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Form 990-PF

Department of the Treasury  
Internal Revenue Service

## Return of Private Foundation

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

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- Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

2015

Open to Public  
Inspection

For calendar year 2015, or tax year beginning 07-01-2015 , and ending 06-30-2016

Name of foundation SOUTHERN OREGON LION		A Employer identification number 93-6042046					
		B Telephone number (see instructions) (541) 779-3653					
Number and street (or P O box number if mail is not delivered to street address) 228 N HOLLY		C If exemption application is pending, check here ►					
		D 1. Foreign organizations, check here ►					
City or town, state or province, country, and ZIP or foreign postal code MEDFORD, OR 97501		2. Foreign organizations meeting the 85% test, check here and attach computation ►					
		E If private foundation status was terminated under section 507(b)(1)(A), check here ►					
G Check all that apply Initial return <input type="checkbox"/> Initial return of a former public charity Final return <input type="checkbox"/> Amended return Address change <input type="checkbox"/> Name change		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ►					
H Check type of organization ✓ Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation							
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ► \$ 1,725,645		J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____		(Part I, column (d) must be on cash basis )			
<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )				Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue							
1	Contributions, gifts, grants, etc , received (attach schedule)		33,247				
2	Check ► <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B						
3	Interest on savings and temporary cash investments		13,938	13,938	13,938		
4	Dividends and interest from securities		10,921	10,921	10,921		
5a	Gross rents		62,447	62,447	62,447		
b	Net rental income or (loss)	-19,936					
6a	Net gain or (loss) from sale of assets not on line 10		4,000				
b	Gross sales price for all assets on line 6a	4,000					
7	Capital gain net income (from Part IV, line 2)			0			
8	Net short-term capital gain				0		
9	Income modifications						
10a	Gross sales less returns and allowances	5,298					
b	Less Cost of goods sold						
c	Gross profit or (loss) (attach schedule)		5,298		5,298		
11	Other income (attach schedule)		246	0	246		
12	<b>Total</b> .Add lines 1 through 11		130,097	87,306	92,850		
Operating and Administrative Expenses							
13	Compensation of officers, directors, trustees, etc		41,800	0	0	0	
14	Other employee salaries and wages		23,446	13,880	13,880	7,107	
15	Pension plans, employee benefits		4,250	0	0	657	
16a	Legal fees (attach schedule)						
b	Accounting fees (attach schedule)		10,900	0	0	0	
c	Other professional fees (attach schedule)						
17	Interest		534	534	0	0	
18	Taxes (attach schedule) (see instructions)		758	0	0	0	
19	Depreciation (attach schedule) and depletion		31,063	25,235	31,063		
20	Occupancy						
21	Travel, conferences, and meetings		1,416	0	0	472	
22	Printing and publications						
23	Other expenses (attach schedule)		73,652	43,268	43,268	1,344	
24	<b>Total operating and administrative expenses.</b>						
	Add lines 13 through 23		187,819	82,917	88,211	9,580	
25	Contributions, gifts, grants paid		21,013			21,013	
26	<b>Total expenses and disbursements.</b> Add lines 24 and 25		208,832	82,917	88,211	30,593	
27	Subtract line 26 from line 12						
a	<b>Excess of revenue over expenses and disbursements</b>		-78,735				
b	<b>Net investment income</b> (if negative, enter -0-)			4,389			
c	<b>Adjusted net income</b> (if negative, enter -0-)				4,639		

	<b>Part II Balance Sheets</b> Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
		<b>(a) Book Value</b>	<b>(b) Book Value</b>	<b>(c) Fair Market Value</b>
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	17,710	24,297	24,297
	<b>2</b> Savings and temporary cash investments . . . . .			
	<b>3</b> Accounts receivable ► 96			
	Less allowance for doubtful accounts ►	11,613	96	96
	<b>4</b> Pledges receivable ►			
	Less allowance for doubtful accounts ►			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ►			
	Less allowance for doubtful accounts ►			
	<b>8</b> Inventories for sale or use . . . . .	5,423	2,101	2,101
	<b>9</b> Prepaid expenses and deferred charges . . . . .		549	549
	<b>10a</b> Investments—U S and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .			
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b> Investments—land, buildings, and equipment basis ► 1,076,927			
Less accumulated depreciation (attach schedule) ► 398,944	703,221	677,983	677,983	
<b>12</b> Investments—mortgage loans . . . . .				
<b>13</b> Investments—other (attach schedule) . . . . .				
<b>14</b> Land, buildings, and equipment basis ► 379,501				
Less accumulated depreciation (attach schedule) ► 315,612	69,714	63,889	63,889	
<b>15</b> Other assets (describe ► )	1,053,664	956,730	956,730	
<b>16</b> <b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	1,861,345	1,725,645	1,725,645	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	1,779	1,707	
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .	31,074	21,727	
	<b>22</b> Other liabilities (describe ► )	2,144	1,892	
	<b>23</b> <b>Total liabilities</b> (add lines 17 through 22) . . . . .	34,997	25,326	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here ► <input checked="" type="checkbox"/></b> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	<b>24</b> Unrestricted . . . . .	1,376,348	1,250,319	
	<b>25</b> Temporarily restricted . . . . .	450,000	450,000	
	<b>26</b> Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here ► <input type="checkbox"/></b> <b>and complete lines 27 through 31.</b>			
	<b>27</b> Capital stock, trust principal, or current funds . . . . .			
	<b>28</b> Paid-in or capital surplus, or land, bldg , and equipment fund			
	<b>29</b> Retained earnings, accumulated income, endowment, or other funds			
	<b>30</b> <b>Total net assets or fund balances</b> (see instructions) . . . . .	1,826,348	1,700,319	
	<b>31</b> <b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	1,861,345	1,725,645	

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b>	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	1,826,348
<b>2</b>	Enter amount from Part I, line 27a . . . . .	<b>2</b>	-78,735
<b>3</b>	Other increases not included in line 2 (itemize) ►	<b>3</b>	0
<b>4</b>	Add lines 1, 2, and 3 . . . . .	<b>4</b>	1,747,613
<b>5</b>	Decreases not included in line 2 (itemize) ►	<b>5</b>	47,294
<b>6</b>	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	<b>6</b>	1,700,319

**Part IV Capital Gains and Losses for Tax on Investment Income**

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)		How acquired (b) P—Purchase D—Donation	Date acquired (c) (mo, day, yr)	Date sold (d) (mo, day, yr)
1a				
b				
c				
d				
e				
(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) over col (j), if any (k)	(l)	
a				
b				
c				
d				
e				
2 Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		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			3	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)  
If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  
If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

Yes  No

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	24,432	1,095,752	0 022297
2013	22,181	1,095,752	0 020243
2012	49,863	1,045,885	0 047675
2011	35,009	1,050,478	0 033327
2010	64,780	1,124,443	0 057611
2 Total of line 1, column (d).			2 0 181153
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 0 036231
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.			4 1,695,341
5 Multiply line 4 by line 3.			5 61,424
6 Enter 1% of net investment income (1% of Part I, line 27b).			6 44
7 Add lines 5 and 6.			7 61,468
8 Enter qualifying distributions from Part XII, line 4.			8 30,593

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

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1	1	88
	Date of ruling or determination letter _____ <b>(attach copy of letter if necessary—see instructions)</b>		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input type="checkbox"/> and enter 1% 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	88
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only) Others enter -0-)	4	0
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, enter -0- . . . . .	5	88
6	<b>Credits/Payments</b>		
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	520
b	Exempt foreign organizations—tax withheld at source . . . . .	6b	
c	Tax paid with application for extension of time to file (Form 8868). . . . .	6c	
d	Backup withholding erroneously withheld . . . . .	6d	
7	Total credits and payments Add lines 6a through 6d. . . . .	7	520
8	Enter any <b>penalty</b> for underpayment of estimated tax Check here <input type="checkbox"/> If Form 2220 is attached	8	
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . ►	9	
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . ►	10	432
11	Enter the amount of line 10 to be <b>Credited to 2015 estimated tax</b> ► 0 <b>Refunded</b> ►	11	432

**Part 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 intervene in any political campaign? . . . . .	<input type="checkbox"/>	<b>Yes</b>	<b>No</b>
1a			<b>1a</b>	<b>No</b>
1b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . .	<input type="checkbox"/>	<b>1b</b>	<b>No</b>
	<i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>			
1c	Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<input type="checkbox"/>	<b>1c</b>	<b>No</b>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year <b>(1)</b> On the foundation ► \$ _____ 0 <b>(2)</b> On foundation managers ► \$ _____ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	<input type="checkbox"/>	<b>2</b>	<b>No</b>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	<input type="checkbox"/>	<b>3</b>	<b>No</b>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<input type="checkbox"/>	<b>4a</b>	<b>Yes</b>
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<input type="checkbox"/>	<b>4b</b>	<b>Yes</b>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<input type="checkbox"/>	<b>5</b>	<b>No</b>
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? . . . . .	<input type="checkbox"/>	<b>6</b>	<b>No</b>
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	<input type="checkbox"/>	<b>7</b>	<b>Yes</b>
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ►OR			
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? <i>If "No," attach explanation</i>	<input type="checkbox"/>	<b>8b</b>	<b>Yes</b>
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)? <i>If "Yes," complete Part XIV</i>	<input type="checkbox"/>	<b>9</b>	<b>Yes</b>
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	<input type="checkbox"/>	<b>10</b>	<b>No</b>

**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions). . . . .	11	No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) . . . . .	12	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ►N/A	13	Yes
14	The books are in care of ►SO OREGON LIONS SIGHT HEARING CT Located at ►228 N HOLLY STREET MEDFORD OR	Telephone no ►(541) 779-3653 ZIP+4 ►97501	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the year. . . . . ► 15		
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ►	16	Yes No

**Part 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? ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(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). . . . . ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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		
c	Organizations relying on a current notice regarding disaster assistance check here. . . . . ►		
2	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015? . . . . . 1c	Yes	No
a	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? . . . . . ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	If "Yes," list the years ► 20____, 20____, 20____, 20____		
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions) . . . . . 2b		
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015) . . . . . 3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a	Yes	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015? 4b		

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)****5a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? . . . . .  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). . . . .  Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . .  Yes  No

**b** If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? . . . . .

Organizations relying on a current notice regarding disaster assistance check here. . . . . ►

**5b****c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . .  Yes  No

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 premiums on a personal benefit contract? . . . . .  Yes  No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .

If "Yes" to 6b, file Form 8870

**6b****No****7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . .**7b****Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

**2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."**

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

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

0

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

**Part X Minimum Investment Return**

(All domestic foundations must complete this part. Foreign foundations, 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	961,159
b	Average of monthly cash balances. . . . .	1b	15,381
c	Fair market value of all other assets (see instructions). . . . .	1c	744,618
d	<b>Total</b> (add lines 1a, b, and c). . . . .	1d	1,721,158
e	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	1,721,158
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	25,817
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,695,341
6	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	6	84,767

**Part XI Distributable Amount**(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ►  and do not complete this part.)

1	Minimum investment return from Part X, line 6. . . . .	1	
2a	Tax on investment income for 2015 from Part VI, line 5. . . . .	2a	
b	Income tax for 2015 (This does not include the tax from Part VI ). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	
5	Add lines 3 and 4. . . . .	5	
6	Deduction from distributable amount (see instructions). . . . .	6	
7	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	

**Part XII 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	30,593
b	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		
a	Suitability test (prior IRS approval required). . . . .	3a	
b	Cash distribution test (attach the required schedule). . . . .	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	30,593
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . .	5	0
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	6	30,593

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

**Part XIII Undistributed Income (see instructions)**

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
<b>1</b> Distributable amount for 2015 from Part XI, line 7				
<b>2</b> Undistributed income, if any, as of the end of 2015				
<b>a</b> Enter amount for 2014 only. . . . .				
<b>b</b> Total for prior years 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2015				
<b>a</b> From 2010. . . . .				
<b>b</b> From 2011. . . . .				
<b>c</b> From 2012. . . . .				
<b>d</b> From 2013. . . . .				
<b>e</b> From 2014. . . . .				
<b>f</b> <b>Total</b> of lines 3a through e. . . . .				
<b>4</b> Qualifying distributions for 2015 from Part XII, line 4 ► \$ _____				
<b>a</b> Applied to 2014, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b> Applied to 2015 distributable amount. . . . .				
<b>e</b> Remaining amount distributed out of corpus				
<b>5</b> Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))				
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5				
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b. . . . .				
<b>c</b> 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. . . . .				
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions. . . . .				
<b>e</b> Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions. . . . .				
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015. . . . .				
<b>7</b> 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). . . . .				
<b>8</b> Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions). . . . .				
<b>9</b> <b>Excess distributions carryover to 2016.</b> Subtract lines 7 and 8 from line 6a. . . . .				
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2011. . . . .				
<b>b</b> Excess from 2012. . . . .				
<b>c</b> Excess from 2013. . . . .				
<b>d</b> Excess from 2014. . . . .				
<b>e</b> Excess from 2015. . . . .				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

1a	If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling. ►				
b	Check box to indicate whether the organization is a private operating foundation described in section <input checked="" type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)				
2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed. . . . .				
b	85% of line 2a . . . . .				
c	Qualifying distributions from Part XII, line 4 for each year listed. . . . .				
d	Amounts included in line 2c not used directly for active conduct of exempt activities. . . . .				
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c. . . . .				
3	Complete 3a, b, or c for the alternative test relied upon				
a	"Assets" alternative test—enter				
(1)	Value of all assets . . . . .				
(2)	Value of assets qualifying under section 4942(j)(3)(B)(i)				
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . .				
c	"Support" alternative test—enter				
(1)	Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties). . . . .				
(2)	Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(ii). . . . .				
(3)	Largest amount of support from an exempt organization				
(4)	Gross investment income				

**Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)****1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ►  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

SOUTHERN OREGON LIONS SIGHT HEAR  
228 N HOLLY STREET  
MEDFORD, OR 97501  
(541) 779-3653  
SOLSHC@RIOUSA.COM

b The form in which applications should be submitted and information and materials they should include

SEE STATEMENT FOR LINE 2A

c Any submission deadlines

NONE

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

LIMITED TO JACKSON OR JOSEPHINE COUNTY RESIDENTS

**Part XV Supplementary Information(continued)****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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
VARIOUS BENEFICIARIES 228 N HOLLY STREET MEDFORD, OR 97501			PATIENT CARE HEARING	9,405
VARIOUS BENEFICIARIES 228 N HOLLY STREET MEDFORD, OR 97501			PATIENT CARE SIGHTPATIENT CARE VISUAL	11,608
<b>Total . . . . .</b>				21,013
<b>b Approved for future payment</b>				
<b>Total . . . . .</b>				0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .			14	13,938	
<b>4</b> Dividends and interest from securities. . . . .			14	10,921	
<b>5</b> Net rental income or (loss) from real estate					
a Debt-financed property. . . . .	531110	-533			
b Not debt-financed property. . . . .	531110	-19,403			
<b>6</b> Net rental income or (loss) from personal property. . . . .					
<b>7</b> Other investment income. . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory. . . . .					4,000
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory . . . . .					5,298
<b>11</b> Other revenue a <u>LOW VISION CLINIC</u>			03	246	
b _____					
c _____					
d _____					
e _____					
<b>12</b> Subtotal Add columns (b), (d), and (e). . .		-19,936		25,105	9,298
<b>13</b> <b>Total.</b> Add line 12, columns (b), (d), and (e). . . . .					14,467
(See worksheet in line 13 instructions to verify calculations.)					

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**



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

<b>(a)</b> Name and address	<b>(b)</b> Title, and average hours per week devoted to position	<b>(c)</b> Compensation (If not paid, enter -0-)	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	<b>(e)</b> Expense account, other allowances
WYLIE JOHNSON 228 N HOLLY MEDFORD, OR 97501	CHAIRMAN 1 00	0	0	0
MARY STANSELL 228 N HOLLY MEDFORD, OR 97501	TREASURER 1 00	0	0	0
GLORIANNIA C COOPER 228 N HOLLY MEDFORD, OR 97501	EXECUTIVE DIRECTOR 40 00	41,800	0	0
CHERYL JOHNSON 228 N HOLLY MEDFORD, OR 97501	SECRETARY 1 00	0	0	0
KARL EDDINGS 228 N HOLLY MEDFORD, OR 97501	VICE-CHAIR 1 00	0	0	0

## TY 2015 Accounting Fees Schedule

**Name:** SOUTHERN OREGON LION

**EIN:** 93-6042046

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
BOOKKEEPING	6,100	0	0	0
ACCOUNTANT	4,800	0	0	0

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## TY 2015 Depreciation Schedule

**Name:** SOUTHERN OREGON LION

**EIN:** 93-6042046

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
LIONS COTTAGES	2003-06-30	408,000	123,798	SL	39 000000000000	10,462	10,462	10,462	
LAND-LIONS COTTAGES	2000-10-27	38,000		L		0	0	0	
HOLLY COURT APARTMENTS	1998-08-15	590,927	249,911	SL	40 000000000000	14,773	14,773	14,773	
LAND-HOLLY COURT	1995-03-15	40,000		L		0	0	0	
LAND-CENTER	1969-01-01	39,874		L		0	0	0	
PARKING LOT	1995-07-01	20,562	20,562	SL	15 000000000000	0	0	0	
TABLES-CENTER	1978-01-01	342	342	SL	10 000000000000	0	0	0	
TABLE RACKS	1979-01-01	105	105	SL	10 000000000000	0	0	0	
MISC EQUIPMENT-CENTER	1982-01-01	800	800	SL	10 000000000000	0	0	0	
RECYCLE BIN #2	1996-12-01	2,700	2,700	SL	10 000000000000	0	0	0	
FENCING-GRAPE STREET	1989-08-01	891	891	SL	20 000000000000	0	0	0	
DRAPEs	1979-01-01	331	331	SL	10 000000000000	0	0	0	
RECYCLE BIN #1	1996-12-20	2,700	2,700	SL	10 000000000000	0	0	0	
EQUIPMENT	1991-01-15	9,812	9,812	SL	10 000000000000	0	0	0	
MAGIC CHEF REFRIGERATOR	1991-07-25	500	500	SL	10 000000000000	0	0	0	
HOT POINT REFRIGERATOR	1991-09-04	449	449	SL	10 000000000000	0	0	0	
STEEL CASE FILE CABINET	1991-10-01	111	111	SL	10 000000000000	0	0	0	
RHEEM ELECTRIC WT/HT	1991-11-25	210	210	SL	10 000000000000	0	0	0	
AS 14" WHITE TOILET	1992-01-27	257	257	SL	10 000000000000	0	0	0	
COMPUTER-JUDITH	1992-10-19	1,499	1,499	SL	6 000000000000	0	0	0	

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
PRINTER	1992-11-01	814	814	SL	6 000000000000	0	0	0	
CHAIRS	1993-03-01	220	220	SL	10 000000000000	0	0	0	
TYPEWRITER	1994-02-01	250	250	SL	10 000000000000	0	0	0	
SOS ALARM CLOCK	1994-04-28	1,016	1,016	SL	10 000000000000	0	0	0	
COMPUTER-DAMONTS 486	1995-03-28	1,440	1,440	SL	6 000000000000	0	0	0	
AC-HEATING	1999-08-05	17,995	17,995	SL	10 000000000000	0	0	0	
BPI COMPUTER SOFTWARE	1996-06-05	165	165	SL	6 000000000000	0	0	0	
EQUIPMENT	1995-12-31	1,828	1,828	SL	6 000000000000	0	0	0	
RECYCLE BIN #3	1997-02-25	2,700	2,700	SL	10 000000000000	0	0	0	
TELEPHONE SYSTEM	1998-05-20	2,909	2,909	SL	10 000000000000	0	0	0	
COMPUTER-CHRISTINA	1997-12-31	1,606	1,606	SL	6 000000000000	0	0	0	
RECYCLE BIN #8	1998-04-20	2,700	2,700	SL	10 000000000000	0	0	0	
RECYCLE BIN #6	1998-03-13	3,050	3,050	SL	10 000000000000	0	0	0	
RECYCLE BIN #7	1998-03-13	3,050	3,050	SL	10 000000000000	0	0	0	
RECYCLE BIN #5	1998-03-13	3,050	3,050	SL	10 000000000000	0	0	0	
RECYCLE BIN #9	1998-05-01	3,050	3,050	SL	10 000000000000	0	0	0	
RECYCLE BIN #10	1998-06-01	3,050	3,050	SL	10 000000000000	0	0	0	
RECYCLE BIN #11	1998-06-01	3,050	3,050	SL	10 000000000000	0	0	0	
DISHWASHER	1997-09-15	805	805	SL	10 000000000000	0	0	0	
WHEELS FOR BINS	1998-06-22	1,429	1,429	SL	10 000000000000	0	0	0	

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
WHEELS FOR BINS	1998-03-31	1,085	1,085	SL	10 000000000000	0	0	0	
SIGNAGE FOR BINS	1998-05-13	399	399	SL	10 000000000000	0	0	0	
RECYCLE BIN #12	1998-12-28	3,489	3,489	SL	10 000000000000	0	0	0	
RECYCLE BIN #13	1998-12-15	3,050	3,050	SL	10 000000000000	0	0	0	
RECYCLE BIN #14	1999-02-26	3,050	3,050	SL	10 000000000000	0	0	0	
LIFT GATE	1998-09-02	1,775	1,775	SL	10 000000000000	0	0	0	
WHEELS FOR BINS	1999-03-31	1,465	1,465	SL	10 000000000000	0	0	0	
COPIER	1999-06-30	7,790	7,790	SL	10 000000000000	0	0	0	
COMPUTER-SHERRIE	1998-07-15	1,545	1,545	SL	6 000000000000	0	0	0	
WATER HEATER	1999-08-23	950	950	SL	10 000000000000	0	0	0	
INSULATION	1999-08-26	1,050	1,050	SL	10 000000000000	0	0	0	
FAX MACHINE	1999-08-17	170	170	SL	7 000000000000	0	0	0	
PRINTER	1999-09-14	1,130	1,130	SL	5 000000000000	0	0	0	
VIDEO MAGNIFIER	1999-12-15	1,087	1,087	SL	7 000000000000	0	0	0	
RECYCLE BINS-SHADY COVE	2000-03-13	2,700	2,700	SL	10 000000000000	0	0	0	
VACUUM	2000-02-16	238	238	SL	7 000000000000	0	0	0	
SHED	2000-04-01	1,880	1,880	SL	10 000000000000	0	0	0	
VISUAL LATEX	1979-01-01	2,030	2,030	SL	10 000000000000	0	0	0	
SOUND SYSTEM	1993-05-01	1,568	1,568	SL	6 000000000000	0	0	0	
COMPUTER-AMBER	1993-05-01	3,452	3,452	SL	6 000000000000	0	0	0	

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
TDD MACHINE	1995-03-17	385	385	SL	10 000000000000	0	0	0	
FM TRANSMITTER	1995-04-27	325	325	SL	10 000000000000	0	0	0	
CCTV	1995-05-08	320	320	SL	10 000000000000	0	0	0	
COMTEK FM TRANSMITTER	1995-05-16	462	462	SL	10 000000000000	0	0	0	
EQUIPMENT	1995-06-30	205	205	SL	10 000000000000	0	0	0	
CENTER EQUIPMENT	1996-06-30	3,092	3,092	SL	10 000000000000	0	0	0	
TOSHIBA TV	1996-10-15	195	195	SL	10 000000000000	0	0	0	
CVCL	1996-09-20	1,382	1,382	SL	10 000000000000	0	0	0	
TYMPANOMETER	1998-04-30	2,483	2,483	SL	10 000000000000	0	0	0	
CCTV	1998-01-28	1,377	1,377	SL	10 000000000000	0	0	0	
FREEZER	2000-02-04	431	431	SL	7 000000000000	0	0	0	
DOOR RECYCLE BIN ASHLAND	1999-11-30	2,250	2,250	SL	10 000000000000	0	0	0	
EARLY BIRD COMPUTER	2001-03-01	4,000	4,000	SL	10 000000000000	0	0	0	
MONITORS (2)	2001-03-28	500	500	SL	5 000000000000	0	0	0	
KENMORE ELECTRIC STOVE	2001-04-16	700	700	SL	5 000000000000	0	0	0	
SHARP 32" TV	2001-02-07	400	400	SL	5 000000000000	0	0	0	
ALADDIN ULTRA 17" CCTV	2001-08-09	1,107	1,107	SL	5 000000000000	0	0	0	
SALAD BAR	2001-08-31	842	842	SL	5 000000000000	0	0	0	
COMPUTER	2001-08-31	1,588	1,588	SL	5 000000000000	0	0	0	
COPY MACHINE KM-3530-24	2003-10-09	8,932	8,932	SL	5 000000000000	0	0	0	

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
ADA UPGRADE	1993-06-01	9,043	4,991	SL	40 000000000000	226	0	226	
EMERGENCY MEDICAL	2011-09-30	790	592	SL	5 000000000000	158	0	158	
4-SCREENING AUDIOMETERS	2011-11-23	3,160	2,265	SL	5 000000000000	632	0	632	
BUILDING-CENTER	1969-01-01	48,753	44,850	SL	50 000000000000	975	0	975	
SLIDING DOOR	1998-06-01	1,450	616	SL	40 000000000000	36	0	36	
ROOF	2002-12-09	18,500	11,640	SL	20 000000000000	925	0	925	
GOODLIGHT MODEL A+ ACUITY CABINET	2011-07-15	995	796	SL	5 000000000000	199	0	199	
CENTER ADDITION	1980-01-01	105,820	93,106	SL	40 000000000000	2,646	0	2,646	
CENTER ADDITION	1981-01-01	1,241	1,054	SL	40 000000000000	31	0	31	
PAVING-CENTER	1983-01-01	3,500	3,500	SL	10 000000000000	0	0	0	
RECYCLE BIN #4	1997-03-31	2,900	2,900	SL	10 000000000000	0	0	0	

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## TY 2015 Gain/Loss from Sale of Other Assets Schedule

**Name:** SOUTHERN OREGON LION

**EIN:** 93-6042046

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
RECYCLING BINS		Purchased			4,000			0	4,000	8,100

## TY 2015 Investments - Land Schedule

**Name:** SOUTHERN OREGON LION

**EIN:** 93-6042046

<b>Category/ Item</b>	<b>Cost/Other Basis</b>	<b>Accumulated Depreciation</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
LIONS COTTAGES	408,000	134,260	273,740	
HOLLY COURT APARTMENTS	590,927	264,684	326,243	

**TY 2015 Land, Etc.****Schedule****Name:** SOUTHERN OREGON LION**EIN:** 93-6042046

<b>Category / Item</b>	<b>Cost / Other Basis</b>	<b>Accumulated Depreciation</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
PARKING LOT	20,562	20,562	0	
TABLES-CENTER	342	342	0	
TABLE RACKS	105	105	0	
MISC. EQUIPMENT-CENTER	800	800	0	
FENCING-GRAPE STREET	891	891	0	
DRAPES	331	331	0	
EQUIPMENT	9,812	9,812	0	
MAGIC CHEF REFRIGERATOR	500	500	0	
HOT POINT REFRIGERATOR	449	449	0	
STEEL CASE FILE CABINET	111	111	0	
RHEEM ELECTRIC WT/HT	210	210	0	
AS 14" WHITE TOILET	257	257	0	
COMPUTER-JUDITH	1,499	1,499	0	
PRINTER	814	814	0	
CHAIRS	220	220	0	
TYPEWRITER	250	250	0	
SOS ALARM CLOCK	1,016	1,016	0	
COMPUTER-DAMONTS 486	1,440	1,440	0	
AC-HEATING	17,995	17,995	0	
BPI COMPUTER SOFTWARE	165	165	0	
EQUIPMENT	1,828	1,828	0	
TELEPHONE SYSTEM	2,909	2,909	0	
COMPUTER-CHRISTINA	1,606	1,606	0	
RECYCLE BIN #9	3,050	3,050	0	
RECYCLE BIN #10	3,050	3,050	0	
RECYCLE BIN #11	3,050	3,050	0	
DISHWASHER	805	805	0	
WHEELS FOR BINS	1,429	1,429	0	
WHEELS FOR BINS	1,085	1,085	0	
SIGNAGE FOR BINS	399	399	0	

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
RECYCLE BIN #12	3,489	3,489	0	
RECYCLE BIN #13	3,050	3,050	0	
RECYCLE BIN #14	3,050	3,050	0	
LIFT GATE	1,775	1,775	0	
WHEELS FOR BINS	1,465	1,465	0	
COPIER	7,790	7,790	0	
COMPUTER-SHERRIE	1,545	1,545	0	
WATER HEATER	950	950	0	
INSULATION	1,050	1,050	0	
FAX MACHINE	170	170	0	
PRINTER	1,130	1,130	0	
VIDEO MAGNIFIER	1,087	1,087	0	
RECYCLE BINS-SHADY COVE	2,700	2,700	0	
VACUUM	238	238	0	
SHED	1,880	1,880	0	
VISUAL LATEX	2,030	2,030	0	
SOUND SYSTEM	1,568	1,568	0	
COMPUTER-AMBER	3,452	3,452	0	
TDD MACHINE	385	385	0	
FM TRANSMITTER	325	325	0	
CCTV	320	320	0	
COMTEK FM TRANSMITTER	462	462	0	
EQUIPMENT	205	205	0	
CENTER EQUIPMENT	3,092	3,092	0	
TOSHIBA TV	195	195	0	
CVCL	1,382	1,382	0	
TYMPANOMETER	2,483	2,483	0	
CCTV	1,377	1,377	0	
FREEZER	431	431	0	
DOOR RECYCLE BIN ASHLAND	2,250	2,250	0	

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
EARLY BIRD COMPUTER	4,000	4,000	0	
MONITORS (2)	500	500	0	
KENMORE ELECTRIC STOVE	700	700	0	
SHARP 32" TV	400	400	0	
ALADDIN ULTRA 17" CCTV	1,107	1,107	0	
SALAD BAR	842	842	0	
COMPUTER	1,588	1,588	0	
COPY MACHINE KM-3530-24	8,932	8,932	0	
ADA UPGRADE	9,043	5,217	3,826	
EMERGENCY MEDICAL	790	750	40	
4-SCREENING AUDIOMETERS	3,160	2,897	263	
BUILDING-CENTER	48,753	45,825	2,928	
SLIDING DOOR	1,450	652	798	
ROOF	18,500	12,565	5,935	
GOODLIGHT MODEL A+ ACUITY CABINET	995	995	0	
CENTER ADDITION	105,820	95,752	10,068	
CENTER ADDITION	1,241	1,085	156	
PAVING-CENTER	3,500	3,500	0	

**TY 2015 Mortgages and Notes Payable Schedule****Name:** SOUTHERN OREGON LION**EIN:** 93-6042046**Total Mortgage Amount:**

<b>Item No.</b>	1
<b>Lender's Name</b>	HOLLY COURT APARTMENTS
<b>Lender's Title</b>	
<b>Relationship to Insider</b>	
<b>Original Amount of Loan</b>	
<b>Balance Due</b>	21,727
<b>Date of Note</b>	
<b>Maturity Date</b>	
<b>Repayment Terms</b>	
<b>Interest Rate</b>	
<b>Security Provided by Borrower</b>	
<b>Purpose of Loan</b>	
<b>Description of Lender Consideration</b>	
<b>Consideration FMV</b>	

## TY 2015 Other Assets Schedule

**Name:** SOUTHERN OREGON LION

**EIN:** 93-6042046

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
CHRISTOPHER TRUST	545,648	491,397	491,397
HUNTER TRUST	35,733	44,190	44,190
NELSON CORSON TRUST	472,283	421,143	421,143

## TY 2015 Other Decreases Schedule

**Name:** SOUTHERN OREGON LION

**EIN:** 93-6042046

Description	Amount
UNREALIZED LOSSES	47,294

## TY 2015 Other Expenses Schedule

**Name:** SOUTHERN OREGON LION**EIN:** 93-6042046

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADVERTISING	1,159	0	0	265
INSURANCE	5,841	0	0	0
OTHER	872	0	0	668
REPAIRS & MAINTENANCE	6,206	0	0	0
SUPPLIES	1,361	0	0	331
UTILITIES	10,177	0	0	0
EDUCATION/TRAINING	205	0	0	80
BAD DEBT EXPENSE	4,563	0	0	0
CONTRACT LABOR	114	114	114	0
INSURANCE	737	737	737	0

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROPERTY MANAGEMENT	1,920	1,920	1,920	0
REPAIRS & MAINTENANCE	13,529	13,529	13,529	0
UTILITIES	2,932	2,932	2,932	0
PAYROLL TAXES & BENEFITS	2,583	2,583	2,583	0
SUPPLIES	518	518	518	0
TRAVEL & MEALS	71	71	71	0
TAXES & PERMITS	80	80	80	0
CONTRACT LABOR	51	51	51	0
INSURANCE	1,757	1,757	1,757	0
PAYROLL TAXES & BENEFITS	3,557	3,557	3,557	0

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROPERTY MANAGEMENT	3,858	3,858	3,858	0
REPAIRS & MAINTENANCE	4,624	4,624	4,624	0
UTILITIES	5,583	5,583	5,583	0
SUPPLIES	1,238	1,238	1,238	0
TAXES & PERMITS	86	86	86	0
TRAVEL & MEALS	30	30	30	0

## TY 2015 Other Income Schedule

**Name:** SOUTHERN OREGON LION**EIN:** 93-6042046

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
LOW VISION CLINIC	246		246

## TY 2015 Other Liabilities Schedule

**Name:** SOUTHERN OREGON LION

**EIN:** 93-6042046

<b>Description</b>	<b>Beginning of Year - Book Value</b>	<b>End of Year - Book Value</b>
ACCRUED PAYROLL AND TAXES	2,144	1,892

## TY 2015 Taxes Schedule

**Name:** SOUTHERN OREGON LION

**EIN:** 93-6042046

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
TAXES, LICENSES	758	0	0	0