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OMB No 1545-0052

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 $\underline{www.irs.gov/form990pf}$.

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015							
	e of four	ndation JNDATION			A Employer ide	entification numbe	er
OL.	OKT TOC	SNDAI ION			72-1574570		
		street (or P O box number if mail is i	not delivered to street address)	Room/suite	B Telephone nur	nber (see instruction	s)
Р (D BOX 23	30939			(503) 585-1782		
	or town, RD, OR	state or province, country, and ZIP o 97281	r foreign postal code		C If exemption	application is pendin	g, check here 🕨 🦵
G CI	neck al	I that apply Tinitial return	Initial return of a fo	ormer public charity	B.1 Foreign or	annizatione about b	
		Final return Address chang	A mended return	,	2. Foreign or	ganizations, check he ganizations meeting k here and attach co	the 85%
H Ch	eck ty	pe of organization 🔽 Section 1947(a)(1) nonexempt charitat	ole trust 「Other taxable	e private foundation	E If private for under section	indation status was t n 507(b)(1)(A), chec	erminated
		et value of all assets at end rom Part II, col. (c),	JAccounting method Other (specify)	✔ Cash Accrual	F II the lounus	ition is in a 60-montl n 507(b)(1)(B), chec	
		\$ 2,629,308	(Part I, column (d) must	be on cash basıs.)	under section	1 307(0)(1)(0), chec	K Here
Pa	rt I	Analysis of Revenue a (The total of amounts in columns (necessarily equal the amounts in co instructions))	b), (c), and (d) may not	Revenue and expenses per (a) books	Net investment (b) income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)
	1	Contributions, gifts, grants, e	tc , received (attach				(, (,)
		schedule)		2,523,025			
	2	Check F 🗀 If the foundation	is not required to attach				
		'					
	3	Interest on savings and temp	orary cash investments	39	39	39	
	4	Dividends and interest from s	ecurities	41,865	41,865	41,865	
	5a	Gross rents					
	ь	Net rental income or (loss) _					
₹	6a	Net gain or (loss) from sale o	fassets not on line 10	2,773,594			
Revenue	b	Gross sales price for all asse 4,059,045	ts on line 6a				
	7	Capital gain net income (from	Part IV, line 2)		2,773,594		
	8	Net short-term capital gain .					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold.					
	С	Gross profit or (loss) (attach	•				
	11	Other income (attach schedu	•				
	12	Total.Add lines 1 through 11		5,338,523	2,815,498	41,904	
	13	Compensation of officers, dire Other employee salaries and					
	14 15	Pension plans, employee ben					
Ř	16a	Legal fees (attach schedule).		% 30,607	30,607		
Expenses	ь	Accounting fees (attach sche		3,000	3,000		
Ë	٥	Other professional fees (atta		95. 45,702	45,702		
₽	17	Interest		15,702	13,702		
rat	18			18,512	18,512		
¥	19	Taxes (attach schedule) (see Depreciation (attach schedul	·	,			
Administrative	20	Occupancy					
4	21	Travel, conferences, and mee					
and	22	Printing and publications	_				
	23	Other expenses (attach sche		1,838	1,838		
ğt III	24	Total operating and administ		_			
Operating	- :	Add lines 13 through 23	-	99,659	99,659		o
ŏ	25	Contributions, gifts, grants pa		3,215,000			3,215,000
	26	Total expenses and disbursen					
		25		3,314,659	99,659		3,215,000
	27	Subtract line 26 from line 12					
	a .	Excess of revenue over exper		2,023,864	2.745.020		
	b c	Net investment income (If near Adjusted net income(If negat			2,715,839	41,904	
		, actor income (ii negat	,			I 11,507	

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						
	1	Cash—non-interest-bearing	(a) Book value	(B) Book Value	(c) I all Flance Value						
	2	Savings and temporary cash investments	198,352	984,643	984,643						
	3	Accounts receivable -	,	·							
		Less allowance for doubtful accounts -									
	4	Pledges receivable -									
	7	Less allowance for doubtful accounts -									
	5	Grants receivable									
	6	Receivables due from officers, directors, trustees, and other			_						
	O	disqualified persons (attach schedule) (see instructions)									
	7	Other notes and loans receivable (attach schedule)									
	,	Less allowance for doubtful accounts									
		Inventories for sale or use									
왍	8	-									
Assets	9	Prepaid expenses and deferred charges	and state government obligations (attach								
Ā	10a	schedule)		_							
	b	Investments—corporate stock (attach schedule)	1,132,513	384,008	1,644,665						
	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 🕨									
		Less accumulated depreciation (attach schedule) ▶									
	15	O ther assets (describe 🟲)									
	16	Total assets(to be completed by all filers—see the									
		ınstructions Also, see page 1, item I)	1,330,865	1,368,651	2,629,308						
	17	Accounts payable and accrued expenses									
	18	Grants payable									
ě.	19	Deferred revenue									
abilities	20	Loans from officers, directors, trustees, and other disqualified persons									
_	21	Mortgages and other notes payable (attach schedule)									
	22	O ther liabilities (describe 🟲)									
	23	Total liabilities(add lines 17 through 22)		0							
_		Foundations that follow SFAS 117, check here 🕨 🦵									
ě		and complete lines 24 through 26 and lines 30 and 31.									
픙	24	Unrestricted									
8	25	Temporarily restricted									
⊒	26	Permanently restricted									
Fund Balances		Foundations that do not follow SFAS 117, check here 🕨 🔽									
<u>-</u>		and complete lines 27 through 31.									
	27	Capital stock, trust principal, or current funds									
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund									
	29	Retained earnings, accumulated income, endowment, or other funds	1,330,865	1,368,651							
Net	30	Total net assets or fund balances(see instructions)	1,330,865	1,368,651							
-	31	Total liabilities and net assets/fund balances(see instructions)	1,330,865	1,368,651							
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	L.								
1		Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must adi	ree T T							
		with end-of-year figure reported on prior year's return)			1,330,865						
2		Enter amount from Part I, line 27a			2,023,864						
3		Other increases not included in line 2 (itemize)		3	· · ·						
4		Add lines 1, 2, and 3		4	3,354,729						
5		Decreases not included in line 2 (itemize) ►		% 5	1,986,078						
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa			1,368,651						

		the kınd(s) of property sold (e g , ehouse, or common stock, 200 sh	•	How acquired P—Purchase (b) D—Donation	[Date acquired mo , day, yr)	Date sold (d) (mo , day, yr)
1a	See Additional Data	Table					
b							
				1			
d				+			
				+			
e		Danier author allow		<u> </u>	1	C	(1)
(e	e) Gross sales price	Deprectation allow (f) (or allowable)		t or other basis expense of sale			n or (loss) (f) minus (g)
a	See Additional Data	Table					
b							
С							
d							
<u>—</u>							
Со	mplete only for assets :	showing gain in column (h) and owr	ned by the foundation	n on 12/31/69		Gains (Col	(h) gaın mınus
	FM V as of 12/31/69	cess of col (ı)		col (k), but no	ot less than -0-) or		
	See Additional Data	(j) as of 12/31/69	(k) ove	rcol (j), if any	(1)	Losses	(from col (h))
b	See Additional Data	Tuble					
c							
d					_		
ее							
2	Capıtal gaın net ıncoı	me or (net capital loss) $\left\{ ight.$	If gain, also enter If (loss), enter -0-		2		2,773,594
3	Net short-term capita	- al gaın or (loss) as defined ın sectı	ons 1222(5) and (6)			
	If gain, also enter in l in Part I, line 8 .	Part I, line 8, column (c) (see instr	ructions) If (loss), e	nter -0 -			
				· · ,	3		
Part	V Qualification	Under Section 4940(e) for	Reduced Tax or	n Net Investme	ent Ir	ncome	
	cional use by domestic ; on 4940(d)(2) applies,	private foundations subject to the s leave this part blank	section 4940(a) tax	on net investment	ıncom	ne)	
		e section 4942 tax on the distribu			erıod?		┌ Yes ┌ No
		unt in each column for each year,			ries		
	(a)		1			(d)	<u> </u>
	period years Calendar	(b) Adjusted qualifying distributions	(c) Net value of noncha	ritable-use assets		Distributio	n ratio
year (or tax year beginning in)			1 501 407		(col (b) divided	
	2014	2,212,951 1,765,822		1,591,407			1 39056 0 81741
	2013	1,637,187		2,160,264			0 59046
	2012	1,242,310		3,955,838			0 31405
	2010	916,293		4,787,762			0 19138
		n (d)	_ !	1	2		3 303858
	·	ratio for the 5-year base period—d		<u> </u>	-		3 303036
3	the number of years t	the foundation has been in existen	ce ıf less than 5 yea	rs	3		0 660772
4	Enter the net value o	f noncharitable-use assets for 201	15 from Part X, line 5	5	4		2,422,094
5		e 3		<u> </u>	5		1,600,452
6	Enter 1% of net inve	stment income (1% of Part I, line	27b) .	[6		27,158
7	Add lines 5 and 6.			[7		1,627,610

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

Enter qualifying distributions from Part XII, line 4.

the Part VI instructions

3,215,000

8

	990-PF (2015) t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4	1040(a)	or 4949 soo	. D2.00	19 of	the inct	ructio		age 4
			, 01 4946—see	. paye	5 10 UI	the mst	Tuctio	113)	
1a	Exempt operating foundations described in section $4940(d)(2)$, check here land enter "N/A" on line 1	-							
	Date of ruling or determination letter			}					
b	(attach copy of letter if necessary-see instructions) Domestic foundations that meet the section 4940(e) requirements in Part V	, check			1			2.7	7,158
	here ► 🔽 and enter 1% of Part I, line 27b			. /					
c	All other domestic foundations enter 2% of line 27b Exempt foreign organiz Part I, line 12, col (b)	ations	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable fou enter -0-)	ndatıon	s only Other	S	2				
3	Add lines 1 and 2				3			27	7,158
4	Subtitle A (income) tax (domestic section $4947(a)(1)$ trusts and taxable for enter -0-)	ındatıor	ns only Other	s	4				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, or	enter-C)		5			2 7	7,158
6	Credits/Payments								
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	13	,281					
b	Exempt foreign organizations—tax withheld at source	6b							
С	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			1	7			13	3,281
8	Enter any penalty for underpayment of estimated tax. Check here if Form			•	8				177
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed. Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount				9				4,054
10 11	Enter the amount of line 10 to be Credited to 2015 estimated tax	iit ovei	Refunded		10 11				
	t VII-A Statements Regarding Activities		Kerunaca						
1a	During the tax year, did the foundation attempt to influence any national, stat	e. or loc	al legislation	or dı				Yes	No
	it participate or intervene in any political campaign?						1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for	politica	l purposes (s	ee In	structı	ons			
	for definition)?						1b		No
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities	s and co	ppies of any ma	ateria	ls				
	published or distributed by the foundation in connection with the activities.								
С	Did the foundation file Form 1120-POL for this year?			•		•	1c		No
d	Enter the amount (If any) of tax on political expenditures (section 4955) impo								
	(1) On the foundation \$ (2) On foundation managers	. –							
е	Enter the reimbursement (if any) paid by the foundation during the year for po	litical e	xpenditure ta	x ımp	osed				
2	on foundation managers * \$ Has the foundation engaged in any activities that have not previously been re	nortod	to the IDC2				2		No
2	If "Yes," attach a detailed description of the activities.	porteu	to the IKS?	• •	• •				NO
3	Has the foundation made any changes, not previously reported to the IRS, in	its anve	ernina instrum	ent	articles	2			
•	of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a con</i>	-	_	•			3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more						4a		No
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	_					4b		No
5	Was there a liquidation, termination, dissolution, or substantial contraction du						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 49	945)sa	tisfied either						
	By language in the governing instrument, or								
	By state legislation that effectively amends the governing instrument so the state of the s								
	that conflict with the state law remain in the governing instrument?						6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year and Part XV.		s," complete Pa		. col. (c), • • •	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered ► OR	(see ins	structions)						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 9	90-PF	to the Attorne	— ≥y					
	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	meanın	g of section 4	942	(3)(3)				
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see Eq. ()) and the second contract of the second contract	see inst	tructions for P	art X	IV)?				
	If "Yes," complete Part XIV						9	\square	No
10	Did any persons become substantial contributors during the tax year? If "Yes			_	their n	ames			
	and addresses.						10		No

Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		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 ► <u>N/A</u>			
14	The books are in care of ►BETTY WILEY Telephone no ►(503) 585	-1782	
	Located at ▶2001 FRONT ST NE SUITE 120 SALEM OR ZIP+4 ▶97301			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		▶ □	-
1.5	and enter the amount of tax-exempt interest received or accrued during the year	•	- ,	
			1	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	م ا	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			
Par	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
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(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 ✓ 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) Yes V No			
b	If any answer is "Yes" to $1a(1)-(6)$, did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		No
	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 not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see instructions)	2b		No
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
За	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	31		N.
	If the foundation had excess business holdings in 2015.)	3b	1	No
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	AL		N'-
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	1	No

Pa	rt VII-B	Statements Rega	rdir	ng Activities for	Wh	ich Form 4720	May	y Be Required <i>(Cont</i>	inue	d)	
5a	During th	e year dıd the foundatıoı	n pay	or incurany amoun	t to						
	(1) Carry	on propaganda, or other	rwise	attempt to influenc	e leg	ıslatıon (section 49	45(e	e)) [?]	√ No		
	(2) Influe	ence the outcome of any	spec	ıfıc publıc election (see	section 4955), or to	car	ry			
	on, dı	rectly or indirectly, any	votei	registration drive?				\ \ Yes \	√ No		
	(3) Provi	de a grant to an individu	al for	travel, study, or oth	ners	ımılar purposes?		┌ Yes रि	√ No		
	(4) Provi	de a grant to an organıza	tion	other than a charita	ble,	etc , organization de	scrit	ped			
	ın sec	ction 4945(d)(4)(A)? (se	ee ins	structions)				T Yes F	√ No		
	(5) Provi	de for any purpose other	thar	religious, charitabl	e, sc	ientific, literary, or					
	educa	ational purposes, or for t	he pr	evention of cruelty	o ch	ıldren or anımals?.		Г Yes 🗟	√ No		
b	If any ans	swerıs "Yes" to 5a(1)–(5), d	ıd any of the transac	tions	fail to qualify under	the	exceptions described in			
	Regulatio	ns section 53 4945 or i	nac	urrent notice regard	ing c	lısaster assıstance	(see	instructions)?		5b	No
	O rganıza	tions relying on a curren	t not	ice regarding disast	eras	sistance check here	e		_		
С	If the ans	wer is "Yes" to question	5a(4), does the foundat	ion c	laım exemption from	the				
	tax becau	use it maintained expend	liture	responsibility for th	ne gr	ant?		T Yes F	√ No		
		attach the statement requ									
6a	Did the fo	oundation, during the yea	r, re	ceive any funds, dire	ectly	or indirectly, to pay	prer	miums on			
	a persona	al benefit contract?						T Yes 🖟	- No		
ь								benefit contract?		6b	No
	If "Yes" to	o 6b, file Form 8870.									
7a	At any tır	ne during the tax year, v	vas tl	ne foundation a part	y to a	a prohibited tax shel	tert	ransaction? Yes	√ No		
ь	If yes, did	d the foundation receive	any	proceeds or have an	y ne	t income attributable	e to t	the transaction?		7b	No
		Information Abou	t Of	ficers, Directors	s, Tı	ustees, Founda	tio	n Managers, Highly	Paid	Emplo	yees,
	rt VIII	and Contractors									
1	List all off	icers, directors, trustee	s, fou	ındation managers a	nd t	heir compensation (see i		 		
				Title, and average	(c)	Compensation(If		(d) Contributions to		Expense a	ccount
	(a) Na	me and address	/	hours per week		not paid, enter	e	mployee benefit plans		other allo	•
			(D)	devoted to position		-0-)	and	deferred compensation			
KATH	ERINE A EITI	NG	-	ident		0					
	BOX 2309		15 (00							
	ARD, OR 9 ETH FITZPATR										
			1 00	ctor)		0					
	7 WALMSL /ORLEANS	EYAVE 5,LA 70125		,							
	ary lou lafi	•	Dire	ctor		0					
184	5 HADDON	N A V E	1 00			· ·					
CAM	1DEN,NJ (08103									
_2	Compensa	tion of five highest-paid	emp	loyees (other than	thos	e included on line 1–	-see	instructions). If none, e	nter "I	NONE."	
		(a)		Title, and aver	age			Contributions to	١.		
Naı		lress of each employee p	paid	hours per we		(c) Compensation	n	employee benefit plans and deferred		Expense a other allo	•
	mo	re than \$50,000		(b) devoted to pos	ition			(d) compensation	\		
NON	I E										
Tota	l number o	f other employees paid o	ver	50.000	_			· · · · · •			
				,	- •			· ·	I		

Part VIII Information About Officers, Directors, Truste and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (IE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
otal number of others receiving over \$50,000 for professional services.		•
Part IX-A Summary of Direct Charitable Activities		
ist the foundation's four largest direct charitable activities during the tax year. Include rele	evant statistical information such as the numbe	r of
rganizations and other beneficiaries served, conferences convened, research papers produ	uced, etc	Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during t	the tax year on lines 1 and 2	A mount
1		
2		
All other program-related investments See instructions		
3		
-		
otal. Add lines 1 through 3		<u>▶</u>

Part X Minimum Investment Return

Pa	(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	2,009,583
b	Average of monthly cash balances	1b	449,396
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	2,458,979
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	
3	Subtract line 2 from line 1d	3	2,458,979
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ % of line 3 (for greater amount, see		
	ınstructions)	4	36,885
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,422,094
6	Minimum investment return. Enter 5% of line 5	6	121,105
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and ceil check here ► ☐ and do not complete this part.)	rtaın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	121,105
2a	Tax on investment income for 2015 from Part VI, line 5 2a 27,158		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	27,158
3	Distributable amount before adjustments Subtract line 2c from line 1	3	93,947
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	93,947
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	93,947
Par	t XII Qualifying Distributions (see instructions)	•	
1	A mounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	3,215,000
b	Program-related investments—total from Part IX-B	1b	
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (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	3,215,000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	27,158
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,187,842
	Note: 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 Un	distributed	Income (see instr	uctions)			
				(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable am	ount for 2015	from Part XI, line 7				93,947
2	Undistributed in	come, if any, a	s of the end of 2015				
а	Enter amount for	r 2014 only.					
b	Total for prior ye	ears 20	, 20, 20				
3	Excess distribut	· · · · · · · · · · · · · · · · · · ·					
а	From 2010		440,070				
b	From 2011		1,047,372				
C	From 2012		1,500,470				
d	From 2013		1,674,009				
е	From 2014		2,159,879				
f	Total of lines 3a	through e		6,821,800			
4	Qualifying distrib						
	XII, line 4 🕨 \$						
а	Applied to 2014	, but not more	than line 2a				
b	Applied to undist		•				
	•		tions)	0			
С	Treated as distri required—see in:			U			
d	Applied to 2015	distributable a	amount				93,947
е	Remaining amou	nt distributed	out of corpus	3,121,053			
5	Excess distribut	ions carryovei	applied to 2015				
	(If an amount app		n (d), the vn ın column (a).)				
6	Enter the net to		' ' '				
	indicated below						
а	Corpus Add lines	s 3f, 4c, and 4	e Subtract line 5	9,942,853			
b	Prior years' undis						
	line 4b from line						
С	Enter the amount						
	income for which been issued, or o		· ·				
	•		sed				
d	Subtract line 6c	from line 6b T	axable amount				
	—see instruction	s					
е	Undistributed ind						
	4a from line 2a 1 instructions	l axable amour	nt—see				
f	Undistributed inc	ome for 2016	Subtract				
·	lines 4d and 5 fro						
	be distributed in	2015					0
7	Amounts treated						
	corpus to satisfy	•	' '				
			g)(3) (Election may				
8	Excess distribut	•	l l				
	applied on line 5	,		440,070			
9	Excess distributi	•		0.502.702			
	Subtract lines 7		e 6a	9,502,783			
	Analysis of line						
	Excess from 20:		1,047,372				
	Excess from 20		1,500,470				
	Excess from 201		1,674,009 2,159,879				
	Excess from 20:		3,121,053				
<u>e</u>	Excess from 20:	13	3,121,033				

- c Any submission deadlines
- **d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

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 A mount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 3,215,000 **b** Approved for future payment

Part XVI-A Analysis of Income-Produc	ing Activitie	s			Page 1 2
Enter gross amounts unless otherwise indicated		isiness income	Excluded by section	(e) Related or exemp function income	
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	(See instructions)
a b					
c					
e					
 g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash 					
Investments			14 14	39 41,865	
Net rental income or (loss) from real estate Debt-financed property					
b Not debt-financed property 6 Net rental income or (loss) from personal property					
Other investment income					
Inventory			18	2,773,594	
L Other revenue a b					
c					
e					
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify			:	2,815,498 13	
Part XVI-B Relationship of Activities to	the Accom				
Explain below how each activity for wh the accomplishment of the foundation's instructions)					

Par	t XVI		Information Re Noncharitable					sactio	ns and	Relationships	With			
		organ	zation directly or i	ndırectly (engage	ın any of t	the following wi						Yes	No
		-				()()	,		,	5 ,				
a Ti	- ransfer	s fron	n the reporting four	ndation to	a nonc	harıtable (exempt organiz	ation of						
(1	L) Cas	sh										1a(1)		No
(2	2) Oth	eras	sets									1a(2)		No
_	_											()		
(1	L) Sale	es of a	assets to a noncha	rıtable ex	empt or	ganızatıoı	n					1b(1)		No
												1b(2)		No
												$\overline{}$		No
												1b(4)		No
												1b(5)		No
												1b(6)		No
												1c		No
	_			_									اـــــا	110
ın	any tr	ansac	tion or sharing arr	angement	, show	ın column	(d) the value of	of the go	ods, othe	r assets, or servi	ces receive	ed		nts
								-						
								+						
								-						
de	escribe	ed in s	ection 501(c) of the plete the following	ne Code (d schedule		an sectioi	n 501(c)(3)) or	rın secti				. ┌Ye	es 🔽	No.
_	the inf	e best ormat	of my knowledge a ion of which prepar	and belief,	ıt ıs tru	ie, correct	t, and complete	e Declar			n taxpaye		sed on	all
Her	e)			rustee				—)			below	he prepa		
										,	(see	nstr)? 🗸	Yesi N	lo
				name	Prepa	rer's Sıgn	ature	Date		Check if self- employed ▶	PTIN	000407	730	
Use	Print/Type preparer's name BETTY H WILEY Preparer's Signature employed F employed F Preparer's Signature employed F HOOTS BAKER & WILEY PC													
UNI	y			T NE SUIT	E 120	SALEM,	O R			Phone no (503	3)585-178	3 2		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
5700 ADOBE SYSTEMS	D	2009-03-17	2015-01-13
2300 CLOROX CO	D	2003-07-09	2015-03-09
3000 ADOBE SYSTEMS	D	2009-03-17	2015-06-01
1500 CLOROX CO	D	2003-07-09	2015-06-01
1000 ABBOTT LABS	D	2003-07-30	2015-07-13
1000 STRYKER CORP	D	2003-07-09	2015-07-13
2200 ABBOTT LABS	D	2003-07-30	2015-08-18
1000 ADOBE SYSTEMS	D	2009-03-17	2015-08-18
1500 STRYKER CORP	D	2003-07-09	2015-08-18
2500 ABBOTT LABS	D	2003-07-30	2015-08-27

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
413,218		105,229	307,989
251,004		99,169	151,835
239,645		55,384	184,261
161,853		64,675	97,178
49,714		17,497	32,217
97,005		35,355	61,650
111,043		38,493	72,550
86,363		18,461	67,902
156,192		53,032	103,160
112,089		43,742	68,347

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets show	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69		
(i) F M V as of 12/31/69	A djusted basıs (j) as of 12/31/69	Excess of col (1) (k) over col (j), if any	col (k), but not less than -0-) or (I) Losses (from col (h))
			307,989
			151,835
			184,261
			97,178
			32,217
			61,650
			72,550
			67,902
			103,160
			68,347

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	Date acquired (c) (mo , day, yr)	(d) Date sold (mo , day, yr)
2585 ABBOTT LABS	D	2003-01-14	2015-08-27
415 ABBOTT LABS	D	2002-06-27	2015-08-27
1000 ABBOTT LABS	D	2000-04-03	2015-08-27
2000 ADOBE SYSTEMS	D	2009-03-17	2015-08-27
1500 CLOROX CO	D	2003-07-09	2015-08-27
850 ECOLAB INC	D	2005-12-07	2015-08-27
675 3M CO	D	2005-01-27	2015-08-27
1075 PEPSICO	D	2005-12-07	2015-08-27
2500 T ROWE PRICE GROUP	D	2009-04-08	2015-08-27
1500 COLGATE-PALMOLIVE	D	2003-01-14	2015-09-28

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
115,900		44,588	71,312
18,607		7,096	11,511
44,836		16,363	28,473
157,685		36,923	120,762
166,418		64,675	101,743
92,455		28,821	63,634
96,661		52,108	44,553
99,751		63,512	36,239
179,836		73,250	106,586
94,205		39,375	54,830

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

	Gains (Col (h) gain minus	y the foundation on 12/31/69	ng gain in column (h) and owned h	Complete only for assets showing
	col (k), but not less than -0-) o (l) Losses (from col (h))	Excess of col (1) (k) over col (1), If any	Adjusted basis (j) as of 12/31/69	(i) F M V as of 12/31/69
	71,312			
	11,511			
_	28,473			
	120,762			
	101,743			
	63,634			
	44,553			
	36,239			
	106,586			
	54,830			

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
300 EQUIFAX	D	2000-09-19	2015-09-28
300 EQUIFAX	D	1999-12-13	2015-09-28
200 OMNICOM GROUP	D	2005-12-07	2015-09-28
400 OMNICOM GROUP	D	2009-04-08	2015-09-28
1200 STRYKER CORP	D	2003-07-09	2015-09-28
2300 AUTOMATIC DATA PROCESSING	D	2003-07-30	2015-11-10
1500 COLGATE-PALMOLIVE	D	2003-01-14	2015-11-10
4500 COGNIZANT TECH SOLUTIONS	D	2008-12-18	2015-11-10
4800 EQUIFAX	D	2003-07-30	2015-11-10

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
28,795		4,414	24,381
28,795		4,040	24,755
12,987		8,599	4,388
25,974		10,683	15,291
111,025		42,426	68,599
198,847		65,623	133,224
99,423		39,375	60,048
304,942		39,489	265,453
503,777		113,054	390,723

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets show	only for assets showing gain in column (h) and owned by the foundation on 12/31/69		Gains (Col (h) gain minus
(i) F M V as of 12/31/69	A djusted basis (j) as of 12/31/69	Excess of col (1) (k) over col (j), if any	col (k), but not less than -0-) or (I) Losses (from col (h))
			24,381
			24,755
			4,388
			15,291
			68,599
			133,224
			60,048
			265,453
			390,723

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

900 SOMERSET BALTIMORE, MD 21202 CAROLINE HOUSE 547 STILLMAN ST BRIDGEPORT, CT 06608 MERCY HOUSING NORTHWEST 2505 THIRD AVE SUITE 204 SEATTLE, WA 98121 ASPCA 424 E 92ND ST NONE OREGON HUMANE SOCIETY P O BOX 11364 PORTLAND, OR 97211 ST AUGUSTINE CHURCH 2486 W 14TH ST CLEVELAND, OH 44113 ARCHDIO CESE OF GALVESTON-HOUSTON HOUSTON, TX 77002 ANIMAL LEAGUE DEFENSE FUND 170 EAST COTATI AVE COTATI, CA 94931 STRAWBERRY MTN MUSTANGS P O BOX 2133 ROSEBURG, OR 97470 LINN COUNTY ANIMAL RESCUE P O BOX 2669 LEBANON, OR 97355 SOUND EQUINE OPTIONS NONE P C CHARITABLE 100 CHARITABLE 1100 CHARITABLE 120 CHARITABLE 35					
a Paid during the year CAROLINE CENTER 900 SOMERSET BALTIMORE, MD 21202 CAROLINE HOUSE 547 STILLMAN ST BRIDGEPORT, CT 06608 MERCY HOUSING NORTHWEST 2505 THIRD AVE SUITE 204 SEATTILE, WA 98121 ASPCA 424 E 92ND ST NEW YORK, NY 10128 OREGON HUMANE SOCIETY PO BOX 11364 PORTLAND, OR 97211 ST AUGUSTINE CHURCH 2486 W 14TH ST CLEVELAND, OH 44113 ARCHDIOCESE OF GALVESTON-HOUSTON HOUSTON, TX 77002 ANIMAL LEAGUE DEFENSE FUND 170 EAST COTATI AVE COTATI, CA 94931 STRAWBERRY MTN MUSTANGS PO BOX 2133 ROSEBURG, OR 97470 LINN COUNTY ANIMAL RESCUE PO BOX 2669 LEBANON, OR 97355 SOUND EQUINE OPTIONS NONE PC CHARITABLE 60 CHARITABLE 60 CHARITABLE 60 CHARITABLE 75 CHARITABLE 60 CHARITABLE 75 CHARITABLE 120 CHARITABLE 35	Recipient	show any relationship to	status of		A mount
CAROLINE CENTER 900 SOMERSET BALTIMORE,MD 21202 CAROLINE HOUSE 547 STILLMAN ST BRIDGEPORT, CT 06608 MERCY HOUSING NORTHWEST 2505 THIRD AVE SUITE 204 SEATTLE, WA 98121 ASPCA 424 E 92ND ST NONE OREGON HUMANE SOCIETY P O BOX 11364 PORTLAND, OR 97211 ST AUGUSTINE CHURCH 2486 W 14TH ST CLEVELAND, OH 44113 ARCHDIOCESE OF GALVESTON-HOUSTON HOUSTON, TX 77002 ANIMAL LEAGUE DEFENSE FUND 170 EAST COTATI AVE COTATI, CA 94931 STRAWBERRY MTN MUSTANGS P O BOX 2133 ROSEBURG, OR 97470 LINN COUNTY ANIMAL RESCUE P O BOX 2669 LEBANON, OR 97355 SOUND EQUINE OPTIONS NONE P C CHARITABLE 60 CHARITABLE 60 CHARITABLE 70 CHARITABLE 61 CHARITABLE 62 CHARITABLE 63 CHARITABLE 64 CHARITABLE 75 CHARITABLE 75 CHARITABLE 120 CHARITABLE 120 CHARITABLE 120 CHARITABLE 120 CHARITABLE 135	Name and address (home or business)		recipient		
900 SOMERSET BALTIMORE,MD 21202 CAROLINE HOUSE S47 STILLMAN ST BRIDGEPORT, CT 06608 MERCY HOUSING NORTHWEST 2505 THIRD AVE SUITE 204 SEATTLE, WA 98121 ASPCA 424 E 92ND ST NONE OREGON HUMANE SOCIETY POBOX 11364 PORTLAND, OR 97211 STAUGUSTINE CHURCH 2486 W 14TH ST CLEVELAND, OH 44113 ARCHDIOCESE OF GALVESTON-HOUSTON HOUSTON, TX 77002 ANIMAL LEAGUE DEFENSE FUND 170 EAST COTATI AVE COTATI, CA 94931 STRAWBERRY MTM MUSTANGS PO BOX 2133 ROSEBURG, OR 97470 LINN COUNTY ANIMAL RESCUE P O BOX 2669 LEBANON, OR 97355 SOUND EQUINE OPTIONS NONE PC CHARITABLE 100 CHARITABLE 110 CHARITABLE 120 CHARITABLE 35	a Paid during the year				
S47 STILLMAN ST BRIDGEPORT, CT 06608 MERCY HOUSING NORTHWEST 2505 THIRD AVE SUITE 204 SEATTLE, WA 98121 ASPCA 424 E 92ND ST NEWYORK, NY 10128 OREGON HUMANE SOCIETY PO BOX 11364 PORTLAND, OR 97211 ST AUGUSTINE CHURCH 2486 W 147TH ST CLEVELAND, OH 44113 ARCHDIOCESE OF GALVESTON-HOUSTON HOUSTON, TX 77002 ANIMAL LEAGUE DEFENSE FUND 170 EAST COTATI AVE COTATI, CA 94931 STRAWBERRY MTN MUSTANGS PO BOX 2133 ROSEBURG, OR 97470 LINN COUNTY ANIMAL RESCUE PO BOX 2669 LEBANON, OR 97355 SOUND EQUINE OPTIONS NONE PC CHARITABLE 30 CHARITABLE 40 CHARITABLE 40 CHARITABLE 35 CHARITABLE 35 CHARITABLE 35 CHARITABLE 35 CHARITABLE 35 CHARITABLE 35 CHARITABLE 35 CHARITABLE 35 CHARITABLE 35	900 SOMERSET	NONE	PC	CHARITABLE	60,000
2505 THIRD AVE SUITE 204 SEATTLE, WA 98121 ASPCA 424 E 92ND ST NEWYORK,NY 10128 OREGON HUMANE SOCIETY POBOX 11364 PORTLAND, OR 97211 ST AUGUSTINE CHURCH 2486 W 14TH ST CLEVELAND, OH 44113 ARCHDIOCESE OF GALVESTON-HOUSTON HOUSTON, TX 77002 ANIMAL LEAGUE DEFENSE FUND 170 EAST COTATI AVE COTATI, CA 94931 STRAWBERRY MTN MUSTANGS PO BOX 2133 ROSEBURG, OR 97470 LINN COUNTY ANIMAL RESCUE PO BOX 2669 LEBANON, OR 97355 SOUND EQUINE OPTIONS NONE PC CHARITABLE 60 CHARITABLE 60 CHAR	547 STILLMAN ST	NONE	PC	CHARITABLE	100,000
NEWYORK,NY 10128 OREGON HUMANE SOCIETY P O BOX 11364 PORTLAND, OR 97211 ST AUGUSTINE CHURCH 2486 W14TH ST CLEVELAND, OH 44113 ARCHDIOCESE OF GALVESTON-HOUSTON HOUSTON,TX 77002 ANIMAL LEAGUE DEFENSE FUND 170 EAST COTATI AVE COTATI, CA 94931 STRAWBERRY MTN MUSTANGS P O BOX 2133 ROSEBURG, OR 97470 LINN COUNTY ANIMAL RESCUE P O BOX 2669 LEBANON, OR 97355 SOUND EQUINE OPTIONS NONE PC CHARITABLE 40 CHARITABLE CHARITABLE 41 CHARITABLE 42 CHARITABLE 45 CHARITABLE 46 CHARITABLE 47 CHARITABLE 47 CHARITABLE 48 CHARITABLE 40 CHARITABLE	2505 THIRD AVE SUITE 204	NONE	PC	CHARITABLE	30,000
POBOX 11364 PORTLAND, OR 97211 ST AUGUSTINE CHURCH 2486 W 14TH ST CLEVELAND, OH 44113 ARCHDIOCESE OF GALVESTON-HOUSTON HOUSTON, TX 77002 ANIMAL LEAGUE DEFENSE FUND 170 EAST COTATI AVE COTATI, CA 94931 STRAWBERRY MTN MUSTANGS PO BOX 2133 ROSEBURG, OR 97470 LINN COUNTY ANIMAL RESCUE PO BOX 2669 LEBANON, OR 97355 SOUND EQUINE OPTIONS NONE PC CHARITABLE 75 CHARITABLE 15		NONE	PC	CHARITABLE	60,000
2486 W 14TH ST CLEVELAND, OH 44113 ARCHDIOCESE OF GALVESTON-HOUSTON HOUSTON, TX 77002 ANIMAL LEAGUE DEFENSE FUND 170 EAST COTATI AVE COTATI, CA 94931 STRAWBERRY MTN MUSTANGS PO BOX 2133 ROSEBURG, OR 97470 LINN COUNTY ANIMAL RESCUE PO BOX 2669 LEBANON, OR 97355 SOUND EQUINE OPTIONS NONE PC CHARITABLE 40 CHARITABLE	P O BOX 11364	NONE	PC	CHARITABLE	40,000
GALVESTON-HOUSTON HOUSTON,TX 77002 ANIMAL LEAGUE DEFENSE FUND 170 EAST COTATI AVE COTATI,CA 94931 STRAWBERRY MTN MUSTANGS P O BOX 2133 ROSEBURG,OR 97470 LINN COUNTY ANIMAL RESCUE P O BOX 2669 LEBANON,OR 97355 SOUND EQUINE OPTIONS NONE PC CHARITABLE 120 CHARITABLE 35	2486 W 14TH ST	NONE	PC	CHARITABLE	75,000
170 EAST COTATI AVE COTATI, CA 94931 STRAWBERRY MTN MUSTANGS P O BOX 2133 ROSEBURG, OR 97470 LINN COUNTY ANIMAL RESCUE P O BOX 2669 LEBANON, OR 97355 SOUND EQUINE OPTIONS NONE PC CHARITABLE 35 CHARITABLE 15	GALVESTON-HOUSTON	NONE	PC	CHARITABLE	40,000
P O BOX 2133 ROSEBURG, OR 97470 LINN COUNTY ANIMAL RESCUE P O BOX 2669 LEBANON, OR 97355 SOUND EQUINE OPTIONS NONE PC CHARITABLE 35 CHARITABLE 15	170 EAST COTATI AVE	NONE	PC	CHARITABLE	120,000
P O BOX 2669 LEBANON, OR 97355 SOUND EQUINE OPTIONS NONE PC CHARITABLE 15	P O BOX 2133	NONE	PC	CHARITABLE	35,000
	P O BOX 2669	NONE	PC	CHARITABLE	35,000
P O BOX 1150 GRESHAM,OR 97030	P O BOX 1150	NONE	PC	CHARITABLE	15,000
HUMANE FARM ANIMAL CARE PO BOX 727 HERNDON, VA 20172 PC CHARITABLE 50	P O BOX 727	NONE	PC	CHARITABLE	50,000
EWTN GLOBAL CATHOLIC NONE PC CHARITABLE 375 NETWORK 5817 OLD LEEDS ROAD IRONDALE, AL 35270	NETWORK 5817 OLD LEEDS ROAD	NONE	PC	CHARITABLE	375,000
HEARTBEAT INTERNATIONAL 5000 ARLINGTON CTR BLVD 2277 COLUMBUS, OH 43220 PC CHARITABLE 100	5000 ARLINGTON CTR BLVD 2277	NONE	PC	CHARITABLE	100,000
OUR LITTLE BROTHERS SISTERS HAITI 399 GREAT HARVEST CT DUMFRIES, VA 22202 PC CHARITABLE 420	HAITI 399 GREAT HARVEST CT	NONE	PC	CHARITABLE	420,000
Total	Total			▶ 3a	3,215,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

	•			
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				
MARIAN HOUSE 949 GORSUCH AVE BALTIMORE, MD 21218	NONE	PC	CHARITABLE	60,000
JOSEPH'S HOME 2412 COMMUNITY COLLEGE AVE CLEVELAND,OH 44115	NONE	PC	CHARITABLE	45,000
CITY MISSION CLEVELAND 5310 CARNEGIE AVE CLEVELAND,OH 44133	NONE	PC	CHARITABLE	45,000
CPAH 12291 SW KNOLL DRIVE TIGARD,OR 97223	NONE	PC	CHARITABLE	10,000
ST JOSEPH SHELTER 925 S MAIN MT ANGEL, OR 97362	NONE	PC	CHARITABLE	35,000
STAND UP GIRL FOUNDATION 4335 RIVER ROAD N KEIZER,OR 97303	NONE	PC	CHARITABLE	15,000
OREGON RIGHT TO LIFE ED FDN 4335 RIVER ROAD N KEIZER,OR 97303	NONE	PC	CHARITABLE	15,000
GOOD SHEPHERD MISSION DEVELOPMENT 1340 PARTRIDGE AVE ST LOUIS,MO 63130	NONE	PC	CHARITABLE	130,000
DISMAS MINISTRIES 3195 S SUPERIOR ST MILWAUKIE, WI 53207	NONE	PC	CHARITABLE	45,000
MARY'S MEALS 327 S ORANGE NEWARK,NJ 07103	NONE	PC	CHARITABLE	120,000
REGINA HEALTH CENTER 5232 BROADVIEW RD RICHFIELD,OH 44286	NONE	PC	CHARITABLE	35,000
SISTERS OF MERCY 8380 COLESVILLE RD 300 SILVER SPRING, MD 20910	NONE	PC	CHARITABLE	55,000
ST FRANCIS ST JOSEPH CATHOLIC 1437 WALNUT ST CINCINNATI,OH 45202	NONE	PC	CHARITABLE	45,000
SOCIETY OF ST VINCENT DE PAUL 58 PROGRESS PARKWAY MARYLAND HEIGHTS, MO 63043	NONE	PC	CHARITABLE	525,000
PORTLAND RESCUE MISSION P O BOX 3713 PORTLAND,OR 97208	NONE	PC	CHARITABLE	30,000
Total			▶ 3a	3,215,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual,		Purpose of grant or	A mount	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution		
a Paid during the year					
SISTERS OF THE DIVINE SAVIOR 4311 NORTH 100TH ST MILWAUKIE, WI 53222	NONE	PC	CHARITABLE	120,000	
DAUGHTERS OF CHARITY INTL 1800 WEST NINE MILE RD 550 SOUTHFIELD,MI 48078	NONE	PC	CHARITABLE	230,000	
AID TO THE CHURCH IN NEED 725 LEONARD ST BROOKLYN,NY 11222	NONE	PC	CHARITABLE	100,000	
Total			▶ 3a	3,215,000	

TY 2015 Accounting Fees Schedule

Name: GLORY FOUNDATION

EIN: 72-1574570

Software ID: 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
HOOTS BAKER & WILEY PC	3,000	3,000	0	0

TY 2015 Investments Corporate Stock Schedule

Name: GLORY FOUNDATION

EIN: 72-1574570

Software ID: 15000324

Name of Stock	End of Year Book Value	End of Year Fair Market Value
EQUIFAX INC	59,169	322,973
OMNICOM GROUP INC	16,025	45,396
STRYKER CORP	39,776	120,822
AUTOMATIC DATA PROCESSING	176,896	525,264
COGNIZANT TECH SOLUTIONS	92,142	630,210

TY 2015 Legal Fees Schedule

Name: GLORY FOUNDATION

EIN: 72-1574570

Software ID: 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
KELL, ALTERMAN & RUNSTEIN	16,799	16,799	0	0
MELISSA MAY LLC	13,808	13,808	0	0

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TY 2015 Other Decreases Schedule

Name: GLORY FOUNDATION

EIN: 72-1574570

Software ID: 15000324

Description	Amount
UNREALIZED GAIN	1,986,078

TY 2015 Other Expenses Schedule

Name: GLORY FOUNDATION

EIN: 72-1574570

Software ID: 15000324

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MEETINGS, SUPPLIES, AND MISCELLANEOUS	1,838	1,838		

TY 2015 Other Professional Fees Schedule

Name: GLORY FOUNDATION

EIN: 72-1574570

Software ID: 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
JENSEN INVESTMENT, INVESTMENT MGMT	14,851	14,851	0	0
KATHY CSANK, GRANT MANAGER	30,851	30,851	0	0

TY 2015 Taxes Schedule

Name: GLORY FOUNDATION

EIN: 72-1574570

Software ID: 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
DEPARTMENT OF JUSTICE FEE	330	330		
FEDERAL TAX PRIOR YEAR	4,902	4,902		
FEDERAL TAX ESTIMATE	13,280	13,280		

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As Filed Data -

DLN: 93491099004196

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

GLORY FOUNDATION

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 www.irs.gov/form990.

OMB No 1545-0047

2015

Employer identification number

	/2-15/45/0
Organization type	e (check one)
Filers of:	Section:
Form 990 or 990-E	Z
	√ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
Form 990-PF	501(c)(3) exempt private foundation
	√ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	□ 501(c)(3) taxable private foundation
General Rule For an or	on 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions eganization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or sperty) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rules	
under sect received fr	anization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /3% support test of the regulations tions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that rom any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990 to 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
during the	anization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, year, total contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or vention of cruelty to children or animals. Complete Parts I, II, and III
during the this box is purpose D	anization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., so not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively charitable, etc., contributions totaling \$5,000 or more during the year

990-EZ, or 990-PF)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

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,

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

Name of organization GLORY FOUNDATION Employer identification number 72-1574570

Part I	Contributors (see instructions) Use duplicate copies of Part I if	f additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
1	KATHERINE A EITING P O BOX 230939 TIGARD, OR97281	\$ 744,855	Person Payroll Noncash (Complete Part II f	「 「 「 or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
2	KATHERINE A EITING P O BOX 230939 TIGARD, OR97281	\$ 1,035,750	Person Payroll Noncash (Complete Part II f	ド or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
3	KATHERINE A EITING P O BOX 230939 TIGARD, OR97281	\$ 742,420	Person Payroll Noncash (Complete Part II footning to contributions)	ド or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
		\$	Person Payroll Noncash (Complete Part II f contributions)	┌ ┌ or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
		\$	Person Payroll Noncash (Complete Part II f	┌ ┌ or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont Person	ribution
		\$	Payroll Noncash (Complete Part II f contributions)	Г or noncash

Name of organiza		Employer identification n	umber
GLORY FOUNDA	ATION	72-1574570	
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
1	8,500 SHS ADP (AUTOMATIC DATA PROCESSING INC)	\$ 744,855	2015-11-06
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	15,000 SHS CTSH (COGNIZANT TECH SOLUTIONS)	\$ 1,035,750	2015-11-06
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	7,000 SHS EFX (EQUIFAX INC)	\$ 742,420	2015-11-06
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
(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
		<u> </u>	

Schedule B ((Form 990,	990-EZ,	or 990-PF)	(2015)
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me of organization	990-EZ, or 990-PF) (2015)	En	Page 4 nployer identification number
ORY FOUNDATION		72	2-1574570
total more line entry. I of \$1,000 or	than \$1,000 for the year from any or	ions to organizations describe ne contributor. Complete colum I, enter the total of exclusively r nation once. See instructions.)	d in section 501(c)(7), (8), or (10) that ins (a) through (e) and the following eligious, charitable, etc., contributions
(a) .from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP4 R	elationship of transferor to transferee
-			
(a) o.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP4 R	elationship of transferor to transferee
(a) .from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
. =			
-	Transferee's name, address, and	ZIP4 (e) Transfer of gift R	elationship of transferor to transferee
(a) o.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP4 R	elationship of transferor to transferee
-			