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Form **990-PF** 

#### EXTENDED TO AUGUST 15, 2016 **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. Department of the Treasury Information about Form 990-PF and its separate instructions is at www irs gov/form990pf JUN 9, DEC 31, 2015 2015 and ending For calendar year 2015 or tax year beginning A Employer identification number Name of foundation 47-4432319 LOVE ABOUNDS FOUNDATION Number and street (or P O box number if mail is not delivered to street address Room/suite B Telephone number 300 NORTH VALLEY DR (541) 955-4700 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here GRANTS PASS, OR 97526 X Initial return Initial return of a former public charity G Check all that apply: D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization; E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year J Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here (from Part II, col (c), line 16) 32,688. ▶\$ (Part I, column (d) must be on cash basis Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) Part I (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable purposes (cash basis only) expenses per books income income 264,510. Contributions, gifts, grants, etc., received Check I if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 6 STATEMENT 6. 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 68 Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 264,516. 0. 6. Total. Add lines 1 through 11 0. Compensation of officers, directors, trustees, etc. 0. Other employee salaries and wages 15 Pension plans, employee benefits STMT 2 3,387. 0 3,387. 16a Legal fees RECEIVED **b** Accounting fees c Other professional fees 17 Interest 1 6 2016 AUG 18 Taxes Depreciation and depletion 19 20 <del>ooder</del> 21 Travel, conferences, and meetings 22 Printing and publications STMT 3 2,065. 0. 0. 2,065. 23 Other expenses 24 Total operating and administrative 5,452 0. 0 5,452. expenses. Add lines 13 through 23 226,526 226,526. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 231,978 0. 0. 231,978. Add lines 24 and 25 27 Subtract line 26 from line 12: 32,538 8 Excess of revenue over expenses and disbursements 6. b Net investment income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

C Adjusted net income (if negative, enter -0-)

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0.

Forn	1 990-PF (2015) LOVE ABOUNDS FOUNDATION	<u>47</u>	<u>-443</u>	<u>2319</u>		Page 4
Pa	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see	instru	ction	s)
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)	- 1				_
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1				0.
	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).	1.	1 -			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	·			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	Щ_			0.
6	Credits/Payments;	İ	1			
8	2015 estimated tax payments and 2014 overpayment credited to 2015	<b>-</b> 1	ĺ			
b	Exempt foreign organizations - tax withheld at source	_				
C	Tax paid with application for extension of time to file (Form 8868)	<b>-</b>	İ			
d	Backup withholding erroneously withheld 6d	<b>⊣</b>	-	-		
	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 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<u> </u>				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<u> </u>				
	Enter the amount of line 10 to be: Credited to 2016 estimated tax	<u>►   1</u> 1	Щ	<del></del>		
	art VII-A Statements Regarding Activities				157	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervi	ene in		<b> </b>	res	No
	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 definit	•		1b	<del> </del>	Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publis	hed or				
	distributed by the foundation in connection with the activities			1	l	
	Did the foundation file Form 1120-POL for this year?			1c	<del> </del>	X
0	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			1		i
		<u>.</u>				1
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 0 •			1		1
				1	-	X
Z	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		
•	If "Yes," attach a detailed description of the activities					i
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	, 01		١.		v .
4.	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  Did the foundation have unrelated business gross income of \$1,000 or more during the year?			3 4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	48		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		.,,	5		X
v	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			J		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the st	ate law		1		
	remain in the governing instrument?			6	х	
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	χv		7	X	
		••				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				1	
	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	Х	_
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calculations are section 4942(j)(3) or 4942(j)(5) for calculations are section 4942(j)(3) or 4942(j)(5) for calculations are section 4942(j)(3) or 4942(j)(5) for calculations are section 4942(j)(3) or 4942(j)(5) for calculations are section 4942(j)(3) or 4942(j)(5) for calculations are section 4942(j)(3) or 4942(j)(5) for calculations are section 4942(j)(3) or 4942(j)(5) for calculations are sections are sections are sections as a private operation of the section 4942(j)(3) or 4942(j)(4) for calculations are sections are sections are sections are sections are sections as a section 4942(j)(4) for calculations are sections at the section of the	alendar				
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	STM		10	X	
			Fr	orm <b>990</b>	PF	(2015)

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Part VII-B   Statements Regarding Activities for Which F	orm 4/20 May be H	equirea (contin	ued)	<del></del>	_
5a During the year did the foundation pay or incur any amount to:					
(1) ,Carry on propaganda, or otherwise attempt to influence legislation (section			es X No		,
(2) Influence the outcome of any specific public election (see section 4955); or	r to carry on, directly or indire				
any voter registration drive?			es X No	1 1	
(3) Provide a grant to an individual for travel, study, or other similar purposes'	?	Yo	es X No	1 1	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section	_	_ 1		1
4945(d)(4)(A)? (see instructions)		Yo	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or	ļ	1 1	
the prevention of cruelty to children or animals?		Y	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations	J		
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b	
Organizations relying on a current notice regarding disaster assistance check hi			▶□ [		_
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ned			
expenditure responsibility for the grant?			es 🔲 No	] [	
If "Yes," attach the statement required by Regulations section 53 4945		,		1 1	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to j					
a personal benefit contract?	, p. c		es X No	1 1	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal henefit contract?	··		6b X	
	orsonal bonom contidor			<del>"</del>	٦
If "Yes" to 6b, file Form 8870  7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?		es X No		-{
b. If "Yes," did the foundation receive any proceeds or have any net income attribu		''		7b	'
Part VIII Information About Officers, Directors, Truste		pagers Highly	+17.44	<del>/**</del>	-
Paid Employees, and Contractors	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
1 List all officers, directors, trustees, foundation managers and their of	compensation.	· <del></del> · ·			-
<del></del>	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense	-
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances	r
<del></del>	to position	entero-j	compensation	anowances	-
			j		
SEE STATEMENT 5		0.	0.	0.	
DEE DIATEMENT 5		<del>                                     </del>	<del>-</del>		_
	1				
	<del></del>	<del></del>			-
		Į l			
					_
<del></del>					
2 Compensation of five highest-paid employees (other than those incl	uded on line 1). If none	enter "NONE "	L		_
2 Compensation of tive highest-paid employees fourer trial trose inc	(b) Title, and average	enter NONE.	(d) Contributions to	(e) Expense	-
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	account, other	ſ
MONE	devoted to position	<del></del>	compensation	allowances	_
NONE					
<del></del>		ļ			_
		<u> </u>			_
		[			
		ļ			_
	1		l		
		ļ			_
		1			_
Total number of other employees paid over \$50,000				0	_
			Form	990-PF (2015	)

Part X   Asi:		TJZJTJ rage (
Minimum Investment Return (All domestic foundations must complete the	lete this part. Foreign foundations, see	nstructions.)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purp	oses:	
Average monthly fair market value of securities	1a	0.
b Average of monthly cash balances	1b	19,502
c Fair market value of all other assets	10	
d Total (add lines 1a, b, and c)	10	19,502
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0
3 Subtract line 2 from line 1d	3	19,502
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instruc	tions) 4	293
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line		19,209
6 Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TA		542
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) priv		
foreign organizations check here   and do not complete this part.)		
1 Minimum investment return from Part X, line 6	1 1	542
2a Tax on investment income for 2015 from Part VI, line 5		
b Income tax for 2015. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2c	0
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	542
4 Recoveries of amounts treated as qualifying distributions	4	0
5 Add lines 3 and 4	5	542
6 Deduction from distributable amount (see instructions)	6	0
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	542
Part XII Qualifying Distributions (see instructions)		
	····	
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		004 050
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	<u>1a  </u>	231,978
b 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., pur	poses 2	
3 Amounts set aside for specific charitable projects that satisfy the:	1 1	
a Suitability test (prior 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	231,978
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	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	_231,978.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculated 4940(e) reduction of tax in those years.	ting whether the foundation qualifies for the	e section
TOTO(6) Teduction of tax in those years.		

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	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,	Сограс	100.0 p.10. to 20.1		542.
line 7				342
2 Undistributed income, if any, as of the end of 2015			0.	
a Enter amount for 2014 only			<del></del>	<del></del>
b Total for prior years;		0.		
3 Excess distributions carryover, if any, to 2015:	<del></del>			
a From 2010				
b From 2011			}	
c From 2012				
d From 2013			}	
e From 2014				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ►\$ 231,978.	J	}		
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)	<u> </u>	0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				542.
e Remaining amount distributed out of corpus	231,436.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a) )	0.			0.
6 Enter the net total of each column as indicated below:				
Corpus Add lines 3f, 4c, and 4e Subtract line 5	231,436.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	1			
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010	ا م			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	231,436.			
	231,430.		<del></del>	
0 Analysis of line 9: a Excess from 2011				
b Excess from 2012	ļ		1	
c Excess from 2013				
d Excess from 2014		j	J	

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e Excess from 2015

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231,436.

Form 990-PF (2015) LOVE AB Part XIV Private Operating Form	OUNDS FOUND	ATION	A guestion (1)	17-44 N/A	32319 Page 10
			-A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective for	•			1040(3/2) 25 14	040(4)(5)
<b>b</b> Check box to indicate whether the found		ig foundation described	Prior 3 years	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
income from Part I or the minimum	(a) 2013	(8) 2014	(0) 2010	(4) 2012	(e) rotar
investment return from Part X for				}	
each year listed	<del></del>			<del></del>	<del> </del>
<b>b</b> 85% of line 2a		ļ <del></del>	<del> </del>	<del></del>	<del> </del>
c Qualifying distributions from Part XII,					
line 4 for each year listed	ļ <del></del>			<del></del>	<del> </del>
d Amounts included in line 2c not	ł				1
used directly for active conduct of					
exempt activities	<u> </u>		<del> </del>	<del> </del>	<del> </del>
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)	ļ		<del> </del>	<u> </u>	<del> </del>
<ul> <li>"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed</li> </ul>					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization	ļ				
(4) Gross investment income  Part XV   Supplementary Info	ranation (Commis	la Albia mart ambri	f the foundation	had \$5 000 ar mai	
Part XV   Supplementary Info at any time during to			t the foundation	nad \$5,000 or moi	e in assets
Information Regarding Foundatio     List any managers of the foundation who year (but only if they have contributed means to the second s	o have contributed more		ributions received by the	foundation before the clos	e of any tax
TRAVIS BOERSMA					
<b>b</b> List any managers of the foundation who other entity) of which the foundation has			or an equally large portion	on of the ownership of a pa	rtnership or
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
				ot accept unsolicited requi	
the foundation makes gifts, grants, etc.					<u>a.                                    </u>
a The name, address, and telephone numb	per or e-mail address of t	ne person to whom appli	cations should be addres	sed:	
SEE STATEMENT 6					
b The form in which applications should b	e submitted and informat	ion and materials they el	rould include:		<del></del>
b the form in which applications should b	e submitted and informat	ion and materials they si	iodio incidue.		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographica	l areas, charitable fields,	kinds of institutions, or o	other factors:	
523601 11-24-15			<del></del>	<del></del>	Form <b>990-PF</b> (2015)
		11			
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3 Grants and Contributions Paid During the Ye	ear or Approved for Future P	ayment		
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
Paid during the year				
,	!			}
				ĺ
SEE ATTACHED SCHEDULE				
				226,526.
	<b>j</b>			
	}	ı		
		ı		
	}			
	}			
	<del>                                     </del>			
				!
<del></del>				
			:	
Total			<b>▶</b> 3a	226,526.
<b>b</b> Approved for future payment				
NONE				
	]		ļ	
	]			
Total			<b>▶</b> 3b	0.

r gross amounts unless otherwise indicated.	Unrelated t	ousiness income		ded by section 512, 513, or 514	(e)
gross amounts amoss outer most maiotica;	(a) Business	(b)	(c)	(d)	Related or exemp
dragram capuca ravanua	Business code	Amount	sion	Amount	function income
rogram service revenue;					
				<u> </u>	
	l i		<del>                                     </del>		
	<del></del>				
Fees and contracts from government agencies	<del>                                     </del>		-		
embership dues and assessments	<del></del>				
terest on savings and temporary cash			14	6.	
vestments			14		<del>-</del> -
vidends and interest from securities	<del> </del>		-	<del></del>	
et rental income or (loss) from real estate:					
Debt-financed property					
Not debt-financed property					
et rental income or (loss) from personal					
operty					<u> </u>
her investment income					
ain or (loss) from sales of assets other					
an inventory					
et income or (loss) from special events					
ross profit or (loss) from sales of inventory					
ther revenue:					
	1 1				
	1 1				
		0.		6.	
ubtotal. Add columns (b), (d), and (e)		0.			
ubtotal. Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e)		0.			
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	s.)		emnt	13	
	s.)		empt	13	
ubtotal. Add columns (b), (d), and (e)  otal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculation  rt XVI-B Relationship of Activitie	s.)	plishment of Ex		Purposes	
ubtotal. Add columns (b), (d), and (e)  otal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculation  rt XVI-B Relationship of Activitie  No. Explain below how each activity for which	s.) es to the Accom	plishment of Excolumn (e) of Part XVI-A		Purposes	
ubtotal. Add columns (b), (d), and (e)  Notal. Add line 12, columns (b), (d), and (e)  Notal. Add line 12, columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add line 12, columns (b), (d), (d), and (e)  Notal. Add line 12, columns (b), (d), (d), (d), (d), (d), (d), (d), (d	s.) es to the Accom	plishment of Excolumn (e) of Part XVI-A		Purposes	
ubtotal. Add columns (b), (d), and (e)  Notal. Add line 12, columns (b), (d), and (e)  Notal. Add line 12, columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add columns (b), (d), and (e)  Notal. Add line 12, columns (b), (d), (d), and (e)  Notal. Add line 12, columns (b), (d), (d), (d), (d), (d), (d), (d), (d	s.) es to the Accom	plishment of Excolumn (e) of Part XVI-A		Purposes	
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523621 11-24-15

Form 990	)-PF (20	D15) LOVE	ABOUNDS 1	FOUNDAT:	ION _				432319	Pa	age 13
Part 2		Information Re		nsfers To a	nd Trans	actions a	and Relations	hips With Nonc	haritable		
		Exempt Organ						504( ) . (		Yes	l Nia
		ganization directly or indi						tion 501(c) of	1	res	NO
		other than section 501(c)				pontical orga	mzauons?				
		from the reporting founda	ation to a noncharit	able exempt ort	gamzanon or.				1a(1)		х
٠,,	Cash								1a(2)		X
	Other								10(2)		1
-		sactions; of assets to a noncharita	hla evemnt organiz	ation					16(1)		x
		ases of assets from a no							1b(2)		X
٠,		l of facilities, equipment,	•	organization					16(3)	-	X
٠,		oursement arrangements							1b(4)		X
		or loan guarantees							1b(5)		X
		rmance of services or me	mbership or fundra	aisina solicitatio	ns				1b(6)		Х
, ,		facilities, equipment, ma		=					1c		Х
		ver to any of the above is				(b) should a	lways show the fair	market value of the go	ods, other ass	ets,	
		s given by the reporting fo									
col	um <u>n (</u> d	) the value of the goods,	other assets, or se	rvices received.		_					
(a) Line n	•	(b) Amount involved	(c) Name	of noncharitable	e exempt orga	nization	(d) Descriptio	n of transfers, transactions	s, and sharing arr	ngemer	nts
				N/A				<del> </del>			
								<del></del>			
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2a  s1	he four	idation directly or indirec	tlv affiliated with, o	r related to, one	or more tax-	exempt organ	izations described		···		
		501(c) of the Code (other	•						Yes	X	No
b_lf_"	Yes," co	mplete the following sch	edu <u>le.</u>								
		(a) Name of org	ganization		(b) Type of	organization		(c) Description of rela	ationship		
		N/A			I						
							ļ				
							<del> </del>				
		<del></del>	<del> </del>		<u> </u>	<del></del>					
6:		penalties of perjury, I declare t liter, it is true, correct, and com							May the IRS o	scuss t	nis
Sign Here					al	10111	DIBEC	TOD	shown below	see inst	r )?
	Sugar	ature of office or trustee				13/16	DIREC!	IOR	_ X Yes		」No 
	Sign	Print/Type preparer's na		Preparer's s	Date		Date	Check   if	PTIN		
		Tring type proparer 5 no	41110	1 Topardi 5 5	igriator v			self- employed	• • • • • • • • • • • • • • • • • • • •		
Paid		WENDY CAMP	os	WENDY	CAMPOS		07/12/16		P00448	102	
Prepa	arer	Firm's name ► MOS			<del>_</del>			Firm's EIN ▶ 91	-01893	18	
Use (										-	

Phone no. 503-242-1447
Form 990-PF (2015)

15350712 146892 637979

Firm's address ▶ 805 SW BROADWAY STE 1200

PORTLAND, OR 97205

### Schedule B

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

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 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>.

OMB No 1545-0047

2015

Name of the organization

Employer identification number

LC	OVE ABOUNDS FOUNDATION	47-4432319				
Organization type (check o	ne)					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e. See instructions.				
General Rule						
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's					
Special Rules						
sections 509(a)(1) a any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, c r, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amoun line 1. Complete Parts I and II.	or 16b, and that received from				
year, total contribu	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.					
year, contributions is checked, enter h purpose Do not co	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 totaling \$5,000 or more during the year					
but it must answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fo the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	•				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Employer identification number

# LOVE ABOUNDS FOUNDATION

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	(d) Type of contribution
1	AARON EASTMAN  3794 COMMERICAL ST  SE SALEM, OR 97306	\$7,375.	Person X Payroll  Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ANDREW RANDALL  1303 N 39TH ST.  NAMPA, ID 83687	\$5,774.	Person X Payroll  Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	BILL SMITH  1143 NE 3RD STREET  BEND, OR 97701	\$5,940.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	BOERSMA BROS, LLC PO BOX 1929 GRANTS PASS, OR 97528	\$57,700.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	CALEB BERKEY  PO BOX 14781  SCOTTSDALE, AZ 85267	\$6,673.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	CHRIS STEWART  4660 MAIN STREET BLDG. D STE 660  SPRINGFIELD, OR 97478	\$10,000.	Person X Payroll

Employer identification number

# LOVE ABOUNDS FOUNDATION

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	(d) Type of contribution
7	DAN RICHARDSON  1733 ESPLANADE  CHICO, CA 95926	\$6,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	JEFF YARNALL		Person X
	510 S WOODHAVEN AVE MERIDIAN, ID 83642	\$7,972.	Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	JIM THOMPSON  27915 N 100TH PLACE  SCOTTSDALE, AZ 85262	\$18,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	JONAH BOERSMA  4085 W 11TH AVE STE 1  EUGENE, OR 97402-2982	\$ <u>10,000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	KENNY STROMER  5700 E FOURTH PLAIN BLVD  VANCOUVER, WA 98661	\$5,245.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	· ·	, ,	Type of contribution  Person X
No.	Name, address, and ZIP + 4	, ,	Type of contribution

Employer identification number

T.OVE	ABOUNDS	FOUNDATIO	N

Partil	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	(d) Type of contribution
13	TRAVIS BOERSMA  PO BOX 1929  GRANTS PASS, OR 97528	\$7,635.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14	TY SULLIVAN  5310 BOUNTY LANE  CENTRAL POINT, OR 97502	\$9,455.	Person X Payroll  Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15	YARNALL OPERATIONS, LLC  510 S. WOODHAVEN AVE  MERIDIAN, ID 83642	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(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
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

# LOVE ABOUNDS FOUNDATION

Part II	Noncash Property (see instructions). Use duplicate copies of Pai	t 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		
		\\$			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
3453 10-26-1		Schodulo P (Form 6	90, 990-EZ, or 990-PF) (2		

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF INTEREST ON SAV	INGS AND TEM	PORARY CASH I	NVESTMENTS	STATEMENT 1				
SOURCE	(A REVE PER B	NUE NET I	(B) NVESTMENT NCOME	(C) ADJUSTED NET INCOME				
BANNERBANK #0767	<del></del>	6.	6.	6.				
TOTAL TO PART I, LINE 3		6.	6.	6.				
FORM 990-PF	LEGAL	FEES		STATEMENT 2				
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME						
LEGAL FEES	3,387.	0.	0	3,387.				
TO FM 990-PF, PG 1, LN 16A	3,387.	0.	0	3,387.				
FORM 990-PF	OTHER E	XPENSES		STATEMENT 3				
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES				
OTHER COSTS BOOKS, SUBSCRIPTIONS,	670.	0.	0	. 670.				
REFERENCE BUSINESS REGISTRATION FEES	1,245. 150.	0. 0.	0					
TO FORM 990-PF, PG 1, LN 23	2,065.	0.	0	. 2,065.				

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT 4
NAME OF CONTRIBUTOR	ADDRESS	
JEFF YARNALL	510 S WOODHAVEN AVE MERIDIAN, ID 83642	
ANDREW RANDALL	1303 N 39TH ST. NAMPA, ID 83687	
JIM THOMPSON	27915 N 100TH PLACE SCOTTSDALE, AZ 85265	
CALEB BERKEY	PO BOX 14781 SCOTTSDALE, AZ 85267	
DAN RICHARDSON	1733 ESPLANADE CHICO, CA 95926	
AARON EASTMAN	3794 COMMERICAL ST SE SALEM, OR 97306	
TY SULLIVAN	5310 BOUNTY LANE CENTRAL POINT, OR 97502	
BOERSMA BROS, LLC	PO BOX 1929 GRANTS PASS, OR 97528	
TRAVIS BOERSMA	PO BOX 1929 GRANTS PASS, OR 97528	
BILL SMITH	1143 NE 3RD STREET BEND, OR 97701	
JONAH BOERSMA	4085 W 11TH AVE STE 1 EUGENE, OR 97402	
CHRIS STEWART	4660 MAIN STREET BLDG. D SPRINGFIELD, OR 97478	STE 660
KERRY & KEVIN PARKER	402 W. 2ND AVE. SPOKANE, WA 99201	

	- LIST OF OFFICERS, I ES AND FOUNDATION MANA		STATEMENT 5				
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE			
TRAVIS BOERSMA 300 NORTH VALLEY DR GRANTS PASS, OR 97526	DIRECTOR/PRESI	IDENT 0.	0.	0.			
BRANT BOERSMA 300 NORTH VALLEY DR GRANTS PASS, OR 97526	DIRECTOR 1.00	0.	0.	0.			
BRIAN MAXWELL 300 NORTH VALLEY DR GRANTS PASS, OR 97526	DIRECTOR/SECRE 1.00	ETARY 0.	0.	0.			
CHRISTINE SCHMIDT 300 NORTH VALLEY DR GRANTS PASS, OR 97526	DIRECTOR 1.00	0.	0.	0.			
AMBER BOERSMA 300 NORTH VALLEY DR GRANTS PASS, OR 97526	DIRECTOR 1.00	0.	0.	0.			
JENNIFER WHEATLEY 300 NORTH VALLEY DR GRANTS PASS, OR 97526	DIRECTOR 19.00	0.	0.	0.			
TOTALS INCLUDED ON 990-PF,	PAGE 6, PART VIII	0.	0.	0.			

FORM 990-PF

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

STATEMENT 6

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

JENNIFER WHEATLEY 300 NORTH VALLEY DR GRANTS PASS, OR 97526

TELEPHONE NUMBER

541-955-4700

#### FORM AND CONTENT OF APPLICATIONS

UPON INVITATION, APPLICANTS ARE REQUIRED TO SUBMIT TAX ID NUMBER AND DESCRIPTION OF THEIR PROGRAM. NO FORM IS REQUIRED TO BE SUBMITTED.

#### ANY SUBMISSION DEADLINES

ROLLING DEADLINE - APPLICATIONS BY INVITATION ONLY

#### RESTRICTIONS AND LIMITATIONS ON AWARDS

AWARDS ARE NOT GIVEN TO POLITICAL OR RELIGION-BASED ORGANIZATIONS. AWARDING IS FOCUSED ON THE SEVEN STATES IN WHICH DUTCH BROS. COFFEE CURRENTLY EXISTS. ADDITIONALLY, AWARDS MAY INCLUDE PHILANTHROPY THAT ENCOMPASSES DUTCH BROS. COFFEE SUPPLY LINE, SUCH AS COFFEE BEANS, DAIRY, ETC., WHICH HAPPENS IN DIVERSE LOCATIONS.

# Love Abounds Foundation Transaction Detail By Account January through December 2015

EIN# 47-4432319

LOVE ABOUNDS FOUNDATION Grants & Contributions

11 14 AM 04/27/16 Accrual Basis FORM 990-PF, PART XV, LINE 3a - GRANTS AND CONTRIBUTIONS

Date	Organization	Address	Status	Purpose	Amount
12/08/2015	ARCH	1550 W Colter St, Phoenix AZ 85015	2	To fulfill young people's educational expenence and promote their wellbeing	24,173
12/22/2015	Boys & Girls Club of Ada County	Attn Colleen Braga 610 E 42nd St Garden City, ID	5	To fulfill young people's educational expenence and promote their wellbeing	7,972
12/31/2015	Boys & Girls Club of Ada County	Attn Colleen Braga 610 E 42nd St Garden City, ID	5	To fulfil young people's educational expenence and promote their wellbeing	8,300
12/22/2015	Boys & Girls Club of Albany	1215 Hill St SE Albany, OR 97322	PC	To fulfill young people's educational expenence and promote their wellbeing	2,411
12/15/2015	Boys & Girls Club of Benton and Franklin	Attn Bnan Ace 801 N 18th Ave Pasco, WA	PC	To fulfil young people's educational experience and promote their wellbeing	851
12/22/2015	Boys & Girls Club of Benton and Franklin	Attn Bnan Ace 801 N 18th Ave Pasco, WA	5	To fulfill young people's educational experience and promote their wellbeing	4,432
12/15/2015	Boys & Girls Club of Koatenai County	200 W Mullan Ave, Post Falls, ID 83854	5	To fulfil young people's educational experience and promote their wellbeing	1,500
12/15/2015	Boys & Girls Club of Lewis-Clark Valley	1021 Burrell Ave, Lewiston, ID 83501	5	To fulfill young people's educational expenence and promote their wellbeing	1,713
12/22/2015	Boys & Girls Club of Nampa	Attn Brad Beckwith 316 Stampede Dr Nampa, ID	PC	To fulfill young people's educational expenence and promote their wellbeing	5,774
12/15/2015	Boys & Girls Club of Pikes Peak Region	102 E Pikes Peak Ave #500, Colorado Springs, CO 80903	S	To fulfill young people's educational expenence and promote their wellbeing	3,532
12/22/2015	Boys & Girls Club of Portland	Attn Melissa Froman 8203 SE 7th Ave, Ste 100 Portland, OR	S	To fulfill young people's educational expenence and promote their wellbeing	1,917
12/22/2015	Boys & Girls Club of Sonoma	100 W Verano Ave Sonoma, CA 95476	5	To fulfill young people's educational experience and promote their wellbeing	250
12/15/2015	Boys & Girls Club of SW Washington	4040 Plomondon St, Vancouver, WA 98661	δ	To fulfill young people's educational expenence and promote their wellbeing	5,245
12/22/2015	Boys & Girls Club of the Greater Santiam	305 S 5th Street Lebanon, OR 97355	5	To fulfill young people's educational expenence and promote their wellbeing	1,503
12/31/2015	Boys & Girls Club of the Redwoods	939 Hams Avenue Eureka, CA 95503	2	To fulfill young people's educational expenence and promote their wellbeing	1,684
12/15/2015	Boys & Girls Club of The Rogue Valley	Attn Diann Gilbertson 203 SW 9th Street Grants Pass, OR	5	To fulfill young people's educational experience and promote their wellbeing	5,477
12/15/2015	Boys & Girls Club of The Rogue Valley	Attn Diann Gilbertson 203 SW 9th Street Grants Pass, OR	5	To fulfill young people's educational experience and promote their wellbeing	625
12/22/2015	Boys & Girls Club of The Rogue Valley	Attn Diann Gilbertson 203 SW 9th Street Grants Pass, OR	PC	To fulfill young people's educational expenence and promote their wellbeing	9,455
12/23/2015	Boys & Girls Club of Umpqua Valley	Ath Came Boothe 1144 NE Cedar St Roseburg, OR	5	To fulfill young people's educational experience and promote their wellbeing	3,322
12/15/2015	Boys & Girts Club of W Treasure Valley	573 SW 3rd Ave, Ontario, OR 97914	PC	To fulfill young people's educational expenence and promote their wellbeing	3,760
12/22/2015	Boys & Girls Club	Attn Sarah Murphy 801 N 18th Ave Pasco WA	2	To fulfill young people's educational expenence and promote their wellbeing	2,862
12/15/2015	Boys and Girts Club of Magic Valley	999 Fronter Rd, Twin Falls, ID 83301	S.	To fulfil young people's educational expenence and promote their wellbeing	2,200
12/15/2015	Boys and Girls Club of SW Oregon	3333 Walnut Ave Coos Bay, OR 97420	S	To fulfill young people's educational experience and promote their wellbeing	1,750
12/15/2015	Boys and Girls Club of Western Nevada	1870 Russell Way, Carson City NV 89706	5	To fulfill young people's educational expenence and promote their wellbeing	1,300
12/22/2015	Brookings-Harbor Education Foundation	PO Box 4294 Brookings, OR 97415	გ	To fuffil young people's educational experience and promote their wellbeing	1,000
12/15/2015	CalServes	5789 State Farm Drive Rohnert Park, CA, 94928	5	To fuffill young people s educational experience and promote their wellbeing	1,124
12/22/2015	Camp Belong	Karyn Schimmels PO Box 366 Salem, OR	8	To fulfill young people's educational experience and promote their wellbeing	1,915
12/15/2015	Centralia Salvation Army	303 N Gold St, Centralia, WA 98531	PC	To fulfill young people's educational expenence and promote their wellbeing	746
12/22/2015	Chelan-Douglas CASA	Attn Susan Baker PO Box 2027 Wenatchee, WA	2	To fulfill young people's educational expenence and promote their wellbeing	2,586
12/15/2015	Children's Justice and Advocacy Center	214 N Pacific Ave, Kelso, WA 98626	S	To fulfill young people's educational experience and promote their wellbeing	800
12/15/2015	Children's Village	3801 Kem Rd Yakıma WA 98902	2	To fulfill young people's educational experience and promote their wellbeing	069
12/15/2015	Christmas Wish	500 W Boone Ave Spokane, WA 99201	5	To fulfill young people's educational expenence and promote their wellbeing	8,033
12/15/2015	CROW	PO Box 184 Flarence, OR 97439	PC	To fulfil young people's educational expenence and promote their wellbeing	765
12/15/2015	Danner Farms	1900 S Main St Milton Freewater, OR 97862	8	To fulfill young people's educational experience and promote their wellbeing	577
12/22/2015	Delta First 5	Attn Lynette 760 1st St Brentwood, CA	8	To fulfill young people's educational expenence and promote their wellbeing	775
12/31/2015	Elk Grove Teen Center	8978 Elk Grove Blvd Elk Grove, CA 95624	გ	To fulfill young people's educational experience and promote their wellbeing	1,800
12/22/2015	EMQ Families First	FCAS Program 2150 Fifth Street Davis CA	5	To fulfill young people's educational experience and promote their wellbeing	4,000
12/31/2015	Excel Roseville	313 High St. Roseville, CA 95678	5	To fulfill young people's educational expenence and promote their wellbeing	952
12/15/2015	Fairfield PAL/Matt Garcia Youth Center	2195 Union Ave, Fairfield, CA 94533	S	To fulfill young people's educational experience and promote their wellbeing	1,627
12/22/2015	Families First	Attn Heidi Venture 965 Tucker Rd Hood River, OR	8	To fulfill young people's educational expenence and promote their wellbeing	1,776
12/15/2015	Food For All	1877 Hooker Oak Ave Chico CA 95926	ጸ	To fulfill young people's educational experience and promote their wellbeing	6,000
12/15/2015	Friends of Children of Walla Walla	120 E Birch St # 10, Walla Walla, WA 99362	2	To fulfill young people's educational expenence and promote their wellbeing	812

# Love Abounds Foundation Transaction Detail By Account January through December 2015

11 14 AM 04/27/16 Accrual Basis

4,089	6,000	5,940	1,013	006	829	3,461	1,000	1,207	2,040	773	4,800	2,064	10,000	792	4,308	842	111	1,800	10,000	10,000	1,050	200	2,350	800	5,000	1,600	4,270
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5716 Folsom Blvd #193 Sacramento, CA 95819	830 NE 9th St Grants Pass, OR 97526	1029 NW 14th Street, Suite 102 Bend, OR 97701	PO Box 284 Hermiston, OR 97838	976 SW Hayter St. Dallas, OR 97338	PO Box 3091 La Grande, Oregon 97850	2685 4th St NE Salem, OR 97301	301 S Main St , Independence OR 97351	650 N Cleveland St Moscow, ID 83843	634 US-101 Depoe Bay, OR 97341	840 E Plum St, Moses Lake, WA 98837	Attn Janet Garnson PO Box 1604 Lake Oswego OR	701 N Pecos Rd Las Vegas Nevada 89101	801 Riverside Dr Suite 6G New York, NY 10032	Attn Cheryl Engstrom PO Box 625 Scappoose, OR	101 SW Market St Portiand, OR 97201	101 SW Market St Portland, OR 97201	Attn Jay Tappan 270 Columbia Blvd St Helens, OR	104 E Central Ave, Sutherlin, OR 97479	3690 W 1st Ave, Eugene, OR 97402	3690 W 1st Ave, Eugene, OR 97402	9000 S W Durham Rd Tigard, OR 97224	1255 Pacific Ave, Forest Grove, OR 97116	18251 Quantico Gateway Dr Tnangle, VA 22172-1776	780 Lincoln Ave Napa, CA 94558	13600 W Mcmillan Rd, Boise, ID 83713	766 15th Ave, Longview, WA 98632	922 NW Circle Blvd Ste 160 PMB 316 Corvalits OR
Getty Ow Foundation	Grants Pass High School	Healthy Beginnings	Hermiston High Sports Boasters	Kids Inc. of Dallas	LaGrande Optimist Club	Liberty House	Monmouth YMCA	Moscow Schools "Backapack for Kids"	Neighbors for Kids	New Hope	Northwest Children's Outreach	Peggy's Attic at Child Haven	Project A L S	Scappoose Volunteer Firefighters Assoc	SMART	SMART	St. Helens Toy N' Joy	Sutherlin Community Resource Center	The Pearl Buck Center	The Pearl Buck Center	Tigard-Tualatin Canng Closet	Tom Mcall Upper Elementary	Toys for Tots	Voices	Lowell Scott Middle School	YMCA of SW Washington	Young Life Mid-Valley
12/15/2015	12/08/2015	12/22/2015	12/15/2015	12/15/2015	12/15/2015	12/22/2015	12/15/2015	12/15/2015	12/15/2015	12/15/2015	12/22/2015	12/15/2015	10/26/2015	12/22/2015	12/15/2015	12/15/2015	12/23/2015	12/15/2015	12/15/2015	12/22/2015	12/15/2015	12/15/2015	12/22/2015	12/22/2015	09/24/2015	12/15/2015	12/23/2015