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

OMB No 1545-0052

2015

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

Open to Public Inspection

For calendar year 2015, or tax year beginning 1/1 , 2015, and ending 12/31 , 2015								
Name of fo	oundation THOMPSON FOUNDATION INC			Α	Employer identification nun	ber		
Number ar	and street (or P.O box number if mail is not delivered	d to street a	ddress)	Room/suite B	93-1316767 B Telephone number (see instructions)			
	6860 SW WINDING WAY				(541) 929-6849			
	City or town, state or province, country, and ZIP or foreign postal code CORVALLIS OR 97333				If exemption application is p	pending check here. >		
	eck all that apply Initial return		Initial return of a forme	or public charity	, ,,	, <u>L</u>		
_	Final return	Ì	Amended return	D D	1 Foreign organizations, chec	ck here		
	Address cha	nge	Name change		2 Foreign organizations meet	ing the 85% test, check		
H Che			(c)(3) exempt private fou		here and attach computation	نــا		
1 5	Section 4947(a)(1) nonexempt char	·		rvate foundation E	If private foundation status under section 507(b)(1)(A),	was terminated		
	market value of all assets at end of year m Part II, column (c), line 16)	J Acc	· • ! !	ash X Accrual				
► ş	885,618.	(Part I,	Other (specify) column (d) must be on c	ash basis.)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here			
Part I	Analysis of Revenue and	1	(a) Revenue and	(b) Net investment	(c) Adjusted net			
	Expenses (The total of amount columns (b), (c), and (d) may not n	s in	expenses per books	income	income	(d) Disbursements for charitable		
	sanly equal the amounts in column	(a)				purposes (cash basis only)		
	(see instructions).)	h . d . d . d	7 500			(cach basis only)		
	Contributions, qiffs, grants etc received (attach so Ck if the foundation is not required to		7,500.	· ,	· · · · · · · · · · · · · · · · · · ·	, y, , , , , , , , , , , , , , , , , ,		
	-					your a g a agreement and a g		
	3 Interest on savings and temporary cash investmen 4 Dividends and interest from securities		913. 7,820.	913. 7,820.	913. 7,820.	********		
	5 a Gross rents		1,020.	1,020.	1,820.			
	b Net rental income or (loss)		+ 1 2 4	, -, , 23	* *;, * *,			
R E	6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all	· · · · ·			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
V	assets on line 6a · · ·	- 23	3, , , , , , , , , , , , , , , , , , ,	* * *		x, , ,		
E N	7 Capital gain net income (from Part IV, line 8 Net short-term capital gain		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- 11,2 - 4,2 - 4,	<u> </u>	1		
ָרָ טְּ	9 Income modifications		***	*		2 2 2 2 2 2 2 2		
; ;	10 a Gross sales less returns and allowances			1880 L. C. C.	11 (A) (B) (B)			
`	b Less Cost of goods sold		\$ 150° 3 ° 0					
	c Gross profit or (loss) (allach schedule)				* ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	1 20		
-	11 Other income (attach schedule)					. y'' ({ ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		
[]	12 Total. Add lines 1 through 11		16,233.	8,733.	8,733.	**************************************		
-	13 Compensation of officers, directors, trust		10,233.	0,733.	6,733.	Date the same		
	14 Other employee salaries and wages				j	R. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
	15 Pension plans, employee benefits				37.	1000		
A D	16 a Legal fees (attach schedule) b Accounting fees (attach sch)				160	\		
M 1	C Other prof fees (attach sch)				ieri	APR 2 1 ZUID		
O I P S	17 Interest				<u> </u>	\$ 1 × 10 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
PS ET RR	18 Taxes (attach schedule)(see instrs) See Line	e.18 Stm1	552.	552.	5'5-2	Pa start of		
AA	19 Depreciation (attach schedule) and depletion					19 1 1/64		
ı i N V	20 Occupancy							
GÉ	21 Travel, conferences, and meetings		1					
A E	22 Printing and publications	• • • •						
D P	20 Sales Superious (annul Sulfature)	FEES	50.			50.		
E N S E S	24 Total operating and administrative				 	30.		
š	expenses. Add lines 13 through 23	• • • •	1 002.	552.	552.	50.		
	26 Total expenses and disbursements.		52,000.	TO THE PROPERTY OF THE PARTY OF		52,000.		
	Add lines 24 and 25 · · · · · ·		52,602.	552	552.	52,050.		
	27 Subtract line 26 from line 12: a Excess of revenue over expenses			47.000.00		Section 1		
	and disbursements		-36,369.					
	b Net investment income (if negative, en	ter -0-)	**************************************	8,181				
	C Adjusted net income (if negative, enter	-0-)		Market Artist	8,181.			

16

Part	1115	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.	Beginning of year	End of	
ı aşı	<u> </u>	(See instructions)	(a) Book Value	(b) Book Value	(c) Fåir Market Value
	1	Cash – non-interest-bearing	668,047.	509,540.	509,540.
	2	Savings and temporary cash investments			
	3	Accounts receivable		1-	
		Less: allowance for doubtful accounts	·		•
	4	Pledges receivable	,		
		Less: allowance for doubtful accounts		- ` ` `	w > 0 mm x x x
	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 sch)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
A		Less: allowance for doubtful accounts	Walter Street	7 E & 200 1 2 6 72 1 72 1 75 1 7 1 1 1	e Landing Control of the Control of
S S E T	8	Inventories for sale or use			
Ĕ	9	Prepaid expenses and deferred charges			
T		Investments — U.S. and state government obligations (attach schedule)			
	۱ ,	b Investments — corporate stock (attach schedule) . L=10b. Stmt	281,202.	403,340.	376,078.
	i	: Investments — corporate bonds (attach schedule)	201,202.	103,340.	370,070.
	11	Investments — land, buildings, and	- VXXIII XVXXII XXXII XXXXII XXXII X	**************************************	
	''	equipment: basis	Jack Ball Hill Carles & Jack Line	A STATE OF THE STA	A STATE OF THE STA
	 	Less accumulated depreciation (attach schedule)			
	12	0 0			
	13	Investments — other (attach schedule)			
	14	Land, buildings, and equipment basis Less accumulated depreciation			,
		(attach schedule)			
	15 16	Other assets (describe Total assets (to be completed by all filers — see the instructions. Also, see page 1, item I)	949,249.	912,880.	885,618.
L	17	Accounts payable and accrued expenses	J15,215.	312,000.	003,010.
i A B	18	Grants payable			
	19	Deferred revenue			
Ī	20	Loans from officers, directors, trustees, & other disqualified persons		·	
Ĺ	21	Mortgages and other notes payable (attach schedule)			3.3
Ť	ı	Other liabilities (describe			
E		Otter habilities (describe			
ร	23				
		Foundations that follow SFAS 117, check here > 1x and complete lines 24 through 26 and lines 30 and 31.	(1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
N F E U	24	Unrestricted	949,249.	912,880.	
	25		,		
T N D	26	Permanently restricted			
A S B S A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.	-		
ELTA	27	Capital stock, trust principal, or current funds			
SN	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
O E	29	Retained earnings, accumulated income, endowment, or other funds			J. A. S.
RS	30		949,249.	912,880.	
	31		040.040	012 000	The second of th
-	East of a to	(see instructions)	949,249.	912,880.	TO STANDARD BOOK .
Kai		Analysis of Changes in Net Assets or Fund Balan			
1	end	al net assets or fund balances at beginning of year — Part II, column -of-year figure reported on prior year's return)		<u>. 1</u>	949,249.
2	Ente	er amount from Part I, line 27a		2	-36,369.
3		er increases not included in line 2 (itemize)		3	
4	Add	I lines 1, 2, and 3	· · · · · · · · · · · · · · · · · · ·	4	912,880.
5	Decr	reases not included in line 2 (itemize)		5	
	Tate	reases not included in line 2 (itemize)	Part II. column (b) line 30		912,880.

b c d e (e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale (e) plus (f) minus (g) a
c d e (e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale (e) plus (f) minus (g) a
d e (e) Gross sales price (f) Depreciation allowed (or allowable)
(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) a b c c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F.M.V. (j) Adjusted basis as of 12/31/69 (ii) F.M.V. (j) Adjusted basis as of 12/31/69 C Capital gain net income or (net capital loss). If gain, also enter in Part I, line 7 If gain, also enter in Part I, line 8 2 Capital gain net income or (net capital loss). If gain, also enter in Part I, line 7 If gain, also enter in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income) If section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base penod? If yes, the foundation does not qualify under section 4940(e). Do not complete this part. I Enter the appropriate amount in each column for each year; see the instructions before making any entries (a) Capital tax year Calendar year (or tax year Leginning in) Adjusted qualifying distributions Calendar year (or tax year Leginning in) Adjusted qualifying distributions Calendar year (or tax year Leginning in) Adjusted qualifying distributions Calendar year (or tax year Leginning in) Adjusted qualifying distributions Calendar year (or tax year Leginning in) Adjusted qualifying distributions Calendar year (or tax year Leginning in) Adjusted Qualifying distributions Calendar year (or tax year Leginning in) Adjusted Qualifying distributions Calendar year (or tax year Leginning in) Adjusted Qualifying distributions Calendar year (or tax year Leginning in) Adjusted Qualifying distributions Calendar year (or tax year Leginning in)
(e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale (h) Gain or (loss) (e) plus (f) minus (g) a b c Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F.M.V. (i) Adjusted basis as of 12/31/69 (ii) F.M.V. (ii) Adjusted basis as of 12/31/69 (iv) Excess of col. (i) gain minus col (k), but not less than -0-) or Losses (from col. (ii)) a b c d e 2 Capital gain net income or (net capital loss) [If gain, also enter in Part I, line 7] If gain, also enter in Part I, line 8. Separate V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (for optional use by domestic private foundations subject to the section 4940(a) tax on net investment income) If section 4940(d)(2) applies, leave this part blank. Was the foundation labele for the section 4942 (ax on the distributable amount of any year in the base period? Yes X If Yes, the foundation does not qualify under section 4940(e). Do not complete this part. 1 Enter the appropriate amount in each column for each year; see the instructions before making any entines (a) Base period years Calendar year (or tax year beginning in) Adjusted qualifying distributions 14, 313. 267, 453. 0.06
(or allowable) plus expense of sale (e) plus (f) minus (g) b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F.M.V.
b c d d
c d d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F.M.V. as of 12/31/69 (k) Excess of col. (i) gain minus col (k), but not less than 49-) or Losses (from col. (ii)). If any a b c d d e e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 a b c c d d e Complete only for assets showing gain in column (b) and owned by the foundation on 12/31/69 a c c d d e Complete only for assets showing gain in column (c) (solumn (c) (ii)) as of 12/31/69 a c c d d e Complete only for assets showing gain in column (c) (solumn (c) if gain, also enter in Part I, line 7
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F.M.V. (i) Adjusted basis as of 12/31/69 (ii) F.M.V. (ii) Adjusted basis as of 12/31/69 (iii) F.M.V. (iii) Adjusted basis as of 12/31/69 (iv) Excess of col. (i) gain minus col. (k), but not less than -0-) or Losses (from col. (h)) a b c c d d e e e e e e e e e e e e e e e e
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F.M.V. (j) Adjusted basis as of 12/31/69 (k) Excess of col. (i) gain mitrus col (k), but not less than -0-) or Losses (from col. (h)) a b c d d e e 2 Capital gain net income or (net capital loss). (if gain, also enter in Part I, line 7 (f (loss), enter -0- in Part I, line 7 (f (loss), enter -0- in Part I, line 7 (f (loss), enter -0- in Part I, line 7 (f (loss), enter -0- in Part I, line 8 (loss). (if gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 7 (loss) as defined in sections 1222(5) and (6). If gain, also enter in Part I, line 8 (loss), enter -0- in Part I, line 7 (loss), enter
(i) F.M.V. as of 12/31/69 (ii) Adjusted basis as of 12/31/69 (iv) Adjusted basis as of 12/31/69 (iv) Adjusted basis as of 12/31/69 (iv) Adjusted basis over col. (j), if any gain minus col. (k), but not less than 4-) or Losses (from col. (n)) a b c d e 2 Capital gain net income or (net capital loss)
(ii) F.M.V. as of 12/31/69 (ij) Adjusted basis as of 12/31/69 (iv) Excess of col. (i) over col. (j), if any gain minus col (k), but not less as of 12/31/69 (ver col. (j)), if any gain minus col (k), but not less than -0-) or Losses (from col. (h)) b c d e 2 Capital gain net income or (net capital loss) [If gain, also enter in Part I, line 7]
b c d e 2 Capital gain net income or (net capital loss)
c d e 2 Capital gain net income or (net capital loss)
2 Capital gain net income or (net capital loss) — If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 If gain, also enter in Part I, line 7 If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8
2 Capital gain net income or (net capital loss) — If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 8 If gain, also enter in Part I, line 8 If gain, also enter in Part I, line 8 If gain, also enter in Part I, line 8 If gain, also enter in Part I, line 8 If gain, also enter in Part I, line 8 If gain, also enter in Part I, line 8 If gain, also enter in Part I, line 8 If gain, also enter in Part I, line 8 If gain, also enter in Part I, line 7 If gain, also enter in Part I, line 8 If gain also enter in Part I, line 7 If gain, also enter in Part I, line 7 If gain, also enter in Part I, line 7 If gain also enter in Part I, line 7 If gain also enter in Part I, line 8 If gain also enter in Part I, line 8 If gain also enter in Part I, line 8 If gain also enter in Part I, line 8 If gain also enter in Part I, line 8 If gain also enter in Part I, line 8 If gain also enter in Part I, line 8 If gain also enter in Part I, line 8 If gain also enter i
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6). If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8
If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8
in Part I, line 8 Part Y Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income) f section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?
For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income) f section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?
f section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?
Calendar year (or tax year beginning in) nonchantable-use assets (col. (b) divided by col. (c)) 2014 53,565. 864,370. 0.06 2013 14,313. 267,453. 0.05
2013 14,313. 267,453. 0.05
2012 33,976. 206,812. 0.16
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
2011     10,430.     181,443.     0.05       2010     40,603.     186,760.     0.21
2010   40,603.] 180,760. 0.21
2 Total of line 1, column (d)
3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5
5 Multiply line 4 by line 3
6 Enter 1% of net investment income (1% of Part I, line 27b)
\(\frac{1}{2}\)
7 Add lines 5 and 6

Part					
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.	*		*;- (B	
1	Date of ruling or determination letter (attach copy of letter if necessary — see instrs)				1,000.00
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			, 1	64.
	check here → ☐ and enter 1% of Part I, line 27b	, ; , £ 2	222		3
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)	<b>"</b> "	, 1 ¹ 12		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
3	Add lines 1 and 2			1	64.
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			1	64.
	Credits/Payments:			VIV.	- Contract
	2015 estimated tax pmts and 2014 overpayment credited to 2015			**	
	Exempt foreign organizations — tax withheld at source 6 b				
	Tax paid with application for extension of time to file (Form 8868) 6 c		(本)		
	Backup withholding erroneously withheld				
	Total credits and payments. Add lines 6a through 6d	Abo ti	and the first		
	Enter any <b>penalty</b> for underpayment of estimated tax. Check here	<del></del>			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<del> </del>			<u></u>
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<del> </del>			64.
		<del> </del> -			0.
	<del>.</del>				
	I.VII-A   Statements Regarding Activities		34.031		F .:
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1 a	Yes	No X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?		1 b		,
	·			- · ·	X
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	ļ	p."		133
	Did the foundation file Form 1120-POL for this year?	ļ	14.7	ويهري	38.7
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		1 c	W. c	X
	(1) On the foundation > \$ (2) On foundation managers > \$				18 M
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$			" `>\%	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	. 4	X
	If 'Yes,' attach a detailed description of the activities.		, A.C. 14	A	\$15\$. T.
,	the foundation made one shounds not provide the IDC in the committee instrument and the			, , , ,	4
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		3	, , , %	Х
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4 a		X
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?		4 b		ļ
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		Х
	If 'Yes,' attach the statement required by General Instruction T		100	*	(\$. t> ·
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		4	ڻي ، ره	
	By language in the governing instrument, or			* * * * * * * * * * * * * * * * * * *	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		6	· · · · · · · · · · · · · · · · · · ·	X
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	×	<del>  ^</del>
	Enter the states to which the foundation reports or with which it is registered (see instructions)		<u> </u>	<del>- ^</del> :	1337
	OR - Oregon	_	2	l.	K
L		_	3 .50	٠, ٠, ٠,	
L	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation		8 b	X	1460
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Part XIV		9	X	
10	Did any persons become substantial contributors during the tax year? If Yes,' attach a schedule listing their names and addresses		10		x
BAA				0-PF	(2015)

orm	<b>990-PF</b> (2015) THE THOMPSON FOUNDATION INC 93-131676	7	Pa	age <b>5</b>
Par	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		х
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		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	х	
	Website address			
14	The books are in care of ► GENE_THOMPSON Telephone no. ► (541)	929	-684	9
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	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	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country	2.15		
Par	tiVIIBB 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.	2500 mg/s	Yes	No
1 a	During the year did the foundation (either directly or indirectly):	1	100	\$ 11K
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	, , ,	ا کار کار اور انجاز اور	ر چک در م برگ می
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	, ,	72.5	"";"
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	3		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	> ****, * ,	، پشره	, [*] *§ *
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	,		: : 7g,
ł	of fany 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)?	1 b	21.1	, LÉ s
	Organizations relying on a current notice regarding disaster assistance check here			
•	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?	. 1 c	j.	X
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)).	,	75. 15.	3. (5.)
4	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?			
	If 'Yes,' list the years ► 20 _ , 20 _ , 20		1	<b>`</b>
ı	Are there any years listed in 2a for which the foundation is <b>not</b> 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.)	2 b	, 53	À
	of 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 , 20 .			200
3	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		1.5	
l	olf '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.)			14 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
4	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?	. 4 a		х
	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?	. 41		Х
BA	· · · · · · · · · · · · · · · · · · ·	Form 99	90-PF	(2015)

				1		
Form 990-PF (2015) THE THOMPSON FOUND	ATION INC		93-131	.6767 Page 6		
Part VII-B Statements Regarding Activiti	es for Which Form	4720 May Be Req				
5 a During the year did the foundation pay or incur ar	ny amount to:			6.34 o		
(1) Carry on propaganda, or otherwise attempt to	•	,	· · · · Yes X	No		
(2) Influence the outcome of any specific public e on, directly or indirectly, any voter registration	dnve?			No		
(3) Provide a grant to an individual for travel, stud	dy, or other similar purpo	ses?	· · · · Yes X	No		
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions).	a chantable, etc, organiz	zation described	· · · · Yes X	No .		
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes X No						
b If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?						
Organizations relying on a current notice regardir	ng disaster assistance ch	neck here		38 883 838		
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsible	lity for the grant?		Yes [	No		
If 'Yes,' attach the statement required by Regulati	ions section 53.4945-5(d	1).				
6 a Did the foundation, during the year, receive any from a personal benefit contract?	unds, directly or indirectl	y, to pay premiums	Yes X	No		
<b>b</b> Did the foundation, during the year, pay premium	s, directly or indirectly, o	n a personal benefit con	tract?	6b X		
If 'Yes' to 6b, file Form 8870.				, ,		
7 a At any time during the tax year, was the foundation						
<b>b</b> If Yes, did the foundation receive any proceeds						
Part VIII Information About Officers, Di and Contractors	rectors, Trustees,	Foundation Manag	gers, Highly Paid E	Employees,		
1 List all officers, directors, trustees, foundation	n managers and their c	ompensation (see inst	ructions).			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c)Compensation (If not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances		
GENE THOMPSON						
6860 SW WINDING WAY	PRESIDENT					
CORVALLIS OR 97333	1.00	0.	0.	0.		
CARRIE THOMPSON						
6860 SW WINDING WAY	VICE PRESIDENT					
CORVALLIS OR 97333	1.00	0.	0.	0.		
JAKE_THOMPSON						
6860 SW WINDING WAY	DIRECTOR					
CORVALLIS OR 97333	1.00	0.	0.	0.		
See Information about Officers, Directors, Trustees, Etc.						
				ļ		
		0.	0.	0.		
2 Compensation of five highest-paid employee						
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances		
NONE						

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000			·	None

3 Five highest-paid independent contractors for professional services (see in		
' (a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<del></del>	
·		
otal number of others receiving over \$50,000 for professional services		Nor
Part IX-A Summary of Direct Charitable Activities		
ist the foundation's four largest direct charitable activities during the tax year. Include relevant statistical organizations and other beneficiaries served, conferences convened, research papers produced, etc.	l information such as the number of	Expenses
1 NONE_		
		.]
		<u> </u>
2		•
		-
3	<del></del>	· · · · · · · · · · · · · · · · · · ·
		•
		-
4		
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		_
		ļ
Part IX-B Summary of Program-Related Investments (see instru	uctions)	
Describe the two largest program-related investments made by the foundation during	the tax year on lines 1 and 2	Amount
1	g the tax year on miles I allo L	7 tillount
		-[
		-
2		
All other program-related investments. See instructions.		
3		-
		-
Total. Add lines 1 through 3		
Total Add mes I thought of the terms of the		<u> </u>

Par	see instructions.)	gn fou	indations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes		,
	Average monthly fair market value of securities		398,141.
b	Average of monthly cash balances	1 b	595,021.
C	Fair market value of all other assets (see instructions)	1 c	
d	Total (add lines 1a, b, and c)	1 d	993,162.
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c	34 40 6	
	(attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	993,162.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	14,897.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	978,265.
6	Minimum investment return. Enter 5% of line 5	6	48,913.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here $x \in \mathbb{R}$ and do not complete this part.)	foun	dations
1	Minimum investment return from Part X, line 6	. 1	
	Tax on investment income for 2015 from Part VI, line 5	(j. 1.4	
b	Income tax for 2015 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b		
3	Distributable amount before adjustments. Subtract line 2c from line 1		
4	Recoveries of amounts treated as qualifying distributions	. 4	
5	Add lines 3 and 4 · · · · · · · · · · · · · · · · · ·		
6	Deduction from distributable amount (see instructions)	. 6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	. 7	
Par	t·XIIs Qualifying Distributions (see instructions)		
1 2	Amounts paid (including administrative expenses) to accomplish chantable, etc, purposes: Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	்ப்லார் . 1 a	52,050.
k	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		
3	Amounts set aside for specific charitable projects that satisfy the	27 187 18 22 14 55 6	
3	Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required)	. 3 a	
ŀ	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	52,050.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	. 6	52,050.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the qualifies for the section 4940(e) reduction of tax in those years	oundat	
RAA			Form 990-PF (2015)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7		+ 1	7 2	0
2 Undistributed income, if any, as of the end of 2015 a Enter amount for 2014 only	is to the	***		
b Total for pnor years 20 , 20 , 20	7		· · · • · · · · · · · · · · · · · · · ·	
3 Excess distributions carryover, if any, to 2015	20 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A	The second second second		Mark Comments
a From 2010				
b From 2011 0 .				
c From 2012 0 .				
d From 2013 0 .	ALCOHOL:		i ke zasti.	
e From 2014 0 .				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from Part	31 c 11 2 17 18	A	***	Ann San
XII, line 4: \$ 52,050.				
a Applied to 2014, but not more than line 2a			er	
b Applied to undistributed income of prior years (Election required – see instructions)	A STATE OF THE STA			
c Treated as distributions out of corpus (Election required — see instructions)		and the second	mgs a more more and in the second	The state of the s
d Applied to 2015 distributable amount				, , , , , , , , , , , , , , , , , , , ,
e Remaining amount distributed out of corpus .		7 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 .		- V 40, 1 10, 10, 10, 10, 10, 10, 10, 10, 10,
5 Excess distributions carryover applied to 2015			8 8 6 G	
(If an amount appears in column (d), the	ge of the contract of	1 1/2 1/2000		185 %
same amount must be shown in column (a).)	1 13 13 13	الله المراجعة	J	
6 Enter the net total of each column as indicated below:	The second of th			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	·	1 2 2	, , , , ,	12346
b Pnor years' undistributed income. Subtract line 4b from line 2b		0.		
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 — see instructions		0.		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by 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).		To a rest to the	4	
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	. 0			
10 Analysis of line 9:	S WWW.	1 WHEE		THE SECOND SECOND
a Excess from 2011 0				
b Excess from 2012 0	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)			
C Excess from 2013 0				
d Excess from 2014 0			NAME OF THE PERSON OF THE PERS	
e Excess from 2015 0				

Part XIV: Private Operating Foundations (see instructions and Part VII-A, question 9)								
1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling								
b Check box to indicate whether the foundation				X 4942(j)(3) or	4942(1)(5)			
2 a Enter the lesser of the adjusted net	Tax year		Pnor 3 years		<u> </u>			
income from Part I or the minimum investment return from Part X for	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total			
each year listed	8,181.	21,575.	274.	10,341.	40,371.			
b 85% of line 2a	6,954.	18,339.	233.	8,790.	34,316.			
C Qualifying distributions from Part XII, line 4 for each year listed	52,050.	53,565.	14,313.	34,100.	154,028.			
d Amounts included in line 2c not used directly for active conduct of exempt activities			0.	0.	N/A			
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	52,050.	53,565.	14,313.	34,100.	154,028.			
Complete 3a, b, or c for the alternative test relied upon:								
a 'Assets' alternative test – enter:								
(1) Value of all assets	912,880.	949,249.	973,739.	292,278.	3,128,146.			
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	912,880.	949,249.	973,739.	292,278.	3,128,146.			
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X,								
line 6 for each year listed	32,609.	28,813.	8,915.	6,894.	77,231.			
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)	7,500.	7,500.	695,500.	10,000.	720,500.			
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)	7,500.	7,500.	695,500.	10,000.	720,500.			
(3) Largest amount of support from an exempt organization	0.	0.	0.	0.	N/A			
(4) Gross investment income	8,733.	21,811.	437.	12,531.	43,512.			
Part XV Supplementary Information		part only if the	foundation had	\$5,000 or more	e in			
assets at any time during th	e year — see ins	structions.)		•				
Information Regarding Foundation Manage a List any managers of the foundation who have close of any tax year (but only if they have concount to the contract of the contr	e contributed more the	nan 2% of the total of \$5,000). (See section	contributions receive on 507(d)(2).)	d by the foundation b	pefore the			
COUNTENAL THOMPSON								
b List any managers of the foundation who own a partnership or other entity) of which the foundation who have a partnership or other entity.	n 10% or more of the indation has a 10% o	stock of a corporati r greater interest.	on (or an equally lar	ge portion of the own	ership of			
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs: Check here X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.								
a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed.								
b The form in which applications should be submitted and information and materials they should include:								
c Any submission deadlines:								
d Any restrictions or limitations on awards, suc	ch as by geographica	l areas, chantable fi	elds, kınds of institut	ions, or other factors	:			

Form 990-PF (2015) THE THOMPSON FOUNDATION INC

Part XV | Supplementary Information (continued)

3 Grants, and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient		If recipient is an individual, show any relationship to any foundation manager or	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or but	usiness)	substantial contributor	recipient				
a Paid during the year							
BENTON COUNTY HOSPICE	SERVICE						
2350 NW PROFESSIONAL D	RIVE						
CORVALLIS	OR 97330		501C3	GENERAL FUND	5,000.		
GOOD SAMARITAN HOSPITAL	FOUNDATION				,		
PO BOX 1068				GSH CANCER			
CORVALLIS	OR 97339		501C3	CENTER	11,000.		
OSU FOUNDATION					,		
850 SW 35TH STREET							
CORVALLIS	OR 97333		501C3	DEAN'S FUND	10,000.		
CATLIN GABLE SCHOOL							
8825 SW BARNES RD				CAMPAIGN FOR			
PORTLAND	OR 97225		501C3	ARTS & MINDS	5,000.		
OLCF			i		,		
PO BOX 10669							
EUGENE	OR 97440		501C3	GENERAL FUND	10,000.		
PHILOMATH SCHOOL DISTI	СТ 17Ј		•	PHILOMATH HIGH			
-535 S-19TH STREET				SCHOOL FORESTRY			
PHILOMATH	OR 97370		501C3	CLUB	1,000.		
BENTON COUNTY HISTORIC					1,000.		
1101 MAIN ST							
PHILOMATH	OR 97370		501C3	GENERAL FUND	10,000.		
					10,000.		
		1					
					., -		
			ł				
				1			
				İ			
Total		· · · · · · · · · · · · · · · · · ·			52,000.		
b Approved for future payment			}		32,000.		
,		;					
			İ				
		ļ					
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			}				
		1			1		
		İ	1				
Table		<u> </u>	.l	<u> </u>			
Total		· · · · · · · · · · · · · · · · · · ·	<u>.</u>		bĮ		

Part XVI-A Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated.	Unrelate	ed business income	Excluded	d by section 512, 513, or 514	' (e)
Program service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions.)
a			1000		
b	 		<u> </u>		
c	<u> </u>		<u> </u>		
d	 		<u> </u>		
e					
f	<u> </u>			***************************************	
g Fees and contracts from government agencies					
2 Membership dues and assessments					
Interest on savings and temporary cash investments			14	913.	
Dividends and interest from securities			14	7,820.	
Net rental income or (loss) from real estate:	X 200		100		V 2 5 8 2 5 3 3 3 4 5
a Debt-financed property					
b Not debt-financed property			1		
6 Net rental income or (loss) from personal property					
Other investment income					
Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					<u> </u>
O Gross profit or (loss) from sales of inventory			1	<u> </u>	
1 Other revenue	,		1. 5	in the second	
a			<u> </u>	7	-2 - 1
h	1				
c	 		Ì		
d	 				
e		<u> </u>	1		
2 Subtotal. Add columns (b), (d), and (e)	· · · · · · · · · · · · · · · · · · ·		S	8,733.	
3 Total. Add line 12, columns (b), (d), and (e)	•			13	8,733
	· · · · · · · · · · · · · · · · · · ·	olishment of Exem	nt Puri	noses	····
art XVI-B Relationship of Activities to th	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	the uctions.)
art XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	o the ructions.)
art XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	the uctions.)
art XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	o the ructions.)
art XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	o the ructions.)
art XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	othe ructions.)
art XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	o the ructions.)
art XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	othe uctions.)
art XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	o the uctions.)
art XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	the uctions.)
art XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	o the nuctions.)
art XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	o the ructions.)
art XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	o the nuctions.)
art XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	o the uctions.)
art XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	o the uctions.)
art XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	othe uctions.)
art XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	o the uctions.)
art XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	o the uctions.)
art XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	othe uctions.)
art XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	othe nuctions.)
Part XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	othe nuctions.)
art XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	o the nuctions.)
Part XVI-B Relationship of Activities to the	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	o the nuctions.)
Relationship of Activities to the Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	e Accomp	ted in column (e) of Part	XVI-A c	ontributed importantly to	o the uctions.)

Form 990-PF (2015) THE THOMPSON FOUNDATION INC 93-1316767 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

des rela a Tra (1) (2) b Oth (1) (2) (3) (4) (5) (6) c Sha	cenbed along to insfers (Cash - Other trans Sales Purcha Renta Reimb Loans Perfor aring of the answers goods,	ganization directly or in section 501(c) of the political organization from the reporting for assets	the Code (other is?) nundation to a nundation to a nundation to a nundation to a nundation to a nundation to a nundation to a nundation to other assents	oncharitable on the organization of the organi	e exempt org on. on. ganization ganization ng solicitation s, or paid em ollowing sche	anization c	ns) or in	section 527,	ow the fair market	1 a (2) 1 b (1) 1 b (2) 1 b (3) 1 b (4) 1 b (5) 1 b (6) 1 c	Yes	X X X X X X X
(a) Line r	10 (b) Amount involved	(c) Name o	f noncharitabl	e exempt organ	ization	(d)	Description of transf	fers, transactions, and	sharing arrai	gement	s
			<u> </u>									
	-											
	_											
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											_	
						1						
··-	_											
	+				· · · · · · · · · · · · · · · · · · ·							
	1			 ,								
de	scribed Yes,' co	ndation directly or in in section 501(c) of omplete the following Name of organizatio	the Code (others	er than sect	elated to, one ion 501(c)(3) Type of orga) or in secti	ix-exemplion 527?		Description of rel		s X	No
							-					
Sign Here	correct, a	enalties of penjury, I declare and complete. Declaration of the complete of the that I have examine of preparer (other tha	ed this return, ir an taxpayer) is	based on all infor	inying schedul mation of whice	ch preparer	ements, and to the be has any knowledge. Scele Latte		May the this return prepare	IRS disc im with the r shown the tructions)	ne below	
	7	Pnnt/Type preparer's nam	ne	Pre	parer's signature			Date	Check	PTIN		
Paid							1		self-employed			
Prepa	rer	Firm's name	Seli	<u> </u>	repa	rec	1		Firm's EIN ►			
Use O		Firm's address										
		<u> </u>							Phone no.			
BAA										Form 9	90-PF	(2015)

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

2015

OMB No 1545-0047

Name of the organization		Employer identification number
THE THOMPSON FOUNDATION	INC	93-1316767
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organiza	ation
	4947(a)(1) nonexempt chantable trust no	ot treated as a private foundation
	527 political organization	
	ozr pontour organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust tre	eated as a private foundation
	501(c)(3) taxable private foundation	•
	501(c)(5) taxable private foundation	
Check if your organization is covered by	the General Rule or a Special Rule.	
, ,	•	Dula and a Special Dula. Con instructions
Note. Only a section 501(c)(7), (8), or (1	0) organization can check boxes for both the General F	Rule and a Special Rule. See Instructions.
General Rule		
X For an organization filing Form 990,	990-EZ, or 990-PF that received, during the year, contributions for determining	nbutions totaling \$5,000 or more (in money or
proporty/ nem any one commenter	50., p. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6.	3
Special Rules		
For an organization described in secunder sections 509(a)(1) and 170(b)	ction 501(c)(3) filing Form 990 or 990-EZ that met the 3)(1)(A)(vi), that checked Schedule A (Form 990 or 990-	i3-1/3% support test of the regulations EZ), Part II, line 13, 16a, or 16b, and that
received from any one contributor, or	lunng the year, total contributions of the greater of (1) \$	55,000 or (2) 2% of the amount on (I)
Form 990, Part VIII, line In, or (ii) Fo	orm 990-EZ, line 1 Complete Parts I and II.	
For an organization described in sec	ction 501(c)(7), (8), or (10) filing Form 990 or 990-EZ th	nat received from any one contributor,
during the year, total contributions of	of more than \$1,000 <i>exclusively</i> for religious, charitable,	, scientific, literary, or educational
purposes, or for the prevention of cr	ruelty to children or animals. Complete Parts I, II, and III	1,
□e :	-1 F04/-\/7\ /0\ /40\ El F 000 000 F7 H	and an arithmetic from any one contributor
	ction 501(c)(7), (8), or (10) filing Form 990 or 990-EZ th sively for religious, charitable, etc., purposes, but no su	
\$1,000. If this box is checked, enter	here the total contributions that were received during the	he year for an exclusively religious,
	mplete any of the parts unless the General Rule applie	č c
it received nonexclusively religious,	charitable, etc., contributions totaling \$5,000 or more d	luring the year • • •
Caution. An organization that is not con	vered by the General Rule and/or the Special Rules do rt IV, line 2, of its Form 990, or check the box on line H	es not file Schedule B (Form 990, 990-EZ, or of its Form 990-EZ or on its Form 990-PF.
Part I. line 2. to certify that it does not n	neet the filing requirements of Schedule B (Form 990, 9	990-EZ, or 990-PF).

BAA 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)

	B (Form 990, 990-EZ, or 990-PF) (2015)	Page	1 of 1 of Part I
Name of org		1	Identification number
	IOMPSON FOUNDATION INC	· · · · · · · · · · · · · · · · · · ·	316/6/
	Contributors (see instructions). Use duplicate copies of Part I if additional space		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	COURTENAY THOMPSON		Person X Payroll
	8133 NW HAWKINS BLVD	\$7 <u>.</u> 500_	Noncash
	PORTLAND OR 97229		(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash
			(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 - \$	Person
		-	(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$=	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroli Omplete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
BAA	TEEA0702 10/12/15	Schedule B (Form	990, 990-EZ, or 990-PF) (2015

Form 990-PF, Page 1, Part I, Line 18 Line 18 Stmt

Taxes	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
2014 FED EXCISE TAX	432.	432.	432.	
OR DEPT OF JUSTICE 2014 TAX	120.	120.	120.	
Total	552.	552.	552.	

Form 990-PF, Page 6, Part VIII, Line 1 Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person . X Business . COURTENAY THOMPSON				
8133 NW HAWKINS BLVD	DIRECTOR	0.	0.	0.
PORTLAND OR 97229 Person . X Business . GINA THOMAS	1.00	0.	0.	0.
4805 HARBOR VIEW PL.	DIRECTOR			
ANACORTES WA 98221 Person . X Business MADELEINE THOMPSON	1.00	0.	0.	0.
6860 SW WINDING WAY	DIRECTOR			
CORVALLIS OR 97333 Person . X Business HALEY PEARCE	1.00	0.	0.	0.
11008 NW 14TH AVE	DIRECTOR			
VANCOUVER WA 98685	1.00	0	0.	0.
Person . X Business ERIC THOMPSON				
6860 SW WINDING WAY	SECRETARY			
CORVALLIS OR 97333	1.00	0.	0.	0.

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0.	0.	0.

Form 990-PF, Page 2, Part II, Line 10b L-10b Stmt

	End of	End of Year			
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value			
200 SHARES RAYTHEON	6,150.	24,862.			
21,467.849 SHARES CITIZENS BANK	282,343.	236,146.			
2000 SHARES INTERNATIONAL PAPER	76,493.	75,890.			
500 SHARES UNION PACIFIC	38,354.	39,180.			

93-1316767

2

Form 990-PF, Page 2, Part II, Line 10b L-10b Stmt

Continued

		End of Year			
	Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value		
otal		403,340.	376,078.		

Supporting Statement of:

Form 990-PF, p8/Part X, Line la

Description	Amount
21467.849 SHARES CITIZENS BANK	261,598.
200 SHARES RAYTHEON	21,730.
2000 SHARES INTERNATIONAL PAPER CO	76,020.
500 SHARES UNION PACIFIC CORP	38,793.
Total	398,141.