

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**

Department of the Treasury Internal Revenue Service

EXTENDED TO AUGUST 15, 20 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 separate instructions is at www.lrs.gov/form990pf.

OMB No 1545-0052

I UI Cale	ndar year 2015 or tax year beginning		, and ending		
Name o	f foundation			A Employer identification	number
PUB	LIC HEALTH MICROBIOLOGY				
_CHA	RITABLE TRUST	94-3216399			
Number	and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
_186	3 NW LESTER AVE			541-829-94	68
City or 1	own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	ending, check here
_COR	VALLIS, OR 97330				
G Checl	k all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	s, check here
	Final return	Amended return		.	
	Address change	Name change	· -	Foreign organizations me check here and attach co	eting the 85% test, emputation
H_Check	k type of organization: Section 501(c)(3) ex	empt private foundation		E If private foundation sta	tus was terminated
	ection 4947(a)(1) nonexempt charitable trust X	Other taxable private founda	ition	under section 507(b)(1)	
I Fair m	arket value of all assets at end of year 🚺 A <u>cco</u> untii	ng method: X Cash	Accrual	F If the foundation is in a	60-month termination
(from	Part II, col. (c), line 16)	her (specify)		under section 507(b)(1)	
\$_	19,362. (Part I, colu	mn (d) must be on cash t	pasis)		
Part	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received	500.			
2	Check It the foundation is not required to attach Sch. B				
3	Interest on savings and temporary cash investments	1.	1.		STATEMENT 1
4	Dividends and interest from securities	393.	393.		STATEMENT 2
58	Gross rents		····		
1	Net rental income or (loss)			<u> </u>	
6a	Net gain or (loss) from sale of assets not on line 10				
ğ t	Gross sales price for all assets on line 6a				
Revenue 7	Capital gain net income (from Part IV, line 2)		0.		
œ 8	Net short-term capital gain				
9	Income modifications				
10a	Gross sales less returns and allowances				
1 .	Less Cost of goods sold				
(Gross profit or (loss)				
11	Other income				
12	Total Add lines 1 through 11	894.	394.	0.	
13	Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
14	Other employee salaries and wages		 		
ر س 15	Pension plans, employee benefits				<u> </u>
မ္ဟု 16a	Legal fees		<u> </u>	ļ	
ja l	Accounting fees STMT 3	680.	0.		680.
ığ d	Other professional fees STMT 4	250.	0.	0.	250.
. <u>\$</u> 17	Interest			ļ	
and Administrative Expens	Taxes STMT 5	12.	12.		0.
SE 19	Depreciation and depletion	68.	68.	0.	
를 20	Occupancy				-
ĕ 21	Travel, conferences, and meetings				
두 22	Printing and publications	, ,		ļ	
Operating 52	Other expenses			 	
E 24	Total operating and administrative		0.0	_	000
ğ	expenses. Add lines 13 through 23	1,010.	80.	0.	
25	Contributions, gifts, grants paid	250.		 	250.
26	Total expenses and disbursements.	1 000	0.0	_	1 100
-	Add lines 24 and 25	1,260.	80.	0.	1,180.
27		366			
1	Excess of revenue over expenses and disbursements	-366.	314.	 	
	Net investment income (if negative, enter -0-)		314.	0.	
523501 11-24-15	Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice, see	instructions	L		Form 990-PF (2015)

PUBLIC HEALTH MICROBIOLOGY CHARITABLE TRUST

Beginning of year Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only End of year (a) Book Value (c) Fair Market Value (b) Book Value 25. 25. 25. 1 Cash - non-interest-bearing 2,316. 1,625 1,625. 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 7 Other notes and toans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 9,438. 9,831. 17,630. STMT 7 **b** Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 3,163. 14 Land, buildings, and equipment; basis ▶ 3,081 150. 82. Less accumulated depreciation STMT 6 82. 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 11,929. 11,563. 19,362. instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0. 23 Total liabilities (add lines 17 through 22) **▶** X Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Fund Balances 11,929. 11,563. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ŏ 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds é 11,929. 11,563 30 Total net assets or fund balances 11,929. 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 11,929. (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

94-3216399

CH	Δ	Ð.	r ጥ 2	BLE	TRT	TST

94-3216399 Page 3

		l(s) of property sold (e.g. common stock, 200 shs			[D	low ac - Purcl - Dona	quired hase ation		acquired ay, yr.)	(d) Date sold (mo., day, yr.)
<u>1a</u>					 					
b NC	NE				 					
<u>C</u>					┿					
<u>d</u>					+-			-		
(e) Gross sales price		preciation allowed or allowable)		t or other basis					ain or (loss) s (f) minus (
a		or unovable)	pido					(0) piuc		91
Ь										
<u>C</u>	-									
<u>d</u>	-				-					
Complete only for assets show	.1 Ind dain in co	lumn (h) and owned by t	he foundation	on 12/31/69			0	Gaine (C	ol (h) nain	тпис
		Adjusted basis		cess of col. (i)	\rightarrow	(I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or				
(i) F.M.V. as of 12/31/69		s of 12/31/69		r col. (j), if any			Losses (from col. (h))			
<u>a</u>										
<u>b</u>										
<u>C</u>			<u> </u>							
<u>d</u>										
<u>e</u>	<u></u>							_		
2 Capital gain net income or (net o	apital loss)	If gain, also enter If (loss), enter -0-	in Part I, line : in Part I, line	7 7	}[2		_		_
3 Net short-term capital gain or (Ic	nss) as define									
If gain, also enter in Part I, line 8			u (0).]					
If (loss), enter -0- in Part I, line 8	3					3				
Part V Qualification I	Jnder Se	ction 4940(e) for	Reduced	lax on Net	Inv	estm	nent Inc	ome		
If section 4940(d)(2) applies, leave Was the foundation liable for the se If "Yes," the foundation does not qui Enter the appropriate amount in	ction 4942 ta alify under se	x on the distributable am	mplete this pa	rt.						Yes X No
(a)	r cacin dolarin	(b)	1547 40410110 004	ioro mamig any s	(c)			<u> </u>	Distrik	(d) oution ratio
Base period years Calendar year (or tax year beginr	ning in)	Adjusted qualifying dis	tributions	Net value of no			use assets	-	(col. (b) div	rided by col. (c))
2014			3,591.			1	9,717	•		.18212
2013			895.				6,137			.05546
2012			1,734.				5,748			.11010
2011		.	3,076.			2	2,742	•		.13525
2010								+		<u>-</u>
2 Total of line 1, column (d)								2		.48295
3 Average distribution ratio for the	5-vear hase	neriod - divide the total of	on line 2 by 5.	or by the numbe	r of ve	ars				
the foundation has been in exist	=		,,, mo E 9, 9,	o. o,	, , ,			3		.12073
4 Enter the net value of noncharita	able-use asse	ets for 2015 from Part X,	line 5					4	İ	18,373
5 Multiply line 4 by line 3								5		2,218
9 Multiply line 4 by line 5								,		
6 Enter 1% of net investment inco	me (1% of P	art I, line 27b)						6		3
7 Add lines 5 and 6								7	<u> </u>	2,221
8 Enter qualifying distributions fro	om Part XII, lı	ne 4						8		1,180
If line 8 is equal to or greater that See the Part VI instructions.	an line 7, che	ck the box in Part VI, line	1b, and comp	olete that part usi	ng a 1	% tax ı	rate.			

	990-PF (2015) CHARITABLE TRUST		94-	<u> 3216</u>	<u> 399</u>		Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e)	, or 4	1948	- see	instru	ctio	าร)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			[
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🔲 and enter 1%	}	1		_		6.
	of Part I, line 27b						
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2				0.
3	Add lines 1 and 2		3				<u>6.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4				0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		5				6.
6	Credits/Payments*			•			
а	2015 estimated tax payments and 2014 overpayment credited to 2015		╛				
b	Exempt foreign organizations - tax withheld at source 6b		_				
C	Tax paid with application for extension of time to file (Form 8868)]				
d	Backup withholding erroneously withheld 6d 6d		_				
7	Total credits and payments. Add lines 6a through 6d		7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9				6.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10				
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax	ed ▶	11				
Pa	rt VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or in	terven	e in			Yes	No
	any political campaign?				1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the de	efinition	1)?		1b		<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials p	ublish	ed or				
	distributed by the foundation in connection with the activities						
C	c Did the foundation file Form 1120-POL for this year?						_X
ď	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$	<u> </u>	<u>-</u>				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	าก					
	managers. ► \$O.						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		_X_
	If "Yes," attach a detailed description of the activities.						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorpo	ration,	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?		N	I/A	4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5_		X
	If "Yes," attach the statement required by General Instruction T						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:						<u> </u>
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state of the state	the star	te law				ļ
	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 it	Part X	V		7_	X	<u> </u>
_							
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)						
	OR						1
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate))				v	
_	of each state as required by General Instruction G? If "No," attach explanation	4			86	X	├—
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)	tor cal	enoar				.
	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 addresse	95			<u> 10 </u>		

Form 990-PF (2015) CHARITABLE TRUST
Part VII-A Statements Regarding Activities (continued)

94-3216399

Page 5

<u> </u>				
	At any time draw, the case of the foundation dispatity are adventity over a controlled patity within the consequence of	1	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			7.7
40	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	40		v
12	If "Yes," attach statement (see instructions) Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	12	Х	X
13	Website address > N/A	13	Δ	
1.4	The books are in care of ► WILLIAM R. FORD Telephone no. ► 541 – 75	3_0	356	
1-4	Located at ► 1863 NW LESTER AVE, CORVALLIS, OR ZIP+4 ►97		330	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	330		
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	<u> </u>		
	foreign country			:
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	•		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			7.7
_	before the first day of the tax year beginning in 2015?	_ 1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1		
_	defined in section 4942(j)(3) or 4942(j)(5)): 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		,	
а	before 2015? Late and on tax year 2015, did the roundation have any diffusionated income (lines od and de, Fart Altry for tax year(s) deglining Late before 2015?	}		
	16 W/ or II look the course			
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	}		ļ
•	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.) N/A	2b		ļ
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
-	▶			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			1
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) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	X
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		X

PUBLIC HEALTH MICROBIOLO)GY					
Form 990-PF (2015) CHARITABLE TRUST			<u>94-32163</u>	99 Page 6		
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)			
5a During the year did the foundation pay or incur any amount to:	•	·				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No	1		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir					
any voter registration drive?			es X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No	1 1		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section					
4945(d)(4)(A)? (see instructions)			es X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	, or educational purposes, or t					
the prevention of cruelty to children or animals?			es X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		ın Regulations				
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A 5	5b		
Organizations relying on a current notice regarding disaster assistance check h						
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f						
expenditure responsibility for the grant?		I/A L Ye	es L No			
If "Yes," attach the statement required by Regulations section 53 494						
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			h		
a personal benefit contract?		Y6	es 🗶 No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		<u> </u>	Sb X		
If "Yes" to 6b, file Form 8870.				1 1		
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?						
b If "Yes," did the foundation receive any proceeds or have any net income attribution of the state of the st				'b		
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	inagers, Highly	y			
List all officers, directors, trustees, foundation managers and their	compensation	<u> </u>				
Telescan emedica, an estato, a estato national managers and also	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense		
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances		
WILLIAM R FORD	CO-TRUSTEE	Cincil o j	compensation	uno municos		
1863 LESTER AVE			ĺ			
CORVALLIS, OR 97330	1.00	0.	0.	0.		
JANNA E FORD	CO-TRUSTEE			<u>-</u>		
1863 LESTER AVE						
CORVALLIS, OR 97330	1.00	0.	0.	0.		
0011112220	7.00					
	1		ļ			
	1					
	1		1			
	Ī					
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1). If none,	enter "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						
	1					
	<u></u>	<u> </u>				

Total number of other employees paid over \$50,000

CHARITABLE TRUST 94-3216399 Form 990-PF (2015) Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (c) Compensation (b) Type of service NONE Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the Expenses number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. SEE STATEMENT 8 0. Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A

Form **990-PF** (2015)

All other program-related investments. See instructions.

Total. Add lines 1 through 3

Form 990-PF (2015)

CHARITABLE TRUST

[<u>r</u>	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	16,610.
b	Average of monthly cash balances	1b	2,043.
C	Fair market value of all other assets	1c	0.
d	Total (add lines 1a, b, and c)	1d	18,653.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	18,653.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	280.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	18,373.
6	Minimum investment return Enter 5% of line 5	6	919.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	nd certain	
	foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	919.
2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015. (This does not include the tax from Part VI.)]	
C	Add lines 2a and 2b	2c	6.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3_	913.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	913.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7_	913.
Р	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,180.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	j	
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	1,180.
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	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	1,180.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies for	the section

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,	00.000	10010 \$1101 10 2011	2011	2010
line 7				913.
2 Undistributed income, if any, as of the end of 2015			-	715.
a Enter amount for 2014 only			0.	
b Total for prior years:				
g your se pro- years		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010 3,472.				
b From 2011 1,939.				
c From 2012 947.				
d From 2013 116.				
e From 2014 2,609.				
f Total of lines 3a through e	9,083.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ▶ \$ 1,180.				
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				-
(Election required - see instructions)	0.	Î		
d Applied to 2015 distributable amount				913.
e Remaining amount distributed out of corpus	267.			
5 Excess distributions carryover applied to 2015	0.		<u> </u>	0.
(If an amount appears in column (d), the same amount must be shown in column (a))	0.			<u></u>
6 Enter the net total of each column as indicated below.				
Corpus Add lines 3f, 4c, and 4e Subtract line 5	9,350.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
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 instr.			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	1			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010		1		
not applied on line 5 or line 7	3,472.			
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	5,878.			
0 Analysis of line 9:	ļ		}	
a Excess from 2011 1,939.				
b Excess from 2012 947.	ļ			}
c Excess from 2013 116.				
d Excess from 2014 2,609.				ļ
e Excess from 2015 267.			<u> </u>	<u> </u>

	0-PF (2015) CHARITA	BLE TRUST				16399 Page 10
	XIV Private Operating F				N/A	
1 a lf tl	he foundation has received a ruling o	r determination letter tha	it it is a private operating			
	ndation, and the ruling is effective fo			▶	,	
b Ch	eck box to indicate whether the found		ng foundation described		4942(j)(3) or49	342(j)(5)
2 a Ent	er the lesser of the adjusted net	Tax year		Prior 3 years		ļ .
inc	ome from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
ınv	estment return from Part X for					
eac	ch year listed					
b 85°	% of line 2a		<u> </u>			
c Qu	alifying distributions from Part XII,					
line	e 4 for each year listed					
d Am	ounts included in line 2c not					
use	ed directly for active conduct of					
exe	empt activities					
e Qu	alifying distributions made directly					
for	active conduct of exempt activities.					
3 Co alte a "As	btract line 2d from line 2c mplete 3a, b, or c for the ernative test relied upon: :sets" alternative test - enter: Value of all assets					
(2)	Value of assets qualifying under section 4942(j)(3)(B)(i)					
2/3	dowment" alternative test - enter of minimum investment return own in Part X, line 6 for each year					
c "Sı	ipport" alternative test - enter:					
(1)	Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2)	Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)			i		
(3)	Largest amount of support from					
(-/	an exempt organization					
(4)	Gross investment income					
Part	XV Supplementary Info	rmation (Comple	ete this part only	if the foundation	n had \$5,000 or m	ore in assets
	at any time during t					
1 In	formation Regarding Foundation	n Managers:				
a Lis	st any managers of the foundation wh ar (but only if they have contributed r	o have contributed more	e than 2% of the total con section 507(d)(2).)	ntributions received by th	e foundation before the clo	se of any tax
NONE						
	st any managers of the foundation wh	o own 10% or more of t	he stock of a corporation	n (or an equally large port	tion of the ownership of a p	artnership or
oth	ner entity) of which the foundation ha	s a 10% or greater inter	est.			
NONE	<u> </u>					
2 In	formation Regarding Contribut	ion, Grant, Gift, Loar	n, Scholarship, etc., I	Programs:		
Ch the	eck here 🕨 🔲 if the foundation of the foundation of the foundation makes gifts, grants, etc.	only makes contributions (see instructions) to ind	to preselected charitable ividuals or organizations	e organizations and does under other conditions,	not accept unsolicited req complete items 2a, b, c, an	uests for funds. If d d.
OREC	e name, address, and telephone num SON STATE UNIVERS	SITY, 541-73	37-0123		essed:	
	OF MICROBIOLOGY				<u>.</u> .	
b Th NONE	e form in which applications should $\mathfrak E$	oe submitted and inform	ation and materials they	should include:		
NONE						
d An	ly restrictions or limitations on award	s, such as by geographi	cal areas, charitable field	s, kınds of ınstitutions, oi	r other factors:	
REC]	PIENTS MUST BE S	TUDENTS OF	MICROBIOLO	GY AT OREGO	N STATE UNIV	ERSITY

Form 990-PF (2015) CHARITABLE TRUST

Part XV Supplementary Information (continued)

94-3216399

Page 11

Fart XV Supplementary information			·	
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 substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	**	
a Paid during the year		ļ		
CARISSA THREEWIT	l	ļ.	FOR THE CERTIFICATION	
3274 26TH ST	ľ	1	TRAINING OF A NEW	
SAN FRANCISCO, CA 94110			PUBLIC HEALTH	
	\mathbf{J}_{0}		MICROBIOLOGIST AT THE	
		ļ	MICROBIAL DISEASES	250.
	1	1		
			1	
	1			
				·
	İ	Ì	1	
)		,	
	-	 		
	.			
	1		1	
	.			
	J	J		
	ts			
			 	
		,		
	1	1	1	
	<u> </u>	1	D 0-	
Total		1	> 3a	250.
b Approved for future payment				
NONE				
NONE	ļ	1	ļ	
				
		1		
		1		
		 		
		1		
		1		
		1	1	
Total			<u>▶ 3b</u>	0.

PUBLIC HEALTH Form 990-PF (2015) CHARITABLE TRU		JOGY		94-3	216399 Page 12
Part XVI-A Analysis of Income-Produ	ucing Activitie	·s	•		
Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded t	by section 512, 513, or 514	(e)
Error group amounts unless only wise indicator.	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a	_				
b					
G	-				
đ					
e	-				
	_		 	_	· · · · · · · · · · · · · · · · · · ·
g Fees and contracts from government agencies					
2 Membership dues and assessments	ļ				
3 Interest on savings and temporary cash					
investments			14		
4 Dividends and interest from securities	<u> </u>		14	393.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property			_	_ 	
b Not debt-financed property			+ +		 .
6 Net rental income or (loss) from personal					
property 7 Other investment income	-				
8 Gain or (loss) from sales of assets other		·	+		
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					<u>. </u>
_					
ab	-	·			··········
c	1				
d	I I				
e					
12 Subtotal. Add columns (b), (d), and (e)	-	0		394.	0
13 Total Add line 12, columns (b), (d), and (e)	<u> </u>			13	394
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accom	plishment of I	Exempt P	urposes	
Line No. Explain below how each activity for which inc	come is reported in o	olumn (e) of Part XVI	-A contributed	I importantly to the accomp	olishment of
the foundation's exempt purposes (other tha	·			, ,	
WE RECEIVED, ACCEPTED	AND APPRO	OVED A GRA	NT FOR	A YOUNG WOM	IAN TO
COMPLETE HER STUDIES I	OR HER PU	JBLIC HEAL	TH CER	TIFICATE.	
TO PUBLICIZE THE TRUST					CORVALLIS
CHAMBER OF COMMERCE AN	ND ATTENDE	ED SEVERAL	NETWO	RKING SESSIC	NS AND
INFORMATIVE SESSIONS.			_	<u> </u>	· — · — · — · — · — · — · — · — · — · —
G. FORD MEMORIAL SCHOOL					
THE DEPARTMENT CHAIR (
UNIVERSITY. THESE ENDO					
MICROBIOLOGY MONETARY					
POSSIBLE FUTURE CAREER	RS IN THE	AREA OF P	UBLIC	HEALTH. WIT	HOUT THIS

SCHOLARSHIP IT WOULD BE DIFFICULT FOR THE RECIPIENT TO COMPLETE HER

STUDIES.

CHARITABLE TRUST Form 990-PF (2015)

94-3216399 Page 13

Exempt Organizations 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets (2) Other assets (1) Sales of assets to a noncharitable exempt organization (1) Sales of assets from a noncharitable exempt organization (1) Sales of assets from a noncharitable exempt organization (1) Sales of assets from a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (6) The answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.	Part XV		egarding Trans		and Transac	ctions a	nd Relations	hips With Nonc	haritable		ge 13
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other sasets (3) State of assets from a noncharitable exempt organization (3) Rental of Eachtes, equipment, or other assets (4) Reminiscrated a rangement of services or membership or fundrasing solicitations (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) It has a service any of the above is "Yes", complete the following schedule. Column (6) should always show the tax market value of the goods, other assets, or services grewed in value of the goods, other assets, or services grewed in value of the goods, other assets, or services grewed in value of the goods, other assets, or services grewed in value of the goods, other assets, or services grewed in value of the goods, other assets, or services grewed in value of the goods, other assets, or services grewed in value of the goods, other assets, or services grewed in value of the goods, other assets, or services grewed in value of the goods, other assets, or services grewed in value of the goods, other assets, or services grewed in value of the goods, other assets, or services grewed in value of the goods of the services grewed in value of the goods, other assets, or services grewed in value of the goods, other assets, or services grewed in value of the goods, other assets, or services grewed in value of the goods, other assets, or services grewed in value of the goods, other assets, or services grewed in value of the goods, other assets, or services grewed in the property of the goods, other assets, or services grewed in the property of the goods, other assets, or services grewed in the grewed in the goods, other assets, or services grewed in the grewed in the grewed						_		•		-	
a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets 5 Other transactions: (3) Sierla of activities from a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reminiusment arrangements (5) Loans or clang quarantes (5) Loans or clang quarantes (6) Performance of services or memborship or fundrasing solicitations (7) Sierla of loan guarantes (8) Performance of services or memborship or fundrasing solicitations (9) The formance of services or memborship or fundrasing solicitations (9) The formance of services or complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services (were by the reporting foundation, if the foundation received less than fair market value in any fundaction or sharing arrangement, show in column (b) the value of the goods, other assets, somewhere the profiting foundation in the foundation received less than fair market value in any fundaction or sharing arrangement, show in section 50 (c) of the Code (other than section 50 (c)) in a section 50 (c) of the Code (other than sections 50 (c)) in a section 50 (c) of the Code (other than sections 50 (c)) in a section 50 (c) of the Code (other than sections 50 (c)) in a section 50 (c) of the Code (other than sections 50 (c)) in a section 50 (c) of the Code (other than sections 50 (c)) in a section 50 (c) of the Code (other than sections 50 (c)) in a section 50 (c) of the Code (other than sections 50 (c)) in a section 50 (c) of the Code (other than sections 50 (c)) in a section 50 (c) of the Code (other than sections 50 (c)) in a section 50 (c) of the Code (other than sections 50 (c)) in a section 50 (c) of the Code (other than sections 50 (c)) in a section 50 (c) of the Code (other than sections 50 (c)) in a section 50 (c) of the Code (other than sections 50 (c)) in a section 50 (c) of the Code (other than sections	1 Did the	organization directly or indi	rectly engage in any o	of the followin	g with any other	organization	n described in sec	tion 501(c) of		Yes	No
(2) Other sassts 0 Other transactions (1) Sake of assets from a noncharitable exempt organization (2) Purchase of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rembursterent arrangements (5) Loans or loan guarantees (6) Performance of services or memburship or fundrasing solicitations (7) Sharing of facilities, equipment, making lists, other assets, or paid employees (8) Performance of services or memburship or fundrasing solicitations (8) Performance of services or memburship or fundrasing solicitations (8) Exhanging of facilities, equipment, making lists, other assets, or paid employees (9) Long or loan guarantees (1) Sharing of facilities, equipment, making lists, other assets, or paid employees (1) It the services given by the reporting foundation, it the foundation exceed less than fair market value in any transaction or sharing arrangement, show in column (9) the value of the goods, other assets, or services present. (a) Long to (9) Amount evolved (b) Amount evolved (c) Name of noncharitable exempt organizations (d) Description of trainders, turnsactions, and sharing errangements N/A (a) It Yes, complete the following schedulize. (d) Name of organization (e) Description of relationship N/A (i) These cervatures of person, I declars that I have examined the relative, including accompanying schedulize and statements, and to the best of my viscolledge and better, it given, cones, and complete feelingents of propine (before the training person person of indications of invitations of inviscolledge and better, it given, cones, and complete feelingents of propine (before the training person person of indications of invitations of invita	the Cod	de (other than section 501(c)(3) organizations) or	n section 52	7, relating to pol	itical organi	zations?	.,			
(2) Other transactions: (3) Siles of assets to a noncharitable eximpt organization (3) Purchases of assets to man concharitable eximpt organization (4) Renation Eductive, equipment, or other assets (5) Loans or of cana guarantees (5) Loans or of cana guarantees (6) Performance of services or membriship or fundrasing solicitations (6) Performance of services or membriship or fundrasing solicitations (7) Siles of data guarantees (8) Performance of services or membriship or fundrasing solicitations (8) Performance of services or membriship or fundrasing solicitations (9) The answer to any of the above is "Yes," complete the following schedule. Column (9) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation directly or midracible with the services given by the reporting foundation. If the foundation decreased lies shan fair market value in any other assets, or services received. (a) Amount involved (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of relationship N/A (e) Performance of services received. (a) Name of organization (b) Type of organization or lineatives, transactions, and always arrangements N/A (b) Performance of services received. (c) Name of organization (d) Description of relationship N/A (e) Description of relationship N/A (ii) Name of organization (iii) Name of organization (iv) Type of organization (iv) Type of organization (iv) Type of organization (iv) Type of organization (iv) Description of relationship N/A (iii) Name of organization (iv) Name of	a Transfe	ers from the reporting found	ation to a noncharitat	ole exempt or	ganization of:						
(2) Other assets by Cherr transcrions: (1) Sales of assets to a noncharidable exempt organization (2) Purchases of assets from a noncharidable exempt organization (3) Rental of facilities, equipment, or other assets (4) Remoturement arrangements (5) Loans or loan quarantees (5) Loans or loan quarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) In the answer to any of the above is "ves," complete the following schedule. Column (6) should always show the fair market value of the goods, other assets, or services received. (3) Inventor (7) Amount involved (4) Remodulation directly or indirectly affiliated with, or related to, one or more tax-exempt organization or sharing arrangement, show in column (6) the value of the goods, other assets, or services received. (3) Inventor (7) Amount involved (4) Name of organization (5) Investorial special sections 501(c)(3)) or in section 527? Investorial sections 501(c) of the Code (other than sections 501(c)(3)) or in section 527? Investorial sections 501(c) of the Code (other than sections 501(c)(3)) or in section 527? Investorial sections 501(c) of the Code (other than sections 501(c)(3)) or in section 527? Investorial sections 501(c) of the Code (other than sections 501(c)(3)) or in section 527? Investorial sections 501(c) of the Code (other than sections 501(c)(3)) or in section 527? Investorial sections 501(c) of the Code (other than sections 501(c)(3)) or in section 527? Investorial sections 501(c) of the Code (other than sections 501(c)(3)) or in section 527? Investorial sections 501(c) or indirectly affiliated with, or related to, one or more tax-exempt organization (e) the arrangements, show in the section of the section 501(c) of the Code (other than sections 501(c) of the Code (other than sections 501(c) of the Code (other than sections 501(c) of the Code (other than sections 501(c) of the Code (other than sections 501(c) of the Code (other 5	(1) Ca	sh							1a(1)		X
(1) Sales of assets to a nonchariable exempt organization (2) Purchases of assets from a nunchariable exempt organization (3) Retail of facilities, equipment, or other assets (4) Reambursement arrangements (5) Loans or loan guaranters (6) Performance of services or membership or fundrating solicitations (7) Sharing of facilities, equipment, maining lists, other assets, or paid employees (8) The answer to any of the above one "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services generally the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of nonchariable exempt organization (d) Description of transfers, transactions, and sharing arrangement, show in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (a) Name of organization (b) Type of organization (c) Description of transfers, transactions, and sharing arrangements. (a) Name of organization (b) Type of organization (c) Description of transfers, transactions, and sharing arrangements. (a) Name of organization (b) Type of organization (c) Description of transfers, transactions, and sharing arrangements. (a) Name of organization (b) Type of organization (c) Description of relationships (a) Name of organization (b) Type of organization (c) Description of relationships (a) Name of organization (b) Type of organization (c) Description of relationships (c) Description of relationships (a) Name of organization (b) Type of organization (c) Description of relationships (a) Name of organization or prepare (some than tax paper) proper (some than tax paper) proper (some than tax paper) proper (some than tax paper) proper (some than tax paper) proper (some than tax paper) proper (some than tax paper) proper (some than tax paper) proper (some than tax paper) proper (some than tax paper) proper (some than tax paper) proper (some than tax paper) proper (some than tax paper) proper (some than	(2) Oti	her assets							1a(2)		
(2) Perchases of assets from a nonchariable exempt organization (3) Rehald of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (7) Sharing of facilities, equipment, making lists, other assets, or paid employees (8) Performance of services or with the properting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (4) the value of the goods, other assets, or services received. (4) Immin (6) the value of the goods, other assets, or services received. (4) Immin (6) The value of the goods, other assets, or services received. (4) Immin (7) Amount involved (6) Tame of nonchariatable exempt organization (7) Amount involved (8) Immin (7) Amount involved (9) Amount involved (1) Amount involved (1) Amount involved (1) Tame of nonchariatable exempt organization (1) Type of organization (2) Type of organization (3) Type of organization (4) Description of relationship (5) Loans or flat in the best of the based of the Northerist Exemptor (1) Type of organization (6) Type of organization (7) Type of organization (8) Type of organization (9) Type of organization (1) Type of organization (1) Type of organization (2) Description of relationship (3) Type of organization (4) Type of organization (5) Description of relationship (6) Description of relationship (7) Type of organization (8) Type of organization (9) Type of organization (1) Type of organization (1) Type of organization (1) Type of organization (2) Description of relationship (3) Type of organization (4) Description of relationship (5) Description of relationship (6) Description of relationship (7) Type of organization (8) Type of organization (9) Type of organization (9) Type of organization (1) Type of organization (1) Type of organization (1) Type of organization (1) Type of organization (2) Description of relationship (3) T	b Other to	ransactions:									
(a) Renation facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loars or loan parameters (6) Performance of services or memborship or fundrasing solicitations (6) Performance of services or memborship or fundrasing solicitations (7) Intel® X (8) Loars or loan parameters (8) Performance of services or memborship or fundrasing solicitations (8) Intel® X (9) Intel® X (10)	(1) Sales of assets to a noncharitable exempt organization								16(1)		X
(a) Renation facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loars or loan parameters (6) Performance of services or memborship or fundrasing solicitations (6) Performance of services or memborship or fundrasing solicitations (7) Intel® X (8) Loars or loan parameters (8) Performance of services or memborship or fundrasing solicitations (8) Intel® X (9) Intel® X (10)	(2) Pu	(2) Purchases of assets from a noncharitable exempt organization									
(4) Reinhursement arrangements (5) Loans or loan guarantees (6) Porformance of services or membership or fundraising solicitations (7) Porformance of services or membership or fundraising solicitations (8) Porformance of services or membership or fundraising solicitations (8) Porformance of services or membership or fundraising solicitations (8) Porformance of services or services services in the following schedule. Column (8) should always show the fair market value of the goods, other assets, or services received. (9) Amount involved (10) Amount involved	(3) Re	ntal of facilities, equipment,	or other assets								
(6) Performance of services or membership or fundrasing solicitations c Sharing of facilities, equipment, mailing fists, other assets, or paid employees d If the answer to any of the above is "Kes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements. N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign Under penalties of peryon, I declare that I have exemmed this return, including accompanying schedules and statements, and to the best of my knowledge and delice, it is ture, correct, and complete Description of pepaler (other than tocayyr) to based on all information of which prepare has any knowledge in the person of the penalties of peryon, I declare that I have exemmed their return, including accompanying schedules and statements, and to the best of my knowledge and delice, it is ture, correct, and complete Description of pepaler (other than tocayyr) to based on all information of which prepare has any knowledge in the person of the penalties of person of the penalties of person locations. Part of the Code (other than tocayyr) to based on all information of which prepare has any knowledge in the penalties of the penalties of the penalties of penalties of the penalties of the penalties of penalties of penalties of penalties of penalties of penalties of penalties of penalties of penalties of p	(4) Reimbursement arrangements								1b(4)		X
E Sharing of facilities, equipment, mailing lists, other assets, or paid employees It I was answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. A	(5) Lo	ans or loan guarantees							1b(5)		X
d If the answer to any of the above is "es," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received des she had a market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements in section 50 (c) of the Code (other than section 50 (c) of the Code (other than section 50 (c)(3)) or in section 52?? 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 50 (c) of the Code (other than section 50 (c)(3)) or in section 52?? b If "ves," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship in the best of my knowledge and allatements, and to the best of my knowledge sold belief, if ig fun, correct, and complete Decidation of prepare (other than laxapsyer) is based on all information of which prepare has any knowledge sold belief, if ig fun, correct, and complete Decidation of prepare (other than laxapsyer) is based on all information of which prepare has any knowledge and allatements, and to the best of my knowledge and allatements, and to the best of my knowledge and allatements, and to the best of my knowledge and allatements, and to the best of my knowledge and allatements, and to the best of my knowledge and allatements, and to the best of my knowledge and the best of my knowledge and allatements, and to the best of my knowledge and allatements, and to the best of my knowledge and belief, if ig fun, correct, and complete Decidation of prepare (other than laxapsyer) is based on all information of which prepare has any knowledge and the left of officer or trustee. Print Print Print Print Print Print Print Print Pr	(6) Pe	rformance of services or me	mbership or fundrais	sing solicitatio	ons				1b(6)		X
or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (e) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the code (other than section 501(c)) or in section 527? Yes X No b. If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under paralless of payary, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, if is fure, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge in section shellow (see grift)? Way the RS discuss this section 1 preparer (other than taxpayer) is based on all information of which preparer has any knowledge in section shellow (see grift)? Yes No Title Tit	c Sharing	g of facilities, equipment, ma	iling lists, other asset	ts, or paid em	ployees				10		_X_
(a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? □ If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign and belief, it ig func, correct, and complete Destration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and statements, and to the beat of my knowledge and statements, it is greatly than the preparer Signature of Officer of trustee Date Tritle PrimiType preparer's name Preparer's signature Preparer's signature Preparer's signature Preparer's signature Preparer's signature PrimiType preparer's name	d If the a	nswer to any of the above is	"Yes," complete the f	ollowing sche	dule. Column (b)	should alw	ays show the fair	market value of the goo	ds, other ass	sets,	
(a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? 3. In the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? 3. In the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? 4. In the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? 4. In the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? 4. In the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? 4. In the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52? 4. In the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c) of the Code (or serv	ices given by the reporting f	oundation. If the four	dation receive	ed less than fair i	narket value	e in any transactio	n or sharing arrangeme	nt, show in		
N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? 3 in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? 4 in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? 5 in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? 5 in section 501(c) of the Code (other than section 527? 6 in section 501(c) of the Code (other than section 527? 7 in section 501(c) Description of relationship in section (c) Description (c) Description of relationship in section (c) Description (c) Descript	column										
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? If Yes, complete the following schedules. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign Here India persults of Despray, Idealars that I have examined this return, including accompanying schedules and statements, and to this best of my knowledge and belief, it is thus, correct, and complete Declaration of prepare for the than taxpayer) is based on all information of which prepare has any knowledge and belief, it is thus, correct, and complete Declaration of prepare with the prepare has any knowledge. Primitype preparer's name Preparer's signature Date Title CO—TRUSTEE Title Check If Self-employed P00092066 Primits name BOLDT CARLISLE + SMITH Firm's address > 200 CALAPOOIA ST. SW	(a) Line no	(b) Amount involved	(c) Name of		e exempt organiza	ation	(d) Descriptio	n of transfers, transactions,	and sharing ar	rangeme	nts
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes				N/A							
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes											
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes									.		
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes							<u> </u>				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes							ļ <u>. </u>				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes							<u> </u>				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes											
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes							 				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes							 				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes							 				_
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes							-				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes											
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes									·- <u>-</u>		
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes											
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes											
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes	0- 10 45 - 6	and date and was the area disease	the officers of weets on a	oloted to acc	or mare toy ave	mot organiz	introde described				
b If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge shown below (see inst 17). Visual County Print/Type preparer's name Preparer's signature Preparer's signature Preparer's signature Preparer's signature Print/Type preparer's name Preparer's signature Preparer's signature Print/Type preparer's name Print/Type preparer's name Preparer's signature Print/Type preparer's name Print/Type preparer's name Preparer's signature Print/Type preparer's name Print/Type prepar		•	•			iipt oi yaiiiz	anons described		☐ Yes	X	ملا [
(a) Name of organization N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and		* *		(0)) 01 111 3661	11011 321				103		J 140
Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge strum with the preparer shown below (see instr.)? Vestate	<u> </u>				(b) Type of org	anization		(c) Description of relat	ionship		
Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below (see instr.)? Yes No No		N/A									
Sign Here Signature of officer or trustee Date Co-TRUSTEE											_
Sign Here Signature of officer or trustee Date Co-TRUSTEE											
Sign Here Signature of officer or trustee Date Co-TRUSTEE											
Sign Here Signature of officer or trustee Date Co-TRUSTEE					<u> </u>						
Here Signature of officer or trustee Date Title	1								May the IRS	discuss	this
Signature of officer or trustee Print/Type preparer's name Preparer's signature Prim's aldress ▶ BOLDT CARLISLE + SMITH Firm's address ▶ 200 CALAPOOIA ST. SW	Sign 👢	1111	17		/	,	L		shown below	(see ins	<u>tr</u>)?
Paid Preparer's name Preparer's signature Pooo92066 Preparer's signature Print's aldress ▶ 200 CALAPOOIA ST. SW		WIMMAN	1. tand		6/	7 <i>[2016</i> .		USTEE	LX Yes	: L	J No
Paid Preparer Use Only HEATHER L. MCGOWAN HEATHER MCGOWAN HEATHER MCGOWAN HEATHER MCGOWAN HEATHER MCGOWAN HEATHER MCGOWAN HEATHER MCGOWAN HEATHER MCGOWAN HEATHER MCGOWAN HEATHER MCGOWAN HEATHER MCGOWAN HEATHER MCGOWAN HEATHER MCGOWAN HEATHER MCGOWAN HEATHER MCGOWAN HEATHER MCGOWAN HEATHER MCGOWAN HOUSE HE HEATHER MCGOWAN HOUSE HEATHER MCGOWAN HOUSE HEATHER MCGOWAN HOUSE HEATHER MCGOWAN HOUSE HEATHER MCGOWAN HOUSE HEATHER MCGOWAN HOUSE HEATHER MCGOWAN HOUSE HEATHER MCGOWAN HOUSE HEATHER MCGOWAN HOUSE HEATHER MCGOWAN HOUSE HEATHER MCGOWAN HOUSE HEATHER MCGOWAN HOUSE HEATHER MCGOWAN HOUSE HEATHER MCGOWAN HOUSE HEATHER MCGOWAN HOUSE HOUSE HOUSE HEATHER MCGOWAN HOUSE				Drannes's s				Chack D if D	TIN		
Paid Preparer Use Only HEATHER L. MCGOWAN Cottle COCCUM, CF P00092066 Firm's name ▶ BOLDT CARLISLE + SMITH Firm's EIN ▶ 93-0570615 Firm's address ▶ 200 CALAPOOIA ST. SW		Printi Type preparer's na	ame	rieparer's s	ignature	k	5-73-11		1 11 V		
Preparer Use Only Firm's name ► BOLDT CARLISLE + SMITH Firm's address ► 200 CALAPOOIA ST. SW	Paid	THE MITTER T	MOCOURS	مصليا	thank	$\gamma \gamma A$	0000	COM	00000	066	
Use Only Firm's address ► 200 CALAPOOIA ST. SW						LICH	CUVCUI I.				
Firm's address ► 200 CALAPOOIA ST. SW	-	1111110110110	INT CARLITS	п <u>г</u> + 2	MITH			THIN SEIN > 33	-05/00	TO	
		· ———	O CALAPOO	TA ST	SW			 			
		l l			<i></i>			Phone no. 541	-928-3	354	

PUBLIC HEALTH MICROBIOLOGY CHARITABLE TRUST

94-3216399

Part XV Supplementary Information
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution
NAME OF RECIPIENT - CARISSA THREEWIT
FOR THE CERTIFICATION TRAINING OF A NEW PUBLIC HEALTH MICROBIOLOGIST AT
THE MICROBIAL DISEASES LABORATORY.

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT 1
SOURCE		(A REVE PER B	NUE	NET IN	(B) VESTMENT COME	(C) ADJUSTED NET INCOME
CENTRAL WILLAMETTE			1.		1.	1.
TOTAL TO PART I, LI	NE 3		1.		1.	1.
FORM 990-PF	DIVIDEND	S AND INTER	EST FRO	M SECUR	ITIES	STATEMENT 2
SOURCE	GROSS AMOUNT		RE	(A) VENUE BOOKS		(C) T- ADJUSTED ME NET INCOME
USAA	393	•	0.	393.	39:	3. 393.
TO PART I, LINE 4	393	•	0.	393.	393	3. 393.
FORM 990-PF		ACCOUNTI	NG FEES			STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	NET IN	S) IVEST- INCOME		
INDIRECT ACCOUNTING	FEES -	680.	·	0.	(0. 680.
TO FORM 990-PF, PG	1, LN 16B	680.		0.	(680.
FORM 990-PF	0	THER PROFES	SIONAL	FEES		STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(E NET IN MENT I	WEST-	(C) ADJUSTED NET INCOM	(D) CHARITABLE E PURPOSES
DUES EXPENSE		250.	·	0.		0. 250.
TO FORM 990-PF, PG	1, LN 16C	250.	· 	0.		0. 250.
	=	_=				

FORM 990-PF	TAX	ŒS		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INDIRECT TAXES/LICENSES	12.	12.	(0.
TO FORM 990-PF, PG 1, LN 18	12.	12.	(0.
FORM 990-PF DEPRECIATION	OF ASSETS NOT	HELD FOR INV	ESTMENT	STATEMENT 6
DESCRIPTION		ACCUMULATED DEPRECIATION	BOOK VALUE	FAIR MARKET VALUE
COMPUTER AND SOFTWARE IPAD 2 LAPTOP COMPUTERS	1,719. 499. 945.	1,719. 499. 863.	0. 0. 82.	0.
TO 990-PF, PART II, LN 14	3,163.	3,081.	82.	82.
FORM 990-PF	CORPORAT	TE STOCK		STATEMENT 7
DESCRIPTION		во	OK VALUE	FAIR MARKET VALUE
200 SHS HEWLETT PACKARD 200 SHS MICROSOFT CORP MONEY MARKET ACCOUNT			3,694. 5,011. 1,126.	5,408. 11,096. 1,126.
TOTAL TO FORM 990-PF, PART	II, LINE 10B		9,831.	17,630.

FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT

ACTIVITY ONE

UNDER THE FOUNDATION'S PRIMARY PURPOSE, ONE GRANT WAS AWARDED DURING 2015 IN SUPPORT OF A YOUNG WOMAN WORKING TOWARD HER CERTIFICATION AS A PUBLIC HEALTH MICROBIOLOGIST FOR THE MICROBIAL DISEASES LABORATORY IN CALIFORNIA. NO ADDITIONAL CONTRIBUTIONS TO THE ELEANOR G. FORD MEMORIAL SCHOLARSHIP WERE MADE TO INCREASE THE ENDOWMENT AT OREGON STATE UNIVERSITY AS THE PRINCIPLE HAS GROWN SUFFICIENTLY TO FUND THE ANNUAL SCHOLARSHIP. THIS YEAR ONE SCHOLARSHIP WAS AWARDED FROM THE ENDOWMENT HELD BY THE OSU FOUNDATION.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 1

0.

015 DEPRECIATION AND AMORTIZATION REPORT	
115 DEPRECIATION AND AMORTIZATION REP	JAT
115 DEPRECIATION AND AMORTIZATI	<u>~</u>
115 DEPRECIATION AND AMORTIZATI	Z
15 DEPRECIATION AND AMOR	2
15 DEPRECIATION AND AMOR	Ž
115 DEPRECIATION AND AM	H
15 DEPRE	8
15 DEPRE	<u>₹</u>
15 DEPRE	Ä
15 DEPRE	ž
15 DEPRE	Ĕ
15 DEPI	ਠੋ
=	Ä
=	Ä
0	15
ನ	ଷ

FORM 9	FORM 990-PF PAGE 1						99	990-PF							,	
Asset	Description	Date Acquired	Method	Life	O C >	Unadjusted Cost Or Basis		Bus S % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation	
1	COMPUTER AND SOFTWARE	02/01/02	20008	5.00	HY17		1,719.		<u> </u>		1,719.	1,719.		0.	1,719.	
7	IPAD	08/22/10	200DB	5.00	HY17		499.	<u></u>			499.	485.		14.	499.	
3	2 LAPTOP COMPUTERS	06/20/12	200DB	2.00	HX17		945.				945.	809.		54.	863.	
	* TOTAL 990-PF PG 1 DEPR					· m`	3,163.				3,163.	3,013.		68	3,081.	
								<u> </u>								
										-						
				_								-				
					<u> </u>					 	_					
								<u> </u>								
							, .								-	
															•	
								,								
									<u>. </u>			-				
							<u>.</u>									
					\dashv											
528111 04-01-15						(D) · Ast	(D) - Asset disposed	pes		•	TC, Salvage,	Bonus, Comm	ercial Revital	* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone	ion, GO Zone	_