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990-PF

Return of Private Foundation

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

OMB No 1545-0052

2014 Do not enter social security numbers on this form as it may be made public. Department of the Treasury Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection Internal Revenue Service For calendar year 2014 or tax year beginning 07-01 , 2014, and ending 06-30 , 2015 A Employer identification number Name of foundation The Hillsboro Community Foundation 93-0931059 Number and street (or PO box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) (503) 693-7500 P O Box 808 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here Hillsboro, OR 97123-0808 Initial return of a former public charity G Check all that apply. Initial return D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, Address change Name change check here and attach computation H Check type of organization: |X| Section 501(c)(3) exempt private foundation E If private foundation status was terminated under Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation section 507(b)(1)(A), check here I Fair market value of all assets at J Accounting method: X Accrual Cash If the foundation is in a 60-month termination Other (specify) end of year (from Part II, col. (c), under section 507(b)(1)(B), check here · · · line 16) ► \$ 482,750 (Part I, column (d) must be on cash basis) Analysis of Revenue and Expenses (The total of Part I (d) Disbursements (a) Revenue and for charitable amounts in columns (b), (c), and (d) may not necessarily equal (b) Net investment (c) Adjusted net expenses per books purposes income income the amounts in column (a) (see instructions).) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 180,706 2 Check I if the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 231 231 231 4 2,056 2,056 2,056 5a

Net rental income or (loss) b 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances h Less. Cost of goods sold 11 Other income (attach schedule) STM106 1,614 1,614 12 184,607 2,287 3,901 13 Compensation of officers, directors, trustees, etc Expenses 14 15 16a Accounting fees (attach schedule) STM108 650 ng and Administrative c Other professional fees (attach schedule) STM1 09 51,667 17 18 Taxes (attach schedule) (see instructions)

182

10,329

62,833

10,120

72,953

111,654

2,282

19

20

21

22

23

25

26

27

Adjusted net income (if negative, enter -0-) For Paperwork Reduction Act Notice, see instructions.

Subtract line 26 from line 12:

Depreciation (attach schedule) and depletion

Occupancy

Other expenses (attach schedule) . . . STM103

Add lines 13 through 23

Contributions, gifts, grants paid

Total expenses and disbursements. Add lines 24 and 25 .

Excess of revenue over expenses and disbursements

Total operating and administrative expenses.

Net investment income (if negative, enter -0-)

Form 990-PF (2014)

1,614

1,619

1.619

2,282

O

10,120

10,120

Pa	irt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	EIIO OI	year
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing · · · · · · · · · · · · · · · · · · ·	46,873	88,997	88,997
	2	Savings and temporary cash investments	64,284	104,515	104,515
	3	Accounts receivable			-
		Less: allowance for doubtful accounts			
	4	Pledges receivable			,
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts			
क्	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ą	10a	Investments - U.S. and state government obligations (attach schedule)			
	l	Investments - corporate stock (attach schedule)			- -
	c	Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment basis			
	''	Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule) - · · · · · STM118	40 505	50.043	E0 043
	14	·	49,525	50,043	50,043
	'*	Land, buildings, and equipment: basis			لايميانا
	45	Less accumulated depreciation (attach schedule)		020 105	020 105
	15	Other assets (describe STM120)	<u></u>	239,195	239,195
	16	Total assets (to be completed by all filers - see the			400 750
	47	Instructions Also, see page 1, item i)	160,682	482,750	482,750
	17	Accounts payable and accrued expenses		4,583	
Ś	18	Grants payable	· · · · · · · · · · · · · · · · · · ·		
Liabilities	19	Deferred revenue			1
E	20	Loans from officers, directors, trustees, and other disqualified persons			
<u> </u>	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe			
_	23	Total liabilities (add lines 17 through 22)	0	4,583	
es		Foundations that follow SFAS 117, check here · · · · · · ► X and complete lines 24 through 26 and lines 30 and 31.			
alances	24	Unrestricted	28,729	58,062	
<u>a</u>	25	Temporarily restricted	131,953	179,532	
8	26	Permanently restricted		240,573	
or Fund		Foundations that do not follow SFAS 117, check here · · ▶			
屲		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds		İ	
Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
988	29	Retained earnings, accumulated income, endowment, or other funds			
Ž	30	Total net assets or fund balances (see instructions)	160,682	478,167	
Net	31	Total liabilities and net assets/fund balances (see	7		
		instructions)	160,682	482,750	
Pa	ert II			402//50	
Ь		net assets or fund balances at beginning of year - Part II, column (a), line 3			
•		of-year figure reported on prior year's return)	= = = = = = = = = = = = = = = = = = = =		160,682
2		amount from Part I, line 27a			111,654
		r increases not included in line 2 (itemize) STM115		3	206,464
		ines 1, 2, and 3 · · · · · · · · · · · · · · · · · ·			478,800
		eases not included in line 2 (itemize) STM116		5	633
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	himn (h) line 30	6	478,167
<u>~</u>		The access of farial paramode at one of your time 4 fillings line of " it alt it, wi	(5), 55		4/0,10/

	Hillsboro Community Foun and Losses for Tax on Invest		-	93-093	1059 Page
(a) List and descri	be the kind(s) of property sold (e.g., real esta chouse, or common stock, 200 shs MLC Co	te, (b) How acc	ise (C)	ate acquired	(d) Date sold (mo , day, yr)
1a					
b					
С					
<u>d</u>					
<u>e</u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale			n or (loss) f) minus (g)
a				<u> </u>	
b					· · · · · · · · · · · · · · · · · · ·
С					
d					
9					
Complete only for assets show	wing gain in column (h) and owned by th	e foundation on 12/31/69			l (h) gain minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		col (k), but not less than Losses (from col (h)	
а					
<u>b</u>					
<u>c</u>					
<u>d</u>					·
9		enter in Part I, line 7			
If gain, also enter in Part I, line Part I, line 8		s), enter -0- in }	3	<u></u>	
	nder Section 4940(e) for Red			come	
or optional use by domestic priv	ate foundations subject to the section 4	940(a) tax on net investment i	ncome.)		
section 4940(d)(2) applies, leave	e this part blank.				
as the foundation liable for the s	ection 4942 tax on the distributable amo	• • • • • • • • • • • • • • • • • • • •	eriod?		Yes X No
	ualify under section 4940(e) Do not cor	<u> </u>			
Enter the appropriate amount (a)	in each column for each year, see the in	nstructions before making any	entries.		(d)
Base period years Calendar year (or tax year beginning		(c) Net value of noncharitable		(∞l (b)	nbution ratio divided by col (c))
2013	53,70		74,350		72226
2012	153,49		66,557		306144
2011	100,64		55,716		806393
2010	63,31		52,016		217241
2009	97,64	/	83,391	<u> </u>	170954
Total of line 1 column (d) .				2 7	222001
• • • • • • • • • • • • • • • • • • • •	he 5-year base period - divide the total of				222991
<u> </u>	on has been in existence if less than 5 years	• • •	. . [3 1.	444598
or your the roundant		· · · · · · · · · · · · · · · ·			
Enter the net value of noncha	ntable-use assets for 2014 from Part X,	line 5		4	333,904
Multiply line 4 by line 3				5	482,357
				1	

482,380

10,120

Part VI instructions

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

Form	990 _T PF (2014) The Hillsboro Community Foundation 93-0931			age 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see inst	ructio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	_		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			46
	here ▶ and enter 1% of Part I, line 27b · · · · · · · · · · · · · · · · · · ·			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of			
	Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
3	Add lines 1 and 2			46
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			46
6	Credits/Payments.			
a	2014 estimated tax payments and 2013 overpayment credited to 2014 · · 6a			
þ	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) · · · · · 6c			
d	Backup withholding erroneously withheld			_ ,
7	Total credits and payments. Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			46
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax Refunded 11			
Pai	rt VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			
	Instructions for the definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			1
	published or distributed by the foundation in connection with the activities	_		
C	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \$ (2) On foundation managers. \$;
0	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X_
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
Ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
_	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
_	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	OR			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	<u>X</u>	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"			
46	complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			١
	names and addresses	. 40		

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Pai	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	<u> </u>
	Website address hillsborocommunityfoundation.org		 -	
14	The books are in care of Hillsboro Community Foundation Telephone no. 503-6	:39-7	500	
	Located at P.O. Box 808, Hillsboro, OR ZiP+4 P97123			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041-Check here			▶□
	and enter the amount of tax-exempt interest received or accrued during the year			ب ا
46	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority		Yes	No
16		16	103	X
	,	''	<u> </u>	 ^-
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90.22.1) If	Ì		
Da	"Yes," enter the name of the foreign country	<u> </u>		Ь
Га	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	т	Tv	1 11-
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No]	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			,
	disqualified person?	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		İ	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? · · · · · · L Yes X No		Ì	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			,
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after		1	'
	termination of government service, if terminating within 90 days.)	1		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		""
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2014?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		1	
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and		1	
	6e, Part XIII) for tax year(s) beginning before 2014?		1	
	If "Yes," list the years , , , ,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	ŀ		
	all years listed, answer "No" and attach statement - see instructions)	2b	1	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	•		}	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
· ·	at any time during the year? Yes X No		1	ĺ
ь	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or	1		
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			1
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	26		
4-	foundation had excess business holdings in 2014.)	3b	+	+-
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	1	X
Ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		1	.,
	charitable number that had not been removed from jeonardy before the first day of the tay year beginning in 20142	i Ah	1	ı X

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	rt VII-B Statements Regarding Activitie				May Be	Requi	red (co	ntinued)	. ugu u
5a	During the year did the foundation pay or incur any am		· · · · · · · · · · · · · · · · · · ·						<u> </u>	
	(1) Carry on propaganda, or otherwise attempt to influ		gislation (section	n 4945(e))?	1	Yes	X No		
(2) Influence the outcome of any specific public election (see section 4955); or to carry on,										
directly or indirectly, any voter registration drive?										
	(3) Provide a grant to an individual for travel, study, or						Yes	X No		
	(4) Provide a grant to an organization other than a ch					,		E3	1 1	1
						1	Yes	X No	1 1	
	(5) Provide for any purpose other than religious, char							(<u>r</u>)		
	purposes, or for the prevention of cruelty to children					1	Yes	X No		
ь	If any answer is "Yes" to 5a(1)-(5), did any of the trans							27 140	1 1	
	Regulations section 53 4945 or in a current notice regi				•				5b	
	Organizations relying on a current notice regarding dis	•		•	•			▶ □	35	-
С	If the answer is "Yes" to question 5a(4), does the found							🗆	1 1	
·	because it maintained expenditure responsibility for the		•			Į.	¬ v	Пма		
		-		• • • •		!	Yes	∐ No	1 1	
6a	If "Yes," attach the statement required by Regulations Did the foundation, during the year, receive any funds,									
va	on a personal benefit contract?	•				1	¬ _v	₩.		
b						,	Yes	X No		
	Did the foundation, during the year, pay premiums, dir	ectly or i	ndirectly, on a p	ersonai	benefit conti	act?	• • •		6b	X
70	If "Yes" to 6b, file Form 8870			- k - 14 4		1	¬ _v	₩.	1 1	
7a	At any time during the tax year, was the foundation a p	-	-			1	Yes	X No		
Dat	If "Yes," did the foundation receive any proceeds or hart VIII Information About Officers. Dire							b. Daid	7b	
Га	t VIII Information About Officers, Dire	ctors,	ilustees,	rounu	auon ma	nayer	s, mign	iy Paid	Emplo	yees,
4 1					/ ! !	-47 \				
	ist all officers, directors, trustees, foundation mana	~~~~~	e, and average		mpensation	, — -	Contributi	one to	г -	
See	(a) Name and address	hou	rs per week ed to position	(lf n	ot paid, ter -0-)	empl	oyee bene			nse account, illowances
Scot	tt Eisenstein	Presi	dent							
PO	Box 808, Hillsboro, OR 97123-0808		2.00		0			0		0
Free	i Johnson	Presi	dent Elect	:		1				
PO	Box 808, Hillsboro, OR 97123-0808		1.00		0			0		0
Mary	y Ordal	Secre	tary							
PO	Box 808, Hillsboro, OR 97123-0808		2.00		0			0		00
Dear	nna Palm	Treas	urer							
<u>P 0</u>	Box 808, Hillsboro, OR 97123-0808		2.00		0			0		0
	Compensation of five highest-paid employees (othe NONE."	r than th	nose included	on line	1 - see instr	uctions	. If none	, enter		
	(a) Name and address of each	000	(b) Title, and a					ributions to	(e) Expe	nse account,
	(a) Name and address of each employee paid more than \$50	,000	hours per w devoted to po		(c) Comper	nsation	plans an	d deferred ensation	other a	llowances
NON	2									
				•						
	-									•
Total	number of other employees paid over \$50,000 · · ·				<u> </u>		<u> </u>			0
	or ourse omproyees paid ofter woo, ood						•	- • •	L	U

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Part VIII Information About Officers, Directors, Trustees, For and Contractors (continued)	indation Managers, Highly Pa	iid Employees,
3 Five highest-paid independent contractors for professional services (see in	structions). If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Janel McKenna		
P.O. Box 808, Hillsboro, OR 97123	Consulting	51,667
Total number of others receiving over \$50,000 for professional services · · · · ·		
Part IX-A Summary of Direct Charitable Activities		
		
List the foundation's four largest direct charitable activities during the tax year. Include relevant st organizations and other beneficianes served, conferences convened, research papers produced,	[Expenses
1 N/A		
· M/A		
		0
2		_
	i	
3		
	į	
4		
Part IX-B Summary of Program-Related Investments (see ins	tructions)	
Describe the two largest program-related investments made by the foundation during the tax year	r on lines 1 and 2	Amount
1 N/A		
		0
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		
EEA	<u> </u>	Form 990-PF (2014)

•	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	10,120
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	· ·
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (pnor IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	,
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	10,120
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	10,120

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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Part XIII

Undistributed Income (see instructions)

(b) Years prior to 2013 (d) 2014 (c) 2013 Distributable amount for 2014 from Part XI, 1 16,649 2 Undistributed income, if any, as of the end of 2014: b Total for pnor years Excess distributions carryover, if any, to 2014: a From 2009 93,483 **b** From 2010 60,719 c From 2011 97,877 **d** From 2012 150,175 e From 2013 49,987 452,241 Qualifying distributions for 2014 from Part XII, line 4: ► \$ 10,120 a Applied to 2013, but not more than line 2a **b** Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2014 distributable amount 10,120 Remaining amount distributed out of corpus . . . Excess distributions carryover applied to 2014 6,529 6,529 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: a Corpus. Add lines 3f, 4c, and 4e Subtract line 5 . 445,712 b Prior years' undistributed income. Subtract c Enter the amount of pnor years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b Taxable amount - see instructions Undistributed income for 2013. Subtract line 4a from line 2a Taxable amount - see instructions f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions) 86,954 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a 358,758 10 Analysis of line 9 a Excess from 2010 60,719 b Excess from 2011 97,877 c Excess from 2012 · · · 150,175 d Excess from 2013 49,987 Excess from 2014

	990-PF (2014) The Hillsh t XIV Private Operating Foun	oro Community		VII A guestion O	93-093105	9 Page 10
1a	If the foundation has received a ruling or		· · · · · · · · · · · · · · · · · · · 	<u>` '</u>	')	
ıa	foundation, and the ruling is effective for 2			ng		
_		•	•		1040(0)(0) == []	4040(1)(5)
b	Check box to indicate whether the founda		tung toundation describ		4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	ļ	Prior 3 years		(e) Total
	investment return from Part X for	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(8) 10tal
	each year listed	· 				ļ
b	85% of line 2a	<u> </u>				
c	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities •					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter (1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test - enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					<u> </u>
	(4) Gross investment income	· ····				
Part	Supplementary Informa any time during the year			ne foundation ha	d \$5,000 or more	in assets at
1	Information Regarding Foundation M	anagers:				
а	List any managers of the foundation who before the close of any tax year (but only					
b	List any managers of the foundation who ownership of a partnership or other entit				e portion of the	
2	Information Regarding Contribution, Check here ► X If the foundation only		•••••		oes not accept	
	unsolicited requests for funds. If the four other conditions, complete items 2a, b, c	ndation makes gifts, gi	rants, etc (see instruct	ions) to individuals or o	organizations under	
а	The name, address, and telephone num	ber or e-mail address	of the person to whom	applications should be	addressed:	
b	The form in which applications should be	e submitted and inform	nation and materials the	ey should include		
c	Any submission deadlines.					
d	Any restrictions or limitations on awards factors.	, such as by geograph	ncal areas, chantable fi	elds, kinds of institution	ns, or other	
EEA						Form 990-PF (2014)

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Form 990-PF (2014) The Hillsboro Community Foundation

[Part XV] Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount			
Name and address (home or business)	or substantial contributor	Touplork					
a Paid during the year		}					
City of Hillsboro							
4400 NW 229th Avenue		İ	Parks and				
Hillsboro, OR 97124			Recreation	3,120			
Western Oregon University							
345 Monmouth Ave N							
Monmouth, OR 97361			Scholarship	2,500			
Portland Chamber Orchestra							
P.O. Box 9024							
Portland, OR 97207			Century Program	2,500			
Oregon Chorale							
P.O. Box 1182							
Hillsboro, OR 97123			Scholarship	2,000			
Total			≯ 3a	10,120			
b Approved for future payment							
Total	• • • • • • • • • •		3b				

	art XVIX Analysis or mosms i rectomy.						
Enter gross amounts unless otherwise indicated.		Unrelated	business income	Excluded by s	ection 512, 513, or 514	(e) Related or exempt	
1	Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)	
	a						
	b						
	C		- 				
	d						
	θ						
	f						
	g Fees and contracts from government agencies · · ·						
2	Membership dues and assessments						
3	Interest on savings and temporary cash investments .			14	231	·	
4	Dividends and interest from securities			14	2,056		
5	Net rental income or (loss) from real estate:						
	a Debt-financed property						
	b Not debt-financed property						
6	Net rental income or (loss) from personal property						
	Other investment income						
	Gain or (loss) from sales of assets other than inventory					···-	
	Net income or (loss) from special events - · · · · ·						
	Gross profit or (loss) from sales of inventory	-				· · · · · · · · · · · · · · · · · · ·	
	Other revenue: a						
••	h						
	•			 			
	d	<u> </u>					
							
42	Subtotal Add columns (b), (d), and (e)		······································		0.007		
					2,287 · · · · · 13		
	ee worksheet in line 13 instructions to verify calculations.)				19	2,287	
	art XVI-B Relationship of Activities to the	Accompl	shment of Eve	mot Purpo	202		
_	Explain below how each activity for which inc accomplishment of the foundation's exempt p	-					
					· · · · · · · · · · · · · · · · · · ·	- · · · ·	
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Form 99			he Hillsboro C	community Foundati	on			0931059		Pa	ige 1:
Part	XVII			insfers To and Trans	actions an	d Relationsl	nips With	ı Noncha	arita	ble	
		<u>-</u>	rganizations					———	 1		
		=		e in any of the following with					1	Yes	No
		. ,	ode (omer man secuc	on 501(c)(3) organizations) o	or in section 52.	r, relating to poli	ucai			,	
	rganızati		tina foundation to a no	nobaritable average organization	ation of						
				ncharitable exempt organiza					4-(4)		v
				· · · · · · · · · · · · · · · · · · ·				- H	1a(1) 1a(2)		X
•	•	nsactions						}	14(2)		$\stackrel{\frown}{\vdash}$
			nonchantable exempt	organization				,	1b(1)		Х
				exempt organization • •				H-	1b(2)		X
•	•			ets · · · · · · · · · · · · · ·				L	1b(3)		X
				· · · · · · · · · · · · · · · · · · ·					1b(4)		X
								-	1b(5)		Х
(6) Perfo	rmance of servi	ices or membership or	fundraising solicitations					1b(6)		X
c S	haring o	of facilities, equip	pment, mailing lists, of	ther assets, or paid employe	es · · · ·			[1c		Х
d If	the ans	wer to any of the	e above is "Yes," com	plete the following schedule	. Column (b) sh	ould always sho	w the fair m	arket			
V	alue of t	he goods, other	assets, or services g	ven by the reporting foundate	tion. If the found	dation received !	less than fai	r market			
va	alue in a	iny transaction o	or sharing arrangemer	nt, show in column (d) the va	alue of the good	ls, other assets,	or services	received			
(a) Line i	no (b) A	Amount involved	(c) Name of nonc	chantable exempt organization	(d) Des	cription of transfer	s, transaction	s, and shanr	ng ama	ngeme	nts
											
	4										
	-										
											
	+										
		•	-					···			
	 										
	 										
				· · · · · · · · · · · · · · · · · · ·							
		•									
2a Is	the fou	ndation directly	or indirectly affiliated	with, or related to, one or mo	re tax-exempt	organizations					
				than section 501(c)(3)) or in				٠٠ ٢	Yes	s X	No
b If	"Yes," c	omplete the foll	lowing schedule								
	((a) Name of organ	nization	(b) Type of organiz	ation		(c) Description	n of relations	ship		
				·							
											
						ļ					
	Hodae	analtuse of part	declare that I have	of the entree maked as a second	a achadulaa aa 4 a	ntomonto	host of t		م اسماد		
Sign	correct,	and complete Declar	aration of preparer (other tha	d this return, including accompanyir an taxpayer) is based on all informat	ry scriedules and st ion of which prepar	atements, and to the er has any knowledg	⊫estormyk∩o	wiedge and be	90 6 1, 17 11	s true,	
Here		赵	~	5-13-40		- D	2	May the IRS			
пеге	,	nature of officer or to	ustee	Date	Title	wing '	 ,	with the preparate (see inst.)?		Yes	OW No
		Print/Type prepar		Preparer's signature		Date	Charle	₩ . PI	TIN		
Paid		Alyce L D		003	+ }	05-11-2016	Check			5595	
Prep	arer	Firm's name	Alyce L Daw	es O			rm's EIN	nployed PO	022	222	
	_					1 - 1					

Use Only Firm's address ▶ 70 SW Century Drive Suite 100-125

Bend OR 97702

503-201-8245

Phone no

Schedule B (Form 990, 990-EZ,

or 990-PF)

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its Instructions is at www.irs.gov/form990.

Name of the organization **Employer identification number** The Hillsboro Community Foundation 93-0931059 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt chantable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I. II. and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

The Hillsboro Community Foundation

93-0931059

Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is r	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1	Michael and Laura McMurray 1371 NE Orenco Station Parkway 12 Hillsboro, OR 97124	\$13,000	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Scott and Kelly Eisenstein 15811 SW Holly Hill Road Hillsboro, OR 97123	\$6,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Baker Rock Resources 21880 SW Farmington Road Beaverton, OR 97007	\$25,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Intel Corporation 2200 Mission College Blvd Santa Clara, CA 95052	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	City of Hillsboro 150 East Main Street Hillsboro, OR 97123	\$ <u></u> 50,000	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	Short Season LLC 4460 NW 229th Avenue Hillsboro, OR 97124	\$8,515	Person X Payroll Complete Part II for noncash contributions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Page 2 Name of organization **Employer identification number** The Hillsboro Community Foundation 93-0931059 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(D) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_7	Ritz Family Foundation 21580 SW Stafford Road Tualatin, OR 97062	\$5,000	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_8	Richard B Siegel Foundation 19360 Rinaldi Street Suite 311 Porter Ranch, CA 91326	\$	Person X Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution

List of Officers, Directors, Trustees, and Key Employees

1 List all officers, directors, trustees, and key employees for the	year even if they wer	e not compensated		
(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Form W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and	(e) Estimated amount of other compensation
Toff Von Boden Broad de	<u> </u>	(if not paid, enter -0-)	deferred compensation	
Jeff Van Raden Past Preside	ì			•
P O Box 808, Hillsboro, OR 97123-0808	1.00	00	0	0
Les Davis Director	1 00			•
P O Box 808, Hillsboro, OR 97123-0808	1.00	0	0	0
Tom Hughes Director	1 00		ا ا	•
P O Box 808, Hillsboro, OR 97123-0808	1.00	0	0	0
Funda Kelsay Director P O Box 808, Hillsboro, OR 97123-0808	1.00	0	0	0
Abdi Nassib Director	1.00	0	· · · · · · · · · · · · · · · · · · ·	
P O Box 808, Hillsboro, OR 97123-0808	1.00	0	0	0
Jerralynn Ness Director	1.00			
P O Box 808, Hillsboro, OR 97123-0808	1.00	0	0	О
	1.00			-
P O Box 808, Hillsboro, OR 97123-0808	1.00	0	0	0
Annie Shull Director	2.00		<u>_</u>	
P O Box 808, Hillsboro, OR 97123-0808	1.00	0	0	0
Dick Stenson Director				
P O Box 808, Hillsboro, OR 97123-0808	1.00	l 0	0	o
Don Suhrbier Director	, ,,-			
P O Box 808, Hillsboro, OR 97123-0808	1.00	l 0	0	0
Rick Van Beveren Director				
P O Box 808, Hillsboro, OR 97123-0808	1.00	0	0	0
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Federal Supporting Statements 2014 PG 01 Name(s) as shown on return FFIN The Hillsboro Community Foundation 93-0931059 Form 990PF, Part III, Line 3 Statement #115 Other Increases Schedule Beneficial interest assets @ OCF 206,464 Total 206,464 PG 01 Form 990PF, Part III, Line 5 Statement #116 Other Decreases Schedule Unrealized loss on investments 633 Total 633 PG 01 Form 990PF, Part II, Line 13 Statement #118 Investments: Other Schedule Book value (BOY) Book value (EOY) Category FMV (EOY) Schwab securities 49,525 50,043 50,043 Total 49,525 50,043 50,043 PG 01 Form 990PF, Part II, Line 15 Statement #120 Other Assets Schedule Description BOY Book **EOY Book** Beneficial interest - assets @ OCF 239,195 239,195 Total 239,195 239,195

		Federal Su	Federal Supporting Statements	ments	2014 № 01	
Name(s) as shown on return The Hillsboro Community Foundation	noı				Your Social Security Number 93-0931059	1
	Form 990PF, Part		I, Line 23 - Other Expenses Schedule	hedule	Statement #103	
:	Revenue	Ne t	Adjusted	Charıtable		
Description	and expenses	investment	net income	purpose		
ACH Fees	1,176	o (.	.		
Insurance	697	> (.	.		
Promotion/advertising	3,500	> C	> C			
2000 A CO	100	, c		, c		
Post office box rental	146	. 0		. 0		
Online expense	533	0	0	0		
OCF fees	1,196	0	0	0		
State of Oregon fees	241	0	0	0		
Office supplies	345	0	0	0		
Event expenses	400	0	0	0		
HCF fees	1,614	0	1,614	0		
Totals	10,329	0	1,614	0		
					;	
	Form 99(Form 990PF, Part I, Line 11 - Other Income Schedule	- Other Income Sc!	nechile	PG 01 Statement #106	
	Revenue	Net	Adjusted			
Description	and expenses	investment	net income			
Administrative fees	1,614		1,614			
Totals	1,614	0	1,614			
						l

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		Federal St	Federal Supporting Statements	ments	2014 PG 01	
Name(s) as shown on return	. ,				Your Social Security Number	<u> </u>
		Part I, Line 16(b)	Form 990PF, Part I, Line 16(b) - Accounting Fees Schedule	3chedu1e	Statement #108	
	Ravenue	Ne t	Adjusted	Charitable		
Description Accounting fees	and expenses	investment	net income	0 0		
Totals	029	0	0	0		
					; ;	
	Form 990PF, Par	t I, Line 16(c) - O	Form 990PF, Part I, Line 16(c) - Other Professional Fees Schedule	ses Schedule	PG O1 Statement #109	
Description Consulting fees	Revenue and expenses 51,667	Net investment	Adjusted net income	Charitable purpose		
Totals	51,667	0	0	0		
				-		

Name(s) as shown on return The Hillsboro Community Foundation
Form 990PF, Part I, Line 18 - Taxes Schedule
Revenue and expenses
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in