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Form **990-PF**

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf

	For	caler	idar year 2015 or tax year beginning		, and ending		
	Na	me of	foundation			A Employer identification	number
	N	EW.	BURN FAMILY FOUNDATION	91-6458791			
	Nur	nber a	nd street (or P O box number if mail is not delivered to street	B Telephone number			
	_4	78	<u>0 VILLAGE PLAZA LOOP, S</u>	UITE 210		541-683-87	47
			own, state or province, country, and ZIP or foreign ${\tt FENE}$, OR 97401	postal code		C If exemption application is pe	ending, check here
			ENE , OR 97401 all that apply: Initial return	Initial return of a f	ormer public charity	D 1. Foreign organizations	check here
	-		Final return	Amended return	ormor public ondires]	· -
			Address change	Name change		Foreign organizations med check here and attach cor	eting the 85% test, imputation
	·H(Check	type of organization: X Section 501(c)(3) e	xempt private foundation] IE If private foundation stat	tus was terminated
			ction 4947(a)(1) nonexempt charitable trust	Other taxable private found		under section 507(b)(1)	(A), check here
			·	ing method: X Cash	Accrual	F If the foundation is in a (- —
				ther (specify)		under section 507(b)(1)	(B), check here
		rt I	668,485. (Part I, cold Analysis of Revenue and Expenses			() () ()	(d) Disbursements
		71 6 1	The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
20		1	Contributions, gifts, grants, etc., received	50,000.	<u></u>	N/A	<u> </u>
2016		3	Check Interest on savings and temporary cash investments	· · · · · · · · · · · · · · · · · · ·	***	ź, śż.	\$ 35 W
69		4	Dividends and interest from securities	7,274.	7,274.	-	STATEMENT: 1
•		5a	Gross rents				`;;}
APR		b	Net rental income or (loss)	the law	1 (4)	* 3	- 36
$\overline{\forall}$	O	6a	Net gain or (loss) from sale of assets not on line 10	27,233.		* 55	·
	evenue	Ь		1	<i>₹%</i> ,	, , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·
	Reve	1 .	Capital gain net income (from Part IV, line 2)	**	27,233.	<u>*</u> ?	<u>**</u>
2		8	Net short-term capital gain	>			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
SCANNED		9 10a	Income modifications Gross sales less returns			* ***	1/3% - v
Ø		Ι.	and allowances Less Cost of goods sold		138 8	**	-
		}	Gross profit or (loss)		×5 ,×5	<u> </u>	(, , , , ,
		11	Other income	19,260.	19,260.		STATEMENT 2
		12	Total. Add lines 1 through 11	103,767.	53,767.		
		13	Compensation of officers, directors, trustees, etc	0.	0.		-1 · · · · · · · · · · · · · · · · · · ·
		14	Other employee salaries and wages			1-	<u> </u>
	ģ	15	Pension plans, employee benefits			MAR 9	8 2016
			Legal fees			Hall Wall #	5 2010 5
10	Administrative Expense	ם נ	Accounting fees Other professional fees	<u> </u>		I OGDE	
563	, iii	17	Interest				N 14 . W B B
<u> Ç</u>	ativ	18	Taxes STMT 3	1,040.	0.		0.
M. Correstos (N. C.)	istr	19	Depreciation and depletion				
(C) 4		20	Occupancy				
	Į P	21	Travel, conferences, and meetings				
!</td <td>ond.</td> <td>22</td> <td>Printing and publications</td> <td></td> <td></td> <td></td> <td></td>	ond.	22	Printing and publications				
>>	<u> </u>	23	Other expenses STMT 4	6,402.	0.		0.
E	Operating and	24	Total operating and administrative	7 442	^		•
<u> </u>	Ö	0.5	expenses. Add lines 13 through 23	7,442.	0.	8 3	31,900.
		25 26	Contributions, gifts, grants paid Total expenses and disbursements.	31,500.		<u> </u>	31,300.
Oginta o sala	3	20	Add lines 24 and 25	39,342.	0.		31,900.
Ų,		27	Subtract line 26 from line 12:	`& \$, · · ·	* 47 * * * * * * * * * * * * * * * * * *	· 20/18 1	- · · · · · · · · · · · · · · · · · · ·
2		1	Excess of revenue over expenses and disbursements	64,425.	Š,	ž 8.	50,
•		Ь	Net investment income (if negative, enter -0-)	2 3 5	53,767.	×6	
	E005		Adjusted net income (if negative, enter -0-)	3 30 30 1	* \` \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	N/A	<u>* _ * _ · _ </u>
	5235	UΊ	LILLA For Department Deduction Act Matice and	!	· 6 /th		Form 000-DE (0015)

16150321 149103 64210

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

664,448

Part IV Capital Gains	and Losse	s for Tax on Inv	vestment	Income					
		of property sold (e.g., mmon stock, 200 shs.			P-	ow acquired Purchase Donation	(c) Date : (mo., d	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
1a FIDELITY #676-	813087					P	06/3		12/31/15
	813079					P	06/3		12/31/15
c FIDELITY #676-			_			P	06/3	0/15	12/31/15
d CAPITAL GAINS	<u>DIVIDEN</u>	DS							
е									
(e) Gross sales price		ciation allowed allowable)		st or other basis expense of sale				ain or (loss (f) minus ((g)
a 45,920.				45,98				`	
ь 49,860.	ļ			41,78					8,075.
c 64,411.	ļ			50,17	3.				14,238.
d 4,985.									4,985.
e	L								
Complete only for assets shown	ng gain in colun	n (h) and owned by the					(I) Gains (C		
(i) F.M.V. as of 12/31/69		justed basis f 12/31/69		cess of col. (I) col. (J), If any		C	ol. (k), but r Losses	(from col. ((h))
a									-65.
b									8,075.
С									14,238.
d	<u> </u>	- · · · · · · · · · · · · · · · · · · ·							4,985.
е	<u></u>								
2 Capital gain net income or (net capital	apıtal loss)	If gain, also enter If (loss), enter -0-			}	2			27,233.
3 Net short-term capital gain or (lo	ss) as defined ii	n sections 1222(5) and	d (6):		$\langle \cdot \cdot \rangle$				
If gain, also enter in Part I, line 8	, column (c).	. ,	` '		M				
If (loss), enter -0- in Part I, line 8	la da a O a at	4040/-\	Na alexà a al	T		3		N/A	·
Part V Qualification U						unent ind	ome		
(For optional use by domestic privat	e foundations si	ubject to the section 4	940(a) tax on	net investment ind	come.)				
If section 4940(d)(2) applies, leave t	his part blank.								
Was the foundation liable for the sec				•	logs				Yes X No
If "Yes," the foundation does not qua					teroo				
Enter the appropriate amount in (a)	each column to		structions dei	ore making any er					(d)
Base periód years	·	(b) djusted qualifying dist	rihiitions	Net value of no	(C) ncharit:	ahle-use asset		Distrib	oùtion ratio
Calendar year (or tax year beginn	ing in) '		0,500.	100 1000 01110		611,86		(cor. (b) alv	nded by col. (c)) • 049848
2014			8,000.			575,46			.048656
2013			6,500.			538,24			.049234
2012			5,868.			$\frac{338,24}{480,12}$.053877
2011			5,828.			$\frac{480,12}{471,40}$.054789
2010			5,626.			4/1,40	} 		.034769
O Takel of lens 4 column (d)							ایا		.256404
2 Total of line 1, column (d)	E waar bass son	und duuda tha tatal a	n linn O hii E	or by the number	of woor	•	2		.230404
3 Average distribution ratio for the	-		in line 2 by 5,	or by the number	or year:	S			.051281
the foundation has been in existe	ence ir iess triari	o years					3		.031201
4 Enter the net value of noncharital	ble-use assets f	or 2015 from Part X, I	ine 5				4		531,191.
5 Multiply line 4 by line 3							5		27,240.
= managery mile i by mile b									
6 Enter 1% of net investment incor	me (1% of Part I	, line 27b)					6		538.
7 Add lines 5 and 6							7		27,778.
	David VIII. I	4						_	
8 Enter qualifying distributions from If line 8 is equal to or greater that			1b. and comp	lete that nart usin	o a 1%	tax rate.	8	·	31,900.
See the Part VI instructions.			, and oump		gu 1/0				

<u>Form</u>	990-PF (2015) NEWBURN FAMILY FOUNDATION			458793		Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 494	0(e), or 49	48 - s	see instru	ction	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	J		. š		
	Date of ruling or determination letter: (attach copy of letter if necessary-see instruction	s)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔀 and enter 1%)	1		5	38.
	of Part I, line 27b			٥. ،		- 1
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (I	b). J		` · · · · · · · · · · · · · · · · ·		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2			0.
3	Add lines 1 and 2		3		5	38.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		5	38.
6	Credits/Payments:					
а	2015 estimated tax payments and 2014 overpayment credited to 2015	1,040.	ŀ	^		<i>'</i>
b	Exempt foreign organizations - tax withheld at source					4
C	Tax paid with application for extension of time to file (Form 8868)				,	, ,
d	Backup withholding erroneously withheld 6d	_			`	`
7	Total credits and payments. Add lines 6a through 6d		7		1,0	40.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶	10		5	02.
	Enter the amount of line 10 to be: Credited to 2016 estimated tax > 502.	Refunded ►	11			0.
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participal	te or intervene	in	``	Yes	No
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for	r the definition)	?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mater	nals published	d or		``	10 %
	distributed by the foundation in connection with the activities				<u> </u>	
C	Did the foundation file Form 1120-POL for this year?			1c		<u> </u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					3,
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$	0.		ŀ		7
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	ındatıon				, j
	managers. ► \$0.			4		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities			`* >·	. 3. 3	٠
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of in	corporation, or		<u> </u>	,	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a	ļ	X
þ	t "Yes," has it filed a tax return on Form 990-T for this year?		N/	/A 4b	1	L
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.			k. 4	100	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			<u>'</u>		
	By language in the governing instrument, or			; ^ <u>\$</u>	*	
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict	t with the state	law		4	Ш
	remain in the governing instrument?		_	6	X	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c),	and Part XV	•	7	X	<u> </u>
						1 1
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	OR	`		;	\$ 7 1	
b	olf the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or desi	ignate)			Š	Ш
	of each state as required by General Instruction G? If "No," attach explanation			<u>8b</u>	X_	<u> </u>
		2(j)(5) for caler	ndar	ş ×	-	
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	1	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and ac	ldresses			<u> </u>	Х
				Form 99	10-PF	(2015)

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2015.)

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?

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 **990-PF** (2015)

3b

4a

Yes X No

N/A

during the year?

Form 990-PF (2015) Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 445,919. 1a a Average monthly fair market value of securities 93,361. b Average of monthly cash balances 1b 10 c Fair market value of all other assets 539,280. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 539,280. 3 Subtract line 2 from line 1d 8.089. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 531,191. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 26,560. Minimum investment return. Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here

and do not complete this part.) 26,560. Minimum investment return from Part X, line 6 538. Tax on investment income for 2015 from Part VI, line 5 2a 2a 2b Income tax for 2015. (This does not include the tax from Part VI.) 538 2c Add lines 2a and 2b 26,022 Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 5 26.022. Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 26,022 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 31,900. 1a a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 2 Amounts set aside for specific charitable projects that satisfy the: 3 a Suitability test (prior IRS approval required) 3a 3b Cash distribution test (attach the required schedule) 31,900. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 538 income. Enter 1% of Part I, line 27b 31.362. Adjusted qualifying distributions. Subtract line 5 from line 4 6 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form **990-PF** (2015)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	1			
	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7	7 - 14 7	; · · ·	·	26,022.
2 Undistributed income, if any, as of the end of 2015				20,022.
- · · · · ·	<u> </u>	*. : */	<u> </u>	*
a Enter amount for 2014 only	<u> </u>		0.	
b Total for prior years:	Ĭ		ĺ	
 ','	, , , , , , , , , , , , , , , , , , , ,	0.		* · · · · ·
3 Excess distributions carryover, if any, to 2015:	*/* ***	· , , ,	ž.,	
a From 2010 2,602.	* * *	1	, , , , , , , , , , , , , , , , , , ,	` ′ 🎠
b From 2011 2,126.	1 11 KX 1	₩	l - • • • • • • • • • • • • • • • • • •	,
c From 2012 369.	* 1	* * /	,	
d From 2013 359.	*	\$ 5 \$ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	'	*****
e From 2014 926.	ii. ii ź			
f Total of lines 3a through e	6,382.	>	· 'Y''	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
4 Qualifying distributions for 2015 from	3 2 7 17 7	1 14 1	1> 1 1	· * * * · · · · · · · · · · · · · · · ·
Part XII, line 4: ►\$ 31,900.	. •	* * * * * * * * * * * * * * * * * * * *	4 5	"
a Applied to 2014, but not more than line 2a	, Y/4, , , , , , , , , , , , , , , , , , ,		0.	***
	<u>'</u>		75 * 7	
b Applied to undistributed income of prior	<i>A</i>		ζ, ΄	>\$
years (Election required - see instructions)	· × · · ×	<u> </u>		<u>~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ </u>
c Treated as distributions out of corpus	•	()	. S S	,
(Election required - see instructions)	0.	``````````````````````````````````````		* `* *
d Applied to 2015 distributable amount		. 🔅 🔅	* * * * * * * * * * * * * * * * * * * *	26,022.
e Remaining amount distributed out of corpus	5,878.	>	<u> </u>	`
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount	0.	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	· · · · · · · · · · · · · · · · · · ·	0.
must be shown in column (a)) 6 Enter the net total of each column as	3 pg - 1 () 2 x x	3 % S S S S S S S S S S S S S S S S S S		
indicated below:	12 260	**		
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	12,260.	,	, , , , , , , , , , , , , , , , , , ,	* * * * * * * * * * * * * * * * * * * *
b Prior years' undistributed income. Subtract line 4b from line 2b	3600 "	, 0.	*	
c Enter the amount of prior years'			<u> </u>	
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable	* * * * * * * * * * * * * * * * * * * *		\$ 1 1/20	() 1/4
amount - see instructions	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	0.	`	>. * · · · · · · · · · · · · · · · · · ·
e Undistributed income for 2014. Subtract line	***	, , ,		7
4a from line 2a. Taxable amount - see instr.	* * * * * * * * * * * * * * * * * * *		0.	<i>></i> ∞ · .
f Undistributed income for 2015. Subtract	\$2 \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	* * * * * *	V	
lines 4d and 5 from line 1. This amount must				
be distributed in 2016	4 + 45 74 + 5 1	`*`		0.
7 Amounts treated as distributions out of				3
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		- 💥	<u> </u>	*
not applied on line 5 or line 7	2,602.			7. Se 3
· ·	2,002.	* * * * * * * * * * * * * * * * * * * *	* * * /	1
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	9,658.	·		
			· · · · · · · · · · · · · · · · · · ·	
IO Analysis of line 9:	* * * * * * * * * * * * * * * * * * *	(× § 2) § () § ()	***	* * * * * * * * * * * * * * * * * * * *
a Excess from 2011 2,126. b Excess from 2012 369.				18 18 18 18 18 18 18 18 18 18 18 18 18 1
b Excess from 2012 c Excess from 2013 359.	, ,			
d Excess from 2014 926.	, ,			1 just 1 with
e Excess from 2015 5,878.	. C 1 2 1		1 × 1 × 1 × 1 × 1 × 1 × 1	3 1 11

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	FAMILY FOU			91-64	58/91 Page 10	
Part XIV Private Operating Fo			-A, question 9)	N/A		
1 a If the foundation has received a ruling of			Ì			
foundation, and the ruling is effective for 2015, enter the date of the ruling						
b Check box to indicate whether the found		ig foundation described i		4942(j)(3) or 49	942(j)(5)	
2 a Enter the lesser of the adjusted net	Tax year	453,0044	Prior 3 years	(4) 0040	(a) Takal	
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total	
investment return from Part X for		J				
each year listed		ļ			<u> </u>	
b 85% of line 2a						
c Qualifying distributions from Part XII,						
line 4 for each year listed						
d Amounts included in line 2c not						
used directly for active conduct of]	ļ			
exempt activities						
e Qualifying distributions made directly						
for active conduct of exempt activities.						
Subtract line 2d from line 2c						
3 Complete 3a, b, or c for the alternative test relied upon:						
a "Assets" alternative test - enter:		l	}	1		
(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				l:		
c "Support" alternative test - enter:				-		
(1) Total support other than gross						
investment income (interest,		1				
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						
Part XV Supplementary Info	rmation (Comple	te this part only i	the foundation	had \$5,000 or mor	re in assets	
at any time during the				,		
1 Information Regarding Foundatio	n Managers:					
a List any managers of the foundation who	•	than 2% of the total conti	ibutions received by the	foundation before the clos	e of any tax	
year (but only if they have contributed in			ibations room of the	ioundation boloro the vice	o or any tax	
MICHAEL C. FISCHNALL	ER					
b List any managers of the foundation who		e stock of a corporation (or an equally large portio	n of the ownership of a pa	rtnership or	
other entity) of which the foundation has						
NONE						
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:			
Check here ► X if the foundation of		• • • •	_	ot accept unsolicited requi	ests for funds. If	
the foundation makes gifts, grants, etc.						
a The name, address, and telephone numb				<u> </u>		
name, and and anophone ham		Forgon to mon abbin				
b The form in which applications should b	e submitted and informat	tion and materials thev sh	iould include:			
			· •			
c Any submission deadlines:						
,						
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields.	kinds of institutions, or o	other factors:		
	. – , o o p	,,	, .			
500004 44 04 45					F 990 DE (0015)	

Tare XV. Cappicine Itary Information	(continued)			
3 Grants and Contributions Paid During the Yea	ar or Approved for Future I	Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
BOYS & GIRLS CLUBS OF EMERALD VALLEY		PC	COMMUNITY SUPPORT	
1545 WEST 22ND AVENUE			COMMONITY SOFFORT	
EUGENE, OR 97405				1,000.
100mm2, On 37403				
DOVE MEDICAL		PC	COMMUNITY SUPPORT	
487 E 11TH AVENUE		1		
EUGENE, OR 97401				2,000.
			,	
EUGENE CHRISTIAN SCHOOL		PC	COMMUNITY SUPPORT	
2895 CHAD DRIVE		ľ	COMMONTITY BOTTON	
EUGENE, OR 97408				1,500.
	-			
EUGENE MISSION		PC	COMMUNITY SUPPORT	
1542 WEST 1ST AVENUE				
EUGENE, OR 97402		ļ	<u>-</u>	2,000.
	-			
FOOD FOR LANE COUNTY		₽C	COMMUNITY SUPPORT	
770 BAILEY HILL ROAD				
EUGENE, OR 97402				7,000.
Total SEE CON	TINUATION SHEE	T(S)	▶ 3a	31,900.
b Approved for future payment				
NONE				
•				
				,
Total	<u></u>	1	▶ 2h	0.

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
a					
b					
С	l l	· ·			
d		-			
e	1				-
f				*·	
g Fees and contracts from government agencies		<u>-</u>			
2 Membership dues and assessments					
3 Interest on savings and temporary cash		·			-
investments					
Dividends and interest from securities			14	7,274.	
5 Net rental income or (loss) from real estate:			1	ν,	· ′ ×
		·	+	, , , , , , , , , , , , , , , , , , ,	*
a Debt-financed property b Not debt-financed property				<u> </u>	
• • •	 			,,,	
6 Net rental income or (loss) from personal				1	
property			14	19,260.	
7 Other investment income			14	19,200.	
8 Gain or (loss) from sales of assets other			18	27 222	
than inventory	-		10	27,233.	
9 Net income or (loss) from special events			-		
O Gross profit or (loss) from sales of inventory	-		-	·····	
1 Other revenue:					
a	_		-		
			1		
b	_		1		
b	_				-
b	_				-
b b c d e Subtotal. Add columns (b), (d), and (e)	_	0.	\$	53,767.	
b b c d e Subtotal. Add columns (b), (d), and (e)		0.	\$		
b	ν ν	0.	5		
b	.)			13	
b c d 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 calculations. Part XVI-B Relationship of Activities	s to the Accor	nplishment of Ex	empt	13 _ Purposes	53,767
b c d 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 calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Ex	empt	13 _ Purposes	53,767
b c d 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 calculations. Part XVI-B Relationship of Activities	s to the Accor	mplishment of Ex	empt	13 _ Purposes	53,767
b c d 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 calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Ex	empt	13 _ Purposes	53,767
b c d 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 calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Ex	empt	13 _ Purposes	53,767
b c d 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 calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Ex	empt	13 _ Purposes	53,767
b c d 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 calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Ex	empt	13 _ Purposes	53,767
b c d 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 calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Ex	empt	13 _ Purposes	53,767
b c d 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 calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Ex	empt	13 _ Purposes	53,767
b c d 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 calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Ex	empt	13 _ Purposes	53,767
b c d 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 calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Ex	empt	13 _ Purposes	53,767
b c d 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 calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Ex	empt	13 _ Purposes	53,767
b c d 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 calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Ex	empt	13 _ Purposes	53,767
b c d 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 calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Ex	empt	13 _ Purposes	53,767
b c d 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 calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Ex	empt	13 _ Purposes	53,767
b c d 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 calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Ex	empt	13 _ Purposes	53,767
b c d 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 calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Ex	empt	13 _ Purposes	53,767
b c d e i2 Subtotal. Add columns (b), (d), and (e) i3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Ex	empt	13 _ Purposes	53,767
b c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of Ex	empt	13 _ Purposes	53,767

Pa	rt XVII	Information Re Exempt Organi		sfers To a	ınd Transactions a	nd Relationsh	nips With Nonc	haritable		
_	Did the or			of the followin	a with any other organization	on described in sect	on 501(a) of		Yes	No
1					ig with any other organization		on 50 I(c) or	* /	163	<i>*</i>
_		• • • • • • • • • • • • • • • • • • • •			7, relating to political organ	uzations				
а		from the reporting founda	ation to a noncharitad	ne exempt org	ganization of:			4-(4)	 	X
	(1) Cash							1a(1)		X
	(2) Other							1a(2)		
Đ	Other tran		hla avamat avamate					45/45	 	
	` '	of assets to a noncharital						1b(1)	\vdash	X
	` '	hases of assets from a nor	•	ganization				1b(2) 1b(3)		X
	` '	al of facilities, equipment, bursement arrangements	oi other assets					1b(4)		X
	` '	s or loan guarantees						1b(5)		X
		rmance of services or me	mharchin or fundraic	ina ealicitatio	ne			1b(6)		X
c	. ,	f facilities, equipment, ma	•	-				1c		X
	-				dule. Column (b) should al	ways show the fair i	narket value of the or			
•		•	· · ·	-	ed less than fair market valu		-		010,	
		i) the value of the goods,				·	0 0	,		
(a) L	ine no	(b) Amount involved	(c) Name of	noncharitable	e exempt organization	(d) Description	of transfers, transactions	s, and sharing arra	ıngemen	ts
				N/A						
			<u> </u>		·					
								-		
										
			<u> </u>		 					
										
—										
	-	<u> </u>			···					—
										
						 -				
	<u> </u>		_		7					
				.						—
			·				····	_		
			-		-					
2a	Is the fou	ndation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exempt organi	zations described				
	in section	501(c) of the Code (other	than section 501(c)	(3)) or in sect	ion 527?			Yes Yes	X	No
b	If "Yes," c	omplete the following sch	edule.							
		(a) Name of org	janization		(b) Type of organization		(c) Description of rel	ationship		
		N/A_								
				_		 	 			
						ļ				
										
_	Linder	negative of person I declare t	hat I have examined this	return including	accompanying schedules and st	tatements, and to the he	st of my knowledge			
Sig	J				taxpayer) is based on all informa			May the IRS of return with the	e prepare	er
He	re L	∞ : 06	0 0	1	13-23-16	TRUSTI	76	shown below	(see inst	7)?
		nature of officer or trustee	Framer	<u> </u>	Date	Title	111	_ X Yes		J No
		Print/Type preparer's na		Preparer's s		Date	Check If	PTIN		
		Trino typo proparor o na	5	N 1. 1	al l		self- employed			
Pa	id	JIM MCQUIS	TON	比划	1 / kg	03/21/16		P01441	049	
Pr	eparer	Firm's name ► ZIR		& QUI	MBY, LLC	<u>, ··- = - , , </u>	Firm's EIN ► 47			
Us	e Only		, ====	, ~ - ~-	• -			- · -		
		Firm's address ▶ 77	7 HIGH ST	, SUIT	E 210	- Nave -				
	<u>-</u>		GENE, OR			·	Phone no. 541			
_		· ——						Form 99 0)-PF	(2015)

Schedule B (Form 990, 990-EZ,

Department of the Treasury

or 990-PF)

Internal Revenue Service

Schedule of Contributors

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

NEWBURN FAMILY FOUNDATION

2015

OMB No 1545-0047

Name of the organization

Employer identification number

91-6458791

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

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

but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

NEWBURN	FAMILY	FOUNDATION

91-6458791

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NEW PACIFIC CORPORATION 4780 VILLAGE PLAZA LOOP, SUITE 210 EUGENE, OR 97401	\$50,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

NEWBURN FAMILY FOUNDATION

91-6458791

Noncash Property (see instructions) Use duplicate copies of Part II if	f additional space is needed.	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	- - - - - \$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	- - - - \$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	- - - - - - - - - -	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	- - - - - \$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	- - - - - - - - - - -	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	-	990. 990-EZ. or 990-PF) (2015)
	(b) Description of noncash property given (b) Description of noncash property given	Description of noncash property given (c) (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) (e) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (f) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (f) Description of noncash property given (h) Description of noncash property given (h) Description of noncash property given (h) Description of noncash property given (c) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions)

Name of orga	anization	Employer identification number							
NEWBITE	N FAMILY FOUNDATION		91-6458791						
Part III	Exclusively religious, charitable, etc., cont	ributions to organizations described in	section 501(c)(7), (8), or (10) that total more than \$1,000 for						
	the year from any one contributor. Complete completing Part III, enter the total of exclusively religious	columns (a) mileugh (e) and the followings, charitable, etc., contributions of \$1,000 or less	s for the year (Enter this info once) \$						
	Use duplicate copies of Part III if addition	al space is needed.							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
-	(e) Transfer of gift								
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee						
(a) No		<u> </u>							
(a) No. from Part i	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
-	(e) Transfer of gift								
-	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee								
			· · · · · · · · · · · · · · · · · · ·						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
	(e) Transfer of gift								
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee								
	iransieree's name, address, a	110 £17 + 4	Relationship of transferor to transferee						

FORM 990-PF	DIVIDENDS	S AND INTE	REST :	FROM SECU	JRITIES	STATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAI GAINS DIVIDENI		(A) REVENUE PER BOOKS	(B) NET INVEST MENT INCOM	
FIDELITY	12,259	. 4,9	85.	7,274	7,274	•
TO PART I, LINE 4	12,259	4,9	85.	7,274	7,274	•
FORM 990-PF	Marks -	OTHER :	INCOM	E		STATEMENT 2
DESCRIPTION			REV		(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
FIDELITY CAPITAL GA	IN DISTRIB	JTIONS		19,260.	19,260.	
TOTAL TO FORM 990-P	F, PART I,	LINE 11	- · 	19,260.	19,260.	
	118.00 <u>0.</u>					
FORM 990-PF	· · · · · · · · · · · · · · · · · · ·	TA	XES			STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) INVEST- T INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL TAX		1,040	•	0.		0.
TO FORM 990-PF, PG 1, LN 18		1,040.		0.		0.
FORM 990-PF		OTHER 1	EVDEN	C II C		STATEMENT 4
FORM 990-PF		OTHER	EAF EN			JIAIEMENI 4
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) INVEST- T INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEES ACCOUNTING FEES OTHER FEES	-	4,004 2,100 298	•	0 . 0 . 0 .	•	0.0
TO FORM 990-PF, PG	1, LN 23	6,402	•	0.	,	0
	=				=	

FORM 990-PF CORPORATE STOCK		STATEMENT 5
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
FIDELITY ACCOUNT 676-813079 FIDELITY ACCOUNT 676-813060 FIDELITY ACCOUNT 676-813087	71,066. 70,603. 449,986.	74,418. 85,636. 405,738.
TOTAL TO FORM 990-PF, PART II, LINE 10B	591,655.	565,792.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to status of recipient Amount any foundation manager Name and address (home or business) or substantial contributor PEARL BUCK CENTER INCORPORATED PC COMMUNITY SUPPORT 3690 W 1ST AVENUE 1,900. EUGENE, OR 97402 PC COMMUNITY SUPPORT RELIEF NURSERY 1720 WEST 25TH EUGENE, OR 97405 6,000. SHELTER CARE PC COMMUNITY SUPPORT 499 W 4TH ST EUGENE, OR 97401 2,000. COMMUNITY SUPPORT VOLUNTEERS IN MEDICINE PC 2260 MARCOLA ROAD SPRINGFIELD, OR 97477 7,000. PC COMMUNITY SUPPORT WILLAMETTE FAMILY 149 W 12TH AVENUE EUGENE, OR 97401 1,500. 18,400. Total from continuation sheets