

#### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



#### DLN: 93491090003226

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its instructions is at <u>www.irs.gov/form990pf</u>.

For calendar year 2015, or tax year beginning 01-01-2015 and ending 12-31-2015

		, ca. zeze, c. tax , ca. zeziming ez c			
	e of fou LP THE (	ndation CHARITY		A Employer identification	number
			_		ctructions)
		street (or P O box number if mail is not delivered to street address) RTY ST SE	Room/suite	BTelephone number (see in:	structions)
				(503) 522-6611	
	or town, M, OR	, state or province, country, and ZIP or foreign postal code 97302		C If exemption application is	s pending, check here 🕨 🦵
G C	neck al	Il that apply   Tinitial return   Tinitial return of a fo	ormer public charity	<b>D 1.</b> Foreign organizations,	check here
		Address change Name change		2. Foreign organizations i test, check here and a	
		pe of organization		<b>E</b> If private foundation stat under section 507(b)(1)(	us was terminated
		4947(a)(1) nonexempt charitable trust Cother taxable trust Different by JAccounting method			,,
		rom Part II col (c)		<b>F</b> If the foundation is in a 6 under section 507(b)(1)(	
		\$ 154,773 (Part I, column (d) must	be on cash basıs.)		
Pa	rt I	Analysis of Revenue and Expenses	Revenue and	Not investment Advist	Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see	expenses per (a) books (	Net investment Adjuste (b) income (c) inco	
		<pre>instructions) ) Contributions, gifts, grants, etc , received (attach</pre>	(-,		(d) (cash basis only)
	1	schedule)	49.993		
	2	,	49,993		
	-	Check ► ☐ If the foundation is <b>not</b> required to attach  Sch B			
	3	Interest on savings and temporary cash investments	172	172	
	4	Dividends and interest from securities			
	5a	Gross rents			
	ь	Net rental income or (loss)			
Reveilue	6a	Net gain or (loss) from sale of assets not on line 10			
	ь	Gross sales price for all assets on line 6a			
Δ̈́	7	Capital gain net income (from Part IV, line 2)		0	
	8	Net short-term capital gain			
	9	Income modifications			
	10a	Gross sales less returns and allowances			
	ь	Less Cost of goods sold			
	C	Gross profit or (loss) (attach schedule)			
	11	Other income (attach schedule)			
	12	Total.Add lines 1 through 11	50,165	172	
	13	Compensation of officers, directors, trustees, etc	0	0	0
	14	Other employee salaries and wages			
SΦS	15 16a	Pension plans, employee benefits			
Ψ	b	Accounting fees (attach schedule)			
Expenses		Other professional fees (attach schedule)	<del></del>		
	C				
Admını strative	17 18	Interest			
Ĭ	19	Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion	<b>95</b> 410	0	
Ē		Occupancy			
Ad	20	Travel, conferences, and meetings			
and	22	Printing and publications			
	23	Other expenses (attach schedule)		0	0
atın	24	Total operating and administrative expenses.			
Operating		Add lines 13 through 23	7,655	0	0
Õ	25	Contributions, gifts, grants paid	23,872		23,872
	26	Total expenses and disbursements. Add lines 24 and 25	31,527	0	23,872
	27	Subtract line 26 from line 12	31,327		23,372
	a	Excess of revenue over expenses and disbursements	18,638		
	b	Net investment income (If negative, enter -0-)		172	
	С	Adjusted net income(If negative, enter -0-)			
For I	Paperw	vork Reduction Act Notice, see instructions.	(	Cat No 11289X	Form <b>990-PF</b> (2015)

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
Ī	1	Cash—non-interest-bearing	135,717	154,773	
	2	Savings and temporary cash investments	, , , , , , , , , , , , , , , , , , ,	,	<u> </u>
	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 🕨			
	8	Inventories for sale or use			
箝	9	Prepaid expenses and deferred charges			
Assets		Investments—U S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)			
	С	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)			
	14	Land, buildings, and equipment basis 🕨4,100			
		Less accumulated depreciation (attach schedule) > 4,100	410	<b>6</b>	0
	15	Other assets (describe )			_
	16	Total assets(to be completed by all filers—see the			
		instructions Also, see page 1, item I)	136,127	154,773	154,773
	17	Accounts payable and accrued expenses	323	331	
	18	Grants payable			
\$	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
랍	21	Mortgages and other notes payable (attach schedule)			
ᄀ	22	Other liabilities (describe			
	23	Total liabilities(add lines 17 through 22)	323	331	
		Foundations that follow SFAS 117, check here			
or Fund Balances		and complete lines 24 through 26 and lines 30 and 31.			
릙	24	Unrestricted			
훘	25	Temporarily restricted			
필	26	Permanently restricted			
.튀		Foundations that do not follow SFAS 117, check here			
핗		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	0	0	
꺗	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	135,804	154,442	
회	30	Total net assets or fund balances(see instructions)	135,804	154,442	
	31	Total liabilities and net assets/fund balances(see instructions)	136,127	154,773	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	•		
1		Total net assets or fund balances at beginning of year—Part II, column (	(a), line 30 (must ac	ıree	
		with end-of-year figure reported on prior year's return)	-		135,804
2		Enter amount from Part I, line 27a		- t	18,638
3		Other increases not included in line 2 (itemize)			0
4		Add lines 1, 2, and 3			154,442
5		Decreases not included in line 2 (itemize)		5	0
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa	art II column (b) lu	ne 30 . <b>6</b>	154 442

Part I	V Capital Gains	and Lo	sses for Tax on Inve	stme	nt Income				
	List and describe (a) 2-story brick war		Date acquired (mo , day, yr )	Date sold (d) (mo , day, yr )					
1a									
b									
С									
d									
e									
(e)	Gross sales price		Deprectation allowe <b>(f)</b> (or allowable)	ed		or other basis expense of sale			or (loss) (f) minus (g)
a									
b									
С									
d									
e									
Com	nplete only for assets	showina (	gain in column (h) and own	ed by tl	he foundation	on 12/31/69		Gains (Col	(h) gain minus
	M V as of 12/31/69		Adjusted basis (j) as of 12/31/69		Exc	ess of col (ı) col (յ), ıf any	(1)	col (k), but no	ot less than -0-) <b>o</b> i (from col (h))
а									
<u></u>									
С									
d									
e									
3	·	_	(loss) as defined in section (loss) as defined in section (see instru	ons 122	22(5) and (6)		`	2	
Dort V	<u> </u>	Indox 6	Section 4040(a) for F		od Toy on	Not Thurston	<u>'                                       </u>	Incomo	
Part V	Qualification	onder s	Section 4940(e) for F	Reduc	ed lax on	Net Investm	ent 1	income	
Ifsection	n 4940(d)(2) applies,	leave this	·						
If "Yes,"	the foundation does n	ot qualify	14942 tax on the distribut under section 4940(e) D	o not c	omplete this	part		?	Γ Yes <b>Γ</b> No
<b>1</b> Ente	er the appropriate amo	unt in ea	ch column for each year, s	ee inst	ructions befo	re making any er	itries		
	(a) period years Calendar tax year beginning in)	Adjus	<b>(b)</b> ted qualifying distributions	Net v	(c) alue of nonchari	table-use assets		<b>(d)</b> Distributio (col (b) divided	n ratio
	2014		26,780			120,548			0 222152
	2013		24,379		· ·	97,314			0 250519
	2012		21,239			75,642			0 280783
	2011		9,754			29,667			0 328783
	2010	L	16,604	•		4,811	1	Г	3 451258
2	Totalof line 1, colum	, ,					2		4 533495
3	the number of years	the found	the 5-year base period—di ation has been in existenc	e ıf les	s than 5 year	s	3		0 906699
4			ritable-use assets for 201.		·	ŀ	4		143,066
5							5		129,718
6	Enter 1% of net inve	stment ır	come (1% of Part I, line 2	?7b)₌		[	6		2
7	Add lines 5 and 6.						7		129 720

the Part VI instructions

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

23,872

Fell	Excise Tax based on Investment Income (Section 4940(a), 4940(b), 49	<del>,,,</del> 0(e),	, UI 4940—Se	e pag	C 10 01	the ins	structio	'IIS)					
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			Į									
	(attach copy of letter if necessary-see instructions)			- 1									
b	Domestic foundations that meet the section 4940(e) requirements in Part V ,	check			1				3				
	here ► ☐ and enter 1% of Part I, line 27b			. ′									
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizate Part I, line 12, col (b)	tions e	enter 4% of										
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable found enter $-0-$ )	dation	s only Othe	rs	2				0				
3	<del></del>												
4	enter -0 - ) 4												
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0												
6													
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a												
b	Exempt foreign organizations—tax withheld at source	6b											
C	Tax paid with application for extension of time to file (Form 8868)	6c											
d	Backup withholding erroneously withheld	6d											
7	Total credits and payments Add lines 6a through 6d				7				0				
8	Enter any <b>penalty</b> for underpayment of estimated tax Check here if Form 2			_	8								
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed .				9				3				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount	t overp		•	10								
11	Enter the amount of line 10 to be Credited to 2015 estimated tax		Refunded	_	11								
	t VII-A Statements Regarding Activities												
1a	During the tax year, did the foundation attempt to influence any national, state,	, or loc	:al legislatio	n or d	ıd			Yes	No				
_	To participate of miscrotter in any pointed and party and a second a second and a second a second and a second a second and a second an	•					. <u>1a</u>	$\vdash$	No				
b	Did it spend more than \$100 during the year (either directly or indirectly) for product that the product of the spend more than \$100 during the year (either directly or indirectly) for product of the spend more than \$100 during the year (either directly or indirectly) for product of the spend more than \$100 during the year (either directly or indirectly) for product of the spend more than \$100 during the year (either directly or indirectly) for product of the spend more than \$100 during the year (either directly or indirectly) for product of the spend more than \$100 during the year (either directly or indirectly) for product of the spend more than \$100 during the year (either directly or indirectly).		-	see Ir	ıstruct	ions	١						
	for definition)?					•	1b		No				
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities published or distributed by the foundation in connection with the activities.	ana co	pies or any n	nateria	115								
c	Did the foundation file <b>Form 1120-POL</b> for this year?						1c		No				
	Enter the amount (if any) of tax on political expenditures (section 4955) impos	· ·	· · · ·	• •		• •	10		NO				
u	(1) On the foundation $\Rightarrow$ \$ 0 (2) On foundation managers			0									
e	Enter the reimbursement (if any) paid by the foundation during the year for political terms of the reimbursement (if any) and by the foundation during the year for political terms of the reimbursement (if any) and by the foundation during the year for political terms of the reimbursement (if any) and by the foundation during the year for political terms of the reimbursement (if any) and by the foundation during the year for political terms of the reimbursement (if any) and by the foundation during the year for political terms of the reimbursement (if any) and by the foundation during the year for political terms of the reimbursement (if any) and by the foundation during the year for political terms of the reimbursement (if any) and by the foundation during the year for political terms of the reimbursement (if any) and by the foundation during the year for political terms of the reimbursement (if any) and by the foundation during the year for political terms of the reimbursement (if any) and by the foundation during the year for political terms of the reimbursement (if any) and by the foundation during the year for political terms of the reimbursement (if any) and the reimbursement (if any)				oosed								
_	on foundation managers <b>&gt;</b> \$0		, portare et	- / · · · · · ·	,,,,,								
2	Has the foundation engaged in any activities that have not previously been rep	orted	to the IRS?				. 2		No				
	If "Yes," attach a detailed description of the activities.												
3	Has the foundation made any changes, not previously reported to the IRS, in its	s aove	ernina instrui	ment.	article	s							
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confo	_	_	-			. 3		No				
4a	Did the foundation have unrelated business gross income of \$1,000 or more du						4a		No				
ь	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?						4b						
5	Was there a liquidation, termination, dissolution, or substantial contraction dur	ing the	e year?				. 5		No				
	If "Yes," attach the statement required by General Instruction T.												
6	Are the requirements of section 508(e) (relating to sections 4941 through 494)  • By language in the governing instrument, or	45) sa	tisfied eithei	r									
	By state legislation that effectively amends the governing instrument so that	at no m	nandatory di	rectio	ns								
	that conflict with the state law remain in the governing instrument?						. 6	1	No				
7	Did the foundation have at least \$5,000 in assets at any time during the year?					:).							
_	and Part XV.						. 7	Yes					
8a	Enter the states to which the foundation reports or with which it is registered (s	see ins	structions)										
L	►OR  If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	0 05	to the ^ +										
D	General (or designate) of each state as required by General Instruction G? If ".						8b	Yes					
9	Is the foundation claiming status as a private operating foundation within the $m$				(1)(3)		90	1 63					
3	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see		_										
	If "Yes," complete Part XIV			. u.c./			. 9		No				
10	Did any persons become substantial contributors during the tax year? <i>If "Yes,"</i>	attach	a schedule l	ıstına	their n	ames							
	and addresses. 🕏			_			. 10	Yes					

Pai	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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►WWW HELPTHECHARITY NET			
14	The books are in care of ►FIGARO'S ITALIAN PIZZA INC Telephone no ►(503)	) 522	-6611	
	Located at 1500 LIBERTY ST SE STE 160 SALEM OR ZIP+4 1500 ZIP+4 15			
15	· · · · · · · · · · · · · · · · · · ·		<u> </u>	-
13	and enter the amount of tax-exempt interest received or accrued during the year		- 1	
			<del></del>	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	l	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
<b>1</b> a	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 V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			
	(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 termination of government service, if terminating within 90 days )			
Ь	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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 2015?	1c		No
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 $4942(j)(5)$ )			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years > 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		
C	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section $4943(c)(7)$ ) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2015.)	3b	<del>                                     </del>	<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	1 '	No

Fel	Lt ATT-B	Statements Rega	arding Activities to	r vvr	iich Form 4/20	мау	, ве кедигеа ( <i>com</i>	inue	1)	
5a	During the	year did the foundation	n pay or incur any amoui	nt to						
	<b>(1)</b> Carry	on propaganda, or othe	rwise attempt to influenc	e leg	ııslatıon (sectıon 49	45(e	)) <sup>?</sup>	No		
	(2) Influer	nce the outcome of any	specific public election	(see	section 4955), or to	car	ry			
	on, dir	ectly or indirectly, any	voter registration drive?				\ Yes \	No No		
	(3) Provid	e a grant to an individu	ıal for travel, study, or ot	hers	ımılar purposes?		☐ Yes Ϝ	No No		
	(4) Provid	e a grant to an organiza	ation other than a charita	able,	etc , organization de	scrib	ped			
	ın sect	tion 4945(d)(4)(A)? (se	ee instructions)				\ \ Yes \	√ No		
	(5) Provid	e for any purpose other	r than religious, charitab	le, sc	ientific, literary, or					
	educat	tional purposes, or for t	the prevention of cruelty	to ch	ıldren or anımals?.		Г Yes <b>Г</b>	√ No		
b	If any ans	werıs "Yes" to 5a(1)–(	(5), did <b>any</b> of the transac	tions	s fail to qualify under	r the	exceptions described in			
	Regulation	ns section 53 4945 or i	ın a current notice regar	ding o	disaster assistance	(see	instructions)?		5b	
	O rganızatı	ions relying on a curren	nt notice regarding disas	teras	ssistance check her	e		-		
С	If the ansv	wer is "Yes" to questior	n 5a(4), does the founda	tion c	laım exemption fron	n the				
	tax becaus	se it maintained expend	diture responsibility for t	he gr	ant?		<b>T</b> Yes 「	- No		
	If "Yes," at	tach the statement requ	ured by Regulations section	on 53.	.4945-5(d).					
6a	Did the fou	undation, during the yea	ar, receive any funds, dir	ectly	or indirectly, to pay	prer	miums on			
	a personal	l benefit contract?					Yes	√ No		
b	Did the fou	undation, during the yea	ar, pay premiums, direct	y or i	ndirectly, on a perso	onal	benefit contract?		6b	No
	If "Yes" to	6b, file Form 8870.								
7a	At any tım	e during the tax year, v	was the foundation a part	y to a	a prohibited tax shel	lter t	ransaction? <b>\( Yes</b> \( \)	- No		
b	If yes, dıd	the foundation receive	any proceeds or have a	ny ne	t income attributabl	e to t	the transaction?		7b	
_		Information Abou	t Officers, Director	s, T	rustees, Founda	atio	n Managers, Highly	Paid	Emp	loyees,
		and Contractors	-		-					
1	List all offi	cers, directors, trustee	s, foundation managers	and t	heir compensation (	see i		I		
			Title, and average	(c)	Compensation( <b>If</b>		<b>(d)</b> Contributions to		ynens	e account,
	(a) Nam	ne and address	hours per week (b) devoted to position		not paid, enter -0-)	е	mployee benefit plans			llowances
			(b) devoted to position	<u> </u>	<del>-0-)</del>	and	deferred compensation			
See	Additional E	Data Table								
2	Compensat	ion of five highest-paid	d employees (other than	thos	e included on line 1-	-see	instructions). If none, e	nter "N	IONE."	
		(a)	Title, and ave	rane			Contributions to			
Nar	ne and addr	ress of each employee ;			(c) Compensation	on	employee benefit plans and deferred		•	e account,
	more	e than \$50,000	(b) devoted to pos	ition			(d) compensation	(e) (	otner a	llowances
NON	IE									
Int-	I number of	other amployage haid o	AVAR & EA AAA					1		^

	(see instructions). If none, enter "NO!	VE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	<b>、</b>	
otal number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
st the foundation's four largest direct charitable activities during the tax year Include re rganizations and other beneficiaries served, conferences convened, research papers pro		er of Expenses
1	udeed, etc	
2		
3		
4		
Part IX-B Summary of Program-Related Investments	•	
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during	•	Amount
Part IX-B Summary of Program-Related Investments	•	A mount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during	•	Amount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during	•	A mount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during  1	•	A mount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during  1  2	•	Amount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during  1  2  All other program-related investments See instructions	•	Amount
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during  1  2	•	Amount

### Form 990-PF (2015) Part X Minimum Investment Return

F (*	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	Average monthly fair market value of securities	1a	0
b	A verage of monthly cash balances	1b	145,245
c	Fair market value of all other assets (see instructions)	<b>1</b> c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	145,245
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	145,245
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ 0 of line 3 (for greater amount, see		
	ınstructions)	4	2,179
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	143,066
6	Minimum investment return. Enter 5% of line 5	6	7,153
Pai	t XI  Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cere check here ► ☐ and do not complete this part.)	rtaın f	oreign organizations
1	Minimum investment return from Part X, line 6	1	7,153
2a	Tax on investment income for 2015 from Part VI, line 5 2a 3		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	3
3	Distributable amount before adjustments Subtract line 2c from line 1	3	7,150
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	7,150
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	7,150
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		l
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	23,872
	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		i
а	Suitability test (prior IRS approval required)	За	
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	23,872
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	23,872
	<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

P	art XIII	Unaistributea	<b>Income</b> (see instr	uctions)				
				(a)	(b)	(c) 2014	(d)	
4	Distributal	ble amount for 2015	from Bart VI June 7	Corpus	Years prior to 2014	2014	2015	7,150
		ted income, if any, a	·					7,130
		unt for 2014 only.				0		
		rior years 20			0			
		stributions carryover						
		0	16,464					
b	From 201:	1	8,271					
c	From 2012	2	17,457					
d	From 2013	3	19,513					
е	From 201	4	20,756					
f	<b>Total</b> of lin	es 3a through e		82,461				
4	Qualifying	distributions for 201	5 from Part					
		<b>&gt;</b> \$						
		2014, but not more				0		
b		undıstrıbuted ıncom equıred—see ınstruc	· ·		0			
C		distributions out of see instructions).		0				
d	Applied to	2015 distributable a	amount					7,150
е	Remaining	amount distributed	out of corpus	16,722				
5	Excess dis	stributions carryover	applied to 2015	0				0
		int appears in column amount must be show						
6	Enter the i	net total of each col below:	umn as					
а	Corpus Ad	ld lines 3f, 4c, and 4	e Subtract line 5	99,183				
		undistributed incon						
	line 4b fron	m line 2b			0			
C		mount of prior years						
		which a notice of det d, or on which the se	•					
		en previously assess			0			
d		ne 6c from line 6b T uctions			0			
e		ted income for 2014						
		e 2a Taxable amour						
	ınstruction	s				0		
f		ted income for 2016						
		ıd 5 from lıne 1   Thıs ted ın 2015 <b>.    .</b>						0
7		reated as distribution						
-		satisfy requirements						
		0(b)(1)(F) or 4942(g		0				
_		l - see instructions)	The state of the s					
8		stributions carryover	rrom 2010 not instructions)	16,464				
9		tributions carryover	· •					
_			e 6a	82,719				
10	Analysis o	of line 9						
а	Excess fro	om 2011	8,271					
b	Excess fro	om 2012	17,457					
		m 2013	19,513					
		om 2014	20,756					
е	Excess fro	m 2015	16,722					

NONE

	t XIV Private Operating Foundat	ione (soo instri	ictions and Dart	VII-A guestion	0)	Page
	TEXIV Private Operating Foundate  the foundation has received a ruling or determ	•		· · ·	<i>ס</i> ן	
	undation, and the ruling is effective for 2015,					
C	heck box to indicate whether the organization	ıs a prıvate opera	ting foundation de:	scribed in section	√ 4942(j)(3) or	
	nter the lesser of the adjusted net	Tax year		Prior 3 years		(a) Tatal
ır	ncome from Part I or the minimum nvestment return from Part X for each	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) Total
•	ear listed					
Q	ualifying distributions from Part XII, ne 4 for each year listed					
d	mounts included in line 2c not used irectly for active conduct of exempt ctivities					
fc	ualifying distributions made directly or active conduct of exempt activities ubtract line 2d from line 2c					
	mplete 3a, b, or c for the Iternative test relied upon					
	Assets" alternative test—enter					
-	1) Value of all assets					
•	2) Value of assets qualifying under section 4942(j)(3)(B)(i) Endowment" alternative test— enter 2/3					
0	f minimum investment return shown in art X, line 6 for each year listed.					
	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)					
C	3) Largest amount of support					
	from an exempt organization  4) Gross investment income					
	XV Supplementary Information (C	omplete this	part only if th	e organization	had \$5.000 o	r more in
	assets at any time during the					
	nformation Regarding Foundation Managers:					
	st any managers of the foundation who have co efore the close of any tax year (but only if they					ation
D.	sione the close of any tax year (but only if they	nave contributed	more than \$5,000	o) (See Section 3)	) / (u)(2) )	
	st any managers of the foundation who own 10 wnership of a partnership or other entity) of wh				large portion of the	2
			_			
I	nformation Regarding Contribution, Grant, Gift	, Loan, Scholarshi	p, etc., Programs:			
	heck here ▶ ⊓ If the foundation only makes co					
	nsolicited requests for funds. If the foundation		ts, etc (see instru	uctions) to individu	ials or organizatior	is under
0	ther conditions, complete items 2a, b, c, and d					
_	the many add to the total to the total total to the total to				and the second	
	he name, address, and telephone number or e-	-mail address of th	ne person to whom	i applications shou	na pe addressed	
	IGARO'S ITALIAN PIZZA INC 500 LIBERTY ST SE STE 160					
	ALEM, OR 97302					
	503) 522-6611					
Т	he form in which applications should be submi	tted and informati	on and materials t	hey should include		
L	OCAL PUBLIC OR PRIVATE SCHOOLS SHO ROM THEIR LOCAL FIGARO'S ITALIAN PIZ	ULD APPLY FOR		•		OBTAINED
	ny submission deadlines					
	IONE  ny restrictions or limitations on awards, such	as by deodraphic	al areas charitable	e fields kinds of in	stitutions or other	
	actors	z, geograpine	a.cas, chantaph	e neras, kinus oi III		

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 23,872 **b** Approved for future payment

Form 990-PF (2015)					Page <b>12</b>
Part XVI-A Analysis of Income-Produc		usiness income	Excluded by section	n 512 512 or 514	(e)
Enter gross amounts unless otherwise indicated	(a)	(b)	(c)	(d)	Related or exempt function income (See
1 Program service revenue	Business code	A mount	Exclusion code	A mount	instructions )
a b					
c					
d					
e f					
<b>g</b> Fees and contracts from government agencies					
<ul><li>2 Membership dues and assessments</li><li>3 Interest on savings and temporary cash investments</li></ul>					172
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income 8 Gain or (loss) from sales of assets other than					
inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)		0		<u> </u>	0 172 172
(See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to	calculations )				
Line No. Explain below how each activity for wh the accomplishment of the foundation's	ıch ıncome ıs re	ported ın column (	(e) of Part XVI-A c	ontributed importa	
instructions )	S USED TO INC	DEACE THE ACC	ETC AVAILABLE		
INTEREST EARNED ON CASH HELD IS TO MAKE GRANTS TO QUALIFYING S				ONS	
+					

Part	: XVI		Information Ro Noncharitable					saction	ns and	Relationships	With			
		organı	zation directly or i ) of the Code (othe	ndırectly (	engage	ın any of t	the following wi						Yes	No
	anıza					( )( )	,		,	<b>J</b> .				
<b>a</b> Tra	nsfer	s fron	n the reporting four	ndation to	a nonc	harıtable e	exempt organiz	ation of						
(1)	Cas	h										1a(1)		No
(2)	Oth	erass	sets									1a(2)		No
<b>b</b> Otl	her tra	ansac	tions											
(1)	Sale	es of a	ssets to a noncha	rıtable ex	empt or	ganızatıor	n					1b(1)		No
(2)	Purc	chase	s of assets from a	noncharit	able ex	empt orga	inization					1b(2)		No
(3)	Ren	tal of	facılıtıes, equipme	nt, or othe	erasset	ts						1b(3)		No
(4)	Reir	nburs	ement arrangemer	nts								1b(4)		No
(5)	Loa	ns or	loan guarantees.									1b(5)		No
(6)	Perfo	rmand	e of services or m	nembershi	p or fun	draising s	olicitations.					1b(6)		No
<b>c</b> Sha	arıng	of facı	lities, equipment,	mailing lis	ts, oth	erassets,	or paid employ	/ees				1c		No
of t	he go any tr	ods, o ansac	to any of the above other assets, or se tion or sharing arr	rvices giv angement	en by t , show :	he reportii in column	ng foundation	If the fou of the goo	indation index	eceived less than	n fair marko ces receive	et value ed		nts
,									· · ·	,				
des	scribe	d in s comp	ion directly or indi ection 501(c) of the plete the following ) Name of organization	ne Code (d schedule		an sectioi		ın sectı			otion of relati		s 🔽	No
									-					
Sign Here	the	best ormat ***	enalties of perjury, of my knowledge a ion of which prepai * * * ature of officer or t	and belief, rer has an	ıt ıs tru	ıe, correct		Declar			May t May t return with t below	r) is bas he IRS di he prepai	sed on scuss th	all us vn
		T						Date		Check if self-	PTIN			
Paid Prep	arei	Firm	nt/Type preparer's RAD BINGENHEII n's name ► LDT CARLISLE SN	MER	Prepa	rer's Sıgn	ature			employed ► ✓ Firm's EIN ► 9	P	5	'44	
Use		Firm	n's address ▶											
Only			55 LEE ST SE SUI	TE 210 S.	ALEM,	OR 9730	2			Phone no (503	3) 585-77!	51		
		1												

# Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
RON BERGER	DIRECTOR	0	0	0
1500 LIBERTY ST SE STE 160 SALEM,OR 97302	1 00			
KELLY KIMSEY	DIRECTOR	0	0	0
1500 LIBERTY ST SE STE 160 SALEM,OR 97302	1 00			
RICK GLENN	DIRECTOR	0	0	0
1500 LIBERTY ST SE STE 160 SALEM,OR 97302	1 00			
HOLLY EARLE-SCHULTZE	DIRECTOR	0	0	0
1500 LIBERTY ST SE STE 160 SALEM,OR 97302	1 00			
PAULA NEWMAN	CHAIR	0	0	0
1500 LIBERTY ST SE STE 160 SALEM,OR 97302	1 00			
TODD OLNEY	DIRECTOR	0	0	0
1500 LIBERTY ST SE STE 160 SALEM,OR 97302	1 00			
CINDY EGNARSKI	DIRECTOR	0	0	0
1500 LIBERTY ST SE STE 160 SALEM,OR 97302	1 00			

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
AUBURN DAYCARE CENTERS INC P O BOX 262 AUBURN,AL 36830		SCHOOL	PHYSICAL ACT INIT	1,000
AUMSVILLE PTC 572 NORTH 11TH STREET AUMSVILLE,OR 97325		SCHOOL	ELEMENTARY CARNIVAL	100
BAYPORT HIGH SCHOOL 2710 LINEVILLE RD GREEN BAY, WI 54313		SCHOOL	SCHOLARSHIP PROGRAM	500
BAYPORT HIGH SCHOOL 2710 LINEVILLE RD GREEN BAY, WI 54313		SCHOOL	SNEAKER EVENT	200
BOYS & GILRS CLUBS OF THE GREATER SANTIAM 305 S 5TH STREET LEBANON,OR 97355		OTHER NON- PROFIT	THINK BIG	400
BRUSH COLLEGE ELEMENTARY 2623 DOAKS FERRY RD SALEM,OR 97304		SCHOOL	PARENT CLUB 2015	250
BURNS HIGH SCHOOL P O BOX 34 HINES,OR 97738		SCHOOL	7TH GRD VOLBAL	344
CASCADE SCHOOL DISTRICT 10226 MARION RD SE TURNER,OR 97392		SCHOOL	OUTDOOR SCHOOL 15	200
CLACKAMAS RIVER ELEMENTARY 301 NE 2ND ESTACADA,OR 97023		SCHOOL	OUTDOOR SCHOOL	300
CLOVERDALE ELEMENTARY SCHOOL 9666 PARRISH GAP RD SE TURNER,OR 97392		SCHOOL	ART OF MATH	250
COUNTRY CHRISTIAN SCHOOL 16975 S HWY 211 MOLALLA,OR 97038		SCHOOL	READING AWARD	200
COUNTRY CHRISTIAN SCHOOL 16975 S HWY 211 MOLALLA,OR 97038		SCHOOL	LIBRARY & MEDIA CEN	200
COUNTRY CHRISTIAN SCHOOL 16975 S HWY 211 MOLALLA,OR 97038		SCHOOL	ELEM READING PROG	200
CRESWELL LIBRARY P O BOX 366 CRESWELL, OR 97426		OTHER NON- PROFIT	SUMMER READ PROGRAM	250
DALLAS COMUUNITY SCHOOL 788 SW BIRCH STREET DALLAS,OR 97338		SCHOOL	PICNIC TABLE SUPP	100

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
EDDYVILLE CHARTER SCHOOL THE ECS BOOSTERS EDDYVILLE,OR 97343		SCHOOL	PLAYGROUND UPGRADE	200
FOREST GLEN ELEMENARY 1935 CARDINAL LANE GREEN BAY,WI 54313		SCHOOL	BARTON READING	100
FOREST GLEN ELEMENARY 1935 CARDINAL LANE GREEN BAY, WI 54313		SCHOOL	APPS FOR ALL	100
HAMILTON CREEK SCHOOL 32135 BERLIN RD LEBANON,OR 97355		SCHOOL	SCHOOL CARNIVAL	100
HAMMOND ELEMENTARY SCHOOL 4900 BAYNE ST NE SALEM,OR 97305		SCHOOL	LEVEL BOOKS-SPEC ED	200
HANBY MIDDLE SCHOOL 1306 FOURTH AVENUE GOLD HILL, OR 97525		SCHOOL	WRESTLING	1,000
HARNEY CO CHAMBER MUSIC SCHOLARSHIPS PO BOX 53 BURNS,OR 97220		OTHER NON- PROFIT	CM SCHOLARSHIP	200
HAWTHORNE ELEMENTARY 3205 E LONG STREET SWEET HOME,OR 97386		SCHOOL	BIRDS OF PREY	265
HAYESVILLE ELEMENTARY 4545 WARD DRIVE NE SALEM,OR 97305		SCHOOL	SCIENCE ENRICHMENT	250
HUMBOLT ELEMENTARY SCHOOL 329 N HUMBOLT CANYON CITY,OR 97820		SCHOOL	IPAD-SPEC ED	600
HUMBOLT ELEMENTARY SCHOOL 329 N HUMBOLT CANYON CITY,OR 97820		SCHOOL	IPAD-6TH GRADE	600
INDEPENDENCE ELEMENTARY SCHOOL 150 S 4TH STREET INDEPENDENCE,OR 97351		SCHOOL	CLASSROOM LIBRARY	500
INDEPENDENCE SERVICE CLUB 340 S 3RD STREET INDEPENDENCE,OR 97351		OTHER NON- PROFIT	NO COST DINNER	200
JEFFERSON COUNTY PEER COURT 75 SE C STREET SUITE A MADRAS,OR 97741		OTHER NON- PROFIT	VOL MENTORSHIP	200
JEFFERSON MIDDLE SCHOOL 1180 KEMPER WAY MADRAS,OR 97741		SCHOOL	SMALL ENGINE PROJ	200

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
<b>a</b> Paid during the year				
KEY PENINSULA MIDDLE SCHOOL 5510 KEY PENINSULA HWY LAKEBAY,WA 98349		SCHOOL	COUGAR PRIDE STORE	800
LA PINE HIGH SCHOOL PO BOX 306 LA PINE,OR 97739		SCHOOL	LPHS-LIFESKILLS	259
LAKE OSWEGO HIGH SCHOOL 2501 SW COUNTRY CLUB RD LAKE OSWEGO,OR 97034		SCHOOL	LAKER LADIES	525
LAKE OSWEGO HIGH SCHOOL 2501 SW COUNTRY CLUB RD LAKE OSWEGO,OR 97034		SCHOOL	KATERI PARK TUTOR	200
LEBANON HIGH SCHOOL 1700 S 5TH STREET LEBANON,OR 97355		SCHOOL	EXPLOSION DANCE TEAM	400
LEBANON SCHOOL DISTRICT 485 5TH STREET LEBANON,OR 97355		SCHOOL	SPEECH SERVICES	400
LINCS 339 NW SHERMAN STREET SHERIDAN,OR 97378		OTHER NON- PROFIT	GIRLS BBALL PROG	500
LOURDES PUBLIC CHARTER SCHOOL 39059 JORDAN RD SCIO,OR 97374		SCHOOL	HELPING OUR SCHOOL	500
MARION MILLER ELEMENTARY 1650 46TH PL SE SALEM,OR 97317		SCHOOL	WORKING TO READ	100
MARION MILLER ELEMENTARY 1650 46TH PL SE SALEM,OR 97317		SCHOOL	WORKING TO READ 15	100
METOLIUS ELEMENTARY SCHOOL 420 SW BUTTE AVE METOLIUS,OR 97741		SCHOOL	METOLIUS ELEM PTA	200
MID-VALLEY CHRISTIAN ACADEMY 1483 N 16TH STREET MONMOUTH,OR 97361		SCHOOL	OFFICE UPDATING	300
MID-VALLEY CHRISTIAN ACADEMY 1483 N 16TH STREET MONMOUTH,OR 97361		SCHOOL	TECHNOLOGY-MACK	200
MID-VALLEY CHRISTIAN ACADEMY 1483 N 16TH STREET MONMOUTH,OR 97361		SCHOOL	TECHNOLOGY-NORDGREN	200
MID-VALLEY CHRISTIAN ACADEMY 1483 N 16TH STREET MONMOUTH,OR 97361		SCHOOL	TECHNOLOGY-WILSON	200
Total			▶ 3a	23,872

				1
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
MOLALLA HIGH SCHOOL P O BOX 309 MOLALLA,OR 97038		SCHOOL	EARTH SCI/EARTHQUAKE	200
MOLALLA HIGH SCHOOL P O BOX 309 MOLALLA,OR 97038		SCHOOL	PROD NATHAN'S PLAY	185
MOLALLA RIVER MIDDLE SCHOOL 318 LEROY AVE MOLALLA,OR 97038		SCHOOL	BATTLE OF THE BOOKS	200
MOLALLA RIVER SCHOOL DISTRICT 412 S SWEGLE AVENUE MOLALLA,OR 97038		SCHOOL	MOL MINIONS-LEGO	400
MOUNT SCOTT ELEMENTARY PTO 11201 SE STEVENS RD HAPPY VALLEY,OR 97086		SCHOOL	EAGLE RUN	100
NEWPORT HIGH SCHOOL 322 NE EADS ST NEWPORT, OR 97365		SCHOOL	ROBOTICS TEAM	300
OAK HEIGHTS ELEMENTARY 605 ELM STREET SWEET HOME,OR 97386		SCHOOL	D ROSS CHRISTMAS	200
OAK HEIGHTS ELEMENTARY 605 ELM STREET SWEET HOME,OR 97386		SCHOOL	2ND GRD D ROSS CHRI	200
OAK HEIGHTS ELEMENTARY 605 ELM STREET SWEET HOME,OR 97386		SCHOOL	REAL WORLD READING	190
OAKRIDGE ELEMENTARY 48119 E FIRST STREET OAKRIDGE,OR 97463		SCHOOL	PROJECT READ	100
OAKRIDGE ELEMENTARY 48119 E FIRST STREET OAKRIDGE,OR 97463		SCHOOL	1ST GRADE WRKBKS	100
OAKRIDGE JRSR HIGH 47997 W 1ST OAKRIDGE,OR 97463		SCHOOL	8TH GRADE PROMOTION	50
PHILOMATH MIDDLE SCHOOL 2021 CHAPEL DRIVE PHILOMATH,OR 97370		SCHOOL	PMS-DRAMA LIGHTS	1,000
PULASKI HIGH SCHOOL 1040 S ST AUGUSTINE STREET PULASKI, WI 54162		SCHOOL	PIZZA WORK	250
REGIS HIGH SCHOOL 550 W REGIS ST STAYTON,OR 97382		SCHOOL	THIRST PROJECT	100
Total			▶ 3a	23,872

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year				
RIDGEWOOD PTC 10100 SW INGLEWOOD ST PORTLAND,OR 97225		OTHER NON- PROFIT	STOCKING STUFFERS	500
ROCK CREEK ELEMENTARY SCHOOL 4125 NW 185TH AVE PORTLAND,OR 97229		SCHOOL	ROCKET RUNNERS 5K	150
SALEM ACADEMY CHRISTIAN SCHOOL 942 LANCASTER DRIVE NE SALEM,OR 97317		SCHOOL	GIRLS BASKETBALL	400
SCAPPOOSE ADVENTIST SCHOOL 54285 COLUMBIA RIVER HWY SCAPPOOSE,OR 97056		SCHOOL	PLAYGROUND FUND	216
SCAPPOOSE HIGH SCHOOL 33700 SE HIGH SCHOOL WAY SCAPPOOSE,OR 97056		SCHOOL	DRAMA CLUB	216
SCAPPOOSE HIGH SCHOOL 33700 SE HIGH SCHOOL WAY SCAPPOOSE,OR 97056		SCHOOL	RM D2 LIFE SKILLS	216
SCHIRLE ELEMENTARY SCHOOL 3875 JUSTICE WAY SOUTH SALEM,OR 97302		SCHOOL	KINDER HEADPHONES	200
SHERIDAN HIGH SCHOOL 433 SOUTH BRIDGE ST SHERIDAN,OR 97378		SCHOOL	LADY SPARTAN SOFTBAL	250
SLATER GRADE SCHOOL 800 N FAIRVIEW BURNS,OR 97720		SCHOOL	MATH MANIPULATOR	300
SLATER GRADE SCHOOL 800 N FAIRVIEW BURNS,OR 97720		SCHOOL	SOC STUD/SCIENCE	200
SLATER GRADE SCHOOL 800 N FAIRVIEW BURNS,OR 97720		SCHOOL	MRS LARDY 5TH GRADE	50
SONSHINE CHRISTIAN SCHOOL 395 MARION STREET SALEM,OR 97301		SCHOOL	LITERACY & MATH CNTR	500
SPRAGUE HIGH SCHOOL 2373 KUEBLER BLVD SE SALEM,OR 97302		SCHOOL	SPRAGUE GIRLS GOLF	750
SPRAGUE HIGH SCHOOL 2373 KUEBLER BLVD SE SALEM,OR 97302		SCHOOL	SPRAGUE GRLS GOLF DK	250
STAYTON ELEMENTARY SCHOOL 875 N THIRD AVENUE STAYTON,OR 97383		SCHOOL	MUSIC EQUIPMENT	460
Total				23,872

Name and address (home or business)  a Paid during the year  STAYTON MIDDLEINTERMEDIATE SCHOOL SCHOOL STAYTON MIDDLEINTERMEDIATE SCHOOLS 1021 SHAFF ROAD STAYTON, OR 97383  SUNSET HIGH SCHOOL 13840 NW CORNELL RD PORTLAND, OR 97229  SWEET HOME CHARTER SCHOOL 28721 LIBERTY RD SWEET HOME, OR 97386  THURSTON HIGH SCHOOL 333 S8TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 S8TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 S8TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 S8TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 S8TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 S8TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 S8TH STREET SPRINGFIELD, OR 97478  WILLAMINA HIGH SCHOOL 100 OAKEN HILLS DRIVE WILLAMINA HIGH SCHOOL 1100 OAKEN HILLS DRIVE WILLAMINA, OR 97396	Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount	
STAYTON MIDDLEINTERMEDIATE SCHOOLS 1021 SHAFF ROAD STAYTON,OR 97383  SUNSET HIGH SCHOOL 13840 NW CORNELL RD PORTLAND, OR 97229  SWEET HOME CHARTER SCHOOL 28721 LIBERTY RD SWEET HOME,OR 97386  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD,OR 97478  WILLAMINA HIGH SCHOOL 333 58TH STREET SPRINGFIELD,OR 97478  WILLAMINA HIGH SCHOOL 130 OAKEN HILLS DRIVE	Name and address (home or business)	any foundation manager	recipient			
SCHOOLS 1021 SHAFF ROAD STAYTON,OR 97383  SUNSET HIGH SCHOOL 13840 NW CORNELL RD PORTLAND,OR 97229  SWEET HOME CHARTER SCHOOL 28721 LIBERTY RD SWEET HOME,OR 97386  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD,OR 97478  WILLAMINA HIGH SCHOOL 1333 58TH STREET SPRINGFIELD,OR 97478  WILLAMINA HIGH SCHOOL 1100 OAKEN HILLS DRIVE	a Paid during the year					
13840 NW CORNELL RD PORTLAND, OR 97229  SWEET HOME CHARTER SCHOOL 28721 LIBERTY RD SWEET HOME, OR 97386  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD, OR 97478  WILLAMINA HIGH SCHOOL 1100 OAKEN HILLS DRIVE	SCHOOLS 1021 SHAFF ROAD		SCHOOL	ROBOTICS	300	
28721 LIBERTY RD SWEET HOME, OR 97386  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD, OR 97478  WILLAMINA HIGH SCHOOL 1100 OAKEN HILLS DRIVE	13840 NW CORNELL RD		SCHOOL	CHOIR-CARNEGIE 2016	350	
333 58TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD, OR 97478  WILLAMINA HIGH SCHOOL 1100 OAKEN HILLS DRIVE	28721 LIBERTY RD		SCHOOL	WASHINGTON DC TRIP	400	
333 58TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD, OR 97478  WILLAMINA HIGH SCHOOL 1100 OAKEN HILLS DRIVE  SCHOOL  CONSTRUCTION  SCHOOL  LEARNING CREATIVITY  SCHOOL  BULLDOG BACKERS	333 58TH STREET		SCHOOL	GILCHRIST- MARKERS	100	
333 58TH STREET SPRINGFIELD, OR 97478  THURSTON HIGH SCHOOL 333 58TH STREET SPRINGFIELD, OR 97478  WILLAMINA HIGH SCHOOL 1100 OAKEN HILLS DRIVE  SCHOOL  BULLDOG BACKERS	333 58TH STREET		SCHOOL	SKILLS USA	100	
333 58TH STREET SPRINGFIELD, OR 97478  WILLAMINA HIGH SCHOOL 1100 OAKEN HILLS DRIVE  SCHOOL BULLDOG BACKERS	333 58TH STREET		SCHOOL	CONSTRUCTION	100	
1100 OAKEN HILLS DRIVE	333 58TH STREET		SCHOOL	LEARNING CREATIVITY	96	
	1100 OAKEN HILLS DRIVE		SCHOOL	BULLDOG BACKERS	100	
Total	Total			№ 3a	23,872	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93491090003226

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

### **TY 2015 Depreciation Schedule**

Name: HELP THE CHARITY

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
SOFTWARE	2010-07-01	4,100	3,690	SL	5 000000000000	410	0		

# TY 2015 Land, Etc. Schedule

Name: HELP THE CHARITY

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
SOFTWARE	4,100	4,100	0	0

#### DLN: 93491090003226

### **TY 2015 Other Expenses Schedule**

Name: HELP THE CHARITY

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LICENSES AND FEES	109	0		0
POSTAGE	135	0		0
CONTRACT LABOR	3,959	0		0
MARKETING	2,021	0		0
SOCIAL MEDIA	324	0		0
MEETINGS	143	0		0
TRAVEL	484	0		0
SUPPLIES	70	0		0

efile GRAPHIC print - DO NOT PROCESS   As Filed Data - DLN: 934910900032
--

# **TY 2015 Substantial Contributors Schedule**

Name: HELP THE CHARITY

Name	Address
FIGARO'S ITALIAN PIZZA INC	1500 LIBERTY ST SE STE 160 SALEM,OR 97302

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491090003226

-N. 3343 1030003220

OMB No 1545-0047

#### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF.
► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

2015

**Employer identification number** 

HELP THE CHARITY		27-2796721
Organization type (che		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
Form 990-PF	√ 501(c)(3) exempt private foundation	
	☐ 501(c)(3) taxable private foundation	
General Rule  For an organiza	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to from any one contributor. Complete Parts I and II. See instructions for determining a contribution of the contribution of the contribution of the contribution.	otaling \$5,000 or more (in money or
Special Rules	, none and continue to the continue of the con	
under sections 50 received from an	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /3% suppr 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II ny one contributor, during the year, total contributions of the greater of <b>(1)</b> \$5,000 or <b>(</b> or (ii) Form 990-EZ, line 1 Complete Parts I and II	l, line 13, 16a, or 16b, and that
during the year, t	tion described in section $501(c)(7)$ , $(8)$ , or $(10)$ filing Form 990 or 990-EZ that received total contributions of more than \$1,000 exclusively for religious, charitable, scientific, on of cruelty to children or animals Complete Parts I, II, and III	
during the year, of this box is checking purpose Do not of	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received contributions exclusively for religious, charitable, etc., purposes, but no such contributed, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the <b>General Rule</b> applies to this organization becausely, etc., contributions totaling \$5,000 or more during the year	utions totaled more than \$1,000 If sively religious, charitable, etc, use it received nonexclusively
Caution. An organization	on that is not covered by the General Rule and/or the Special Rules does not file Scheo	dule B (Form 990,

990-EZ, or 990-PF)

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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990,

Name of organization HELP THE CHARITY Employer identification number 27-2796721

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(c) (d) Total contributions Type of contribution	
1			Person	I
	FIGARO'S ITALIAN PIZZA INC 1500 LIBERT ST SE STE 160	\$ 5,902	Payroll	Γ
	SALEM, OR97302		Noncash	Γ
			(Complete Part II f contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Γ
			Payroll	Γ
		<u> </u>	Noncash	Γ
			(Complete Part II f contributions )	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Γ
		\$	Payroll	Γ
		•	Noncash	Г
			(Complete Part II f contributions )	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Γ
		•	Payroll	Γ
		<u> </u>	Noncash	Г
			(Complete Part II f contributions )	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Г
		•	Payroll	Γ
		<u> </u>	Noncash	Г
			(Complete Part II f contributions )	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Γ
		s	Payroll	Γ
		·	Noncash	Г
			(Complete Part II f contributions )	or noncash

Name of organization HELP THE CHARITY		Employer identification n	Employer identification number	
HELP THE CHARI	I Y	27-2796721		
Part II	Noncas h Property (see instructions) Use duplicate copies of Part II if additional space is needed			
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		s		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		

Schedule B (Form 990, 990-E∠, or 990-PF) (2015)
---

Page 4

<b>Name of organizatio</b> HELP THE CHARITY			oyer identification number 796721
total mo line entr of \$1,000	ely religious, charitable, etc., contribute than \$1,000 for the year from any color. For organizations completing Part or less for the year. (Enter this inforcate copies of Part III if additional space is	one contributor. Complete columns III, enter the total of exclusively rel rmation once. See instructions.) <b>&gt;</b>	s (a) through (e) and the following ligious, charitable, etc., contributions
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, an	(e) Transfer of gift and ZIP4 Rela	ationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, an	(e) Transfer of gift ad ZIP4 Rela	ationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift Transferee's name, address, and ZIP4 Relations		ationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
•	Transferee's name, address, an	(e) Transfer of gift ad ZIP4 Rela	ationship of transferor to transferee