | ווס וו |
| D II | "Yes," co | omplete the following sch | | | (b) Type of organization | ı | (c) Description of relations | <u></u> | |
| | | (a) Name of org | anization | | (b) Type of organization | | (c) Description of relations | ııb | |
| | | N/A | | | | | | | |
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| | | | | | | <u> </u> | | | |
| ٥. | 1 | | | | g accompanying schedules and n taxpayer) is based on all inform | | han any knowledge May | the IHS discu | |
| Sign | 1 . / | 1440800 | De 10 == | ^ | - | . 4 | 1010 | rn with the pre wn below (see | parer instr)? |
| Here | ╸ | macri | axun | <u> </u> | 16-27-14 | poreo | surer | _ Yes └ | No |
| | Sigr | nature of officer or trustee | 0 | | Date | Title | | | |
| | | Print/Type preparer's na | ime Pr | eparer's si | gnature | Date | Check if PTIN | | |
| _ | | | | / · | | 1/2-1 | self- employed | | |
| Paid | i | YEE LEE LO | | 1 | 3 | 0/25/19 | Z P0: | 129435 | 6 |
| Prep | parer | Firm's name ► GAR | Y MCGEE | <u> </u> | LP | | Firm's EIN ▶ | | |
| Use | Only | | | | | | | | |
| | • | Firm's address ► 8 0 | 8 S.W. THIF | RD AV | ENUE, SUITE | 700 | | - | |
| | | 1 | RTLAND, OR | | • | | Phone no. (503) | 222-2 | 515 |
| | | <u> </u> | | | | | | rm 990-P | |
| | | | | | | | 10 | 555-1 | . (2010) |

| Part.XV Supplementary Information | | | | |
|--|--|----------------------|----------------------------------|-------------|
| 3 Grants and Contributions Paid During the | | , | | |
| 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 | | |
| | | | | |
| FAMILIES FIRST OF GRANT COUNTY | | PC | SUPPORT FOR FAMILIES | |
| 401 S. CANYON BLVD. | | 1 | | |
| JOHN DAY, OR 97845 | | <u> </u> | | 5,000. |
| | | | | |
| FOUR WINDS | | ₽C | SUPPORT FOR CHILDREN'S | |
| P.O. BOX 140 | | | CAMP | |
| DEER HARBOR, WA 98243 | | ļ | | 14,400. |
| | | | | |
| FULL ACCESS OF EUGENE | | PC | UPDATE OLD LIGHTING | |
| 1240 CHARNELTON ST. | | | SYSTEM | |
| EUGENE, OR 97401 | | | | 6,500. |
| HORSE ENTHUSIASTS ADAPTIVE RIDING | | PC | CAPACITY BUILDING | |
| THERAPY | | | | |
| P.O. BOX 7871 | | | | |
| KLAMATH FALLS, OR 97602 | | | | 10,000. |
| | | | | |
| LANE PREGNANCY SUPPORT CENTER | | PC | MEDICAL EXPANSION | |
| 819 A STREET | | | 1 | |
| SPRINGFIELD, OR 97477 | | | | 5,000. |
| | | | | |
| MAGDALENE HOME | | PC | SUPPORT PRO-LIFE WORK | |
| P.O. BOX 255 | | | | |
| MEDFORD, OR 97501 | | | | 27,500. |
| | | | | |
| MARIST CATHOLIC HIGH SCHOOL | | ₽C | SUPPORT PRO-LIFE | |
| 1900 KINGSLEY ROAD | | | STUDENT GROUP | |
| EUGENE, OR 97401 | | <u> </u> | | 4,550. |
| | | | | |
| NESKOWIN VALLEY SCHOOL | | PC | GENERAL SUPPORT | |
| 10005 SLAB CREEK ROAD | | | | |
| NESKOWIN, OR 97149 | | ļ | | 660. |
| | | | | |
| OPTIONS PREGNANCY RESOURCE | | PC | SUPPORT PRO-LIFE WORK | |
| 867 N.W. 23RD ST. | | | | |
| CORVALLIS, OR 97330 | | 1 | | 10,000. |
| | | | | |
| OREGON HEALTH SCIENCES UNIVERSITY | | PC | ALZHEIMER'S RESEARCH | |
| 3181 S.W. SAM JACKSON PARK ROAD | | | AND GLOBAL WOMEN'S | |
| PORTLAND, OR 97239 | | | HEALTH ISSUES | 65,355. |
| Total from continuation sheets | | | | 336,594. |

STORMS FAMILY FOUNDATION Part XV | Supplementary Information

| Part XV Supplementary Information | | | | |
|---|--|----------------------|---|---------|
| 3 Grants and Contributions Paid During the Ye | • | | | |
| 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 | | |
| PARENTS ENHANCEMENT 421 N.W. 4TH STREET, SUITE A CORVALLIS, OR 97330 | | PC | HELP WITH PARENTING SKILLS | 15,000. |
| PARKINSON'S RESOURCES OF OREGON 3975 MERCHANTILE DRIVE, SUITE 154 LAKE OSWEGO, OR 97035 | | PC | CARE FOR THOSE WITH PARKINSONS | 8,680. |
| PEARL BUCK CENTER 3690 W. FIRST AVENUE EUGENE, OR 97402 | | PC | SUPPORT TRANSPORTATION FOR CHILDREN TO CENTER | 15,000. |
| PLAYWRITE, INC. P.O. BOX 13420 PORTLAND, OR 97213 | | PC | SUPPORT PROGRAMS FOR YOUTH THROUGH PLAYS THEY WRITE | 11,500. |
| PORTLAND JAPANESE GARDEN 611 S.W. KINGSTON AVENUE PORTLAND, OR 97205 | | PC | FACILITIES IMPROVEMENT | 24,275. |
| PREGNANCY CARE CENTER OF ILLINOIS VALLEY P.O. BOX 993 CAVE JUNCTION, OR 97523 | | PC | PRO-LIFE WORK | 5,000. |
| PROVIDENCE HOSPITAL CHILD CARE 830 N.E. 47TH AVENUE PORTLAND, OR 97213 | | PC | CARE FOR DISABLED | 47,000. |
| SENIOR CITZENS COUNCIL OF CLACKAMAS COUNTY P.O. BOX 1777 | | PC | TECHNOLOGY UPGRADE | |
| OREGON CITY, OR 97045 | | | | 4,620. |
| SEVENTH DAY ADVENTIST CHURCH 2870 N.E. DEVILS LAKE ROAD LINCOLN CITY, OR 97367 | | PC | PROJECT ETHIOPIA | 16,964. |
| TREASURE VALLEY CHILDREN RELIEF NURS 588 W IDAHO AVENUE ONTARIO, OR 97914 | | PC | TRAINING FOR CHILDREN WITH SPECIAL NEEDS | 8,250. |
| Total from continuation sheets | | | | |

| Part XV Supplementary Information 3 Grants and Contributions Paid During the Ye | ear (Continuation) | | | |
|---|--|----------------------|----------------------------------|-------------|
| | If recipient is an individual | <u> </u> | 1 | _ |
| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (nome of business) | or substantial contributor | recipient | | |
| | ļ | | | |
| OLUNTEERS IN MEDICINE | | PC | SUPPORT WORK DONE WITH | |
| 260 MARCOLA ROAD | | | DEPRESSED PATIENTS | |
| PRINGFIELD, OR 97477 | | | | 26,34 |
| | | | | |
| OLUNTEERS OF AMERICA | | PC | HOUSING FOR GRADUATES | |
| 910 S.E. STARK STREET | | | | |
| ORTLAND, OR 97214 | | | | 5,00 |
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| FORM 990-PF INTEREST ON SAVIN | IGS AND | TEMI | PORARY C | ASH . | INVESTMENTS | STATEMENT | 1 |
|--------------------------------|---------------------------|-------|----------------------------|-------|-----------------------------------|---------------------|-----|
| SOURCE | | | | | | AMOUNT | |
| CHARLES SCHWAB | | | | | | | 60. |
| TOTAL TO FORM 990-PF, PART I, | LINE 3, | COI | LUMN A | | | 36,0 | 60. |
| FORM 990-PF DIVIDENDS | S AND IN | ITERI | EST FROM | SEC | URITIES | STATEMENT | 2 |
| SOURCE | GF | ROSS | AMOUNT | | PITAL GAINS DIVIDENDS | COLUMN (A AMOUNT | .) |
| CHARLES SCHWAB | | : | 184,917. | | 0. | 184,9 | 17. |
| TOTAL TO FM 990-PF, PART I, LN | T 4 | • | 184,917. | | 0. | 184,9 | 17. |
| FORM 990-PF | ОТНЕ | ER II | NCOME | | | STATEMENT | 3 |
| DESCRIPTION | |] | (A) REVENUE PER BOOK | | (B) NET INVEST- MENT INCOME | | |
| GRANT REFUNDS | | | 19, | 329. | 0 | • | |
| TOTAL TO FORM 990-PF, PART I, | LINE 11 | L | 19, | 329. | 0 | • | |
| FORM 990-PF | LI | EGAL | FEES | | | STATEMENT | 4 |
| DESCRIPTION | (A) EXPENSI PER BOO | | (B) NET INV MENT IN | EST- | | | |
| DUFFY KEKEL LLP | 5 | 540. | | 0 | • | 5 | 40. |
| TO FM 990-PF, PG 1, LN 16A | Ę | 540. | | 0 | • | 5 | 40. |

| FORM 990-PF | ACCOUNTI | NG FEES | S' | PATEMENT 5 | | |
|--|------------------------------|-----------------------------------|-------------------------------|-------------------------------|--|--|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | | |
| GARY MCGEE & CO. LLP | 2,565. | 0. | | 2,565. | | |
| TO FORM 990-PF, PG 1, LN 16B | 2,565. | 0. | | 2,565. | | |
| FORM 990-PF (| OTHER PROFES | SIONAL FEES | S' | FATEMENT 6 | | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | | |
| FERGUSON WELLMAN INVESTMENT FEES | 35,856. | 35,856. | | 0. | | |
| TO FORM 990-PF, PG 1, LN 16C | 35,856. | 35,856. | | 0. | | |
| FORM 990-PF TAXES | | | STATEMENT 7 | | | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | | |
| FOREIGN TAX ON DIVIDENDS | 1,237. | 1,237. | | 0. | | |
| ADR PASSTHROUGH FEES ON INVESTMENTS IRS EXCISE TAXES | 294. 2,684. | 294. 0. | | 0. | | |
| TO FORM 990-PF, PG 1, LN 18 | 4,215. | 1,531. | | 0. | | |

| FORM 990-PF | OTHER E | XPENSES | | | STATEMENT | 8 |
|---|------------------------------|-----------------------------|----------------|---------------------------------|------------------------|-------------------|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVE MENT INC | | | | |
| SUPPLIES COMPUTER/WEB SITE ANNUAL REPORT FEE OREGON DEPARTMENT OF JUSTICE | 2,442. 410. 100. | | 0. 0. 0. | | | 42. 10. 00. |
| REGISTRATION FEE MEETINGS | 800. 997. | | 0. 0. | | | 00. 97. |
| TO FORM 990-PF, PG 1, LN 23 | 4,749. | | 0. | | 4,7 | 49. |
| FORM 990-PF U.S. AND S | TATE/CITY G | OVERNMENT | OBL | IGATIONS | STATEMENT | 9 |
| DESCRIPTION | U.S GOV' | | вос | OK VALUE | FAIR MARKE | T |
| US GOVERNMENT BONDS US TREASURIES MUNICIPAL BONDS | X | x | | 105,775. 201,532. 52,003. | 107,2 188,2 50,1 | 58. |
| TOTAL U.S. GOVERNMENT OBLIGAT | CIONS | • | | 307,307. | 295,4 | 95. |
| TOTAL STATE AND MUNICIPAL GOV | ERNMENT OBL | IGATIONS | | 52,003. | 50,1 | 58. |
| TOTAL TO FORM 990-PF, PART II | , LINE 10A | : | | 359,310. | 345,6 | 53. |
| FORM 990-PF | CORPORAT | E STOCK | | | STATEMENT | 10 |
| DESCRIPTION | | | вос | OK VALUE | FAIR MARKE VALUE | T |
| EQUITIES | | • | | 4,684,970. | 6,313,9 | 03. |
| TOTAL TO FORM 990-PF, PART II | , LINE 10B | • | | 4,684,970. | 6,313,9 | 03. |

| FORM 990-PF | CORPORATE BONDS | | STATEMENT 11 |
|---|---------------------|----------------------|----------------------|
| DESCRIPTION | | BOOK VALUE | FAIR MARKET VALUE |
| CORPORATE BONDS | | 826,917. | 810,723. |
| TOTAL TO FORM 990-PF, PART II, | LINE 10C | 826,917. | 810,723. |
| FORM 990-PF | OTHER INVESTMENTS | | STATEMENT 12 |
| DESCRIPTION | VALUATION METHOD | BOOK VALUE | FAIR MARKET VALUE |
| EQUITY MUTUAL FUNDS EMERGING MARKETS MUTUAL FUNDS | COST COST | 568,464. 502,359. | 727,947. 501,331. |
| TOTAL TO FORM 990-PF, PART II, | LINE 13 | 1,070,823. | 1,229,278. |

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

13

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

STORMS FAMILY FOUNDATION PMB 325, 25 N.W. 23RD PLACE, SUITE 6 PORTLAND, OR 97210

TELEPHONE NUMBER

503-227-5174

FORM AND CONTENT OF APPLICATIONS

APPLICATIONS ARE AVAILABLE AT THE FOUNDATION'S WEBSITE: WWW.STORMSFAMILYFOUNDATION.ORG.

ANY SUBMISSION DEADLINES

DETAILS ARE AVAILABLE AT WWW.STORMSFAMILYFOUNDATION.ORG.

RESTRICTIONS AND LIMITATIONS ON AWARDS

DETAILS ARE AVAILABLE AT WWW.STORMSFAMILYFOUNDATION.ORG.

*Form **8868**

(Rev. January 2014)

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.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No. 1545-1709

| ● If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box | | | | | | ightharpoonup |
|---|--|-------------|---------------------------------------|---------------|----------------------|---------------|
| • If you | are filing for an Additional (Not Automatic) 3-Month Ex | tension, d | complete only Part II (on page 2 of | this form) | | |
| Do not | complete Part II unless you have already been granted a | an automa | atic 3-month extension on a previous | sly filed Fo | rm 8868. | |
| Electro | nic filing (e-file). You can electronically file Form 8868 if | ou need a | a 3-month automatic extension of tir | ne to file (6 | 6 months for a c | orporation |
| | to file Form 990-T), or an additional (not automatic) 3-mo | | | | | |
| - | to file any of the forms listed in Part I or Part II with the ex | | | | | |
| Person | al Benefit Contracts, which must be sent to the IRS in pap | er format | (see instructions). For more details | on the elec | ctronic filing of th | nis form, |
| | w.irs.gov/efile and click on e-file for Charities & Nonprofits | | , | | | • |
| Part | | | submit original (no copies ne | eded). | | |
| A corpo | ration required to file Form 990-T and requesting an autor | natic 6-mo | onth extension - check this box and | complete | | |
| Part I o | nly | | | | | ightharpoonup |
| All othe | r corporations (including 1120-C filers), partnerships, REM | ICs, and t | rusts must use Form 7004 to reques | at an exten | sion of time | |
| to file in | come tax returns | | · | Enter file | er's identifying | number |
| Type or | Name of exempt organization or other filer, see instru | ctions. | | | dentification n | |
| print | | | | | | (, |
| , | STORMS FAMILY FOUNDATION | | | | 26-2020 | 553 |
| File by the | N. I. should and some supplier to B.O. have a | ee instruc | tions. | Social se | curity number (S | |
| filing your | PMB 325, 25 N.W. 23RD PLACE | | _ | | | , |
| return Sec instruction | | | | | | |
| | PORTLAND, OR 97210 | | , | | | |
| • | , | | · | | | |
| Enter th | e Return code for the return that this application is for (file | e a separa | te application for each return) | | | 0 4 |
| Applica | tion | Return | Application | | | Return |
| Is For | | Code | Is For | | | Code |
| | 00 or Form 990-EZ | 01 | Form 990-T (corporation) | | | 07 |
| Form 99 | | 02 | Form 1041-A | | <u>.</u> . | 08 |
| | '20 (individual) | 03 | Form 4720 (other than individual) | | | 09 |
| Form 99 | | 04 | Form 5227 | | | 10 |
| | 00-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | | | 11 |
| | 00-T (trust other than above) | 06 | Form 8870 | - | | 12 |
| | ANNA STORMS INC | | | | | 112 |
| | books are in the care of PMB 325, 25 N.V | | | PORTL. | AND, OR | 97210 |
| | phone No. ► <u>(503) 227-5174</u> | | Fax No. | | | . — |
| | organization does not have an office or place of business | | • | | | |
| _ | s is for a Group Return, enter the organization's four digit (| | | | r the whole grou | |
| box 🕨 | . If it is for part of the group, check this box | | | | ers the extensio | n is for. |
| 1 1 | equest an automatic 3-month (6 months for a corporation | • | • | | | |
| _ | | t organizat | tion return for the organization name | ed above. | The extension | |
| | for the organization's return for: | | | | | |
| | X calendar year 2013 or | | | | | |
| | tax year beginning | , an | d ending | | _ · | |
| | | | | | | |
| 2 If | the tax year entered in line 1 is for less than 12 months, cl | heck reaso | on. Initial return | Fınal returi | n | |
| | Change in accounting period | | | | | |
| 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any | | | | | | |
| nonrefundable credits. See instructions. 3a \$ | | | | | | <u> </u> |
| | this application is for Forms 990-PF, 990-T, 4720, or 6069 | _ | | | | |
| | timated tax payments made. Include any prior year overp | | · | 3b | \$ | 0. |
| | alance due. Subtract line 3b from line 3a. Include your pa | - | • | | | |
| | using EFTPS (Electronic Federal Tax Payment System). | | | 3c | \$ | 0. |
| Caution | i. If you are going to make an electronic funds withdrawal | (dırect del | ort) with this Form 8868, see Form 8 | 453-EO ar | nd Form 8879-EC | o for payment |