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OMB NO 1545-005

2015

OMB No 1545-0052

Form 990-PF

Department of the Treasury
Internal Revenue Service

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

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

Open to Public Inspection

For	caler	ndar year 2015, or tax y	ear beginning 01-0	01-2015	, a	nd ending 1	2-31-2015	
	e of four	ndation lds Foundation				A Employer id	entification numbe	er
De	скет-гіеі	ias Foundation				93-0571251		
Num	ber and	street (or P O box number if mail is i	not delivered to street address)	Room/suite		B Telephone nur	mber (see instruction	s)
75	85 State	St				(503) 581-9317	,	
City	or town,	state or province, country, and ZIP o	r foreign postal code			C If exemption	application is pendin	g, check here 🕨 🦵
Sale	m, OR S	97317						
G C	neck all	I that apply Initial return	Initial return of a fo	ormer public charity		D.1 Foreign or	ganizations, check h	ere 🕨 🗀
		Final return Address chang	A mended return ge Name change			_	rganizations meeting	tho 95%
ись	and the	pe of organization Section	<u>-</u>	a faundation		test, chec	k here and attach co Indation status was t	mputation
		1947(a)(1) nonexempt charital					n 507(b)(1)(A), chec	. —
		et value of all assets at end	JAccounting method	F Cash	I		ation is in a 60-mont	. —
		om Part II, col. (c), \$ 101,572	Other (specify)	be on cash basis.)		under section	n 507(b)(1)(B), chec	k here 📕 I
	rt I	Analysis of Revenue a	and Evnenses					Disbursements
ГG		(The total of amounts in columns ((b), (c), and (d) may not	Revenue and expenses per		Net investment	Adjusted net	for charitable
		necessarily equal the amounts in c instructions))	olumn (a) (see	(a) books	(b)	income	(c) income	purposes (d) (cash basıs only)
	1	Contributions, gifts, grants, e	etc , received (attach					
		schedule)		185,375				
	2	Check 🟲 🦵 If the foundation	is not required to attach					
		Sch B						
	3	Interest on savings and temp		1,655		1,655	1,655	
	4	Dividends and interest from s		3,501		3,501	3,501	
	5a b	Gross rents						
ф	6a	Net gain or (loss) from sale o		37				
Ě	Ь							
Revenue		Gross sales price for all asse	ets on line 6a					
Ŗ	7	Capital gain net income (from	n Part IV, line 2)			37		
	8	Net short-term capital gain .						
	9	Income modifications						
	10a	Gross sales less returns and allowances						
	ь	Less Cost of goods sold .						
	c	Gross profit or (loss) (attach	schedule)					
	11	Other income (attach schedu	ıle)					
	12	Total.Add lines 1 through 11		190,568		5,193	5,156	
	13	Compensation of officers, dire	ectors, trustees, etc					
	14	O ther employee salaries and						
φ	15	Pension plans, employee ben						
Expenses	16a	Legal fees (attach schedule).						
œ.	b	Accounting fees (attach sche		1,100				1,100
	C	Other professional fees (atta						
Administrative	17	Interest		(5)				127
	18	Taxes (attach schedule) (see	•	137				137
Ħ	19	Depreciation (attach schedul						
Ą	20	Occupancy						
and	21 22	Printing and publications.	_					
	23	Other expenses (attach sche		% 2,045				2,045
Operating	24	Total operating and administ		- -				
ğ		Add lines 13 through 23	-	3,282		0		3,282
ŏ	25	Contributions, gifts, grants p		179,632				179,632
	26	Total expenses and disburser						
		25		182,914		0		182,914
	27	Subtract line 26 from line 12		3.554				
	a b	Net investment income (if ne		7,654		5,193		
	C	Adjusted net income(if negat				5,175	5,156	
			, ,				<u>'</u>	

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		f year					
		should be for end-or-year amounts only (see instructions)	(a) Book Value 4,739	(b) Book Value 12,249	(c) Fair Market Value					
	1	Cash—non-interest-bearing	4,/39	12,249	12,249					
	2	Savings and temporary cash investments								
	3	Accounts receivable								
	_	Less allowance for doubtful accounts -								
	4	Pledges receivable								
	_	Less allowance for doubtful accounts -								
	5	Grants receivable								
	6	Receivables due from officers, directors, trustees, and other								
		disqualified persons (attach schedule) (see instructions)								
	7	Other notes and loans receivable (attach schedule) 16,694	10 142	16.604	16.604					
		Less allowance for doubtful accounts ▶	19,143	16,694	16,694					
ع	8	Inventories for sale or use								
ssets	9	Prepaid expenses and deferred charges								
Ą	10a	Investments—U S and state government obligations (attach schedule)	dule)							
	b	Investments—corporate stock (attach schedule)								
	С	Investments—corporate bonds (attach schedule)								
	11	Investments—land, buildings, and equipment basis ▶								
		Less accumulated depreciation (attach schedule) -								
	12	Investments—mortgage loans								
	13	Investments—other (attach schedule)	73,706	76,299	72,629					
	14	Land, buildings, and equipment basis 🟲								
		Less accumulated depreciation (attach schedule)								
	15	O ther assets (describe 🟲)								
	16	Total assets(to be completed by all filers—see the								
		instructions Also, see page 1, item I)	97,588	105,242	101,572					
	17	Accounts payable and accrued expenses								
S	18	Grants payable								
bilities	19	Deferred revenue								
<u>=</u>	20	Loans from officers, directors, trustees, and other disqualified persons								
Lia	21	Mortgages and other notes payable (attach schedule)								
	22	Other liabilities (describe)								
	23	Total liabilities(add lines 17 through 22)		0						
ķ		Foundations that follow SFAS 117, check here								
Balance		and complete lines 24 through 26 and lines 30 and 31.	07.500	105.242						
ilai	24	Unrestricted	97,588	105,242						
	25	Temporarily restricted								
Fund	26	Permanently restricted								
FL		Foundations that do not follow SFAS 117, check here								
0		and complete lines 27 through 31.								
ets	27	Capital stock, trust principal, or current funds								
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund								
	29	Retained earnings, accumulated income, endowment, or other funds								
Net	30	Total net assets or fund balances(see instructions)	97,588	105,242						
	31	Total liabilities and net assets/fund balances(see instructions)	97,588	105,242						
	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)			97,588					
2		Enter amount from Part I, line 27a			7,654					
3		Other increases not included in line 2 (itemize)								
4		Add lines 1, 2, and 3			105,242					
5		Decreases not included in line 2 (itemize)		_ 5						
6		Total net assets or fund balances at end of year (line 4 minus line 5)—P	'art II, column (b), li	ne 30 . 6 	105,242					

the Part VI instructions

Form 9	90-PF (2015)					Page 3	
Part	IV Capital Gains and Lo	osses for Tax on Investme	ent Income				
		d(s) of property sold (e g , real es or common stock, 200 shs MLC		How acquired P—Purchase (b) D—Donation	Date acquired	Date sold (d) (mo , day, yr)	
1 a	23 213 Franklın Tax Free			Р	2011-05-13	2015-01-09	
b	22 403 Principal Funds Inc			Р	2011-05-13	2015-04-10	
С	20 317 Russell strategic bo	nd		Р	2011-05-13	2015-10-09	
d	22 703 TCW Fds Inc			Р	2013-01-01	2015-07-10	
е							
(e) Gross sales price		Depreciation allowed (f) (or allowable)		t or other basıs expense of sale		n or (loss) (f) mınus (g)	
a	250			228	3	2 2	
b	234			231	_	3	
с	225			223	.3		
d	232			222	2	10	
е							
		g gain in column (h) and owned by Adjusted basis	1	n on 12/31/69 cess of col (ı)	_	(h) gaın mınus ot less than -0-) or	
(1)) F M V as of 12/31/69	(j) as of 12/31/69	r col (j), ıf any	(I) Losses	(from col (h))		
a						22	
b						3	
с						2	
d						10	
е							
2	Capital gain net income or (r	net capital loss) $\left\{egin{array}{l} ext{If ga} \ ext{If (loss)} \end{array} ight.$	in, also enter oss), enter -0-	in Part I, line 7 in Part I, line 7	2	37	
3	Net short-term capital gain	or (loss) as defined in sections 12	222(5) and (6))			
		ine 8, column (c) (see instruction	s) If(loss), e	nter -0 - }	3		
Part	V Qualification Under	Section 4940(e) for Redu	ced Tax on	Net Investme	nt Income		
	tional use by domestic private on 4940(d)(2) applies, leave the	foundations subject to the sectior	1 4940(a) tax	on net investment	income)		
		on 4942 tax on the distributable a fy under section 4940(e) Do not			rıod?	┌ Yes ┌ No	
1 E r	nter the appropriate amount in e	ach column for each year, see ins	structions befo	ore making any enti	ıes		
	, , , , , , , , , , , , , , , , , , ,	1			(4)		

(a) Base period years Calendar year (or tax year beginning in)		(b) Adjusted qualifying distributions			(d) Distribution ratio (col (b) divided by col (c))
	2014	77,178	98,400		0 78433
	2013	67,606	100,080		0 67552
	2012	79,122	104,220		0 75918
	2011	75,807	113,470		0 66808
	2010	76,324	85,857		0 88897
2	Total of line 1, colum	n (d)		2	3 776078
3	_	ratio for the 5-year base period—div the foundation has been in existence		3	0 755216
4	Enter the net value o	f noncharitable-use assets for 2015	from Part X, line 5	4	82,294
5	Multiply line 4 by line	23	[5	62,150
6	Enter 1% of net inve	stment income (1% of Part I, line 2	7b)	6	5 2
7	Add lines 5 and 6.			7	62,202
8	Enter qualifying distr	ibutions from Part XII, line 4	8	182,914	

	990-PF (2015) t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b),	. 4940(e)	, or 4948—s	ee pag	e 18 of	the inst	ructio		age 4
1a	Exempt operating foundations described in section 4940(d)(2), check here	e ▶ ┌		ነ					
	and enter "N/A" on line 1	•							
	Date of ruling or determination letter)					
_	(attach copy of letter if necessary-see instructions)	.,							
Ь	Domestic foundations that meet the section 4940(e) requirements in Part		(ļ	1				52
	here 🟲 🔽 and enter 1% of Part I, line 27b			• • •					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organi Part I, line 12, col (b)	ızatıons	enter 4% of	:					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable fo enter -0-)	oundation	s only Oth	ers	2				
3	Add lines 1 and 2				3				52
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable for	oundatioi	ns only Oth	iers					
_	enter -0-)		,		4				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less	, enter -t)		5				52
6	Credits/Payments	1 -	I			l			
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a							
Ь	Exempt foreign organizations—tax withheld at source	6b							
С	Tax paid with application for extension of time to file (Form 8868)	6c							
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d				7				
8	Enter any penalty for underpayment of estimated tax. Check here if Form	n 2220 is	s attached		8				
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed				9				52
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amo	unt over	paid		10				
11	Enter the amount of line 10 to be Credited to 2015 estimated tax		Refunded	<u> </u>	11				
Par	t VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, sta	ate, or lo	cal legislati	on or d	ıd			Yes	No
	it participate or intervene in any political campaign?						1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) fo	r politica	l purposes	(see I	nstruct	ions			
	for definition)?					•	1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activiti	ies and co	opies of any	materia	als				
	published or distributed by the foundation in connection with the activities.								
С	Did the foundation file Form 1120-POL for this year?						1c		No
d	Enter the amount (If any) of tax on political expenditures (section 4955) imp	posed du	rıng the yea	ır					
	(1) On the foundation 🕨 \$ (2) On foundation manager								
е	Enter the reimbursement (if any) paid by the foundation during the year for p	olitical e	xpenditure	tax ım	posed				
	on foundation managers 🕨 \$								
2	Has the foundation engaged in any activities that have not previously been i	reported	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	n its gove	erning instr	ument,	artıcle	s			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a co	onformed	copy of the	change.	s.		3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more	e during t	he year?.				4a		No
b	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 of	during th	e year?				5		No
	If "Yes," attach the statement required by General Instruction T.								
6	Are the requirements of section 508(e) (relating to sections 4941 through	4945)sa	itisfied eith	er					
	By language in the governing instrument, or								
	\bullet By state legislation that effectively amends the governing instrument so	that no r	mandatory o	lirectio	ns				
	that conflict with the state law remain in the governing instrument? . $% \left(1\right) =\left(1\right) \left(1\right) $.						6		No
7	Did the foundation have at least \$5,000 in assets at any time during the year	ar? <i>If "Ye</i> .	s," complete	Part Il	, col. (c	·),			
	and Part XV.						7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered	d (see ins	structions)						
	▶or								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form	990-PF	to the Atto	ney					
	General (or designate) of each state as required by General Instruction G?	If "No," at	ttach explan	ation .			8b	Yes	
9	Is the foundation claiming status as a private operating foundation within th	e meanır	ng of section	14942	(3)(3)				
	or 4942(J)(5) for calendar year 2015 or the taxable year beginning in 2015	(see ins	tructions fo	r Part)	۲(VIX				
	If "Yes," complete Part XIV						9		No
10	Did any persons become substantial contributors during the tax year? If "Year"	es," attaci	h a schedule	listing	their n	ames			
	and addresses.						10		No

Par	** VII-A Statements Regarding Activities (continued)			i
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►N/A			
14	The books are in care of ▶ David K Fields Telephone no ▶ (503) 581-	9317	
	Located at ▶7585 State St SE Salem OR ZIP+4 ▶97317	<u>/</u>		
4-			<u> </u>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here			
			1	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial			
	Accounts (FBAR) If "Yes", enter the name of the foreign country 🟲			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? 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? Yes Vo			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
L	after termination of government service, if terminating within 90 days) Yes $\overline{\lor}$ No If any answer is "Yes" to $1a(1)$ – (6) , did any of the acts fail to qualify under the exceptions described in Regulations			
b	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.	10		NO
_	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
С	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	10		NO
_	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? Yes Vo			
	If "Yes," list the years > 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see instructions)	2b		No
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section $4943(c)(7)$) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	if the foundation had excess business holdings in 2015.)	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

Pai	Statements Rega	rding Activities for	· Wr	nich Form 4720	May	Be Required (<i>Cont</i>	tinue	ed)		
5a	During the year did the foundatio	n pay or incurany amoun	t to							
	(1) Carry on propaganda, or othe	rwise attempt to influenc	e leg	ııslatıon (sectıon 49	45(e))?	√ No			
	(2) Influence the outcome of any	specific public election ((see	section 4955), or to	carı	ry				
	on, directly or indirectly, any	voter registration drive?				T Yes 🖟	√ No			
	(3) Provide a grant to an individu	al for travel, study, or otl	ners	ımılar purposes?		┌ Yes रि	√ No			
	(4) Provide a grant to an organiza	ation other than a charita	ble,	etc , organization de	scrib	ped				
	in section 4945(d)(4)(A)? (s	ee instructions)				\ Yes \	√ No			
	(5) Provide for any purpose other	than religious, charitabl	e, sc	ientific, literary, or						
	educational purposes, or for t	he prevention of cruelty	to ch	ıldren or anımals?.		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	√ No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the transac	tions	s fail to qualify under	r the	exceptions described in				
	Regulations section 53 4945 or	instructions)?		5b		No				
	Organizations relying on a currer		_							
С	If the answer is "Yes" to question									
	tax because it maintained expend	liture responsibility for th	he gr	ant?		T Yes [√ No			
	If "Yes," attach the statement requ									
6a	Did the foundation, during the yea	ar, receive any funds, dire	ectly	or indirectly, to pay	prer	niums on				
	a personal benefit contract?						- No			
b	Did the foundation, during the yea	ar, pay premiums, directl	y orı	ndirectly, on a perso	onall	benefit contract?		6b		No
	If "Yes" to 6b, file Form 8870.									
7a	At any time during the tax year, v	vas the foundation a part	y to a	a prohibited tax shel	ter tı	ransaction? \(Yes \)	√ No			
b	If yes, did the foundation receive	•	-	•				7b		No
	Information Abou	t Officers, Director						l Emp	loyee	s,
	and Contractors	·		<u>, </u>						
1	List all officers, directors, trustee	s, foundation managers a	nd t	heir compensation (see i	nstructions).				
		Title, and average	(c)	Compensation(If		(d) Contributions to		Evnens		unt
	(a) Name and address	hours per week		not paid, enter	e	mployee benefit plans		•	e accou Illowanc	
		(b) devoted to position		-0-)		deferred compensation	L`´			
See	Additional Data Table									
		1								
2	Compensation of five highest-paid	l employees (other than	thos	e included on line 1–	-see	instructions). If none, e	nter "	NONE.	,	
	(a)	Title, and aver	.2.00			Contributions to				
Nar	me and address of each employee		_	(c) Compensation	n	employee benefit			se acco	
	more than \$50,000	(b) devoted to pos	ition			plans and deferred (d) compensation	(e)	otnera	illowand	es
NON	IE									
										
							1			
		 								
							-			
.	I mumb an affect	<u> </u>				<u> </u>	-			
LOTA	I number of other employees paid of	vers50000.	_		_		1			

Part VIII Information About Officers, Directors, T and Contractors (continued)	rustees, Foundation Managers, Highly	Paid Employees,	
3 Five highest-paid independent contractors for professional ser	vices (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation	
NONE			
	7		
	1		
	1		
	-		
	1		
Total number of others receiving over \$50,000 for professional serv	Week State of the	<u> </u>	
	·		
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year Incl		Expenses	
organizations and other beneficiaries served, conferences convened, research pape	•	· ·	
1 Reid Saunders Association Grant for general use in their chairi		15,060	
2 Missions Door Grant for general use in their charitable activities		6,285	
3 Salem Academy Grant for any charitable purpose	6d .64b	5,500	
4 First Baptist Church of Salem For the building fund and general		134,100	
Part IX-B Summary of Program-Related Investme Describe the two largest program-related investments made by the foundation	·	Amount	
1	during the tax year on lines I and 2	Amount	
1		1	
		1	
		-	
2		-	
		-	
All 11			
All other program-related investments See instructions			
3		-	
		-	
Tabel Additions of the control			
Total. Add lines 1 through 3			

Form 990-PF (2015) Part Y Minimum Investment Return

Fa	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	73,442
b	A verage of monthly cash balances	1b	10,105
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	83,547
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	83,547
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	1,253
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	82,294
6	Minimum investment return.Enter 5% of line 5	6	4,115
Pai	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cei check here ► □ and do not complete this part.)	taın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	4,115
2a	Tax on investment income for 2015 from Part VI, line 5 2a 52		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	52
3	Distributable amount before adjustments Subtract line 2c from line 1	3	4,063
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	4,063
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	4,063
	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	182,914
	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	182,914
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b (see instructions)	5	52
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	182,862
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

P	Undistributed Income (see ins	tructions)			
		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, line 7	001940	reare prior to 2021	2011	4,063
	Undistributed income, if any, as of the end of 2015				,
	Enter amount for 2014 only				
	Total for prior years 20				
	Excess distributions carryover, if any, to 2015				
a	From 2010	1			
Ь	From 2011	7			
С	From 2012	5			
d	From 2013 62,70	6			
е	From 2014	4			
f	Total of lines 3a through e	351,593			
4	Qualifying distributions for 2015 from Part				
	XII, line 4 🕨 \$ 182,914				
	Applied to 2014, but not more than line 2a				
b	Applied to undistributed income of prior years				
_	(Election required—see instructions)	0			
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2015 distributable amount				4,063
	Remaining amount distributed out of corpus	178,851			
5	Excess distributions carryover applied to 2015				
	(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:				
•	Corpus Add lines 3f, 4c, and 4e Subtract line 5	530,444			
	Prior years' undistributed income Subtract	333,			
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable amount				
<u> </u>	—see instructions				
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see				
_	Instructions				
Т	Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must				
	be distributed in 2015				0
7	A mounts 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)				
8	Excess distributions carryover from 2010 not				
-	applied on line 5 or line 7 (see instructions)	72,141			
9	Excess distributions carryover to 2016.	458,303			
4.0	Subtract lines 7 and 8 from line 6a	430,303			
	Analysis of line 9 Excess from 2011	7			
	Excess from 2011				
	Excess from 2013 62,70				
	Excess from 2014				
	Excess from 2015 178,85	1			

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

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 179,632 **b** Approved for future payment

Part XVI-A Analysis of Income-Produc	ing Activitie	S			Page 1 2	
Enter gross amounts unless otherwise indicated		isiness income	Excluded by section	<u> </u>	(e) Related or exemp function income	
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	(See instructions)	
a b						
c						
e						
g Fees and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash						
Investments			14 14	1,655 3,501		
Net rental income or (loss) from real estate			14	3,301		
a Debt-financed propertyb Not debt-financed property						
Net rental income or (loss) from personal property						
Other investment income			10	27		
Net income or (loss) from special events Gross profit or (loss) from sales of inventory			18	37		
Other revenue a						
b						
d						
e 2 Subtotal Add columns (b), (d), and (e)				5,193		
Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify	calculations)			13	5,193	
Part XVI-B Relationship of Activities to						
Line No. Explain below how each activity for whether accomplishment of the foundation's instructions)						

Par	t XVI		Information Re Noncharitable					sactio	ns and	Relationships	With			
		organ	zation directly or i	ndırectly (engage	ın any of t	the following wi						Yes	No
	ganıza	-				()()	,		,	5 ,				
a Tı	- ransfer	s fron	n the reporting four	ndation to	a nonc	harıtable (exempt organız	ation of						
(1	L) Cas	sh										1a(1)		No
(2	2) Oth	eras	sets									1a(2)		No
-	, ther tr											, ,		
			assets to a noncha	ritable ex	empt or	rganizatioi	n					1b(1)		No
			s of assets from a									1b(2)		No
			facilities, equipme									$\overline{}$		No
			ement arrangemer									1b(4)		No
			loan guarantees.									1b(5)		No
			ce of services or m									1b(5)		No
												1c		No
	_		ilities, equipment, i to any of the above	_										140
	any tr	ansac	other assets, or section or sharing arr) Amount involved	angement	, show	ın column		f the go	ods, othe		ces receive	ed		nts
								-						
de	scribe	ed in s	cion directly or indicection 501(c) of the plete the following of the plete the following of the plete the following of the plete the pl	ne Code (d schedule		an sectioi		ın sectı			otion of relati	. ┌Ye	ıs 🔽	No
									-					
Sigr Her	the inf	e best	enalties of perjury, of my knowledge a ion of which prepar ***	and belief,	ıt ıs tru	ie, correct		Declar			n taxpaye May t return	r) is bas he IRS di he prepai	sed on	all
	'	Sıgn	ature of officer or t	rustee			Date	r	Title			nstr)? 🔽	Yes N	No
			nt/Type preparer's larta Powers	name	Prepa	rer's Sıgn	ature	Date		Check if self- employed ▶	PTIN	006187	17	
Use	pare	M u	n's name ► eller Yuva Osterma n's address ►	an Powers	LLP			I		Firm's EIN ▶				
Only	/			e,OR 97	401					Phone no (541	.)344-110	0 0		
			225 E 4th Ave Eugene, OR 97401											

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

(a) Name and address	Title, and average	(c) Compensation(If	(d)	Expense account,
(a) Name and address	hours per week (b) devoted to position	not paid, enter -0-)	Contributions to employee benefit plans and deferred compensation	(e) other allowances
David K Fields	President	0		
7585 State St SE Salem, OR 97301	3 00			
Park S Kriner	Vice President	0		
PO Box 329 Glennallen, AK 99588	0 00			
Dale D Decker	Secretary	0		
3411 Boone Rd SE 208 Salem, OR 97317	1 00			
Louise E Fields	Director	0		
7585 State St SE Salem, OR 97301	2 00			
Betty L Kriner	Director	0		
PO Box 329 Glennallen, AK 99588	0 00			

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

David K Fields			
Dale D Decker			

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

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
Daystar USA 5701 Normandale Rd 323 Edina, MN 55424	Charitable Organization	PC	Any Charitable Purpose	2,335
Crisis Chaplaincy Services 387 Court St NE Salem,OR 97301	Charitable Organization	PC	Any Charitable Purpose	1,200
International Teams 411 W River Rd Elgin, IL 60123	Charitable Organization	PC	Any Charitable Purpose	2,662
Glennallen Chapel Mi 1885 Glen Hwy Glennallen, AK 99588	Charitable Organization	PC	Any Charitable Purpose	1,500
Am Cen for Law Justice Box 90555 Washington, DC 20090	Charitable Organization	PC	Any Charitable Purpose	660
International Students Box C Colorado Springs, CO 80901	Charitable Organization	PC	Any Charitable Purpose	1,320
First Baptist Church 395 Marion St NE Salem, OR 97301	Charitable Organization	PC	Any Charitable Purpose	134,100
Child Evangelism Fellow PO Box 348 Warrenton, MO 63383	Charitable Organizaion	PC	Any Charitable Purpose	4,510
Reid Saunders Association PO Box 4275 Salem,OR 97302	Charitable Organization	PC	Any Charitable Purpose	15,060
Missions Door 2530 Washington Street Denver, CO 80205	Charitable Organization	PC	Any charitable purpose	6,285
Hope Pregnancy Clinic 2630 Market St NE Salem,OR 97301	Charitable Organization	PC	Any charitable purpose	1,200
Corban University 5000 Deer Park Dr SE Salem, OR 97317	Charitable Organization	PC	Scholarship fund	1,700
Salem Academy 942 Lancaster Drive NE Salem,OR 97301	Charitable Organization	PC	Any charitable purpose	5,500
Teach Beyond PO Box 6248 Bloomingdale, IL 60108	Charitable Organization	PC	Any charitable purpose	1,600
Total				179,632

TY 2015 Accounting Fees Schedule

Name: Decker-Fields Foundation

EIN: 93-0571251

Software ID: 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Accounting Fees	1,100	0	0	1,100

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491251006096

TY 2015 Investments - Other Schedule

Name: Decker-Fields Foundation

EIN: 93-0571251

Software ID: 15000324

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
Mutual Funds Wells Fargo 3572	AT COST	76,299	72,629

TY 2015 Other Expenses Schedule

Name: Decker-Fields Foundation

EIN: 93-0571251

Software ID: 15000324

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Bank Fees	151			151
Donor Expenses	903			903
Investment Fees	941			941
Licenses and fees	50			50

TY 2015 Taxes Schedule

Name: Decker-Fields Foundation

EIN: 93-0571251

Software ID: 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Taxes State	55			55
Taxes, Other	82			82

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491251006096

.N. 93491231000090

OMB No 1545-0047

leu Data -

Schedule B (Form 990, 990-EZ,

Name of the organization

Department of the Treasury Internal Revenue Service

or 990-PF)

► Attach to Form 990, 990-EZ, or 990-PF. ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at

www.irs.gov/form990.

Schedule of Contributors

2015

Employer identification number

	undation	93-0571251
Organization type	e (check one)	
Filers of:	Section:	
Form 990 or 990-EZ	₹Z	
		private foundation
Form 990-PF	√ 501(c)(3) exempt private foundation	
		ate foundation
	501(c)(3) taxable private foundation	
	ganization filing Form 990, 990-EZ, or 990-PF that received, during the yoperty) from any one contributor. Complete Parts I and II. See instructions	
other prop	pperty) from any one contributor Complete Parts I and II See instructions	s for determining a contributor's total contributions
under section received from	anization described in section 501(c)(3) filing Form 990 or 990-EZ that m tions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 rom any one contributor, during the year, total contributions of the greate the 1h, or (II) Form 990-EZ, line 1 Complete Parts I and II	0 or 990-EZ), Part II, line 13, 16a, or 16b, and that
during the y	anization described in section 501(c)(7), (8), or (10) filing Form 990 or 99 year, total contributions of more than \$1,000 exclusively for religious, chivention of cruelty to children or animals. Complete Parts I, II, and III	
during the y this box is o purpose Do	anization described in section $501(c)(7)$, (8) , or (10) filing Form 990 or 99 year, contributions $exclusively$ for religious, charitable, etc., purposes, be checked, enter here the total contributions that were received during the 20 not complete any of the parts unless the General Rule applies to this charitable, etc., contributions totaling \$5,000 or more during the year.	but no such contributions totaled more than \$1,000 lf e year for an <i>exclusively</i> religious, charitable, etc, s organization because it received <i>nonexclusively</i>

990-EZ, or 990-PF)

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

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

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

Name of organization
Decker-Fields Foundation

Employer identification number 93-0571251

Part I	Contributors (see instructions) Use duplicate copies of Part I if	f additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
1	Dale D Decker		Person Payroll	ᅜ
	3411 Boone Rd SE 208	\$ 74,100	Noncash	'
	Salem, OR97317		(Complete Part II to contributions)	for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
2			Person	r
	Dave K Fields 7585 State St SE	\$ 88,765	Payroll	Γ
	Salem, OR97317		Noncash	Γ
			(Complete Part II to contributions)	for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
3	American Village Corporation		Person	모
	7585 State St SE	\$ 22,510	Payroll	Γ
	Salem, OR97317		Noncash	Γ
			(Complete Part II to contributions)	for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
			Person	Г
		\$	Payroll	Г
		<u> </u>	Noncash	Г
			(Complete Part II to contributions)	for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
			Person	Г
		\$	Payroll	Γ
			Noncash	Г
			(Complete Part II to contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
			Person	Г
		\$	Payroll	Г
			Noncash	Г
			(Complete Part II to contributions)	or noncash

	Employer identification n	umber
ındatıon	93-0571251	
Noncash Property (see instructions) Use duplicate copies of Part II if 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)	(c)	(d)
Description of noncash property given	FMV (or estimate) (see instructions) \$	Date received
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given (b) Description of noncash property given	Solution Solution

Schedule B (Form 990, 990-EZ, or 990-PF)	(2015)
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Page 4

Name of organization Decker-Fields Foun			oyer identification number 571251
total mo line ent of \$1,000	vely religious, charitable, etc., contributore than \$1,000 for the year from any or ry. For organizations completing Part II 0 or less for the year. (Enter this informate copies of Part III if additional space is respectively.	tions to organizations described in contributor. Complete columns ll, enter the total of exclusively releation once. See instructions.)	in section 501(c)(7), (8), or (10) that s (a) through (e) and the following igious, charitable, etc., contributions
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift I ZIP 4 Rela	ationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift Rela	ationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP4 Rela	ationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, and	(e) Transfer of gift Rela	ationship of transferor to transferee