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Department of the Treasury

Internal Revenue Service

DLN: 93491132028866

OMB No 1545-0052

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	cale	ndar year 2015, or tax y	ear beginning 01-0	1-2015	, ar	d ending 1	2-31-2015				
	e of fou	ndation RRIGAN FOUNDATION 99011580				A Employer id	entification numbe	er			
1117	ADEL HOP	CRIGAN I CONDALION 99011360				86-6022633					
		street (or P O box number if mail is n	ot delivered to street address)	Room/suite		B Telephone number (see instructions)					
PO	BOX 06	34				(503) 464-3580	1				
		state or province, country, and ZIP or	foreign postal code			C If exemption	application is pendin	g, check here 🕨 🗍			
MILV	VAUKEE,	WI 532010634									
G Cl	neck al	I that apply Initial return	Initial return of a fo	rmer public charity		D 1. Foreign or	ganızatıons, check he	ere ▶ 「			
		Final return Address chang	A mended return e Name change				ganizations meeting				
H Ch	neck tv	pe of organization	501(c)(3) exempt private	e foundation	i		k here and attach co Indation status was t				
		1947(a)(1) nonexempt charitab	le trust Other taxable	private foundation		under sectioi	n 507(b)(1)(A), chec	k here 🕨 🖡			
		et value of all assets at end rom Part II, col. (c),	JAccounting method Other (specify)	Cash Accrual			ation is in a 60-month n 507(b)(1)(B), chec				
		\$ 2,157,657	(Part I, column (d) must	be on cash basıs.)		ander section	1 307(b)(1)(b), chec	K Here			
Pa	rt I	Analysis of Revenue a	nd Expenses	Revenue and				Disbursements			
		(The total of amounts in columns (in necessarily equal the amounts in constructions)		expenses per (a) books	(b)	Net investment income	Adjusted net (c) income	for charitable purposes (d) (cash basis only			
	1	Contributions, gifts, grants, et	tc , received (attach								
		schedule)									
	2	Check 🟲 🔽 if the foundation i	s not required to attach								
		Sch B									
	3	Interest on savings and temp	orary cash investments								
	4	Dividends and interest from s	ecurities	51,705		49,535					
	5a	Gross rents									
٠.	b	Net rental income or (loss)		74,799							
Ę	6a	Net gain or (loss) from sale of		74,799							
Revenue	b	Gross sales price for all asset 914,826	ts on line 6a								
	7	Capital gain net income (from	Part IV, line 2)			74,799					
	8	Net short-term capital gain .					0				
	9	Income modifications									
	10a	Gross sales less returns and allowances									
	ь	Less Cost of goods sold									
	С	Gross profit or (loss) (attach	schedule)								
	11	Other income (attach schedul	le)								
	12	Total.Add lines 1 through 11		126,504		124,334					
	13	Compensation of officers, dire	ectors, trustees, etc	26,012		23,411		2,60			
	14	O ther employee salaries and	wages			0	0	(
φ	15	Pension plans, employee bene				0	0				
SH8	16a	Legal fees (attach schedule).		_				(
Expenses	Ь	Accounting fees (attach sche		1,500		0	0	1,500			
	C	O ther professional fees (attac	ch schedule)					(
Admını strative	17	Interest		ART				(
Str	18	Taxes (attach schedule) (see				713					
띰	19	Depreciation (attach schedule		0		0					
ΑĠ	20	Occupancy				0	0				
and	21	Travel, conferences, and mee Printing and publications				0	0				
	22	Other expenses (attach sche		% 25		0		2!			
ğin.	24	Total operating and administr									
Operating		Add lines 13 through 23	-	29,752		24,124	О	4,126			
ŏ	25	Contributions, gifts, grants pa		113,395				113,39			
	26	Total expenses and disbursem									
	27	25 Subtract line 26 from line 12		143,147		24,124	0	117,52			
	2/ a	Excess of revenue over expen	ses and disbursements	-16,643							
	b	Net investment income (if neg				100,210					
	l c	Adjusted net income(if negati	ve, enter -0-)				0				

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End o	·
	<u> </u>	Cash—non-interest-bearing	(a) Book Value 1,702	(b) Book Value 158	(c) Fair Market Value
	2	Savings and temporary cash investments	27,518		15,347
	3	Accounts receivable	27,510	15,547	15,547
	3	Less allowance for doubtful accounts	2,172	0	0
			2,172	0	0
	4	Pledges receivable Less allowance for doubtful accounts			
	_				
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶0			
Assets	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	1,160,155		756,085
	C	Investments—corporate bonds (attach schedule)	865,537	749,843	695,314
	11	Investments—land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) 🟲			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)		725,546	688,706
	14	Land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule) ▶			_
	15	Other assets (describe		2,047	2,047
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	2,057,084	2,037,045	2,157,657
	17	Accounts payable and accrued expenses			
	18	Grants payable			
å.	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
e e	21	Mortgages and other notes payable (attach schedule)			
Ï	22	Other liabilities (describe			
	23	Total liabilities(add lines 17 through 22)		0	
		Foundations that follow SFAS 117, check here			
e S		and complete lines 24 through 26 and lines 30 and 31.			
Balances	24	Unrestricted			
9	25	Temporarily restricted			
8		Permanently restricted			
Ĭ	26	Foundations that do not follow SFAS 117, check here			
or Fund		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	2,057,084	2,037,045	
늏	27	-	2,037,004	2,037,043	
Š	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	2.057.004	2.027.045	
ž	30	Total net assets or fund balances(see instructions)	2,057,084	2,037,045	
	31	Total liabilities and net assets/fund balances(see instructions)	2,057,084	2,037,045	
	rt III				
1		Total net assets or fund balances at beginning of year—Part II, column (, ,,		
		with end-of-year figure reported on prior year's return)		1	2,057,084
2		Enter amount from Part I, line 27a		_ —	-16,643
3		Other increases not included in line 2 (itemize)			946
4		Add lines 1, 2, and 3			2,041,387
5		Decreases not included in line 2 (itemize) ►			4,342
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa	art II, column (b), lı	ne 30 . 6	2,037,045

the Part VI instructions

Part 1	V Capital Gains	and Los	ses for Tax on Inve	stment]	Income	•			<u>-</u>
			s) of property sold (e g , re r common stock, 200 shs			How acquire P—Purchas (b) D—Donatio	e (c)	Date acquired (mo , day, yr)	Date sold (d) (mo , day, yr)
1a	See Additional Data	Table							
b									
С									
d									
е									
(e) Gross sales price			Depreciation allowe (f) (or allowable)			t or other basıs expense of sale			n or (loss) (f) mınus (g)
а	See Additional Data	Table							
b									
С									
d									
е									
Со	mplete only for assets :	showing g	aın ın column (h) and own	ed by the fo	undation	n on 12/31/69		Gains (Col	(h) gain minus
(i)	FMV as of 12/31/69		A djusted basis (j) as of 12/31/69			cess of col (ı) r col (j), ıf any	(1)	col (k), but no	ot less than -0-) or (from col (h))
а	See Additional Data	Table							
b									
С									
d									
e									
3		al gaın or	(loss) as defined in section (e.8, column (c) (see instru	If (loss), 6 ons 1222(5	enter -0 -	•	} 2		74,799
	<u> </u>	• • •		<u> </u>		· · ·	J 3	<u> </u>	
Part	Qualification (Jnder S	ection 4940(e) for F	Reduced	lax on	Net Investm	ent I	ncome	
	nonal use by domestic pon 4940(d)(2) applies,		ndations subject to the spart blank	ection 494	0(a) tax	on net investmei	nt incor	me)	
			4942 tax on the distribut under section 4940(e) D				period?	,	│ Yes 🔽 No
1 E n	ter the appropriate amo	unt ın eac	h column for each year, s	ee instruct	ions befo	ore making any e	ntries		
Base year ((a) period years Calendar or tax year beginning in)	Adjust	(b) ed qualifying distributions	Net value	(c) of nonchai	ritable-use assets		(d) Distributio (col (b) divided	n ratio
	2014		112,412			2,426,628			0 046324
	2013		111,029			2,353,094			0 047184
	2012		112,759			2,250,059			0 050114
	2011		107,166			2,283,767			0 046925
	2010	(1)	99,520			2,165,756			0 045952
2 3	Average distribution	ratio for t	e 5-year base period—di	vide the to	tal on lın	e 2 by 5, or by	2		0 236499
A			tion has been in existenc table-use assets for 201.				3 4		0 0473
4					-				2,312,878
5			come (1% of Part I, line 2				5		109,399
6				•			6		1,002
7			tom Dowt VII line 4				7		110,401
8	enter qualitying distr	ibutions fi	om Part XII, line 4				8		117,521

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

	990-PF (2015) Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4	4040(-)	a 1049 a		10 -6	Abo inch			age 4
			, or 4948—se	e page	5 18 OI	tne inst	ructio	ns)	
1a	Exempt operating foundations described in section $4940(d)(2)$, check here and enter "N/A" on line 1	P							
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)			}					
b	Domestic foundations that meet the section 4940(e) requirements in Part V	/, check	<		1			:	1,002
	here ▶ 🔽 and enter 1% of Part I, line 27b			'					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organiz Part I, line 12, col (b)	zations	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable fou enter -0-)	undatior	ns only Othe	ers	2				0
3	Add lines 1 and 2				3		1,002		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)								<u>,</u> 0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less,	enter-0	o		5			:	1,002
6	Credits/Payments								
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a		3,415					
b	Exempt foreign organizations—tax withheld at source	6b							
c	Tax paid with application for extension of time to file (Form 8868)	6c		0					
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d				7				3,415
8	Enter any penalty for underpayment of estimated tax Check here $\ \ \ \ $ if Form				8				0
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed .			•	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amou			•	10				2,413
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	1,004	Refunded		11				1,409
	t VII-A Statements Regarding Activities		!!:-!-+:-						N ₂
1a	During the tax year, did the foundation attempt to influence any national, stat it participate or intervene in any political campaign?	te, or lo	cai iegisiatio	on or ar	u		1a	Yes	No No
b	Did it spend more than \$100 during the year (either directly or indirectly) for	nolitica	l nurnoses (caa In	etructi	one	Ia		140
	for definition)?			300 111			1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activitie	es and co	opies of any i	materia	ls				
	published or distributed by the foundation in connection with the activities.		,						
c	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	osed du	rıng the yea	r					
	(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 t	ax ımp	osed				
	on foundation managers 🕨 \$								
2	Has the foundation engaged in any activities that have not previously been re	eported	to the IRS?				2		No
_	If "Yes," attach a detailed description of the activities.								
3	Has the foundation made any changes, not previously reported to the IRS, in	_	_	•		5	_		NI-
4-	of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a con</i>						3 4a	\vdash	No
4a b	Did the foundation have unrelated business gross income of \$1,000 or more 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 di						5		No
•	If "Yes," attach the statement required by General Instruction T.	army cm	c , cu	•					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4	945)sa	atisfied eithe	r					
	By language in the governing instrument, or	,				!			
	ullet By state legislation that effectively amends the governing instrument so t	hat no r	mandatory d	irectio	ns				
	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	r? <i>If "Ye</i>	s," complete	Part II,	col. (c),			
_							7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered >CO	(see in	structions)						
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 9	990-PF	to the Attor	nev					
	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				(1)(3)				
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (_						
	If "Yes," complete Part XIV						9		No
10	Did any persons become substantial contributors during the tax year? If "Yes	s," attacı	h a schedule	listing	their n	ames			
	and addresses.						10		No

Pai	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12	<u> </u>	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ▶			
14	The books are in care of ►US BANK Telephone no ►(503)) 464	-3580	
	Located at ►555 SW OAK PORTLAND OR ZIP+4 ►97204			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		▶ □	-
	and enter the amount of tax-exempt interest received or accrued during the year		- ,	
16			Yes	l No
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	res	No No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	10		NO
	Accounts (FBAR) If "Yes", enter the name of the foreign country			
Day	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
FŒ	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1_			res	NO
Ia	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes 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) A gree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days)			
ь	If any answer is "Yes" to 1a(1)–(6), did 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			
c	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			
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			
3 a	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	3.		
4.	If the foundation had excess business holdings in 2015.).	3b	+-	 _
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	A L		N-
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	1	No

5a		aramy Acathacs to	i willell I of ill 4	/ 20 Pla	iy Be Required (<i>Cont</i>	mueu)
	During the year did the foundatio	n pay or incurany amou	nt to			
	(1) Carry on propaganda, or othe	rwise attempt to influen	ce legislation (section	on 4945((e))? 	No
	(2) Influence the outcome of any					
	on, directly or indirectly, any					No
	(3) Provide a grant to an individu				r Yes ✓	
	(4) Provide a grant to an organiza				·	110
						T No.
	in section 4945(d)(4)(A)? (se				Tes	NO
	(5) Provide for any purpose other				□ v □	T No.
	educational purposes, or for t	•				NO
b	If any answer is "Yes" to 5a(1)-(
	Regulations section 53 4945 or					
	Organizations relying on a currer					
C	If the answer is "Yes" to question					
	tax because it maintained expend	diture responsibility for	the grant?		T Yes 「	No
	If "Yes," attach the statement requ	ured by Regulations secti	on 53.4945-5(d).			
6a	Did the foundation, during the yea	ar, receive any funds, di	rectly or indirectly, t	o pay pre	emiums on	
	a personal benefit contract?					No
ь	Did the foundation, during the yea	ar, pay premiums, direct	tly or indirectly, on a	persona	I benefit contract?	. 6b No
	If "Yes" to 6b, file Form 8870.	,, ,,	,	•		
7a	At any time during the tax year, v	was the foundation a nar	ty to a prohibited ta	(shelter	transaction?	No.
b	If yes, did the foundation receive	•			·	
Pa	and Contractors	t Officers, Director	rs, Trustees, Fo	unuatio	on Managers, Highly	Paid Employees,
-	List all officers, directors, trustee	s. foundation managers	and their compensa	tion (see	instructions).	
					(d)	
		Title, and average	e (c) Compensatio	n/Tfr I		
	(a) Name and address				Contributions to	Expense account,
	(a) Name and address	hours per week	not paid, ente	r	employee benefit plans	Expense account, (e) other allowances
LIC P		hours per week (b) devoted to positio	not paid, ente	r an		
US Ba	ink	hours per week	not paid, ente	r	employee benefit plans	
PO E	ink 30 X 3168	hours per week (b) devoted to positio	not paid, ente	r an	employee benefit plans	
PO E	nk 30 X 3168 TLAND, OR 97208	hours per week (b) devoted to positio TRUSTEE 1	not paid, ente	an 5,012	employee benefit plans nd deferred compensation	(e) other allowances
PO E	ink 30 X 3168	hours per week (b) devoted to positio TRUSTEE 1	not paid, ente	an 5,012	employee benefit plans nd deferred compensation e instructions). If none, en	(e) other allowances
PO E POR	ink BOX 3168 TLAND,OR 97208 Compensation of five highest-paid (a)	hours per week (b) devoted to positio TRUSTEE 1 d employees (other than Title, and ave	not paid, entern 20	ir an	employee benefit plans nd deferred compensation e instructions). If none, en	(e) other allowances
PO E POR	onk BOX 3168 TLAND, OR 97208 Compensation of five highest-paid (a) ne and address of each employee	hours per week (b) devoted to position TRUSTEE 1 d employees (other than paid hours per week)	not paid, entern 20 1 those included on learage eek (c) Compe	ir an	employee benefit plans nd deferred compensation e instructions). If none, en Contributions to employee benefit	(e) other allowances ter "NONE." Expense account,
PO E POR	ink BOX 3168 TLAND,OR 97208 Compensation of five highest-paid (a)	hours per week (b) devoted to positio TRUSTEE 1 d employees (other than Title, and ave	not paid, entern 20 1 those included on learage eek (c) Compe	ir an	employee benefit plans nd deferred compensation e instructions). If none, en Contributions to employee benefit	(e) other allowances
PO E POR	onk BOX 3168 TLAND, OR 97208 Compensation of five highest-paid (a) ne and address of each employee more than \$50,000	hours per week (b) devoted to position TRUSTEE 1 d employees (other than paid hours per week)	not paid, entern 20 1 those included on learage eek (c) Compe	ir an	e instructions). If none, en Contributions to employee benefit plans and deferred	(e) other allowances ter "NONE." Expense account,
PO E POR 2	onk BOX 3168 TLAND, OR 97208 Compensation of five highest-paid (a) ne and address of each employee more than \$50,000	hours per week (b) devoted to position TRUSTEE 1 d employees (other than paid hours per week)	not paid, entern 20 1 those included on learage eek (c) Compe	ir an	e instructions). If none, en Contributions to employee benefit plans and deferred	(e) other allowances ter "NONE." Expense account,
PO E POR 2	onk BOX 3168 TLAND, OR 97208 Compensation of five highest-paid (a) ne and address of each employee more than \$50,000	hours per week (b) devoted to position TRUSTEE 1 d employees (other than paid hours per week)	not paid, entern 20 1 those included on learage eek (c) Compe	ir an	e instructions). If none, en Contributions to employee benefit plans and deferred	(e) other allowances ter "NONE." Expense account,
PO E POR 2	onk BOX 3168 TLAND, OR 97208 Compensation of five highest-paid (a) ne and address of each employee more than \$50,000	hours per week (b) devoted to position TRUSTEE 1 d employees (other than paid hours per week)	not paid, entern 20 1 those included on learage eek (c) Compe	ir an	e instructions). If none, en Contributions to employee benefit plans and deferred	(e) other allowances ter "NONE." Expense account,
PO E POR 2	onk BOX 3168 TLAND, OR 97208 Compensation of five highest-paid (a) ne and address of each employee more than \$50,000	hours per week (b) devoted to position TRUSTEE 1 d employees (other than paid hours per week)	not paid, entern 20 1 those included on learage eek (c) Compe	ir an	e instructions). If none, en Contributions to employee benefit plans and deferred	(e) other allowances ter "NONE." Expense account,
PO E POR 2	onk BOX 3168 TLAND, OR 97208 Compensation of five highest-paid (a) ne and address of each employee more than \$50,000	hours per week (b) devoted to position TRUSTEE 1 d employees (other than paid hours per week)	not paid, entern 20 1 those included on learage eek (c) Compe	ir an	e instructions). If none, en Contributions to employee benefit plans and deferred	(e) other allowances ter "NONE." Expense account,
PO E POR 2	onk BOX 3168 TLAND, OR 97208 Compensation of five highest-paid (a) ne and address of each employee more than \$50,000	hours per week (b) devoted to position TRUSTEE 1 d employees (other than paid hours per week)	not paid, entern 20 1 those included on learage eek (c) Compe	ir an	e instructions). If none, en Contributions to employee benefit plans and deferred	(e) other allowances ter "NONE." Expense account,
PO E POR 2	onk BOX 3168 TLAND, OR 97208 Compensation of five highest-paid (a) ne and address of each employee more than \$50,000	hours per week (b) devoted to position TRUSTEE 1 d employees (other than paid hours per week)	not paid, entern 20 1 those included on learage eek (c) Compe	ir an	e instructions). If none, en Contributions to employee benefit plans and deferred	(e) other allowances ter "NONE." Expense account,
PO E POR 2	onk BOX 3168 TLAND, OR 97208 Compensation of five highest-paid (a) ne and address of each employee more than \$50,000	hours per week (b) devoted to position TRUSTEE 1 d employees (other than paid hours per week)	not paid, entern 20 1 those included on learage eek (c) Compe	ir an	e instructions). If none, en Contributions to employee benefit plans and deferred	(e) other allowances ter "NONE." Expense account,
PO E POR 2	onk BOX 3168 TLAND, OR 97208 Compensation of five highest-paid (a) ne and address of each employee more than \$50,000	hours per week (b) devoted to position TRUSTEE 1 d employees (other than paid hours per week)	not paid, entern 20 1 those included on learage eek (c) Compe	ir an	e instructions). If none, en Contributions to employee benefit plans and deferred	(e) other allowances ter "NONE." Expense account,
PO E POR 2	onk BOX 3168 TLAND, OR 97208 Compensation of five highest-paid (a) ne and address of each employee more than \$50,000	hours per week (b) devoted to position TRUSTEE 1 d employees (other than paid hours per week)	not paid, entern 20 1 those included on learage eek (c) Compe	ir an	e instructions). If none, en Contributions to employee benefit plans and deferred	(e) other allowances ter "NONE." Expense account,

Form 990-PF (2015)		Page 7
Part VIII Information About Officers, Directors, Trust and Contractors (continued)	ees, Foundation Managers, Higl	hly Paid Employees,
3 Five highest-paid independent contractors for professional services	(see instructions). If none, enter "NONE	" <u>. </u>
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services.		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rel organizations and other beneficiaries served, conferences convened, research papers produced.		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	•	Amount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		P

Part X Minimum Investment Return

Pa	(All domestic foundations must complete this part. Foreign foundations, see instruction	ıs.)	
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	2,322,075
b	Average of monthly cash balances	1b	26,024
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	2,348,099
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	2,348,099
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ $\!$ of line 3 (for greater amount, see		
	ınstructions)	4	35,221
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,312,878
6	Minimum investment return. Enter 5% of line 5	6	115,644
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cere check here ► □ and do not complete this part.)	rtaın fo	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	115,644
2a	Tax on investment income for 2015 from Part VI, line 5 2a 1,002		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	1,002
3	Distributable amount before adjustments Subtract line 2c from line 1	3	114,642
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	114,642
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	114,642
Par	t XII Qualifying Distributions (see instructions)	•	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	117,521
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 ,		
	purposes	2	0
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	117,521
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	1,002
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	116,519
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the section 4940(e) reduction of tax in those years	er the f	oundation qualifies for

P	art XIIII Undistributed Income (see inst	ructions)			
		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, line 7				114,642
2	Undistributed income, if any, as of the end of 2015				
а	Enter amount for 2014 only			113,768	
	Total for prior years 2013, 20, 20		0		
3	Excess distributions carryover, if any, to 2015				
_	From 2010				
	From 2011				
c	From 2012)			
d	From 2013				
	From 2014	_)			
	Total of lines 3a through e		0		
	Qualifying distributions for 2015 from Part				
•	XII, line 4 > \$117,521				
2	Applied to 2014, but not more than line 2a			113,768	
			0	2207.00	
	Applied to undistributed income of prior years (Election required—see instructions)		-		
С	Treated as distributions out of corpus (Election required—see instructions)		0		
d	Applied to 2015 distributable amount				3,753
е	Remaining amount distributed out of corpus		0		
5	Excess distributions carryover applied to 2015		0		0
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5		0		
	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)		0		
_	tax has been previously assessed		, and the second		
d	Subtract line 6c from line 6b Taxable amount —see instructions		0		
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see			0	
_	instructions			ŭ	
Т	Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must				
	be distributed in 2015				110,889
7	Amounts treated as distributions out of				
•	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may				
	be required - see instructions)		0		
8	Excess distributions carryover from 2010 not		0		
_	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a		0		
10					
	Analysis of line 9 Excess from 2011				
	Excess from 2012				
	Excess from 2012				
	Excess from 2014				
	Excess from 2015				
~	LACESS HUIII ZUIDI II II II II				

	n 990-PF (2015) art XIV Private Operating Foundat	t ions (see instri	ictions and Part	· VII-A question	9)	Page 10
	If the foundation has received a ruling or deterr foundation, and the ruling is effective for 2015,	nination letter tha	t it is a private ope	erating		
h	Check box to indicate whether the organization				☐ 4942(1)(3) or	T 4942(1)(5)
	Enter the lesser of the adjusted net	Tax year		Prior 3 years	1 4342())(3)(1	1 4942(])(3)
	income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	investment return from Part X for each	(a) 2013	(6) 2014	(6) 2013	(d) 2012	
h (yearlisted					
	Oualifying distributions from Part XII.					
•	line 4 for each year listed					
d	A mounts included in line 2c not used directly for active conduct of exempt					
e	activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
_	alternative test relied upon "Assets" alternative test—enter					
а	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed					
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					
_	(4) Gross investment income			<u> </u>		
' a	rt XV Supplementary Information (assets at any time during the	Complete this	part only if th	e organizatio	n had \$5,000 o	r more in
	Information Regarding Foundation Managers:	year—see iiis	tructions.)			
а	List any managers of the foundation who have c before the close of any tax year (but only if the					lation
<u> </u>	List any managers of the foundation who own 10)% or more of the	stock of a corpora	ition (or an equally	/ large portion of th	e
_	ownership of a partnership or other entity) of wh				range portion or th	
	.,		-			
:	Information Regarding Contribution, Grant, Gif	t, Loan, Scholarshi	p, etc., Programs:			
	Check here ► rif the foundation only makes co	ontributions to pre	selected charitabl	le organizations ai	nd does not accept	
	unsolicited requests for funds If the foundation		ts, etc (see instri	uctions) to individ	uals or organızatıoı	ns under
	other conditions, complete items 2a, b, c, and c	d				
а	The name, address, and telephone number or e	-mail address of t	he person to whom	n applications sho	uld be addressed	
	US BANK CO SALLY WOODS					
	200 UNIVERSITY BOULEVARD DENVER, CO 80206 (206) 344-5062					
h	The form in which applications should be subm	itted and informati	on and materials t	they should includ	e	
,	LETTER FORMAT WITH A FORMAL PROPOSA STATUS AND REASON FOR REQUEST					ATION, EXEMPT
_	Any submission deadlines					
٠	NO SUBMISSION DEADLINES					
				ع المام الما		
d	Any restrictions or limitations on awards, such	as by geographic	aı areas, charitabl	e rieias, kinds of i	nstitutions, or othe	Γ

THE SOLE PURPOSE OF THIS TRUST IS TO BENEFIT AND ASSIST SUCH PUBLIC CHARITIES AND PUBLIC CHARITABLE

PURPOSES AS TRUSTEES DETERMINE FROM AMONG ORGANIZATIONS, USES AND PURPOSES NAMED

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 113,395 **b** Approved for future payment

Form 990-PF (2015) Part XVI-A Analysis of Income-Produc	ing Activitie	s			Page 1 2
Enter gross amounts unless otherwise indicated		ısıness income	Excluded by section	(e) Related or exempt function income	
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	(See Instructions)
a b					
c d					
e					
g Fees and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	51,705	
5 Net rental income or (loss) from real estate a Debt-financed property					
b Not debt-financed property6 Net rental income or (loss) from personal property					
7 Other investment income			18	74,799	
Net income or (loss) from special events Gross profit or (loss) from sales of inventory .					
b					
c					
e 2 Subtotal Add columns (b), (d), and (e)				126,504	
3 Total.Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify a relationship of Activities to	calculations)			13	126,504
Explain below how each activity for whe the accomplishment of the foundation's instructions)	ıch ıncome ıs re	ported ın column ((e) of Part XVI-A c	ontributed importa	

Part	t XVI	Information R Noncharitable				actions and I	Relationships	With		
		organization directly or i	ndırectly (engage in any of	the following wit				Ye	s No
		501(c) of the Code (other)	er than se	ction 501(c)(3)	organizations) o	r in section 527,	relating to politic	:al	16	5 NO
_		tions?	adation to	a nanaharitahla	avamet aranniza	stron of				
		s from the reporting fou h						1	a(1)	No
		erassets						-	a(2)	No
` '	•	ansactions							a(2)	NO
		es of assets to a noncha	ritable ov	omnt organizatio	n			1	b/1)	No
		chases of assets from a							b(2)	No
		tal of facilities, equipme						_	b(3)	No
		nbursement arrangemei						_	b(4)	No
		ns or loan guarantees.						_	b(5)	No
		rmance of services or m						_	b(6)	No
		of facilities, equipment,						-	1c	No
	_	swer to any of the above	_							140
of t	the go any tra	ods, other assets, or seansaction or sharing arr	rvices giv angement	en by the report	ing foundation I (d) the value of	f the foundation r the goods, other	eceived less thai	n fair market ces received	value	nents
(4)		(b) / illicult illivoireu	(c) Hame	or monenamed ex	empt organization	(a) Description	or transfers, transact	nons, and sham	ig arrangen	Terres
des	scribe	undation directly or indi d in section 501(c) of the complete the following (a) Name of organization	ne Code (d schedule	other than sectio		in section 527?.		ption of relation	┌Yes ship	₽No
Sign	the	der penalties of perjury, best of my knowledge a brmation of which prepai	and belief,	ıt ıs true, correc	t, and complete			an taxpayer)		on all
Here					2016-05-05	\		return with the	preparer sl	nown
		Signature of officer or t	rustee		Date	Title	T	below (see inst	r)? Ves	
		Print/Type preparer's DONALD J ROMAN		Preparer's Sıgr	nature	Date 2016-05-05	Check if self- employed ►	PTIN POO	364310	
Paid Prep Use	arer	Firm's name PRICEWATERHOUSE	ECO O PER	S LLP			Firm's EIN ► 1	3-4008324		
Only		Firm's address • 600 GRANT STREET PITTSBURGH, PA 15219 Phone no (412)355-6000								

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)
900 IPATH DOW JONES UBS COMMODITY			2015-01-21
679 348 INV BALANCE RISK COMM STR Y		2012-07-10	2015-04-07
100 IPATH DOW JONES UBS COMMODITY		2010-06-14	2015-04-07
574 713 ROWE T PRICE INTL FDS INC INTL BD FD		2014-05-14	2015-04-07
625 782 TCW EMERGING MARKETS INCOME FUND		2014-11-10	2015-04-07
9256 217 ABERDEEN FDS EMRGN			2015-07-07
358 295 PRICE T ROWE GROWTH STK FD INC COM		2004-06-03	2015-07-07
460 123 INV BALANCE RISK COMM STR Y		2012-07-10	2015-10-01
200 IPATH DOW JONES UBS COMMODITY		2010-06-14	2015-10-01
2426 062 COLUMBIA INCOME FD CL Z			2015-10-01

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)
26,037		39,142	-13,105
5,007		6,963	-1,956
2,871		3,834	-963
4,966		5,626	-660
5,013		5,321	-308
123,756		119,778	3,978
20,065		8,795	11,270
3,009		4,716	-1,707
4,918		7,668	-2,750
23,387		24,901	-1,514

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

Complete 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 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 (l) Losses (from col (h))
			-13,105
			-1,956
			-963
			-660
			-308
			3,978
			11,270
			-1,707
			-2,750
			-1,514

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)
9499 741 COLUMBIA INCOME FD CL Z		2013-05-07	2015-10-01
666 667 TCW EMERGING MARKETS INCOME FUND		2014-11-10	2015-10-01
600 IPATH DOW JONES UBS COMMODITY		2010-06-14	2015-11-04
341 239 PRICE T ROWE GROWTH STK FD INC COM		2004-06-03	2015-11-04
64 558 VANGUARD MID-CAP INDEX-ADM		2013-05-07	2015-11-04
542 888 EATON VANCE GLOBAL MACRO FD CL I		2013-05-07	2015-11-27
916 59 NUVEEN CORE PLUS BOND I		2014-06-18	2015-11-27
343 584 PRICE T ROWE GROWTH STK FD INC COM		2004-06-03	2015-11-27
397 4 SCOUT INTERNATIONAL FUND		2014-12-19	2015-11-27
235 511 SCOUT INTERNATIONAL FUND		2010-06-14	2015-11-27

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)
91,578		101,077	-9,499
5,013		5,660	-647
14,365		23,004	-8,639
20,010		8,376	11,634
9,976		7,703	2,273
4,984		5,261	-277
10,000		10,715	-715
20,003		8,433	11,570
12,558		13,047	-489
7,442		6,364	1,078

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

Complete 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))
			-9,499
			-647
			-8,639
			11,634
			2,273
			-277
			-715
			11,570
			-489
			1,078

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)
65 003 VANGUARD MID-CAP INDEX-ADM		2013-05-07	2015-11-27
8493 771 NUVEEN HIGH INCOME BOND FD CL I		2014-11-14	2015-12-11
13041 332 NUVEEN DIVIDEND VALUE FUND CLASS I			2015-12-11
917 6 NUVEEN DIVIDEND VALUE FUND CLASS I		2014-12-16	2015-12-11
432 826 PRICE T ROWE GROWTH STK FD INC COM			2015-12-11
2762 785 SALIENT MLP ENERGY INFRASTRUCTURE I			2015-12-11
4832 125 SCOUT INTERNATIONAL FUND			2015-12-11
CAPITAL GAIN DIVIDENDS	Р		

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)
10,013		7,756	2,257
59,456		75,000	-15,544
199,793		156,214	43,579
14,058		14,746	-688
24,437		10,348	14,089
18,345		34,019	-15,674
145,834		125,560	20,274
			27,932

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

Complete 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), ıf any	col (k), but not less than -0-) or (l) Losses (from col (h))
			2,257
			-15,544
			43,579
			-688
			14,089
			-15,674
			20,274

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

Recipient Name and address (home or	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
COUNCIL ON AGING SONOMA COUNTY 730 BENNETT VALLEY RD SANTA ROSA,CA 95404	NONE	PC	GENERAL SUPPORT	2,667
PIKES PEAK HOSPICE FOUNDATION 825 E PIKES PEAK AVENUE COLORADO SPRINGS,CO 80903	NONE	PC	INDIGENT CARE	5,000
DAHLSTROM HOUSE BAY AREA CRISIS NURSERY 1506 MENDOCINO DRIVE CONCORD,CA 94521	NONE	PC	GENERAL SUPPORT	2,000
FAMILY AID FOR CATHOLIC EDUCATION 2121 HARRISON ST STE 100 OAKLAND, CA 94512	NONE	PC	GENERAL SUPPORT	2,000
NOTRE DAME SCHLRSHP FUND OFFICE OF FINANCIAL AID UNIVERSITY OF NOTRE DAME NOTRE DAME,IN 46556	NONE	PC	SCHOLARSHIP FUND	6,000
O'DEA HS SCHOLARSHIP FUND ATTN BR KARL WALCZAK 802 TERRY AVENUE SEATTLE, WA 98104	NONE	PC	SCHOLARSHIP FUND	6,000
CATHOLIC FAMILY AND CHILD SERVICES/TRI-CITIES 2139 VAN GIESEN ST RICHLAND, WA 99352	NONE	PC	GENERAL SUPPORT	1,500
HOSPICE FDN OF EAST BAY DIRECTOR OF FND DEVELOP 3470 BUSKIRK AVENUE PLEASANT HILL,CA 94523	NONE	PC	BRUNS HOUSE IN ALAMO	1,500
LASALLIAN EDUCATIONAL OPPORTUNITIES CENTER PO BOX 3238 OAKLAND,CA 94609	NONE	PC	GENERAL SUPPORT	1,500
LINDSAY WILDLIFE MUSEUM 1931 FIRST AVENUE WALNUT CREEK,CA 94597	NONE	PC	WILDLIFE HOSPITAL	3,167
JOHN MUIR HEALTH FDN ATTN SALLY GRANT 1400 TREAT BOULEVARD WALNUT CREEK,CA 94597	NONE	PC	INPATIENT REHAB EQUIPMENT	2,634
ST ANTHONY SCHOOL 1500 EAST 15TH STREET OAKLAND,CA 94606	NONE	PC	COMPUTERS/TUITION	2,000
ST MARTIN DE PORRES SCHOOL 675 41ST STREET OAKLAND,CA 94609	NONE	PC	COMPUTERS/TUITION	2,000
STAND FOR FAMILIES FREE OF VIOLENCE 1410 DANZIG PLAZA STE 200 CONCORD,CA 94520	NONE	PC	FAMILIES NEEDS PROGRAMS	2,500
LOAVES & FISHES OF CONTRA COSTA COUNTY 510 GARCIA AVENUE PITTSBURG,CA 94565	NONE	PC	GENERAL SUPPORT	2,750
Total				113,395

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
	or substantial contributor			
a Paid during the year CATHOLIC CHARITIES OF EAST BAY ATTN COLLEEN MILLER 433 JEFFERSON STREET OAKLAND, CA 94607	NONE	PC	LIFE SUPPORT AND JOYBELLS	4,000
SUSAN G KOMEN BREAST CANCER FDNSACRAMENTO VALLEY 9310 TECH CTR DR STE 250 SACRAMENTO, CA 95826	NONE	PC	NAT'L RESEARCH PROGRAM &	1,250
PLACER COUNTY SPCA ATTN LEILANI FRATIS 150 CORPORATION YARD RD ROSEVILLE,CA 95678	NONE	PC	GUARDIAN ANGEL PROGRAM	1,250
GREATER BAY AREA MAKE-A WISH FDN 55 HAWTHORNE ST STE 800 SAN FRANCISCO,CA 94104	NONE	PC	MAKE-A-WISH PROGRAM	1,000
CATHOLIC CHARITIES OF THE DIOCESE OF SANTA ROSA PO BOX 4900 SANTA ROSA,CA 95402	NONE	PC	FAMILY SUPPORT CTR &	1,500
BAY AREA CRISIS NURSERY ATTN SISTER ANN WELTZ 1506 MENDOCINO DRIVE CONCORD,CA 94521	NONE	PC	CHILDREN'S NEEDS	2,000
CATHOLIC CHARITIES OF CENTRAL COLORADO 228 N CASCADE AVE STE 139 COLORADO SPRINGS,CO 80903	NONE	PC	SUPPORT OF MARIAN HOUSE	5,000
HOLY NAMES ACADEMY 728 21ST AVENUE EAST SEATTLE,WA 98112	NONE	PC	GENERAL SUPPORT	2,000
TAYLOR FAMILY FOUNDATION ATTN ELAINE TAYLOR 5555 ARROHYO ROAD LIVERMORE,CA 94550	NONE	PC	CAMP ARROYO	1,667
HOME FRONT CARES 1120 N CIRCLE DR COLORADO SPRINGS,CO 80909	NONE	PC	GENERAL OPERATING PURPOSES	3,126
RECLAIMING CHRIST'S MISSION TOGETHER 2121 HARRISON ST OAKLAND,CA 94612	NONE	PC	GENERAL PURPOSES	1,000
ST MARY CATHOLIC CHURCH 2051 MT DIABLO BLVD WALNUT CREEK,CA 94596	NONE	PC	GENERAL PURPOSES	1,000
BIG BROTHERS BIG SISTERS NORTH BAY 1618 2ND ST SAN RAFAEL,CA 94901	NONE	PC	GENERAL PURPOSES	1,000
ROHNERT PARK ANIMAL SHELTER 301 J ROGERS LANE ROHNERT PARK,CA 94928	NONE	PC	GENERAL PURPOSES	500
FOOD BANK OF CONTRA COSTA COUNTY 4010 NELSON AVENUE CONCORD,CA 94524	NONE	PC	GENERAL SUPPORT	1,500
Total			▶ 3a	113,395

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

	ints and Continuations			· ·,
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				
SPRINGS RESCUE MISSION PO BOX 699 COLORADO SPRINGS,CO 80901	NONE	PC	FAMILY CRISIS CENTER	5,000
MONUMENT CRISIS CENTER PO BOX 23973 PLEASANT HILL,CA 94523	NONE	PC	GENERAL SUPPORT	2,000
URBAN PEAK 423 E CUCHARAS ST COLORADO SPRINGS,CO 80903	NONE	PC	GENERAL SUPPORT	5,000
CHILDREN'S HOSPITAL FOUNDATION PO BOX 5585 DENVER,CO 80217	NONE	PC	GENERAL SUPPORT	5,000
CARE AND SHARE SOUTHERN COLORADO 2605 PREAMBLE PT COLORADO SPRINGS,CO 80915	NONE	PC	GENERAL SUPPORT	5,000
MAKE-A-WISH FOUNDATION NORTHEASTERN CA & NORTHERN NV 2800 CLUB CENTER DRIVE SACRAMENTO, CA 95835	NONE	PC	GENERAL SUPPORT	1,250
DISCOVER GOODWILL FOUNDATION 1460 GARDEN OF THE GODS RD COLORADO SPRINGS,CO 80907	NONE	PC	GENERAL SUPPORT	5,000
BOYS & GIRLS CLUB OF PIKES PEAK REGION PO BOX 15919 COLORADO SPRINGS,CO 80935	NONE	PC	YOUTH ACTIVITIES	5,000
GRECCIO HOUSING 1808 W COLORADO AVE COLORADO SPRINGS,CO 80904	NONE	PC	GENERAL SUPPORT	5,000
WESTSIDE CARES 1930 W COLORADO AVE COLORADO SPRINGS,CO 80910	NONE	PC	UTILITIES	4,134
Total				113,395

TY 2015 Accounting Fees Schedule

Name: MABEL HORRIGAN FOUNDATION 99011580

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX PREPARATION FEE (NON-ALLOC	1,500			1,500

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TY 2015 Investments Corporate Bonds Schedule

Name: MABEL HORRIGAN FOUNDATION 99011580

Name of Bond	End of Year Book Value	End of Year Fair Market Value	
ISHARES BARCLAYS TIPS BOND ETF	46,552	43,872	
T ROWE PRICE INTL BOND FUND	54,632	46,458	
INV BALANCE RISK COMM	26,728	18,495	
COLUMBIA INCOME FD	100,000	95,858	
EATON VANCE GLOBAL MACRO FND	98,645	94,487	
FEDERATED INST HI YLD BD FD	75,000	67,300	
NUVEEN CORE PLUS BOND I	114,285	104,490	
NUVEEN HIGH INCOME BOND FD			
NUVEEN INFLATION PRO SEC	100,000	96,853	
NUVEEN SHORT TERM BOND FUND	95,000	93,266	
TCW EMERGING MARKETS	39,001	34,235	

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TY 2015 Investments Corporate Stock Schedule

Name: MABEL HORRIGAN FOUNDATION 99011580

Name of Stock	End of Year Book Value	End of Year Fair Market Value
T ROWE PRICE GROWTH STK FD #40	99,715	218,421
SCOUT INTERNATIONAL FUND		
IPATH DOW JONES UBS COMMODITY		
ABERDEEN FDS EMERGN MRKT		
ISHARES DJ US R/E ETF	57,100	75,080
VANGUARD INTL GRWTH FND #581	132,749	168,786
NUVEEN DIVIDEND VAL FND		
VANGUARD MID CAP INDEX #1344	109,540	136,527
VANGUARD SMALL CAP INDEX #1345	50,000	59,239
NEUBERGER BERMAN EMERG MRKTS		
ROBECO BOSTON PARTNERS	95,000	98,032

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TY 2015 Investments - Other Schedule

Name: MABEL HORRIGAN FOUNDATION 99011580

Category / Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
AQR MANAGED FUTURES STR I	AT COST	25,000	22,930
CAUSEWAY EMERGING MARKETS INST	AT COST	125,000	103,322
DOUBLELINE TOTAL RET BD I	AT COST	120,000	118,137
FIDELITY ADV DIVERS INTL CL I	AT COST	150,000	153,139
GOLDEN LARGE CAP CORE I	AT COST	150,000	146,388
NEUBERGER BERMAN EMERG MKTS EQ	AT COST	80,000	68,844
PRUDENTIAL SHORT DUR HI YLD IN	AT COST	60,000	60,000
VANGUARD REIT ETF	AT COST	15,546	15,946

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TY 2015 Other Assets Schedule

Name: MABEL HORRIGAN FOUNDATION 99011580

Description	Beginning of Year -	End of Year - Book	End of Year - Fair
	Book Value	Value	Market Value
ACCRUED INCOME		2,047	2,047

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TY 2015 Other Decreases Schedule

Name: MABEL HORRIGAN FOUNDATION 99011580

Description	Amount
PY BALANCE SHEET ADJUSTMENT	2,172
RETURN OF CAPITAL ADJUSTMENT	2,170

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TY 2015 Other Expenses Schedule

Name: MABEL HORRIGAN FOUNDATION 99011580

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MN STATE AG FEE	25	0		25



TY 2015 Other Increases Schedule

Name: MABEL HORRIGAN FOUNDATION 99011580

Description	Amount
COST BASIS ADJUSTMENT	946

TY 2015 Taxes Schedule

Name: MABEL HORRIGAN FOUNDATION 99011580

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	594	594		0
FEDERAL ESTIMATES - PRINCIPAL	1,502	0		0
FOREIGN TAXES ON NONQUALIFIED	119	119		0