

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

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.

OMB No 1545-0052

2015

Department of the Treasury Internal Revenue Service 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	calend	dar year 2015 or tax year beginning	07-01 , 2015,	and endin	g	06-	30 , 2016
Na	me of fo	oundation			A Employer	identification number	
_T	e Hi	illsboro Community Foundation			93-0931	.059	
Nu	mber a	and street (or P O box number if mail is not delivered to street address)	F	Room/suite	B Telephone	number (see instructions))
_P	O Bo	x 808			(503)69	3-7500	
Cit	y or tow	vn, state or province, country, and ZIP or foreign postal code			C If exempts	on application is pending,	check here
_Hi	llsk	ooro, OR 97123-0808					
G C	heck a	all that apply Initial return Initial return	of a former public cha	rity	D 1. Foreigi	n organizations, check he	re 🕨 📙
		Final return Amended ret	turn		2. Foreigi	n organizations meeting th	e 85% test.
		Address change Name chang				here and attach computat	
H_C	heck t	type of organization X Section 501(c)(3) exempt privi			E If private	foundation status was terr	ninated under
Ш.	Secti		axable private founda		section 50	07(b)(1)(A), check here	▶∐
		rket value of all assets at J Accounting method	Cash X	Accrual	F If the four	ndation is in a 60-month te	rmination
	-	year (from Part II, col. (c), Other (specify)			under sec	ction 507(b)(1)(B), check t	nere ►X
	ne 16)		e on cash basis)		<u> </u>		
Pa	rt 1	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(5) 10-			(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books		i investment ncome	(c) Adjusted net income	purposes
r <u> </u>		the amounts in column (a) (see instructions))	<u> </u>				(cash basis only)
7017	1	Contributions, gifts, grants, etc , received (attach schedule)	508,65	2			
	2	Check ► if the foundation is not required to attach Sch B			204	204	· · · · · · · · · · · · · · · · · · ·
က	3	Interest on savings and temporary cash investments	28		284		
() ()	4	Dividends and interest from securities .	4,41	-4	4,412	4,412	
7	5a	Gross rents			······································		
	р	Net rental income or (loss)				BECEN	* }
E-3	6a	Net gain or (loss) from sale of assets not on line 10 .				[(L.O)	17 1-7
, [5	b	Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2)	· · · · · · · · · · · · · · · · · · ·			4	O
Revenue	7 8	Net short-term capital gain				PEB Z I	2017
	9	Income modifications				4	1 22
Ó	10a	Gross sales less returns and allowances	<u></u>		·····	OGDEN	
60	b	Less Cost of goods sold		+			
	c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule) . STM106	42,58	38	· · · · · · · · · · · · · · · · · · ·	42,588	
	12	Total. Add lines 1 through 11	555,93		4,696		·····
	13	Compensation of officers, directors, trustees, etc			-,,,,		-
S	14	Other employee salaries and wages				-	
penses	15	Pension plans, employee benefits					
be	16a	Legal fees (attach schedule)		·· 			
Operating and Administrative Ex	b	Accounting fees (attach schedule) . STM108	7,02	29			
į×e	С	Other professional fees (attach schedule) . STM109	55,00				
rat	17	interest					
iist	18	Taxes (attach schedule) (see instructions) STM110		16	46	4(
nir	19	Depreciation (attach schedule) and depletion					
Adr	20	Occupancy .					
ŭ	21	Travel, conferences, and meetings .	2,6	56			
a	22	Printing and publications .	19	97			
ing	23	Other expenses (attach schedule) STM103	39,4	55		31,51	2
rat	24	Total operating and administrative expenses.					
be		Add lines 13 through 23	104,38	33	46	31,55	0
0	25	Contributions, gifts, grants paid	41,6	20			41,620
	26	Total expenses and disbursements. Add lines 24 and 25	146,00	03	46	31,55	
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursements	409,9	36			
	b	Net investment income (if negative, enter -0-)			4,650	d	
	С	Adjusted net income (if negative, enter -0-)		, , , , , ,		15 72	

Page 2

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	Ena of y	T		
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing	88,997	197,736	197,736		
	2	Savings and temporary cash investments	104,515	104,834	104,834		
	3	Accounts receivable					
		Less allowance for doubtful accounts					
	4	Pledges receivable	**				
		Less allowance for doubtful accounts					
	5	Grants receivable .					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach schedule)					
		Less. allowance for doubtful accounts					
şts	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
₹	10a	Investments - U S and state government obligations (attach schedule)					
	b	Investments - corporate stock (attach schedule)					
	С	Investments - corporate bonds (attach schedule)					
	11	Investments - land, buildings, and equipment basis					
		Less accumulated depreciation (attach schedule)					
	12	Investments - mortgage loans .			·		
	13	Investments - other (attach schedule) STM118	50,043	49,882	49,882		
	14	Land, buildings, and equipment basis	30,013	25,002			
		Less accumulated depreciation (attach schedule)		}			
	15	Other assets (describe ► STM120	239,195	539,186	239,185		
	16	Total assets (to be completed by all filers - see the	235,155	337,100	237/103		
		instructions Also, see page 1, item I)	482,750	891,638	591,637		
	17	Accounts payable and accrued expenses .	4,583	4,583	391,037		
	18	Grants payable	4,303	1,303			
es	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
ä	21	Mortgages and other notes payable (attach schedule)					
Ë	22	Other liabilities (describe >)					
	23	Total liabilities (add lines 17 through 22)	4 503	4 503			
	23		4,583	4,583			
_s		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.					
ances	24	Unrestricted	58,062	165 044			
<u>a</u>	25	Temporarily restricted .	179,532	165,844 182,025			
Bal	26	Permanently restricted					
or Fund B	20	Foundations that do not follow SFAS 117, check here	240,573	539,186			
Fu		and complete lines 27 through 31.					
5	27	Capital stock, trust principal, or current funds					
ţ	28	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
Assets	l	Paid-in or capital surplus, or land, bldg , and equipment fund					
As	29	Retained earnings, accumulated income, endowment, or other funds					
Net	30	Total net assets or fund balances (see instructions)	478,167	887,055			
_	31	Total liabilities and net assets/fund balances (see					
De	- ET	Instructions)	482,750	891,638			
	rt II						
		net assets or fund balances at beginning of year - Part II, column (a), line 3	ou (must agree with				
		of-year figure reported on prior year's return)		1	478,167		
		r amount from Part I, line 27a		2	409,936		
		r increases not included in line 2 (itemize)		3			
		lines 1, 2, and 3		. 4	888,103		
		eases not included in line 2 (itemize) STM116		5	1,048		
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	887,055		

93-0931059 Form 990-PF (2015) The Hillsboro Community Foundation Page 3 Capital Gains and Losses for Tax on Investment Income (b) How acquired P-Purchase (d) Date sold (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.) (c) Date acquired (mo, day, yr) (mo, day, yr) D-Donation 1a b C d е (e) Gross sales price (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (or allowable) plus expense of sale (e) plus (f) minus (g) а b C d е Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col (h) gain minus I (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col (i) (I) F M V as of 12/31/69 Losses (from col (h)) as of 12/31/69 over col ()), if any а b C ď е If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 2 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 Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income Part V (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 Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? 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 entries (d) (a) (b) Adjusted qualifying distributions (c)
Net value of noncharitable-use assets Base period years Distribution ratio Calendar year (or tax year beginning in) (col (b) divided by col (c)) 2014 10,120 333,904 0.030308 2013 53,700 74,350 0.72226 2012 153,490 66,557 2.306144 2011 100,645 55,716 1.806393 2010 63,316 52,016 1.217241 2 Total of line 1, column (d) 6.082345 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 3 1.216469 4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5 590,786 5 Multiply line 4 by line 3 5 718,673 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 47 7 Add lines 5 and 6 7 718,720 8 Enter qualifying distributions from Part XII, line 4 41,620 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

Part VI instructions

Pa	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	- see	instruc	tions)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			<u>-</u>	
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			93
	here ▶ and enter 1% of Part I, line 27b	1			
С	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>93</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			93
6	Credits/Payments	}	ļ		
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a				
b	Exempt foreign organizations - tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld 6d	İ			
7	Total credits and payments Add lines 6a through 6d .	7			
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			93
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 ▶ Refunded ▶	11			
Pa	t 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			Yes	No
	participate or intervene in any political campaign?		. 18	1	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			1	
	Instructions for the definition)?		. 11)	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			1	
	published or distributed by the foundation in connection with the activities			}	
С	Did the foundation file Form 1120-POL for this year?		10	:	X
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 \$	_		İ	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			-	
	on foundation managers \$			İ	
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			- 1	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			1	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		_ 3		_ X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		48	1	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		41)	
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				
	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		<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part >	(V	7	X	<u> </u>
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		1	}	
	OR			İ	
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) of each state as required by General Instruction G? If "No," attach explanation		81	X	
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

The Hillsboro Community Foundation

Form 990-PF (2015)

93-0931059

Page 4

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)

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?

X

3b

4a

4b

	990-PF (2015) The Hillsboro Commun					<u> </u>	93-093:		Page 6		
<u> </u>	t VII-B Statements Regarding Activitie		which For	n 4/20	мау ве	Requii	rea (continued				
5a	During the year did the foundation pay or incur any am					٢		1			
	(1) Carry on propaganda, or otherwise attempt to influ		•	•		٠ ا	Yes X No				
	(2) Influence the outcome of any specific public electric	on (see s	section 4955),	or to car	ry on,	۲					
	directly or indirectly, any voter registration drive?			•		-	Yes X No	1 1			
	(3) Provide a grant to an individual for travel, study, or					L	Yes X No				
	(4) Provide a grant to an organization other than a cha	aritable,	etc, organizati	on descr	ribed in	Г					
	section 4945(d)(4)(A)? (see instructions)					Ĺ	Yes X No	1 1			
	(5) Provide for any purpose other than religious, chari		-	, or educ	cational	Г	ਾ. ਦੀ	1 1			
	purposes, or for the prevention of cruelty to children					Լ	Yes X No				
b	If any answer is "Yes" to 5a(1)-(5), did any of the trans				•		d in	1	}		
	Regulations section 53 4945 or in a current notice rega	_		•	instructions)	7	. —	5b			
	Organizations relying on a current notice regarding dis						▶ [_]				
С	If the answer is "Yes" to question 5a(4), does the found		•	from the	e tax	г					
	because it maintained expenditure responsibility for the	e grant?				. [Yes No	1 1			
	If "Yes," attach the statement required by Regulations	section	53 4945-5(d)								
6a	Did the foundation, during the year, receive any funds,	directly	or indirectly, to	pay pre	emiums						
	on a personal benefit contract?						Yes X No				
b	Did the foundation, during the year, pay premiums, dire	ectly or i	ndırectly, on a	personal	l benefit conf	ract?		6b	X		
	If "Yes" to 6b, file Form 8870					_					
7a	At any time during the tax year, was the foundation a p	party to a	a prohibited tax	shelter t	transaction?	[Yes X No				
b	If "Yes," did the foundation receive any proceeds or ha	ave any	net income attr	ıbutable	to the transa	ction?		7b			
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emplo											
	and Contractors		,			•		•	•		
1 1	ist all officers, directors, trustees, foundation mana	ders an	d their compe	nsation	(see instru	ctions).					
<u> </u>			e, and average		mpensation		Contributions to	(e) Expe	nse account,		
g _{aa}	(a) Name and address		rs per week ed to position		not paid, iter -0-)		oyee benefit plans ferred compensation		illowances		
		President		161 -0-7	and de	circa compensation	 				
	Box 808, Hillsboro, OR 97123-0808	LCBI	2.00				0	Į	0		
		Drogi	dent Elec			 -		 			
		Presi		<u> </u>	^		0	ļ	^		
	Box 808, Hillsboro, OR 97123-0808	7	2.00	ļ	0		0_	 			
	•	Secre	-	ļ	_						
	Box 808, Hillsboro, OR 97123-0808		2.00	ļ	0		0_	 	0_		
		Treas		i				[
	Box 808, Hillsboro, OR 97123-0808	<u></u>	2.00	L	0	l	0	<u> </u>	0		
	Compensation of five highest-paid employees (other NONE."	r than th	nose included	on line	1 - see instr	uctions)). If none, enter				
			T		Γ		(d) Contributions to	<u> </u>			
	(a) Name and address of each employee paid more than \$50	.000	(b) Title, and hours per v		(c) Comper	esation	`employee benefit	(e) Expe	nse account,		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		devoted to p		(b) compe	isation,	plans and deferred compensation	otner a	llowances		
NON							 	1			
HOH	-]								
			 		 		 	 			
			1					1			
			 		 		 	 			
			ļ		 		 	 			
							ļ				
			1		1		[
			l		L		L				
Tota	number of other employees paid over \$50,000		·				<u> </u>	<u> </u>	00		
EEA								Form 99	0-PF (2015)		

Form 990-PF (2015) The Hillsboro Community Foundation		931059 Page 7
Part VIII Information About Officers, Directors, Trustees, Fou and Contractors (continued)	Indation Managers, Highly P	aid Employees,
3 Five highest-paid independent contractors for professional services (see ins	tructions). If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Janel McKenna		
P.O. Box 808, Hillsboro, OR 97123	Consulting	55,000
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 st organizations and other beneficiaries served, conferences convened, research papers produced,	Expenses	
1 N/A	eic	
· · · · · ·		
		0
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see inst	ructions)	
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2	Amount
1 N/A		
		•
2		0
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		
EEA		Form 990-PF (2015)

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign	foundat	ions,
	see instructions)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	48,548
b	Average of monthly cash balances	1b	83,052
C	Fair market value of all other assets (see instructions)	1c	539,186
d	Total (add lines 1a, b, and c)	1d	670,786
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d .	3	670,786
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions) .	4	80,000
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	590,786
6	Minimum investment return. Enter 5% of line 5	6	29,539
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f	oundatio	ns
	and certain foreign organizations check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	29,539
2a	Tax on investment income for 2015 from Part VI, line 5		
ь	Income tax for 2015 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	93
3	Distributable amount before adjustments Subtract line 2c from line 1	3	29,446
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	29,446
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	29,446
Pa	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	41,620
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	41,620
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	41,620
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	e foundation	on
	qualifies for the section 4940(e) reduction of tax in those years	_	

r di	TEXASE Undistributed income (see instru		·		
1	Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years pnor to 2014	(c) 2014	(d) 2015
	line 7		<u>_</u>		29,446
2	Undistributed income, if any, as of the end of 2015				1
a	Enter amount for 2014 only				
b	Total for prior years				<u> </u>
3	Excess distributions carryover, if any, to 2015				F
a	From 2010		ŧ		1
b	From 2011 97,877				_
С.	From 2012 150,175		ļ		
d	From 2013 49,987				•
e	From 2014	350 554			
_f	Total of lines 3a through e	358,758		······	-
4	Qualifying distributions for 2015 from Part XII,	1	ŧ		
_	line 4 ▶ \$ 41,620	-			
	Applied to 2014, but not more than line 2a				
D	Applied to undistributed income of prior years				Ì
_	(Election required - see instructions) .			· · · · · · · · · · · · · · · · · · ·	
С	Treated as distributions out of corpus (Election				
_	required - see instructions)		···		
	Applied to 2015 distributable amount	10 174		······	29,446
e	Remaining amount distributed out of corpus	12,174			
5	Excess distributions carryover applied to 2015				
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a).) Enter the net total of each column as	-			
0	indicated below:				
_	Corpus Add lines 3f, 4c, and 4e Subtract line 5	370,932			
a b	Prior years' undistributed income Subtract	370,932			
U	line 4b from line 2b				
_	Enter the amount of prior years' undistributed				·
·	income for which a notice of deficiency has				ŀ
	been issued, or on which the section 4942(a)				
	tax has been previously assessed .				
А	Subtract line 6c from line 6b Taxable				
	amount - see instructions				
е	Undistributed income for 2014 Subtract line				
•	4a from line 2a Taxable amount - see				
	Instructions				
f	Undistributed income for 2015 Subtract lines			······································	
	4d and 5 from line 1. This amount must be				
	distributed in 2016	1			,
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)	60,719	ľ		
9	Excess distributions carryover to 2016.	307.23		·	· · · · · · · · · · · · · · · · · · ·
	Subtract lines 7 and 8 from line 6a	310,213			
10	Analysis of line 9	520,213		· · · · · · · · · · · · · · · · · · ·	
а	Excess from 2011 . 97,877		İ		1
b	Excess from 2012 150,175				
c	Excess from 2013 49,987				
d	Excess from 2014		1		1
e	Excess from 2015 . 12,174		ļ		
					_l

Part	XIV Private Operating Four	ndations (see ins	tructions and Par	t VII-A, question 9								
1a	If the foundation has received a ruling or	determination letter that	it it is a private operat	ing								
	foundation, and the ruling is effective for 2015, enter the date of the ruling .											
b	Check box to indicate whether the found	ation is a private opera	ting foundation descri	bed in section	4942(j)(3) or 4	942(j)(5)						
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	<u> </u>							
	income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total						
	investment return from Part X for each year listed .	(2) 2010	(6) 2511	(0) 2010	(0) 2012							
b	85% of line 2a			·- · · · · · · · · · · · · · · · · · ·								
С	Qualifying distributions from Part XII, line 4 for each year listed											
d	Amounts included in line 2c not used directly for active conduct of exempt activities					·						
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c											
3	Complete 3a, b, or c for the											
	alternative test relied upon											
а	"Assets" alternative test - enter (1) Value of all assets											
	(2) Value of assets qualifying under section 4942(i)(3)(B)(i)											
b	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed											
	i i											
С	"Support" alternative test - enter (1) Total support other than gross											
	investment income (interest,											
	dividends, rents, payments on											
	securities loans (section 512(a)(5)), or royalties)											
	(2) Support from general public					·						
	and 5 or more exempt											
	organizations as provided in											
	section 4942(j)(3)(B)(iii)											
	(3) Largest amount of support from											
	an exempt organization											
F-1.1.4	(4) Gross investment income					<u> </u>						
Part	XV Supplementary Informa			ne foundation ha	d \$5,000 or more	in assets at						
	any time during the yea		ons.)									
1	Information Regarding Foundation M	•										
а	List any managers of the foundation who before the close of any tax year (but only the control of the control o	o nave contributed moi	e than 2% of the total led more than \$5 000)	contributions received I (See section 507(d)(2)	by the foundation							
	belove the close of any tax your (but on	y it they have contained	ica more than 40,000)	(000 3000011 007 (0)(2)	,							
												
b	List any managers of the foundation wh				portion of the							
	ownership of a partnership or other entit	ty) of which the founda	tion has a 10% or gre	ater interest								
												
2	Information Regarding Contribution,		• • • •									
	Check here ▶ X if the foundation only	y makes contributions	to preselected charital	ble organizations and do	pes not accept							
	unsolicited requests for funds If the fou	ndation makes gifts, gr	ants, etc (see instruc	tions) to individuals or o	rganizations under							
	other conditions, complete items 2a, b, The name, address, and telephone num		of the person to the co	a applications of suid-1	addroned							
а	The name, address, and telephone num	iber or e-mail address	or the person to whom	applications should be	addressed							
	The face of the second											
b	The form in which applications should b	e submitted and inform	iation and materials th	iey should include								
C	Any submission deadlines:											
d	Any restrictions or limitations on awards	s, such as by geograph	ical areas, charitable	fields, kinds of institution	ns, or other							
	factors											

Part XV | Supplementary Information (continued)

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

3 Grants and Contributions Paid During th	e Year or Approve	d for Future I	Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
Hillsboro Arts & Culture Programs		Ĺ	ĺ	
4400 NW 229th Avenue			Education in Arts	
Hillsboro, OR 97124		(& Culture	8,000
MIIIBBOIO, OR 5/124			" 0013010	5,555
Washington Country Museum	:	Ì	1	
Washington County Museum				
123 E Main Street				
Hillsboro, OR 97123			Enhance exhibits	1,000
Hillsboro School District			Music education -	
3083 NE 49th Place			Una Voz Mariachi	
Hillsboro, OR 97124			Band	5,000
]		
Hillsboro Parks & Rec District			Playground	
4400 NW 229th Ave			equipment for	
	1	1		0 500
Hillsboro, OR 97124			McKinney Park	8,500
Westside Community/Youth Orchestra				
125 SW First Ave, 3491			Music education	
Hillsboro, OR 97123			and appreciation	4,000
Hillsboro Community Youth Choir			Siegel Grant -	
22115 NW Imbrie Drive, 241			Music education	
Hillsboro, OR 97124			and appreciation	3,425
HIIIBDOIG, OK 9/124			and appreciation	3,423
STAGES Performing Arts Youth Academ			Performing Arts	
22115 NW Imbrie Drive, 237			education and	
				2 245
Hillsboro, OR 97124			appreciation	3,945
Bag and Baggage Productions			Local nonprofit	
235 E Main Street			performing arts	
Hillsboro, OR 97123			theater	1,000
	<u> </u>	<u> </u>		
Total	·, ·	,	▶ 3a	
 Approved for future payment 				
		į		
			j	
Total	<u> </u>		> 3b	

Part XV Supplementary Information (continued)

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

show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
or substantial contributor	recipient		
		1	
		I I	
		heritage	750
		Arts and culture	
		enhancement and	
		education	3,500
		Gordon Faber	
		Scholarship	2,500
		▶ 3a	41,620
	any foundation manager	show any relationship to any foundation manager status of regioners	show any relationship to any foundation manager or substantial contributor Cultivation Hawaiian art and heritage Arts and culture enhancement and education Gordon Faber Scholarship

Enter gross amounts unless otherwise indicated	Unrelated business income (a) (b) Business Amount E		(c) Exclusion code	(d)	(e) Related or exempt function income (See instructions)
1 Program service revenue	code	Amount	Exclusion code	Amount	
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments		284	14		
4 Dividends and interest from securities		4,412	14		
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			<u> </u>		
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 a Adminstrative fees		8,27	1 03		
b Fundraising		34,31	7 02		
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		47,284	4		
13 Total Add line 12, columns (b), (d), and (e)				13	47,28
Explain below how each activity for which incomplishment of the foundation's exempt				•	
					
	·				
					
			·		
					
	· · · · · · · · · · · · · · · · · · ·				
					Earm 000 PE (2015

Form 990-PF (2015) The Hillsboro Community Foundation 93-0931059 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described Yes No in section 501(c) of 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 . . 1a(1) Х (2) Other assets 1a(2) **b** Other transactions (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c If 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 (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations Yes X No described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship

				/_							1							
Sign Here	correct	and complete Dec	Torolly	on of prep	have e	examined the	xpayer) is b	cluding accomased on all inf	formation o	of which prepar	statements, and er has any know	vledge	{	May the	RS di	iscuss this rer shown	return below	,
Paid		Print/Type prepa					Preparer's	s signature		روسي	Date 02-08-2	017	Check self-em		PTII	N 022659	95	
Prepa	irer	Firm's name	•	Alyc	еL	Dawes		0				Firm's El	N Þ					
Use C	Only	Firm's address	fress ► 70 SW Century Drive Suite 100-125							Phone no								
				Bend	OR	97702							503	-201	-824	45	_	
EEA															Forr	m 990-P	F (2015	,)

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2015

Employer identification number

The H	illsboro Communit	y Foundation	93-0931059		
Organi	zation type (check one).				
Filers o	llers of: Section:				
Form 9	90 or 990-EZ	501(c)() (enter number) organization			
		4947(a)(1) nonexempt charitable trust not treated as a private foundation			
		527 political organization			
Form 9	90-PF	501(c)(3) exempt private foundation			
		4947(a)(1) nonexempt charitable trust treated as a private foundation			
		501(c)(3) taxable private foundation			
Check	f your organization is cove	red by the General Rule or a Special Rule.			
Note. C		, or (10) organization can check boxes for both the General Rule and a Special	Rule See		
Genera	al Rule				
X	-	Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaline erty) from any one contributor. Complete Parts I and II. See instructions for detections.			
Specia	i Rules				
	regulations under sections 13, 16a, or 16b, and that r	bed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ eceived from any one contributor, during the year, total contributions of the great count on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Part), Part II, line ter of (1)		
	contributor, during the year	bed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from the first received from the contributions of more than \$1,000 exclusively for religious, charitable, so poses, or for the prevention of cruelty to children or animals. Complete Parts I, I	entific,		
	Interary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.				
990-EZ	, or 990-PF), but it must a	ot covered by the General Rule and/or the Special Rules does not file Schedule swer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its F fy that it does not meet the filing requirements of Schedule B (Form 990, 990-E	orm 990-EZ or on its		

Name of organization

The Hillsboro Community Foundation

Employer identification number 93-0931059

Part I	Contributors (see instructions). Use duplicate copie	s of Part I if additional space is n	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Gary and Dixie Baker 71110 Holmes Road Sisters, OR 97759	\$60,000	Person 🔀 Payroll 🗍 Noncash 🗍 (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Kurt and Mary Koehler 6595 NE Cherry Drive 3212 Hillsboro, OR 97124	\$	Person 💹 Payroll 🗍 Noncash 🗍 (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Baker Rock Resources 21880 SW Farmington Road Beaverton, OR 97007	\$125,000	Person 🔀 Payroll 🗍 Noncash 🗍 (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Intel Corporation 2200 Mission College Blvd Santa Clara, CA 95052	\$15,560	Person 🖫 Payroll 🗍 Noncash 🗍 (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5_	City of Hillsboro 150 East Main Street Hillsboro, OR 97123	\$ 60,000	Person 🔀 Payroll 🗍 Noncash 🗍 (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	Short Season LLC 4460 NW 229th Avenue Hillsboro, OR 97124	\$ 57,547	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

The Hillsboro Community Foundation

Employer identification number

93-0931059

Part I	Contributors (see instructions) Use duplicate copie	s of Part I if additional space is r	needed
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Rick and Cheryl Van Beveren 2858 NE Jackson School Road Hillsboro, OR 97124	\$	Person 🔀 Payroll [] Noncash [] (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	Richard B Siegel Foundation 19360 Rinaldi Street Suite 311 Porter Ranch, CA 91326	\$ 50,000	Person 💹 Payroll 🗍 Noncash 🗍 (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	Oregon Chorale P.O. Box 1182 Hillsboro, OR 97123	\$ 30,000	Person 🖫 Payroll 🗍 Noncash 🗍 (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

		Federal St	Federal Supporting Statements	nents	2015 PG01
Name(s) as shown on return The Hillsboro Community Foundation	u				Your Social Security Number 93-0931059
	Form 990PF - Part I	- Part I - Line 23	- Other Expenses Schedule	edule	Statement #103~
Description	Revenue and expenses	Net investment	Adjusted net income	Charitable purpose	
ACH fees Fundraising event expenses Insurance	2,333 23,241 865	0000	23,241	0000	
HCF fees OCF fees Office supplies Online expense Post office box rental Promotion & advertising State of Oregon fees	8,271 2,999 73 480 170 750		8,271 0 0 0 0		
Totals	39,455	0	31,512	0	
	Form 990PF - Part I	- Part I - Line 11	- Other Income Schedule	ule	PG01 Statement #106~
Description Administrative fees Fundraising	Revenue and expenses 8,271 34,317	Net investment 0	Adjusted net income 8,271		
Totals	42,588	0	42,588		

		Federal Su	Federal Supporting Statements	ments		
Name(s) as shown on return					Z015 pg01 Your Social Security Number	
The Hillsboro Community Foundation	ition				93-0931059	
	Form 990PF - Part l		Line 16(b) - Accounting Fees Schedule	chedule	Statement #108~	•
Description	Revenue and expenses	Net investment	Adjusted net income	Charitable purpose		
Accounting fees Totals	7,029	0	0	0		
	Form 990PF - Part I	rt I - Line 16(c) - 0	- Line 16(c) - Other Professional Fees Schedule	es Schedule	PG01 Statement #109~	
Description Consulting	Revenue and expenses 55,000	Net investment	Adjusted net income	Charitable purpose		
Totals	55,000	0	0			
STM-LD						

Name(s) as shown on return The Hillsboro Community Foundation		}			reduit Maria Security
	c				93-0931059
		Form 990PF - Part I - Line	- Line 18 - Taxes Schedule		Statement #110~
)escription	Revenue and expenses	Net investment	Adjusted net income	Charitable purpose	
Federal taxes	46	46	46		

Federal Supporting Statements **2015** PG01 Name(s) as shown on return 93-0931059 The Hillsboro Community Foundation Form 990PF - Part III - Line 5 Statement #116 Other Decreases Schedule Unrealized loss on investments 1,048 1,048 Total PG01 Form 990PF - Part II - Line 13 Statement #118 Investments: Other Schedule Book value (BOY) Book value (EOY) FMV (EOY) Category 50,043 Schwab securities 49,882 49,882 50,043 Total 49,882 PG01 Form 990PF - Part II - Line 15 Statement #120 Other Assets Schedule
 BOY Book
 EOY Book
 FMV

 239,195
 539,186
 239,185
 Description Beneficial interest - assets @ OCF Total 239,195 539,186 239,185

List of Officers, Directors, Trustees, and Key Employees

1 List all officers, directors, trustees, and key employees for the		re not compensated		
(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Form W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits. contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Les Davis Director	_			
P O Box 808, Hillsboro, OR 97123-0808	1.00	0	0	0
Tom Hughes Director	_			
P O Box 808, Hillsboro, OR 97123-0808	1.00	0	0	0
Funda Kelsay Director				
P O Box 808, Hillsboro, OR 97123-0808	1.00	0	0	0
Abdi Nassib Director			1	
P O Box 808, Hillsboro, OR 97123-0808	1.00	0	0	0
Jerralynn Ness Director	_]			
P O Box 808, Hillsboro, OR 97123-0808	1.00	0	00	0
Dick Stenson Director				
P O Box 808, Hillsboro, OR 97123-0808	1.00	0	0	0
Rick Van Beveren Director				
P O Box 808, Hillsboro, OR 97123-0808	1.00	0	0	0
Jeff Van Raden Director				
P O Box 808, Hillsboro, OR 97123-0808	1.00	0	0	0
	7			
	7			
	7			
			1	
			 	
			 	
	-			
		 		
	-			
	+	+	 	
	_			
			 	
	_			
	 	 		
	_			
			ļ	
	-			
	 	 	 	
	4			
			 	ļ ————
	-			
				
	_			
	7			
		<u> </u>	<u> </u>	