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### Form **990,-PF**

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

2013

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service ► 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.

For calendar year 2013, or tax year beginning , 2013, and ending ,												
PENDLETON COMMUNITY MEMORIAL HEALTH CO						LTH CORP		A	Employer Identification num 93-0477693	iber		
		OX 7 LETC	/86 ON, OR 9780	01				В				
							С	If exemption application is				
G	Che	ck all	that apply:	Initial return		Initial return of a form	ner public charity	١	ii exemption application is	pending, check here.		
				Final return	Ţ	Amended return		D	1 Foreign organizations, chec	k here ►		
				Address char	<u> </u>	Name change	<del>,</del>		2 Foreign organizations meeti	ing the 85% test, check		
Н	얁		lype of organiza			1(c)(3) exempt private f			here and attach computatio	n		
						trust Other taxable p		E	If private foundation status under section 507(b)(1)(A),	was terminated		
1			et value of all asset rt II, column (c), line		J Acc	counting method: XC	ash Accruai	F	If the foundation is in a 60-			
ı	► s			,906.	(Part I	, column (d) must be on	cash basis.)	ļ "	under section 507(b)(1)(B)	, check here		
Pā	HI	<b>図Ar</b>	nalysis of Re	venue and	(	1	(b) Net investmen		(C) Adjusted not	(d) Disbursements		
		Ex	penses (The	total of amount	s in	(a) Revenue and expenses per books	income	ıı	(C) Adjusted net income	for charitable		
		sai	rily equal the an	and (d) may not nounts in colum	neces- n (a)					purposes (cash basis only)		
		(se	<u>ee</u> instructions).)	)				9277F	Process of the second s	• •		
				grants, etc, received oundn is not req to at								
	}		Interest on savi	ings and tempor	rary	manders and a second of the se						
	1	4		nts est from securities .		15,880.	15,88		15,880.			
	- 1	-		est nom securices .		8,183.	8,18	3.	8,183.			
	l	b	Net rental income or (loss)					9				
R			Net gain/(loss) from	sale of assets not on		234.						
R E V	; ]		Gross sales price for assets on line 6a		<u>519.</u>							
E N U		8	Capital gain net inco	ome (from Part IV, lin	ie 2)		23	4.	234.			
				ations					234.			
E		10a	Gross sales less returns and									
Γ-		b	allowances									
1	-	KË	Gross profit (loss)	(att sch)		and the second second						
2	П	11	Other income-(	attach schedule	<b>3</b>		THE DESIGNATION OF THE PERSON	= C + N1.				
SZOE		MAF	1 1 2010 S	SEE2STATEME s 11 through 11.	ENT 1	2,000.						
<u> </u>	╝			s 11 through 11.		26,297. 3,600.	24,29	7.	24,297.	3,600.		
ı	d	714:1	Other employee sal	aries and wages	ees, etc	3,000.				3,000.		
٠.,	-	-15-	Pension plans,	employee bene	fits							
	A	16 a	Legal fees (attach s	schedule)								
	M			tach sch) SEE .		1,320.				1,320.		
0	א		Interest	ach sch)SEE	. D.I3	1,390.			<u> </u>	1,390.		
P	S	18		ee instrs)SEES	STM 4	735.				735.		
R A T	RA		Depreciation (a	attach								
l N	Ţ	20	sch) and deple	tion		<u> </u>						
≅Ğ	Ě	21	Travel, confere	nces, and meet		440.				440.		
À	E	22	Printing and pu									
<b>_</b>	P	23		s (attach sched: SEE STATEM		1,311.				1,311.		
SCANNED MAK 2 GZ SUBE-TERMO	N S	24	Total operating	and administr	ative							
Z Z	Š	OE.	expenses. Add	lines 13 throug grants paid PAR	h 23	8,796.	Contraction to Programme and James and	regress to	aport, nigan kanamatanan si senem	8,796.		
_						19,617.		<u>(地)</u>	<b>第2字型版到图254時</b>	19,617.		
<u> </u>	_			s <b>and disburse</b> n nd 25		28,413.		0.	0.	28,413.		
			Subtract line 20			YEAR DEPOSITE SERVICES						
Ę		а	excess of reve	nue over exper		-2,116.						
Z)		b		ome (if negative, ente	er -0-)		24,29	97.	N-SCIPPING TO THE			
		C	Adjusted net incom	ie (if negative, enter	-0-)	VAN MET HERE			24,297.	Company Company		
BA	A F	or Pa	perwork Reduct	tion Act Notice.	see in	structions.		TEFA	05041 10/18/13	Form 990-PF (2013)		

Form				93-04	
Par		Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year		f year
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	ן ן	Cash – non-interest-bearing	F00 400	460 550	460 550
	2	Savings and temporary cash investments	588,133.	462,558.	462,558.
	3	Accounts receivable			
	4	Pledges receivable			ED EU SO HOLES VAS BASE CAROLES
	~	Less: allowance for doubtful accounts	WEST REAL PROPERTY.		
	5	Grants receivable.			<del></del>
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions).			
	7	Other notes and loans receivable (attach sch).			
A	1	Less: allowance for doubtful accounts ►	100.5505-5505-5505-5505		
S	8	Inventories for sale or use			
S S E T	9	Prepaid expenses and deferred charges			
s	102	a Investments — U.S. and state government obligations (attach schedule)			
	l t	Investments — corporate stock (attach schedule) . STATEMENT 6	128,736.	128,736.	154,636.
	(	Investments — corporate bonds (attach schedule)		_	
	11	Investments — land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)STATEMENT7		123,459.	132,712.
	14	Land, buildings, and equipment: basis ►			
		Less: accumulated depreciation (attach schedule)			
		Other assets (describe ►)		<u> </u>	
	16	Total assets (to be completed by all filers – see the instructions. Also, see page 1, item l)	716,869.	714,753.	749,906.
L	17	Accounts payable and accrued expenses	120,003.	7217,000	
Ā	18	Grants payable			
Ŗ	19	Deferred revenue			
Ļ	20	Loans from officers, directors, trustees, & other disqualified persons			
ļ	21	Mortgages and other notes payable (attach schedule)			
i	22	Other liabilities (describe			
E S	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
ΝF	24	Unrestricted	716,869.	714,753.	
N F E U T N	25	Temporarily restricted			
D	26	Permanently restricted			
A B A E A E T A		Foundations that do not follow SFAS 117, check here ► and complete lines 27 through 31.			
ΕL	27	Capital stock, trust principal, or current funds			
SN	28	Paid-in or capital surplus, or land, building, and equipment fund			
O E	29	Retained earnings, accumulated income, endowment, or other funds	_		
ŘŜ	30	Total net assets or fund balances (see instructions)	716,869.	714,753.	
	31	Total liabilities and net assets/fund balances (see instructions)	716,869.	714,753.	
Parl		Analysis of Changes in Net Assets or Fund Balanc		71177001	Friday Constant Labors 16 metry 227 and 181
		I net assets or fund balances at beginning of year — Part II, colu of-year figure reported on prior year's return)	<del></del>	gree with	716 960
		r amount from Part I, line 27a			716,869. -2,116.
3	Other	increases not included in line 2 (itemize)		3	2,110.
4	Add	lines 1, 2, and 3			714,753.
5	Dooro	sees not included in line 9 (itemize)		r.	
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)	) - Part II, column (b),	line 30 6	714,753.

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Capital Gains and L  (a) List and describe 2-story brick warehous	the kind(s) of property sold (e.g., se; or common stock, 200 shares M	real estate.	(b) How ac P — Purch D — Dona	nase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a 835.622 JP MORGAN C	OPE BOND		P		VARIOUS	10/28/13
<b>b</b> 303.698 LOOMIS SAYL			P		VARIOUS	11/13/13
C C	ES INV GIVADE DD	<del>-</del>			VMCIOOS	11/15/15
d						
e				<del></del> -		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa	sis le		(h) Gain or (e) plus (f) m	(loss) ninus (g)
a 9,793.			9,643.			150.
<b>b</b> 3,726.			3,642.			84.
С						
d					·	
e						
(i) Fair Market Value as of 12/31/69	ring gain in column (h) and owned (j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a	ı (i)		(I) Gains (Col ain minus column (I an -0-) or Losses (fi	(), but not less
a						150.
b						84.
c						
d						
e	<u> </u>					
2 Capital gain net income or (ne	t capital loss).    [If gain, also If (loss), en	o enter in Part I, line 7 hter -0- in Part I, line 7		2		234.
3 Net short-term capital gain or	(loss) as defined in sections 1222(5	5) and (6):				
If gain, also enter in Part I, line in Part I, line 8	e 8, column (c) (see instructions).	If (loss), enter -0-	•	3		234.
<b>Part V</b> Qualification Under			nt Incon	1e	<u> </u>	
Was the foundation liable for the set if 'Yes,' the foundation does not quate the set if 'Yes,' the foundation does not quate in the appropriate amount.	ction 4942 tax on the distributable	complete this part.	N/A			No
(a) Base period years	(b) Adjusted qualifying distributions	(c) Net value of			(d) Distribution	ı ratio
Calendar year (or tax year beginning in)		noncharitable-use as	sets	(coli	umn (b) divided	by column (c))
2012						
2011						
2010						
2009			_			
2008		l		<b></b> -		
2 Total of line 1, column (d)				2		
3 Average distribution ratio for the number of years the foundation	he 5-year base period– divide the t n has been in existence if less than	total on line 2 by 5, or by the	e	3		
4 Enter the net value of nonchar	ritable-use assets for 2013 from Pa	ort X. line 5		4		
5 Multiply line 4 by line 3				5		· <del></del>
6 Enter 1% of net investment in	come (1% of Part I, line 27b)			6		
<b>7</b> Add lines 5 and 6				7		
	rom Part XII, line 4					
If line 8 is equal to or greater Part VI instructions.	than line 7, check the box in Part \	/I, line 1b, and complete th	at part usi	ng a		
BAA					Fort	n <b>990-PF</b> (2013)

			<u>7693</u>		P	age 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s	ee inst	ruction	s)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here   and enter 'N/A' on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary — see instrs)		Ì			
	Domestic foundations that meet the section 4940(e) requirements in Part V,	1			4	86.
	check here ► and enter 1% of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)	1		ATT COME		RESEARCH.
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	. 2				0.
	Add lines 1 and 2				4	86.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)					0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0				4	86.
	Credits/Payments:				<b>XX</b>	
	2013 estimated tax pmts and 2012 overpayment credited to 2013					
	Exempt foreign organizations — tax withheld at source					
C	Tax paid with application for extension of time to file (Form 8868) 6 c					
	Backup withholding erroneously withheld					
7	Total credits and payments. Add lines 6a through 6d	. 7			6	500.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	. 8	1			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<b>►</b> 9				0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶ 10	1		1	14.
	Enter the amount of line 10 to be: Credited to 2014 estimated tax	<u>- 11</u>				0.
Part	MIA Statements Regarding Activities					
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				Yes	No
	participate or intervene in any political campaign?			1 a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?			1 b	_	Х
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.					
С	Did the foundation file Form 1120-POL for this year?			1 c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		•			
_	(1) On the foundation ►\$ 0. (2) On foundation managers ►\$  Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on		0.			
-	foundation managers ►\$  0.					
	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If 'Yes,' attach a detailed description of the activities.					
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles					
3	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes.			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If 'Yes,' has it filed a tax return on Form 990-T for this year?			4b	N.	/ <u>A</u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If 'Yes,' attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?</li> </ul>			<b>多</b>	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV			7	Х	
	Enter the states to which the foundation reports or with which it is registered (see instructions)					NO.
	OR					
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation		<del></del>	8 b	X	
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)					
	for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If 'Yes,' comp	iete Pa	art XIV.	9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses			10		<u>x</u> _
BAA			Fo	rm 990	)-PF (2	2013)

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Pa	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	<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person ladvisory privileges? If 'Yes,' attach statement (see instructions)	nad	12	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption ap Website address	plication?	13	Х
14	The books are in care of ► DAN CENIGA  Telephone no	(541)	276-	-3182
	Located at ► PO BOX 786 PENDLETON, OR ZIP + 4 ►	97801		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year		.혀/.쇼.	. ► [] N/A
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over bank, securities, or other financial account in a foreign country?	· a	16	Yes No
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the name of the foreign country ►			
Pai	TWIEB Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Yes No
1 a	During the year did the foundation (either directly or indirectly):	<u></u>		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No		
		Yes X No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes X No		
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.).	Yes X No		
i	olf 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)?		1 b	N/A
	Organizations relying on a current notice regarding disaster assistance check here	📙		
•	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?		1 c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
i		Yes X No		
	If 'Yes,' list the years ► 20 _ , 20 _ , 20			
١	b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)( (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(in all years listed, answer 'No' and attach statement — see instructions.)	2) to	2 b	N/A
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	► 20 , 20 , 20 , 20			
		Yes X No		
1	b 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 dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2013.)		3 b	N/A
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	Х
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?		4 b	X
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Form 990-PF (2013) PENDLETON COMMUNIT	Y MEMORIAL HEA	LTH CORP	93-04	77693 P	age 6
Partivil: B. Statements Regarding Activiti	es for Which Form	4720 May Be Requ	uired (continued)	le control control	I TOTAL TOTAL
5 a During the year did the foundation pay or incu					
(1) Carry on propaganda, or otherwise attemp	t to influence legislatio	n (section 4945(e))?	····· Yes X	No	
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registra	tion drive?			No	
(3) Provide a grant to an individual for travel,			Yes X	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	4940(d)(2)? (see instru	ictions)		No Page 1	
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in (see instructions)?					/A
Organizations relying on a current notice regard	rding disaster assistand	e check here	▶		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure responsible 'Yes,' attach the statement required by Regulary 1.			N.A. Yes	]No	
6 a Did the foundation, during the year, receive ar on a personal benefit contract?			S 	No	
<b>b</b> Did the foundation, during the year, pay premi				6 b	X
If 'Yes' to 6b, file Form 8870.  7a At any time during the tax year, was the found	lation a party to a prob	ihited tax shelter transa	ction? Tyes X	lNo l	
b If 'Yes,' did the foundation receive any procee					1154553
Partavilla Information About Officers, Di	rectors, Trustees,	Foundation Manag	ers, Highly Paid I	mployees,	
and Contractors					
1 List all officers, directors, trustees, foundation				T:	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense acc other allowar	ount, nces
SEE STATEMENT 8					
		3,600.	0.		0.
		3,600.	0.	<del></del>	<u> </u>
					<del></del>
2 Compensation of five highest-paid employees (or	her than those included	on line 1 — see instruction	ns). If none, enter 'NONE	1	
(a) Name and address of each employee	(b) Title, and average	(c) Compensation	(d)Contributions to	(e) Expense acc	count,
paid more than \$50,000	hours per week devoted to position		employee benefit plans and deferred	other allowa	nces
-			compensation	<u> </u>	
NONE					
				1	
				<del> </del>	
	}				
			-		
Total number of other employees paid over \$50,000	l	<u></u>	<u> </u>	<u> </u>	0
RAA		יייייייייייייייייייייייייייייייייייייי		Form 998-PE /	-

Form 990-PF (2013) PENDLETON COMMUNITY MEMORIAL HEALTH CORP  Part Mile Information About Officers, Directors, Trustees, Foundation Manager and Contractors (continued)	93-0477693 Page 7 s, Highly Paid Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none	, enter 'NONE.'
(a) Name and address of each person paid more than \$50,000 (b) Type of	f service (c) Compensation
NONE	
	}
Total number of others receiving over \$50,000 for professional services	▶ 0
Partix A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the organizations and other beneficiaries served, conferences convened, research papers produced, etc.	number of Expenses
1 N/A	
2	
3	
<b>,</b>	
4	
~	
Part X:B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1	and 2. Amount
1	
N/A	
2	
All of	
All other program-related investments. See instructions.	ļ
3	
Total. Add lines 1 through 3.	▶ 0.
BAA	Form 990-PF (2013)
	1 2 202 (2010)

		3-04//	
Rai	Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)		oundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes:  Average monthly fair market value of securities	1 a	209,316.
	Average of monthly cash balances	1b	525,340.
	Fair market value of all other assets (see instructions).		020/0101
	Total (add lines 1a, b, and c)		734,656.
	Reduction claimed for blockage or other factors reported on lines 1a and 1c	1232.1	7017000.
	(attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets.	2	0.
3	Subtract line 2 from line 1d.		734,656.
_		<del>                                     </del>	751,050.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	11,020.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	723,636.
6	Minimum investment return. Enter 5% of line 5.	6	36,182.
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations		undations
26/22/14	and certain foreign organizations check here \(\bigsim\) and do not complete this part.)	9 .0	
1	Minimum investment return from Part X, line 6.	11	36,182.
2 a	Tax on investment income for 2013 from Part VI, line 5	<del></del>	
	Income tax for 2013. (This does not include the tax from Part VI.)		
-	Add lines 2a and 2b.	2 c	486.
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	35,696.
4	Recoveries of amounts treated as qualifying distributions		33,030.
5	Add lines 3 and 4		35,696.
6	Deduction from distributable amount (see instructions).		
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	-	35,696.
	*XIII Qualifying Distributions (see instructions)	<u> </u>	
Not California	- Child Country (1)	IEONES I	<del></del>
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:		
	Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	28,413.
	Program-related investments — total from Part IX-B.		<del></del>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes		
3 a	Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required)	3 a	
b	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	28,413.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.  Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	28,413.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the for qualifies for the section 4940(e) reduction of tax in those years.	indation	
BAA			Form 990-PF (2013)

#### Partixill Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	<b>(c)</b> 2012	<b>(d)</b> 2013
1 Distributable amount for 2013 from Part XI, line 7.				35,696.
2 Undistributed income, if any, as of the end of 2013:				
a Enter amount for 2012 only			2,656.	
b Total for prior years: 20 , 20 , 20		0.		
a From 2008				
<b>b</b> From 2009				
c From 2010				
d From 2011				
e From 2012				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2013 from Part				
XII, line 4: \$ 28,413.				
a Applied to 2012, but not more than line 2a			2,656.	
<b>b</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				25,757.
e Remaining amount distributed out of corpus .	0.			
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).)				
(-9,9				
6 Enter the net total of each column as				
indicated below: a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency				
has been issued, or on which the section				
4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount — see instructions		0.		
e Undistributed income for 2012. Subtract line 4a from line 2a. Taxable amount — see instructions.			0	
THE LET LEADING STREET, SECTION AND ASSESSED.				TO POLICIONA DE UNA DE LA CAMBINADA
f Undistributed income for 2013. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2014				9,939.
7 Amounts treated as distributions out of	ACCUMENTATION OF THE PARTY OF T			
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)				
(see instructions)	0.			
8 Excess distributions carryover from 2008 not				
applied on line 5 or line 7 (see instructions).	0.			
9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2009				
b Excess from 2010				
c Excess from 2011				
d Excess from 2012				
e Excess from 2013	ENTERE CALL PROPERTY	DELIVERY DEL	SHOULD COLUMN TO	证据。1821年1月1日

Form 990-PF (2013) PENDLETON COMMUN				93-0477693		
Private Operating Foundations (see instructions and Part VII-A, question 9)  1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling						
is effective for 2013, enter the date of the	rmination letter that ruling	it is a private operati	ing foundation, and t	ne ruling		
<b>b</b> Check box to indicate whether the foundat	ion is a private ope	erating foundation d	lescribed in section	4942(j)(3) or	4942(j)(5)	
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years			
investment return from Part X for each year listed	(a) 2013	<b>(b)</b> 2012	(c) 2011	(d) 2010	(e) Total	
<b>b</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:	u.	1		1		
(1) Value of all assets	<del></del> -					
<b>b</b> 'Endowment' alternative test — enter 2/3 of					<del></del>	
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						
RantXVII Supplementary Information assets at any time during th	(Complete this	part only if the	foundation had	1 \$5,000 or more	in	
1 Information Regarding Foundation Manag	_ <del></del>	300000113.)				
a List any managers of the foundation who have	e contributed more th	nan 2% of the total co	ontributions received	by the foundation before	ore the	
close of any tax year (but only if they have NONE	e contributed more	tnan \$5,000). (See	section 507(a)(2).)			
<b>b</b> List any managers of the foundation who own a partnership or other entity) of which the NONE	10% or more of the foundation has a 1	stock of a corporatio 0% or greater interes	n (or an equally larg est.	e portion of the owners	ship of	
2 Information Donarding Contribution Con-	t Citt Laan Caba	Jamelia eta Duanua				
2 Information Regarding Contribution, Gran Check here ► ☐ If the foundation only ma				does not accept unsoli	icited	
requests for funds. If the foundation make complete items 2a, b, c, and d.						
a The name, address, and telephone number or	e-mail of the person	n to whom application	ns should be address	sed:		
SEE STATEMENT 9			<u></u>			
<b>b</b> The form in which applications should be s	submitted and infor	mation and materia	ils they should inclu	ıde:		
SEE STATEMENT FOR LINE 2A						
c Any submission deadlines:						
SEE STATEMENT FOR LINE 2A						
d Any restrictions or limitations on awards, s	such as by geograp	phical areas, charita	ble fields, kinds of	institutions, or other	factors:	
SEE STATEMENT FOR LINE 2A		_				
BAA	TE	EA0310L 07/10/13		F	orm <b>990-PF</b> (2013)	

Form 990-PF (2013) PENDLETON COMMUNITY MEMORIAL HEALTH CORP Partix Supplementary Information (continued)

93-0477693

Page 11

3 Grants and Contributions Paid During the Ye	If recipiont is an individual	are raymen			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purp	ose of grant or contribution	Amount
	substantial contributor	recipient		<del> </del>	
a Paid during the year BLUE MOUNTAIN COMMUNITY COLLEGE DISTRICT PENDLETON, OR 97801	NONE		MEDICAL	SCHOLARSHIP	9,449
IDAHO STATE UNIVERSITY POCATELLO, ID	NONE		MEDICAL	SCHOLARSHIPS	1,500
OREGON HEALTH AND SCIENCE UNIVERSITY 3181 SW SAM JACKSON PARK ROAD PORTLAND, OR	NONE		MEDICAL	SCHOLARSHIPS	1,668
WALLA WALLA COMMUNITY COLLEGE WALLA WALLA, WA 99362	NONE				2,000
PIONEER RELIEF NURSERY 715 SE COURT AVE PENDLETON, OR 97801	NONE				4,000
WESTERN OREGON UNIVERSITY MONMOUTH , OR 97361	NONE				1,000
				•	
		 	<u> </u> 		
Total		· · · · · · · · · · · · · · · · · · ·		► 3a	19,61
b Approved for future payment					
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### **Part XVIFA** Analysis of Income-Producing Activities

Enter gros	s amounts unless otherwise indicated.	Unrelate	ed business income	Excluded	by section 512, 513, or 514	(e)	
		(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	<b>(d)</b> Amount	Related or exempt function income (See instructions.)	
_	ram service revenue:			code			
	PENSE REFUND					2,000.	
b		ļ					
c							
d							
e							
f							
<b>g</b> Fees	and contracts from government agencies						
2 Mem	bership dues and assessments						
3 Interes	st on savings and temporary cash investments			14	15,880.		
4 Divid	ends and interest from securities	{		14	8,183.		
5 Net r	ental income or (loss) from real estate:			經過			
a Debt-	-financed property						
<b>b</b> Not c	debt-financed property						
6 Net re	ntal income or (loss) from personal property						
7 Other	r investment income						
	r (loss) from sales of assets other than inventory		<del></del>			234.	
	ncome or (loss) from special events	<del> </del>		<del>                                     </del>		204.	
	s profit or (loss) from sales of inventory						
	r revenue:			THE STATE OF			
	TS/BEQUESTS	PRESIDENCES	ALL STREET, ST	KAGEL MALL	O COMPANY DE LA PROPERTIE DE L	CAYSTON CORNEL (CONTRACTOR SPECIAL SPE	
b	15/ 55/01515						
c	<del></del>			<del></del>			
d							
е				<del>                                     </del>	<del></del>		
12 Subto	otal. Add columns (b), (d), and (e)			<b>1000</b>	24,063.	2,234.	
13 Total	. Add line 12, columns (b), (d), and (e)	Scarrigging of Princip				26,297.	
	sheet in line 13 instructions to verify calculat				-		
	Relationship of Activities to the		showed of Evenue	Dive			
III GILUXVI	Relationship of Activities to the	Accompi	Siment of Exempt	rurpos	es		
Line No. ▼	Explain below how each activity for which i accomplishment of the foundation's exemp	ncome is rei t purposes (	oorted in column (e) of other than by providing	Part XVI funds fo	I-A contributed importa or such purposes). (See	ntly to the e instructions.)	
N/A							
		_			······································		
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	<del>                                     </del>	<del></del>			<del></del>		

Yes No

# Form 990-PF (2013) PENDLETON COMMUNITY MEMORIAL HEALTH CORP 93-0477693 
Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?							
<b>a</b> Tran	sfers from the reporting	foundation to a r	noncharitable exempt organ	ization of:			
• • •			***************************************				X
(2)	Other assets						X
<b>b</b> Othe	er transactions:						
(1)	Sales of assets to a non-	charitable exemp	t organization			1 b (1)	X
(2)	Purchases of assets from	n a noncharitable	e exempt organization			1 b (2)	<u> </u>
(3)	Rental of facilities, equip	ment, or other a	ssets			1 b (3)	<u> </u>
(4)	Reimbursement arranger	ments				1 b (4)	X
(5)	Loans or loan guarantee	s				1 b (5)	X
(6)	Performance of services	or membership of	or fundraising solicitations.			1b(6)	X
c Sha	ring of facilities, equipme	ent, mailing lists,	other assets, or paid empl	oyees	• • • • • • • • • • • • • • • • • • • •	1c	X
d If th the q any	e answer to any of the a goods, other assets, or ser transaction or sharing ar	rrangement, show	mplete the following schedure reporting foundation. If the form of the value of the	the goods,	other assets, or services	received.	
(a) Line no	. <b>(b)</b> Amount involved	(c) Name of no	oncharitable exempt organization	(d)	Description of transfers, transac	tions, and sharing arrang	ements
N/A					· · · · · · · · · · · · · · · · · · ·		
			·				
					<del></del>		
			<u> </u>				
			<u> </u>				
<del></del>							<del></del>
				_[			
desc	e foundation directly or inc cribed in section 501(c) of es,' complete the followi	of the Code (othe	ith, or related to, one or more r than section 501(c)(3)) or	tax-exempt in section !	organizations 527?		χΝο
	(a) Name of organization	on	(b) Type of organizati	on	(c) Descripti	on of relationship	
N/A							
Sign Here	nder penalties of perjury, I declar prect, and complete. Declaration	e that I have examined of preparer (other than	i this return, including accompanying a taxpayer) is based on all information	on of which prep	statements, and to the best of m parer has any knowledge. RESIDENT	May the IR this return preparer s	S discuss with the hown below
\ <b>/</b>	Signature of officer or trustee	2.	Date	<del></del>		(see instru	
	Print/Type preparer's nar	ne	Preparer's signature		Date Check	X if PTIN	[ ]
Dv:4	ROBERT F. TF	REMPER, CPA	Total & Drawnea	e CPA	2/26/14 self-emp		257
Paid			TREMPER, L.L.P.	<del>/</del>	Firm's EIN		<del></del>
Prepare	" I —		RST ST		T HITS CHY	20 0330990	
Use On	י <i>ע</i> י —		OR 97801		Phone no.	(541) 276-6	862
BAA	<u>_</u>	EMPRETON, (	OK 91001		Frione III.	Form 990-	
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2013	FEDERAL STATEMENTS				
CLIENT 22120	PENDLETON COMMUNITY MEMORIAL HEALTH CORP	93-0477693			
2/28/14	28/14				
STATEMENT 1 FORM 990-PF, PART OTHER INCOME	i, LINE 11				
	(A) (B) NET REVENUE INVESTMENT PER BOOKS INCOME	(C) ADJUSTED NET INCOME			
EXPENSE REFUND	TOTAL \$ 2,000. \$ 0. \$	0.			
STATEMENT 2 FORM 990-PF, PART ACCOUNTING FEES	I, LINE 16B				
DICKEY AND TREMP	C	\$ 1,320.			
STATEMENT 3 FORM 990-PF, PART OTHER PROFESSIO	「I, LINE 16C NAL FEES				
	(A) (B) NET (C)  EXPENSES INVESTMENT ADJUSTED  PER BOOKS INCOME NET INCOME  \$ 453. 937.  TOTAL \$ 1,390. \$ 0. \$ 0.	(D) CHARITABLE PURPOSES  \$ 453. 937. \$ 1,390.			
STATEMENT 4 FORM 990-PF, PART TAXES	Γ I, LINE 18				
EXCISE TAXES	(A) (B) NET (C)  EXPENSES INVESTMENT ADJUSTED  PER BOOKS INCOME NET INCOME  \$ 735.  TOTAL \$ 735. \$ 0. \$ 0.	\$ 735.			

2013	FEDE	RAL STATE	EMENTS		PAGE
<b>CLIENT 22120</b>	PENDLETON COM	IMUNITY MEMO	RIAL HEALTH C	ORP	93-04776
2/28/14					12:56F
	T I INE 99				
OTHER EXPENSES	RT I, LINE 23 S	(A)	(B) NET	(C)	(D)
OTHER EXPENSES	RT I, LINE 23	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OTHER EXPENSES	<b>5</b>	EXPENSES	INVESTMENT	ADJUSTED	CHARITABLE

# STATEMENT 6 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

AMERICAN WATER WORKS  CONOCO PHILLIPS  COST  P, 979. \$ 11,368.  CONOCO PHILLIPS  EMERSON ELECTRIC COMPANY  JOHNSON AND JOHNSON  COST  P, 977. 14,457.  JOHNSON AND JOHNSON  COST  I0,029. 13,097.  KELLOGG CO  NORTHEAST UTILITIES  COST  P, 989. 10,301.  REALTY INCOME CORP  COST  MCDONALDS CORP  COST  MCDONALDS CORP  COST  MCDONALDS CORP  COST  P, 769. 10,673.  NORFOLK SOUTHERN CORP  COST  PFIZER INC  UNITED TECHNOLOGIES CORP  WESTAR ENERGY INC  COST  P, 835. 11,823.  UNITED TECHNOLOGIES CORP  COST  P, 754. 14,339.  WESTAR ENERGY INC  COST  P, 831. 10,648.	CORPORATE STOCKS	VALUATION <u>METHOD</u>	BOOK VALUE	FAIR MARKET VALUE
TOTAL \$ 128,736. \$ 154,636.	CONOCO PHILLIPS EMERSON ELECTRIC COMPANY JOHNSON AND JOHNSON KELLOGG CO NORTHEAST UTILITIES REALTY INCOME CORP HEALTH CARE REIT INC MCDONALDS CORP NORFOLK SOUTHERN CORP PFIZER INC	COST COST COST COST COST COST COST COST	9,991. 9,977. 10,029. 10,017. 9,989. 9,975. 9,802. 9,769. 9,788. 9,835. 9,831.	12,788. 14,457. 13,097. 12,825. 10,301. 8,997. 8,839. 10,673. 14,481. 11,823. 14,339. 10,648.

# STATEMENT 7 FORM 990-PF, PART II, LINE 13 INVESTMENTS - OTHER

OTHER INVESTMENTS	VALUATION METHOD	· <del></del>	BOOK VALUE	 MARKET ALUE
ALGER SMALL/MID CAP GROWTH	COST	\$	4,151.	\$ 4,042.
ARTISAN INTL VALUE	COST		7,763.	8,024.
BRIDGE BUILDER BOND FUND	COST		13,538.	13,385.
COLUMBIA SMALL CAP VALUE II	COST		3,930.	4,105.
DELAWARE US GROWTH	COST		6,005.	6,985.
DODGE & COX INCOME	COST		8,535.	8,604.
DODGE & COX STOCK	COST		6,037.	6,909.
EUROPACIFIC GROWTH	COST		6,060.	6,791.
FUNDAMENTAL INVESTORS	COST		7,401.	8,271.
HARBOR CAPITAL APPRECIATION	COST		6,216.	7,131.
HOTCHKIS & WILEY MID CAP VAL	COST		4,816.	5,240.
INVESCO COMSTOCK	COST		4,838.	5,392.
JP MORGAN FED MON MKT	COST		1,927.	1,947.
MFS VALUE	COST		8,643.	9,528.

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#### **FEDERAL STATEMENTS**

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**CLIENT 22120** 

#### PENDLETON COMMUNITY MEMORIAL HEALTH CORP

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#### STATEMENT 7 (CONTINUED) FORM 990-PF, PART II, LINE 13 INVESTMENTS - OTHER

OTHER INVESTMENTS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
MUNDER MID CAP CORE GROWTH MUTUAL GLOBAL DISCOVERY OPPENHEIMER INTL GROWTH RANIER MID CAP EQUITY T ROWE PRICE INSTL LARGE CAP GR T ROWE PRICE INTL DISCOVERY	COST COST COST COST COST	\$ 4,897. 8,971. 8,486. 3,934. 3,602. 3,709.	9,241. 9,292. 4,050. 4,329.
	TOTAL	<u>\$ 123,459.</u>	\$ 132,712.

#### STATEMENT 8 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	ACCOUNT/
DAN CENIGA PO BOX 786 PENDLETON, OR 97801	PRESIDENT 0	\$ 3,600.	\$ 0.	\$ 0.
GARY JELLUM C/O PO BOX 786 PENDLETON, OR 97801	VICE-PRESIDENT 0	0.	0.	0.
ANNETTE SKINNER C/O PO BOX 786 PENDLETON, OR 97801	SEC-TREASURER 0	0.	0.	0.
PAULETTE DIEHL C/O PO BOX 786 PENDLETON, OR 97801	DIRECTOR 0	0.	0.	0.
THERESA BOSWORTH C/O PO BOX 786 PENDLETON, OR 97801	DIRECTOR 0	0.	0.	0.
STEVEN BJERKE C/O PO BOX 786 PENDLETON, OR 97801	DIRECTOR 0	0.	0.	0.
FRANK SZUMSKI C/O PO BOX 786 PENDLETON, OR 97801	DIRECTOR 0	0.	0.	0.
JOSEPH DIEHL, MD C/O PO BOX 786 PENDLETON, OR 97801	DIRECTOR 0	0.	0.	0.

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#### FEDERAL STATEMENTS

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**CLIENT 22120** 

#### PENDLETON COMMUNITY MEMORIAL HEALTH CORP

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# STATEMENT 8 (CONTINUED) FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
DOUGLAS OLSEN C/O PO BOX 786 PENDLETON, OR 97801	DIRECTOR 0	\$ 0.	\$ 0.	\$ 0.
LAURINE KITES C/O PO BOX 786 PENDLETON, OR 97801	DIRECTOR 0	0.	0.	0.
DONALD F. NEW C/O PO BOX 786 PENDLETON, OR 97801	DIRECTOR 0	0.	0.	0.
	TOTAL	\$ 3,600.	\$ 0.	<u>\$ 0.</u>

### **STATEMENT 9** FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

NAME:

DAN CENIGA

PO BOX 786

CARE OF: STREET ADDRESS: CITY, STATE, ZIP CODE:

PENDLETON, OR 97801

TELEPHONE: 541-276-3182

E-MAIL ADDRESS:

FORM AND CONTENT:

APPLICATIONS AVAILABLE UPON REQUEST.

SUBMISSION DEADLINES: RESTRICTIONS ON AWARDS: 2013

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#### FEDERAL SUPPLEMENTAL INFORMATION

PAGE 1

**CLIENT 22120** 

PENDLETON COMMUNITY MEMORIAL HEALTH CORP

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FORM 990 PF, PAGE 2, PART III LINE 3-OTHER INCREASES

COLLECTION OF BAD DEBTS, WRITTEN-OFF BY THE "PENDLETON COMMUNITY HOSPITAL", A NON-PROFIT ORGANIZATION, WERE VALUED AT "ZERO", WHEN THE ASSETS WERE TRANSFERRED TO THE TAXPAYER (PENDLETON COMMUNITY MEMORIAL HEALTH CORPORATION), THE "SUCCESSOR" PRIVATE FOUNDATION AND ARE DEEMED TO BE CORPUS FOR BOOK PURPOSES.

AS THE SUCCESSOR TO THE TAX ATTRIBUTES OF THE "NON-PROFIT HOSPITAL CORPORATION", THE TAXPAYER IS ALLOWED, FOR INCOME TAX PURPOSES, TO EXCLUDE FROM INCOME AN AMOUNT EQUAL TO THE DEDUCTION IN PRIOR YEARS THAT DID NOT REDUCE TAXABLE INCOME. SEE INTERNAL REVENUE CODE SECTION 111.