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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

▶ Do not enter social security numbers on this form as it may be made public. ► Information about Form 990 and its instructions is at www.irs.gov/form990. Open to Public Inspection

A F	or the	2014 calendar year, or tax year beginning an	nd ending		
В	heck if pplicabl	C Name of organization		D Employer identifica	tion number
	_Addre _chang	PORTLAND PARKS FOUNDATION		_	
	_Name _chang	Doing business as		93-13	19970
느	initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite		445 0004
L_	Final return termin		400	(503)	445-0994
_	ated Amen	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	568,958.
<u> </u>	_return ∏Applic	FORTBAND, OR 37204		H(a) Is this a group reti	⊔m ☐Yes X No
<u> </u>	⊥tion pend⊪	F Name and address of principal officer 1111 1 1 0111111		for subordinates? H(b) Are all subordinates incl	
		empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527	-1 ' '	st. (see instructions)
11	Nebsi	te: WWW.PORTLANDPARKSFOUNDATION.ORG	., 0,	H(c) Group exemption	
		organization; X Corporation	L Year	of formation: 2001 M	
	art I	Summary			
	1	Briefly describe the organization's mission or most significant activities: SEE	SCHEDU	ULE O	
Governance					
Ë	2	Check this box 🕨 📖 if the organization discontinued its operations or disp	oosed of mor	e than 25% of its net ass	
Š	3	Number of voting members of the governing body (Part VI, line 1a)		. 3	12
ಷ	l .	Number of independent voting members of the governing body (Part VI, line 1b	o)	4	12
Activities &	l	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	1350
Ę		Total number of volunteers (estimate if necessary)		6	0.
Ac	1	Total unrelated business revenue from Part VIII, column (C), line 12		7a 7b	0.
	B	Net unrelated business taxable income from Form 990-T, line 34		Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	<u> </u>	522,442.	568,535.
Je P		Program service revenue (Part VIII, line 29) FCFIVED	 	0.	0.
Revenue		Investment income (Part VIII, column (Al. lines 3.4 and 7d)		479.	423.
ď		Other revenue (Part VIII, column (A), Ines 5, 6d, 8c, 9c, 10c, and 18		0.	0.
		Total revenue - add lines 8 through (must) aqual Part 210, bolumnica, line 12)	522,921.	568,958.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		317,481.	364,389.
	14	Benefits paid to or for members (Part IX column (A) line 4)		0.	0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10	0)	148,359.	160,541.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ă. X	1	——————————————————————————————————————	136.	- 00 202	<u> </u>
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u> </u>	80,373.	65,293.
-	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>	546,213.	590,223.
C107	19_	Revenue less expenses. Subtract line 18 from line 12	 	-23,292.	-21,265.
ets o		Total access (Dart V. live 40)	-	eginning of Current Year 567, 273.	End of Year 545,237.
Page 8		Total assets (Part X, line 16) Total liabilities (Part X, line 26)	-	9,339.	5,459.
est.	l .	Net assets or fund balances Subtract line 21 from line 20		557,934.	539,778.
Pa	art II	Signature Block			
- Und	er pena	lities of perjury, I declare that I have examined this return, including accompanying schedu	ules and staten	nents, and to the best of my l	knowledge and belief, it is
True	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of	which prepare	r has any knowledge.	
字.		Mitte S Pull			
E ig	n	Signature of officer		Date 1 / 12 / 15	,
NN Ger	е	MATT PULLEN, TREASURER		[1/12/15	
<u>~</u>		Type or print name and title		Data - T	II DTIN
Date		Print/Type preparer's name Preparer's annuality Preparer's annuality	7	Date Check	PTIN
Paid	arer	YEE LEE MCGEE	اسمر	self-employed	P01294356
	Only	Firm's name GARY MCGEE & CO. LLF Firm's address 808 S.W. THIRD AVENUE, SUITE 7	00	Firm's EIN	
- 46	J.11.J	PORTLAND, OR 97204	00	Phone no. (50	3) 222-2515
NA = :	, the a !!			J Fhohe no. (30	
May	rne I	RS discuss this return with the preparer shown above? (see instructions)			Yes No

Other program services (Describe in Schedule O)

Total program service expenses

including grants of \$

491,570.

) (Revenue \$

Checklist of	

			Yes	_No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
_	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		_X_
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent		1	
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u> </u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
_	as applicable		ŀ	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	x	
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	ı ıa	1	
U	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	<u> </u>	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	-	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	446	1	х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	···		
-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	İ	х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	1	Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	<u> </u>	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	<u> </u>	X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20ь		<u> </u>
		Form	990	(2014)

Pạ	rt IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	l	.	
	domestic government on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			х
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	-	_
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current		ŀ	ŀ
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	00		Х
240	•	23	-	
248	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		1	
	Schedule K. If "No", go to line 25a	240		х
		24a 24b	-	
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	246		-
·	any tax-exempt bonds?	24c		
ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	2.70	 -	
256	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	204	<u> </u>	
-	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? /f "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	<u> </u>	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		ł	
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	1 .	1	
	Part V, line 1	34	<u> </u>	X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	├	X
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	l		
20	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	 	\vdash
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2			\ _w
27	·	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI			x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37	╁	┝
50	big the organization complete conecute of and provide explanations in schedule of for Part VI, lines 110 and 19?	1	1	i

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

Pạr	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			$\overline{}$
	Officer in correction of contains a response of flore to any line in this fact v		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		163	140
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit		}	
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).	} !		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			х
	to file Form 8282?	7c		_^
	If "Yes," indicate the number of Forms 8282 filed during the year	┨╻, │		Х
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
'	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	
h	If the organization received a contribution of qualified intellection property, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 <u>9</u> 7h	N/	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the N/A	 		F
Ū	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>		
а	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a		<u> </u>	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b]	l	
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders N/A 11a	_		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)	1		
12a	/-	12a	<u> </u>	<u> </u>
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	4	1	l
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		ļ	<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a	<u> </u>	
_	Note. See the instructions for additional information the organization must report on Schedule O		1	1
D	Enter the amount of reserves the organization is required to maintain by the states in which the			
_	organization is licensed to issue qualified health plans Enter the amount of receives on head	1		
	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tay year?	+	\vdash	X
14a h	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a	-	├^
	1 100, has known at only 120 to report these payments the 140, provide all explanation in Schedule O	14b	aan	<u>(2014</u>

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

	Check if Schedule O contains a response or note to any line in this Part VI			X			
Sec	tion A. Governing Body and Management						
			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year 12	2					
	If there are material differences in voting rights among members of the governing body, or if the governing	1					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			İ			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 12	2					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1					
_	officer, director, trustee, or key employee?	2		X			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision						
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Х				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х			
6	Did the organization have members or stockholders?	6		Х			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or						
	more members of the governing body?	7a		Х			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or						
	persons other than the governing body?	7b		X			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:						
а		8a	Х				
b	Each committee with authority to act on behalf of the governing body?	8b	Х				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)						
			Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	10a		<u> </u>			
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			1			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	ļ			
11a	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?						
ь			l				
12a		12a	X	ļ			
b		12b	Х	<u> </u>			
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe						
	in Schedule O how this was done	12c	X	ļ			
13	Did the organization have a written whistleblower policy?	13	Х	 ,,-			
14	Did the organization have a written document retention and destruction policy?	14	ļ	Х			
15	Did the process for determining compensation of the following persons include a review and approval by independent	1		ļ			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official	15a	ļ	X			
b	Other officers or key employees of the organization	15b	├─-	├ ^			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		· -				
	taxable entity during the year?	16a	├	X			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			1			
	exempt status with respect to such arrangements?	16b	<u> </u>	Ц.,			
	ction C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed OR						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availa	ole				
	for public inspection. Indicate how you made these available. Check all that apply						
	X Own website Another's website X Upon request Other (explain in Schedule O)						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, at	10 tinai	ncial				
00	statements available to the public during the tax year						
20	State the name, address, and telephone number of the person who possesses the organization's books and records ► THE ORGANIZATION - (503) 445-0994						
	111 S.W. OAK STREET, SUITE 400, PORTLAND, OR 97204						

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee "
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

Compensation Comp	(A)	(B)			((C)			(D)	(E)	(F)
CHARLIE BAKER	Name and Title		box	not ci	heck ss pe	more rson	than	h an	, , , , , , , , , , , , , , , , , , ,	•	Estimated amount of other
DIRECTOR		hours for related organizations below line)	Indiwdual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization	_	from the organization and related organizations
C2 ALEX OCCHIPINTI	• • •	1.00	v						_	0	0.
DIRECTOR		1.00		-		\vdash		\vdash		•	•
Case Case			x						0.	0.	0.
1.00	(3) CHET ORLOFF	1.00									
Director X	DIRECTOR		X						0.	0.	0.
1.00	(4) JIM OWENS	1.00							_		_
Director X		4-00	X	<u> </u>			<u> </u>		0.	0.	0.
Column		1.00	ļ.,			1					, l
DIRECTOR X		1 00	I.		_	┢			0.	0.	0.
O		1.00	v					į	ا ا	0.	0.
DIRECTOR		1.00	 ^	╁				\vdash		· ·	
(8) JULIE VIGELAND			\mathbf{x}						0.	0.	0.
(9) JEFFREY WOODCOX DIRECTOR X (10) ELIZABETH WHALEN 3.00 CHAIR X X X 0. 0. 0. 0. 1.00 0. 0. 0. 0. 0		1.00		t			T				
DIRECTOR	DIRECTOR		Х						0.	0.	0.
(10) ELIZABETH WHALEN CHAIR X X 0. 0. (11) MATT PULLEN TREASURER X X 0. 0. (12) GINA EIBEN SECRETARY X X 0. 0. (13) NICK HARDIGG 40.00	• •	1.00	١							1	
X X 0 0 0		- 2 00	X	├	_	┡	╄	ļ	0.	0.	0.
(11) MATT PULLEN 3.00 TREASURER X X 0. 0. (12) GINA EIBEN 3.00 X X 0. 0. SECRETARY X X X 0. 0. (13) NICK HARDIGG 40.00 0. 0. 0.		3.00	₩	ŀ	v				١ ،	l 0	0.
TREASURER X X X 0. 0. (12) GINA EIBEN 3.00 X X 0. 0. SECRETARY X X X 0. 0. (13) NICK HARDIGG 40.00 0. 0. 0.		3.00	^	┢	^	 	╁	 			
(12) GINA EIBEN			\mathbf{x}		$ _{\mathbf{x}}$		Ì		0.	l 0.	0.
(13) NICK HARDIGG 40.00	(12) GINA EIBEN	3.00			<u> </u>				<u> </u>		
	SECRETARY		1 x	1	Х				0.	0.	0.
X 76,667. 0. 4,5	(13) NICK HARDIGG	40.00	Г								
	EXECUTIVE DIRECTOR			_	X	<u> </u>	$oxed{igspace}$	╙	76,667.	0.	4,560.
			-								
			T								
			+	+-	+-	╁╌	+	-	-		
			1				\perp				

Form 990 (2014) PORTLAND									93-1319	970	P:	age 8
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d H	ghe	st C	ompensated Employe	es (continued)			
(A) Name and title	(B) Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)			than	h an	(D) Reportable compensation from	(E) Reportable compensation from related	l .	(F) stimate mount other	of
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	org an	npensa from the ganizate ad relate anizate	e tion ted
												
										-		
1b Sub-total c Total from continuation sheets to Part V d Total (add lines 1b and 1c)	II, Section A	<u> </u>		<u> </u>	<u> </u>	L	<u> </u>	76,667. 0. 76,667.	0.		4,5	0.
Total number of individuals (including but recompensation from the organization	not limited to th	ose	liste	ed a	bov	e) wi	no re	<u> </u>	L			0
3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s	such individual									3	Yes	No X
 4 For any individual listed on line 1a, is the si and related organizations greater than \$15 5 Did any person listed on line 1a receive or 	0,000? If "Yes,	" co	mple	ete S	Sch	edul	e J f	or such individual	_	4		х
rendered to the organization? If "Yes," con Section B. Independent Contractors	-				-					5		Х
Complete this table for your five highest countries the organization. Report compensation for	-								•	sation	from	
(A) Name and business	address	N	ONE	3				Description of s	services		C) ensatio	ก
							-					

Form 990 (2014)

\$100,000 of compensation from the organization

0

Total number of independent contractors (including but not limited to those listed above) who received more than

Page 9

Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII Revenue excluded from tax under sections 512 - 514 (B) (C) Related or Unrelated Total revenue exempt function business revenue revenue 5,100. Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 563,435 similar amounts not included above 44,902 g Noncash contributions included in lines 1a-1f \$ 568,535 h Total. Add lines 1a-1f Business Code Program Service Revenue All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 423. 423. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities 7 a Gross amount from sales of (ii) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b All other revenue Total. Add lines 11a-11d 568,958. 0. Total revenue. See instructions. 0. 423

Part IX Statement of Functiona		00 00000000000000000000000000000000000	mploto salves (A)	
ection 501(c)(3) and 501(c)(4) organization. Check if Schedule O contain	s must complete all columns. All others a response or note to any line in		mpiete column (A)	
On not include amounts reported on lines to the state of	Ι /Δ\	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic of	rganizations		3	
and domestic governments. See Part IV, III	ne 21 364,389.	364,389.	 	
2 Grants and other assistance to dome individuals See Part IV, line 22	stic			
Grants and other assistance to foreign organizations, foreign governments, a	nd foreign			
 individuals See Part IV, lines 15 and Benefits paid to or for members 				
5 Compensation of current officers, dire	ectors			
trustees, and key employees	84,560.	50,736.	8,456.	25,368
6 Compensation not included above, to disqu				,
persons (as defined under section 4958(f) persons described in section 4958(c)(3)(B	(1)) and			
7 Other salaries and wages	57,546.	32,801.	9,783.	14,962
8 Pension plan accruals and contributions (i section 401(k) and 403(b) employer contributions.	butions)			
Other employee benefits	3,631.	2,070.	617.	944
Payroll taxes	14,804.	8,438.	2,517.	3,849
1 Fees for services (non-employees).				
a Management				
b Legal	3 505		2 505	
c Accounting	3,585.		3,585.	
d Lobbying	t IV line 17			
 Professional fundraising services. See Par Investment management fees 	Tiv, line 17			
f Investment management fees g Other (If line 11g amount exceeds 10% of	f line 25			
column (A) amount, list line 11g expenses	ا ممما	3,052.	1,568.	1,392
2 Advertising and promotion	3,7323	3,0020	2,0001	
3 Office expenses	12,053.	6,870.	2,049.	3,134
4 Information technology	5,688.	3,242.	967.	1,479
5 Royalties			· · · · · · · · · · · · · · · · · · ·	
6 Occupancy	4,981.	2,839.	847.	1,295
7 Travel	647.	369.	110.	168
8 Payments of travel or entertainment e	xpenses			
for any federal, state, or local public of		4.50		
9 Conferences, conventions, and meet	ngs 298.	170.	51.	77
0 Interest		_		
1 Payments to affiliates				
2 Depreciation, depletion, and amortiza	4,216.	2,403.	717.	1,096
3 Insurance 4 Other expenses, Itemize expenses not covabove. (List miscellaneous expenses in line 24e amount exceeds 10% of line 25, colur	ered e 24e. If line	2,403.	717.	1,096
amount, list line 24e expenses on Schedul	e O.)			
a OUTREACH EXPENSES	13,286.	11,454.	296.	1,536
b OTHER EXPENSES c DUES AND SUBSCRIPTS	13,125.	1,938.	9,716.	1,471
	ONS 1,402.	799.	238.	365
d				
e All other expenses Total functional expenses. Add lines 1 thi	ough 24e 590, 223.	491,570.	41,517.	<u> </u>
 Total functional expenses. Add lines 1 th Joint costs. Complete this line only if the c 		431,370.	41,31/•	57,136
reported in column (B) soint costs from a c				
educational campaign and fundraising soli				
Check here III if following SOP 98-2 (ASI	.			

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year 187,606. 209,364. 1 1 Cash - non-interest-bearing 266,944. 267,331. 2 2 Savings and temporary cash investments 6,500. 6,500. 3 3 Pledges and grants receivable, net Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees. Complete Part II of Schedule I 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L Notes and loans receivable, net 7 8 Inventories for sale or use 784. 784. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 20,370. basis Complete Part VI of Schedule D 10a 0. 20,370 0. b Less accumulated depreciation 10b 10c Investments - publicly traded securities 11 11 Investments - other securities See Part IV, line 11 12 12 13 13 Investments - program-related See Part IV, line 11 14 14 Intangible assets 83,681 83,016. Other assets See Part IV, line 11 15 15 567,273. 545,237. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 9,339. 5,459. 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L. 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 9,339. 5,459. 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 119,480 141,414. 27 Unrestricted net assets 398,364. 438,454 28 28 Temporarily restricted net assets Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 539,778. 557,934. 33 33 Total net assets or fund balances 567,273. 545,237. 34 Total liabilities and net assets/fund balances 34

Form	1990 (2014) PORTLAND PARKS FOUNDATION	93-131	9970	Page	12		
Pą	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI				X		
			_		_		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,95			
2	Total expenses (must equal Part IX, column (A), line 25)	2		,22			
3	Revenue less expenses. Subtract line 2 from line 1	3		.,26			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	557	,93	4.		
5	Net unrealized gains (losses) on investments	5					
6	Donated services and use of facilities	6					
7	Investment expenses .	7					
8	Prior period adjustments .	8					
9	Other changes in net assets or fund balances (explain in Schedule O)	9	3	,10	9.		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,						
	column (B))	10	539	777	8.		
Pa	t XII Financial Statements and Reporting			_	_		
	Check if Schedule O contains a response or note to any line in this Part XII						
				Yes N	lo_		
1	Accounting method used to prepare the Form 990 Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a	1				
	separate basis, consolidated basis, or both		1	l			
	Separate basis Consolidated basis Both consolidated and separate basis		_	_			
ь	Were the organization's financial statements audited by an independent accountant?		2b	2	<u> </u>		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,		1			
	consolidated basis, or both			ļ			
	Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c				
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch						
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Audit					
	Act and OMB Circular A-133?		3a		<u>X</u>		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b				
			Form	990 (20	114)		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section
4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

► Information about Schedule A (Form 990 or 990-EZ) and its Instructions is at www.irs.gov/form990. Inspection

Employer identification number

				FOUNDATION					3-131 <u>9970</u>		
Pa	rt T	Reason for Public (Charity Status (/	All organizations must co	mplete th	ıs part) Se	e instructions				
The	organ	ization is not a private found	lation because it is (For lines 1 through 11, o	heck only	one box)					
1		A church, convention of ch	urches, or association	on of churches describe	d in sectio	n 170(b)(1)(A)(ı).				
2		A school described in secti									
3		A hospital or a cooperative			ction 170	(b)(1)(A)(ii	i).				
4		A medical research organiz					-	(iii). Enter	the hospital's name.		
		city, and state	·	,			N. K. A. J.	. ,			
5		An organization operated for	or the benefit of a co	llege or university owne	d or operat	ted by a go	overnmental u	nıt describ	ned in		
_		section 170(b)(1)(A)(iv). (C		g ,		,-3					
6		A federal, state, or local gov		nental unit described in	section 17	70(h)(1)(A)	(v)				
7	$\overline{\mathbf{X}}$, ,	•				• •	e general	nublic described in		
•		An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)									
8		A community trust describe		(1)(A)(vi) (Complete Par	• II V						
9	Ħ	An organization that norma				oontributu	ana mambaral	food o	nd areas resemble from		
3											
		activities related to its exen	•	•					•		
		income and unrelated busin		(less section 511 tax) if	om busine	sses acqu	irea by the org	janization	atter June 30, 1975		
40	\Box	See section 509(a)(2). (Cor	•		fat. Caa.	4'	10/-1/4)				
10	H	An organization organized a		•	-						
• • •	لـــا	An organization organized a	•	•	•			-	•		
		more publicly supported or	=						neck the box in		
_		lines 11a through 11d that				•		_			
а		☐ Type I. A supporting orga		·							
		the supported organization		· · · · · ·	a majority (of the aired	ctors or truste	es of the s	supporting		
		organization You must c	-								
b		☐ Type II. A supporting org.				* *	-		•		
		control or management o			ame perso	ons that co	ontrol or mana	ge the sup	ported		
		organization(s) You mus									
С	<u> </u>							y integrate	ed with,		
	_	its supported organization	n(s) (see instructions	You must complete I	Part IV, Se	ections A,	D, and E.				
d		☐ Type III non-functionally	y integrated. A supp	orting organization oper	ated in co	nnection v	vith its suppor	ted organı	zation(s)		
		that is not functionally int	egrated The organia	zation generally must sa	tisfy a dist	ribution re	quirement and	an attent	iveness		
	_	requirement (see instructi	ions) You must con	nplete Part IV, Sections	A and D,	and Part	V.				
е	L.	☐ Check this box if the orga	anization received a	written determination fro	m the IRS	that it is a	Туре І, Туре	II, Type III			
		functionally integrated, or	r Type III non-functio	nally integrated support	ing organi	zation					
f	Ente	er the number of supported o	organizations								
9		vide the following information	about the supporte	ed organization(s)							
	(i) Name of supported	(u) EIN	(iii) Type of organization	(iv) is the o		(v) Amount of	-	(vi) Amount of		
		organization		(described on lines 1.9 above or IRC section	governing		support (other support (see		
				(see instructions))	Yes	No	Instruction	ons)	Instructions)		
				_							
						_					
Tota	al_										

Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	237,238.	399,291.	227,509.	522,442.	568,535.	1,955,015.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to					ļ	
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge		•				
4	Total. Add lines 1 through 3	237,238.	399,291.	227,509.	522,442.	568,535.	1,955,015.
5	The portion of total contributions						
	by each person (other than a	:					
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)					:	486,496.
6	Public support. Subtract line 5 from line 4			-			1,468,519.
	tion B. Total Support				•		· · · · · · · · · · · · · · · · · · ·
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	237,238.	399,291.	227,509.	522,442.	568,535.	1,955,015.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	6,264.	4,379.	5,140.	479.	423.	16,685.
9	Net income from unrelated business			·			
-	activities, whether or not the						
	business is regularly carned on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						1,971,700.
	Gross receipts from related activities,	etc (see instruction	nne)		<u> </u>	12	
	First five years. If the Form 990 is for	•	•	d fourth or fifth to	av vear as a sectio		
	organization, check this box and stor	=	mat, accord, um	a, 10a1 ti 1, 01 min te	ax year as a sectio	11 30 1(0)(0)	
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				·
	Public support percentage for 2014 (<u>*</u>	column (f))		14	74.48 %
	Public support percentage from 2013		•			15	59.31 %
	33 1/3% support test - 2014. If the			n line 13 and line			
	stop here. The organization qualifies	_			1418 66 17676 6111	nore, ericen triis be	▶ X
ь	33 1/3% support test - 2013. If the		•		l line 15 is 33 1/3%	or more check th	
_	and stop here. The organization qual	_				or more, crieck a	
17:	10% -facts-and-circumstances tes	•			o 12 160 or 16b	and line 14 is 1004	or more
""	and if the organization meets the *fac						
						nt vi now the organ	IIZATION .
_	meets the "facts-and-circumstances"	-	•		•	170 and has 45 ··	1.00/ 51
	10% -facts-and-circumstances tes						
	more, and if the organization meets the						,
10	organization meets the "facts-and-circ						···· 【片
-10	Private foundation. If the organization	in did flot check a	DOX ON HITE 13, 16	a, 100, 1/a, or 1/l		ind see instruction	_

Schedule A (Form 990 or 990-EZ) 2014 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization failed	ıls to
gualify under the tests listed helow places complete Bott II \	

Se	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not	İ]			
	include any "unusual grants ")	İ					
2	Gross receipts from admissions,						
	merchandise sold or services per-	İ	İ			İ	
	formed, or facilities furnished in	.				1	
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
3	'			Į			
	are not an unrelated trade or bus-						
	iness under section 513					-	
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to		i		ļ		
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						,
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons		1				
ŀ	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	· · · · · · · · · · · · · · · · · · ·					Í	+
	Add lines 7a and 7b					 	+
	Public support (Subtract line 7c from line 6.)		l	ļ	<u> </u>		
_			T	1	1 40.55.5	T	7
	indar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6					ļ	
10:	Gross income from interest,					1	
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources	<u> </u>					_
ı	Unrelated business taxable income						
	(less section 511 taxes) from businesses			į		į	
	acquired after June 30, 1975						
	Add lines 10a and 10b				 	1	-
11			-			1	
•	activities not included in line 10b,						
	whether or not the business is						
40	regularly carried on	<u> </u>	 	1		 	
12	Other income Do not include gain or loss from the sale of capital					1	
	assets (Explain in Part VI)			 			
	Total support. (Add lines 9, 10c, 11, and 12)		L			1	
14	First five years. If the Form 990 is for	r the organization	's first, second, th	ird, fourth, or fifth	tax year as a section	on 501(c)(3) orga	inization,
_	check this box and stop here						<u></u>
_	ction C. Computation of Publ						
15	Public support percentage for 2014 (•	column (f))		15	%
16						16	
<u>Se</u>	ction D. Computation of Inve	stment Incom	ne Percentage	•	_		
17	Investment income percentage for 20)14 (line 10c, colu	mn (f) divided by l	ine 13, column (f))		17	%
18	Investment income percentage from	2013 Schedule A	, Part III, line 17			18	%
19	a 33 1/3% support tests - 2014. If the	organization did	not check the box	on line 14, and lin	ne 15 is more than	33 1/3%, and lin	e 17 is not
	more than 33 1/3%, check this box a	ind stop here. Th	e organization qua	alifies as a publicly	supported organia	zation	▶□
- 1	o 33 1/3% support tests - 2013. If the	organization did	not check a box o	n line 14 or line 19	a, and line 16 is m	ore than 33 1/39	6, and
	line 18 is not more than 33 1/3%, che	eck this box and :	stop here. The org	anization qualifies	as a publicly supp	orted organizati	on > 🗀
20	Private foundation. If the organization	on did not check a	box on line 14, 1	9 <u>a, or 19b, che</u> ck	this box and see in	structions	▶□
	00.00.47.44				Cal	hodulo A /Form	200 200 200 4

Part IV | Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A. D. and E. If you checked 11d of Part I, complete Sections A and D. and complete Part V.)

	2.1.2 2 1.1 year cheesing 1.1.2 cm, complete continue con year cheesing 1.1.2 cm, complete continue co
	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)
Section A	A. All Supporting Organizations

Jec	tion A. All Supporting Organizations		V	NI-
	Are all of the experimental experimental experimental properties and by name in the experimental covering		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain	1	i	
2	Did the organization have any supported organization that does not have an IRS determination of status	_ <u>-</u> -		
-	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
-	(b) and (c) below	3a	1	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)	_		
	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations	4b		
C	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes	4c	ļ	
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"		/	
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,			
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action			
	was accomplished (such as by amendment to the organizing document)	5a		
D	Type I or Type II only. Was any added or substituted supported organization part of a class already	5b	-	
	designated in the organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	-	
с 6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	30		
0	anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class]
	benefited by one or more of its supported organizations, or (c) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
	Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial			
	contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent			
	controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7	ļ -	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
	If "Yes," complete Part I of Schedule L (Form 990)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described	[İ	
	in section 509(a)(1) or (2))? If "Yes," provide detail in part VI.	9a	<u> </u>	
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b	<u> </u>	
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c	 	-
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f)	1	1	
	(regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting			
	organizations)? If "Yes," answer (b) below	10a	 	
D	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	104		
	determine whether the organization had excess business holdings /	10b	1	ı

Sche	dule A (Form 990 or 990-EZ) 2014 PORTLAND PARKS FOUNDATI	ON		93-1319970 Page 6
Pai				
1	Check here if the organization satisfied the Integral Part Test as a qualifyin			ructions. All
	other Type III non-functionally integrated supporting organizations must co	mplete S	ections A through E	
Secti	ion A - Adjusted Net Income		(A) Pnor Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of pnor-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		_
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or	i i		
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		<u></u>
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	-		
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
ь	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other		•	
	factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	on C - Distributable Amount			Current Year

	emergency temporary reduction (see instructions)	6		
,	Check here if the current year is the organization's first as a non-functionally-	ntegr	ated Type III supporting orga	nızatıon (see
	instructions)			

Adjusted net income for prior year (from Section A, line 8, Column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to

Minimum asset amount for prior year (from Section B, line 8, Column A)

Enter 85% of line 1

Enter greater of line 2 or line 3

Income tax imposed in prior year

Schedule A (Form 990 or 990-EZ) 2014

2

<u>3</u>

5

Schedule A (Form 990 or 990-EZ) 2014 PORTLAND PARKS FOUNDATION 93-1319970 Page 7 Part V | Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions Current Year Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions Distributable amount for 2014 from Section C, line 6 Line 8 amount divided by Line 9 amount (i) (ii) (iiii) **Excess Distributions** Underdistributions Distributable Section E - Distribution Allocations (see instructions) Pre-2014 Amount for 2014 1 Distributable amount for 2014 from Section C, line 6 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions) Excess distributions carryover, if any, to 2014 а b С d e From 2013 Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions) Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2014 from Section D, a Applied to underdistributions of prior years **b** Applied to 2014 distributable amount c Remainder Subtract lines 4a and 4b from 4 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions) 6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions) Excess distributions carryover to 2015. Add lines 3) and 4c. Breakdown of line 7 а

Schedule A (Form 990 or 990-EZ) 2014

b c

d Excess from 2013e Excess from 2014

Schedule A	(Form 990 or 990-EZ) 2014 PORTLAND PARKS FOUNDATION	93-1319970 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or	17b; and Part III, line 12
	Also complete this part for any additional information (See instructions)	
	· · · · · · · · · · · · · · · · · · ·	
		
		·-
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		· · · · · · · · · · · · · · · · · · ·

SCHEDULE C (Fqrm 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2014

Open to Public Inspection

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

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

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

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

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

•	Section 501(c)(4), (5), or (6) organiza	tions [.] Complete Part III				
Nan	ne of organization				Emplo	yer identification number
		D PARKS FOUNDATIO				93-1319970
Pa	art I-A Complete if the org	janization is exempt unde	r section 501(c)	or is a section 5	527 or	ganization.
1	Provide a description of the organiz	ation's direct and indirect political	l campaign activities ir	n Part IV		
2	Political expenditures				▶\$	
3	Volunteer hours					
Ps	art I-B Complete if the ord	ganization is exempt unde	r section 501(c)(:	3)		
	Enter the amount of any excise tax	•		<i>5</i> ₁ .	▶\$	
	Enter the amount of any excise tax	• •			▶ \$	
	If the organization incurred a section				•	Yes No
	Was a correction made?	,				Yes No
	o If "Yes," describe in Part IV.					
	art I-C Complete if the org	ganization is exempt unde	r section 501(c),	except section	501(0	c)(3) .
1	Enter the amount directly expended	d by the filing organization for sect	tion 527 exempt functi	ion activities	▶\$	
2	Enter the amount of the filing organ	nization's funds contributed to othe	er organizations for se	ction 527		
	exempt function activities				▶\$	
3	Total exempt function expenditures	s Add lines 1 and 2 Enter here an	d on Form 1120-POL,			
	line 17b				▶\$.	
4	Did the filing organization file Form	1120-POL for this year?				Yes No
5	Enter the names, addresses and er	mployer identification number (EIN) of all section 527 pol	litical organizations t	o which	n the filing organization
	made payments For each organiza	ation listed, enter the amount paid	from the filing organiz	ation's funds Also e	enter the	e amount of political
	contributions received that were pr	• •	•		separat	te segregated fund or a
	political action committee (PAC) If	additional space is needed, provide	de information in Part I	IV		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid		(e) Amount of political
				filing organization funds if none, ent		contributions received and promptly and directly
				lunus il none, em	rei -O-	delivered to a separate
						political organization
			<u> </u>			If none, enter -0-
				 		
			 	1		

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

Schedule C (Form 990 or 990-EZ) 2014

Schedule C (Form 990 or 990-EZ) 2014	PORTLAND	PARKS FOUNDAT	rion	93-1	319970 Page 2
Part II-A Complete if the org section 501(h)).	ganization is e	exempt under section	on 501(c)(3) and file	ed Form 57 68 (e	lection under
A Check If the filing organiza expenses, and sha	re of excess lobby	- , ,		group member's nam	e, address, EIN,
Lımi	ts on Lobbying E	A and "limited control" pi xpenditures mounts paid or incurred		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence public opın	ion (grass roots lobbying)			
b Total lobbying expenditures to infl	uence a legislative	e body (direct lobbying)		54,333.	
c Total lobbying expenditures (add I	ines 1a and 1b)			54,333.	
d Other exempt purpose expenditur	es .			478,754.	
e Total exempt purpose expenditure	es (add lines 1c ar	d 1d)		533,087.	
f Lobbying nontaxable amount Ent		n the following table in bo	oth columns	104,963.	
If the amount on line 1e, column (a)	or (b) is: The	lobbying nontaxable an	mount is:		
Not over \$500,000		6 of the amount on line 1			
Over \$500,000 but not over \$1,00		0,000 plus 15% of the ex			,
	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000.				, ,
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500					,
Over \$17,000,000	\$1,	000,000			•
g Grassroots nontaxable amount (er	nter 25% of line 1	<u> </u>		26,241.	
h Subtract line 1g from line 1a. If zer		•		0.	
i Subtract line 1f from line 1c. If zero				0.	
j If there is an amount other than ze	·	h or line 1i, did the organi	zation file Form 4720		
reporting section 4911 tax for this				<u>.</u>	Yes No
(Some organizations t	hat made a secti See the se	Averaging Period Unde on 501(h) election do no eparate instructions for l	t have to complete all (lines 2a through 2f.)	of the five columns b	elow.
	Lobbying E	xpenditures During 4-Ye	ear Averaging Period		r ·
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount				104,963.	104,963.
b Lobbying ceiling amount	1				455 445
(150% of line 2a, column(e))					157,445.
c Total lobbying expenditures				54,333.	54,333.
d Grassroots nontaxable amount				26,241.	26,241.
e Grassroots ceiling amount (150% of line 2d, column (e))					39,362.

Schedule C (Form 990 or 990-EZ) 2014

f Grassroots lobbying expenditures

Schedule C. (Form 990 or 990-EZ) 2014 PORTLAND PARKS FOUNDATION 93-1319970 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	1 (a)	(t	o)
of the lobbying activity	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state or				
local legislation, including any attempt to influence public opinion on a legislative matter				*
or referendum, through the use of				
a Volunteers?		ļ		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		 		
c Media advertisements?				
d Mailings to members, legislators, or the public?			ļ	
e Publications, or published or broadcast statements?		ļ		
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?		ļ		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	-	-	<u> </u>	
i Other activities?			<u> </u>	
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			· · ·	
b If "Yes," enter the amount of any tax incurred under section 4912		,		
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912	ļ	ļ.	 	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	ion 501/c	V5) or se	oction	
501(c)(6).	.1011 50 1(0	/(J) , U 1 30		
301(0)(0).			Yes	No
1 Were substantially all (00% or more) dues resoured pendedustible by members?		1	100	
Were substantially all (90% or more) dues received nondeductible by members?Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? 		3		
Part III-B Complete if the organization is exempt under section 501(c)(4), sect	ion 501(c		ection	l
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere				ne 3. is
answered "Yes."	, -	(_,		,
Dues, assessments and similar amounts from members	······································	1	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poli	tical	-		
expenses for which the section 527(f) tax was paid).		į		
a Current year		2a		
b Carryover from last year		2b		
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the e	xcess		-	
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
expenditure next year?		. 4		
5 Taxable amount of lobbying and political expenditures (see instructions)		. 5		
Part IV Supplemental Information				
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated gro	up list); Part	II-A, lines 1	and 2 (see	
instructions), and Part II-B, line 1 Also, complete this part for any additional information				
PART II-A, LINES 1 AND 2				
THE PORTLAND PARKS FOUNDATION AIDED IN THE PASSING O	F THE	2014 F	ARKS	
REPLACEMENT BOND MEASURE: FIX OUR PARKS. THIS MEASUR	E REPL	ACED A	PREV	ious,
EXPIRING PARKS BOND. THE BOND PROVIDED \$68M TO ADDRE	SS URG	ENT PA	RKS N	EEDS
AROUND THE CITY OF PORTLAND. THE FOUNDATION'S SUPPOR	T CAME	IN T	E FOR	M OF
DIRECT LOBBYING INCLUDING YARD SIGN DISTRIBUTION, GE	T OUT	THE V	TE SI	GN
432043	Sched	ule C (Forn	1 990 or 99	0-EZ) 2014

Schedule C (Form 990 or 990-EZ) 2014 PORTLAND PARKS FOUNDATION	93-13199/U Page 4
Part IV Supplemental Information (continued)	
WAVING, PUBLICITY/VISIBILITY AT DIFFERENT PARKS EVENTS (PAR	RKE DIEM),
ORGANIZING MEDIA COVERAGE, CONNECTING WITH OVER 30 FRIENDS	OF PARKS GROUPS
AND NEIGHBORHOOD ASSOCIATIONS FOR ENDORSEMENT/PARTICIPATION	N IN THE
CAMPAIGN, AND RAISING FUNDS FOR THE PARKS BOND MEASURE CAME	PAIGN. A GRANT
OF \$37,000 WAS MADE DIRECTLY TO THE FIX OUR PARKS CAMPAIGN	•
	

SCHEDULE D

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990. Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

PORTLAND PARKS FOUNDATION 93-1319970 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (b) Funds and other accounts (a) Donor advised funds Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds Yes No are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a Total number of conservation easements 2b **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure 2d listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

_		D PARKS FO					-131 <u>9</u> 97	
Pai	t III Organizations Maintaining C	collections of A	rt, Historical	Treasures,	or Other	Similar A	Assets(cont.	inued)
3	Using the organization's acquisition, accessi	on, and other recor	ds, check any of	the following tha	at are a sign	ııficant use	of its collection	on items
	(check all that apply)							
а	Public exhibition	•	d 📙 Loan or	exchange progra	ams			
b	Scholarly research	•	e 🔲 Other					
C	Preservation for future generations							
4	Provide a description of the organization's co	ollections and expla	in how they furth	er the organizate	ion's exemp	ot purpose i	ın Part XIII	
5	During the year, did the organization solicit of	r receive donations	of art, historical t	reasures, or oth	er sımılar a:	ssets		
	to be sold to raise funds rather than to be m						Yes	No_
Pai	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or							
	reported an amount on Form 990, Pa	rt X, line 21						
1a	Is the organization an agent, trustee, custod	an or other interme	diary for contribu	tions or other as	ssets not in	cluded		
	on Form 990, Part X?						☐ Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the f	ollowing table:					
							Amour	nt
C	Beginning balance			-		1c		
d	Additions during the year		•	••		1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount on F	orm 990, Part X, line	e 21, for escrow o	or custodial acco	ount liability	?	Yes	No
b	If "Yes," explain the arrangement in Part XIII	Check here if the e	xplanation has b	een provided in	Part XIII			
Pai								
		(a) Current year	(b) Prior year	(c) Two yea	rs back (d)	Three years	back (e) Fou	ır years back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses							
g	End of year balance	*						
2	Provide the estimated percentage of the cur	rent year end balan	ce (line 1g, colum	nn (a)) held as				
а	Board designated or quasi-endowment	•	%	·				
ь	Permanent endowment	%	_					
С	Temporarily restricted endowment ▶							
	The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%						
За	Are there endowment funds not in the posse	•	zation that are he	ld and administe	ered for the	organizatio	n	
	by	•				ŭ		Yes No
	(i) unrelated organizations						3a(i)	
	(ii) related organizations						3a(ii)	
b	If "Yes" to 3a(ii), are the related organization:	s listed as required	on Schedule R?				3b	
4	Describe in Part XIII the intended uses of the			•				
Pai	rt VI Land, Buildings, and Equipn			_				
	Complete if the organization answere	d "Yes" to Form 99	0. Part IV. line 11	a. See Form 990). Part X. lin	e 10		
	Description of property	(a) Cost or		ost or other		umulated	(d) Boo	ok value
	,	basis (invest		sis (other)		ciation	(0,00	
1a	Land		· · · · · · · ·		<u>_</u>			
	Buildings			_				
C	Leasehold improvements					_		
d	Equipment			15,840.	1	5,840	•	0.
	Other			4,530.		4,530		0.
	I. Add lines 1a through 1e (Column (d) must e	gual Form 990. Par	t X column (B) II		·		1	0.

Schedule D (Form 990) 2014

Schedule D (Form 990) 2014

SCHEDULE

(Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No 1545-0047

▶ Information about Schedule I (Form 990) and its instructions is at www Irs gov/form 990. ▶ Attach to Form 990.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

Open to Public. Inspection

<u>ş</u> Employer identification number 93-1319970 X Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection PORTLAND PARKS FOUNDATION General Information on Grants and Assistance critena used to award the grants or assistance? Parti

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	\$5,000 Part II car	n be duplicated if additi	ional space is need	led.			
1 (a) Name and address of organization or government	(a) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PORTLAND PARKS AND RECREATION 1120 S.W. FIFTH AVENUE, SUITE 1302 PORTLAND OR 97204	93-6002236	GOVERNMENT UNIT	270,843.	FAIR 35,764.VALUE	FAIR MARKET VALUE	SOCCER BALLS, BASKETBALLS AND SHIRTS	PARK SUPPORT
FOREST PARK CONSERVANCY 210 N.W. 17TH AVENUE, SUITE 201 PORTLAND, OR 97209	94-3103055	501(C)(3)	7,515.	•0			FOREST PARK TRAIL REPAIR AND ADDITIONAL SIGNAGE.
FRIENDS OF PENINSULA PARK ROSE GARDEN - 700 N. ROSA PARKS WAY - PORTLAND, OR 97217	45-5207764	501(C)(3)	6,103.	0			GENERAL SUPPORT OF VOLUNTEER-LED PROJECTS AT PENINSULA PARK ROSE GARDEN, PURCHASE AND
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	and government or	rganizations listed in th	e line 1 table		:		3
S Eliter total liuliber of other organization	ואופת ווו מוום וווום	- table					

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2014)

432101 10-15-14

PORTLAND PARKS FOUNDATION Schedule I (Form 990) (2014)

PartIII

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed

Page 2

93-1319970

Schedule I (Form 990) (2014) (f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) IS PPF CREATES PERIODIC OR ANNUAL PROGRESS REPORTS FOR OPERATIONAL GRANTS APPROPRIATE TO FUNDS ARE RECEIVED AND DISTRIBUTED FOLLOWING THE APPROVED BUDGET OR GRANT PARTNER AGENCIES WHICH RECEIVE FUNDING THROUGH PORTLAND PARKS FOUNDATION. Part IV | Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information THE EXECUTIVE DIRECTOR IS RESPONSIBLE FOR THE TIMELY ACCEPTANCE, REVIEW AND ANALYSIS OF PROGRESS/ANNUAL REPORTS AND FOR ENSURING THAT ALL GRANT PORTLAND PARKS FOUNDATION ("PPF") MAINTAINS AN OFFICIAL GRANT FILE AND THE GRANTING AGENCY, AND COLLECTS PROGRESS AND OR ANNUAL REPORTS FROM (d) Amount of non-cash assistance RESPONSIBLE FOR TRACKING THE RECEIPT OF ALL GRANT DOCUMENTS. (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance PART I, LINE 432102 10-15-14

Schedule I (Form 990) PORTLAND PARKS FOUNDATION 93-1319970 Page 2 Part IV Supplemental Information Page 2
PROPOSAL.
PPF CONDUCTS MONITORING TO ENSURE:
* COMPLIANCE WITH RELEVANT STATUTES, REGULATIONS, POLICIES, AND
GUIDELINES;
* RESPONSIBLE OVERSIGHT OF AWARDED FUNDS;
* IMPLEMENTATION OF REQUIRED PROGRAMS, GOALS, OBJECTIVES, TASKS, PRODUCTS
TIMELINES, AND SCHEDULES;
* IDENTIFICATION OF ISSUES AND PROBLEMS THAT MAY IMPEDE GRANT
IMPLEMENTATION; AND
* ADJUSTMENTS REQUIRED BY THE GRANTEE AS APPROVED BY THE GRANTING AGENCY.
PART II, LINE 1, COLUMN (H):
(H) PURPOSE OF GRANT OR ASSISTANCE: GENERAL SUPPORT OF VOLUNTEER-LED
PROJECTS AT PENINSULA PARK ROSE GARDEN. PURCHASE AND INSTALLATION OF
PLANTERS.

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www.lrs.gov/form990 Inspection

Employer identification number

PORTLAND PARKS FOUNDATION

93-1319970

Par	rt I Types of Property							
		(a)	(b)	(c)	(d)			
		Check if applicable	Number of contributions or	Noncash contribution amounts reported on	Method of de			•
		applicable		Form 990, Part VIII, line 1g		ilion am	ount	5
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications				T			
5	Clothing and household goods	X		35,764.	FAIR MARKET	VAI	UE	
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicity traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests				İ			
12	Secunties · Miscellaneous							
13	Qualified conservation contribution -				•			
	Historic structures		ł					
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory	X	2	2,333.	FAIR MARKET	' VAI	υE	
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens				<u> </u>			
24	Archeological artifacts							
25	Other (MISCELLANEOUS)	X	10	6,805.	FAIR MARKET	' VAI	<u>'UE</u>	
26	Other ()							
27	Other ()							
<u>28</u>	Other (<u> </u>				
29	Number of Forms 8283 received by the organiz		•	l l				
	for which the organization completed Form 828	83, Part IV,	Donee Acknowled	gement 29		1		
							Yes	No
30a	During the year, did the organization receive by	•		•	•			
	must hold for at least three years from the date		al contribution, and	d which is not required to b	e used for			v
	exempt purposes for the entire holding period?	?		•••		30a		X
	If "Yes," describe the arrangement in Part II						- 1	37
31	Does the organization have a gift acceptance p					31		X
32a	Does the organization hire or use third parties	or related o	rganizations to sol	cit, process, or sell noncas	h			v
	contributions?					32a	_	X
	If "Yes," describe in Part II	b (-)		aki da a saka a saka a saka a saka a saka a saka a saka a saka a saka a saka a saka a saka a saka a saka a sak				
33	If the organization did not report an amount in	column (c)	for a type of prope	пу for which column (a) is o	checked,			
	describe in Part II							

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

Schedule M (Form 990) (2014)

Schedule M.(Form 990) (2014) PORTLAND PARKS FOUNDATION	93-1319970	Page 2
Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, is reporting in Part I, column (b), the number of contributions, the number of items received, or a comb this part for any additional information.	and whether the organiza pination of both Also com	ation
SCHEDULE M, PART I, COLUMN (B):	-,	
COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTIONS.		
		- ·- <u>-</u>
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Schedule M (Form 990) (2014)

432142 08-12-14

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 4 Open to Public

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

Inspection

Name of the organization

PORTLAND PARKS FOUNDATION

Employer identification number 93-1319970

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THE FOUNDATION, A PRIVATE, NONPROFIT ORGANIZATION, WAS CREATED IN 2001 TO FOSTER PUBLIC/PRIVATE PARTNERSHIPS FOR THE BENEFIT OF THE PARKS AND TO CREATE NEW ONES. PORTLAND PARKS FOUNDATION'S GOALS ARE: TO ENSURE THAT ALL OF THE CHILDREN OF PORTLAND HAVE ACCESS TO PLAY; TO PROVIDE A NEIGHBORHOOD PARK WITHIN A 15-MINUTE WALK OF EVERY PORTLAND RESIDENT; TO PRESERVE GREENSPACE; AND TO MAINTAIN THE CITY'S INVESTMENT IN ITS WORLD-CLASS PARK SYSTEM. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: IMPROVEMENTS AT COLONEL SUMMERS PARK. FORM 990, PART VI, SECTION A, LINE 4: THE ORGANIZATION AMENDED THE BYLAWS OF THE ORGANIZATION EFFECTIVE AS OF JANUARY 16, 2014. THE ORGANIZATION'S BYLAWS WERE UPDATED AND MODERNIZED. MODIFICATIONS INCLUDE, BUT ARE NOT LIMITED TO, EXPANSION OF BOARD OF DIRECTORS, COMMITTEES, OFFICERS AND STAFF SECTIONS AS WELL AS ADDITION OF ADVISORY BOARD AND INDEMNIFICATION SECTIONS. FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS REVIEWED BY THE BOARD CHAIR, BOARD TREASURER, AND EXECUTIVE DIRECTOR. DISCREPANCIES ARE DISCUSSED AND CORRECTED, IF ANY, PRIOR TO FILING. THE FILED 990 IS THEN DISTRIBUTED TO THE BOARD OF DIRECTORS.

PORTLAND PARKS FOUNDATION

Employer identification number 93-1319970

THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED TO EVERY BOARD MEMBER AND REVIEWED ANNUALLY. MEMBERS ARE ASKED WHETHER THEY HAVE ANY ISSUES OR CONFLICTS TO REPORT.

FORM 990, PART VI, SECTION B, LINE 15:

FORM 990, PART VI, SECTION B, LINE 15A: THE ANNUAL REVIEW PROCESS OF THE
PORTLAND PARKS FOUNDATION EXECUTIVE DIRECTOR (E.D.) HAD HISTORICALLY BEEN
ACCOMPLISHED BY THE BOARD CHAIR WITH INPUT FROM FOUNDATION MEMBERS. THE

VERBAL / WRITTEN REVIEW INCLUDES A RETROSPECTIVE ANALYSIS OF THE E.D.'S

PRIOR TWELVE-MONTH PERFORMANCE / STAFF OVERSIGHT / GOAL SETTING - VISIONING
/ COMPENSATION ADJUSTMENTS. E.D. PERFORMANCE IS BROADLY DEFINED AS

COMMUNITY BRANDING / PROJECT(S) OVERSIGHT / BOARD AND RELATED "PARTNERS"

INTERACTION AND COOPERATION / DEVELOPING PUBLIC-PRIVATE COLLABORATIONS,

ETC. UPON FORMAL REVIEW COMPLETION, THE DOCUMENT AND COMPENSATION
RECOMMENDATION IS THEN REVIEWED / APPROVED BY THE FOUNDATION EXECUTIVE

COMMITTEE.

THE CHAIR DOES NOT CONDUCT A STATISTICAL E.D. PEER COMPENSATION STUDY.

HOWEVER, THE E.D. HAS PROVIDED PEER INPUT FROM LOCAL SOURCES GERMANE TO

EXISTING MARKETPLACE COMPENSATION RANGES. ALSO, WITH CURRENT AND PRIOR

COMMUNITY BOARD INVOLVEMENT, INCLUDING E.D. COMPENSATION REVIEWS, THE

COMPENSATION ASPECT OF THE REVIEW REFLECTS THE BOARDS' CONTINUED EFFORTS TO

UPGRADE THE E.D.'S AGGREGATE COMPENSATION TO MORE APPROPRIATELY ALIGN WITH

LOCAL, SIMILARLY-SIZED COMMUNITY ORGANIZATION E.D. PEERS.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST

POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST AND
432217
08-27-14
Schedule O (Form 990 or 990-EZ) (2014)

Sche						EZ) (2	2014)																					F	age 2
Name	of	the o	rganız	ation	P	ORT	'LA	ND	P.	ARK	S	FOU	UNI	DA	TIC	ON							_	E	mploye 93-	131	tificat 997	ion nu 70	mber
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