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Form 990-PF

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as 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

Open to Public Inspection

Department of the Treasury Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Internal Revenue Service and ending OCT 1. 2015 2016 For calendar year 2015 or tax year beginning SEP 30, Name of foundation A Employer identification number FRERES FOUNDATION 93-6027213 C/O FRERES LUMBER CO. Number and street (or P O box number if mail is not delivered to street address) Room/surte B Telephone number PO BOX 276 503-859-2121 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 97358 LYONS, OR Initial return initial return of a former public charity D 1. Foreign organizations, check here G Check all that apply: Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Name change Address change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust ____ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: Accrual If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here (from Part II, col. (c), line 16) 3,181,818. (Part I, column (d) must be on cash basis.) ▶\$ Analysis of Revenue and Expenses (c) Adjusted net (d) Disbursements for charitable purposes Part I (b) Net investment (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income (cash basis only) 150,000. N/A Contributions, gifts, grants, etc., received 1 - 1 - 1. of the foundation is not required to attach Sch. B. interest on savings and temporary cash investments 3 82,703. 82,703 STATEMENT 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6,530. 1 33 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 1,819,630. `. č 7 Capital gain net income (from Part IV, line 2) 6,530 8 Net short-term capital gain 20 Income modifications 10a Gross sales less returns and allowances 2017 b Less Cost of goods sold c Gross profit or (loss) 11 Other income 239.233 89,233 12 Total. Add lines 1 through 11 0 0 Compensation of officers, directors, trustees, etc 0. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees **b** Accounting fees 12,056. c Other professional fees STMT 2 0. 0. 17 Interest STMT 3 <1,088.5 0 0. 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications STMT 4 50 0 23 Other expenses 0. 24 Total operating and administrative 11,018 expenses. Add lines 13 through 23 141,975 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: Total Control 86,240 a Excess of revenue over expenses and disbursements THE THE PERSON NAMED IN b Net investment income (if negative, enter -0-) 89,233. C Adjusted net income (if negative, enter -0-)

Form 990-PF (2019) C/O FRERES LUMBER CO.					93-6027213 Page 2				
_	_		Beginning of year	End o	f year				
P	<u>irt l</u>	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value				
		Cook non interest hearing	265,971.	215,584.					
l		Cash - non-interest-bearing	203,3/11	213/3010	223/3021				
		Savings and temporary cash investments			, * *				
1		Accounts receivable		**	, ,				
1		Less; allowance for doubtful accounts	1 2 -2-4 / 1 3 2 4 3 3 4 3 3 4 3 3 4 3 4 3 4 3 4 3 4	7 · *(*) · 7 * 7 * 7 * 7 * 7 * 7 * 7 * 7 * 7 * 7	, , ,				
ł		Pledges receivable ►		" * * * * * * * * * * * * * * * * * * *	, , , , ,				
- 1		Less: allowance for doubtful accounts	<u> </u>						
- [5	Grants receivable							
- [6	Receivables due from officers, directors, trustees, and other							
		disqualified persons							
)	7	Other notes and loans receivable			, · · · · · · · · · · · · · · · · · · ·				
1		Less; allowance for doubtful accounts	1						
y	8	Inventories for sale or use							
Assets	9	Prepaid expenses and deferred charges							
As		Investments - U.S. and state government obligations							
		Investments - corporate stock							
		Investments - corporate bonds							
		Investments - Land, buildings, and equipment basis		* * * * * * * * * * * * * * * * * * *	* * .				
ì	11			,	î				
		Less accumulated depreciation	 						
		Investments - mortgage loans	2 710 761	2 055 200	2,966,234.				
	13	Investments - other STMT 5	2,/10,/01.	2,855,388.	2,300,234.				
	14	Land, buildings, and equipment basis							
		Less accumulated depreciation	_		 				
		Other assets (describe))						
	16	Total assets (to be completed by all filers - see the							
		instructions. Also, see page 1, item I)	2,984,732.	3,070,972.	3,181,818.				
	17	Accounts payable and accrued expenses	\		, , , , , , , , , , , , , , , , , , , ,				
	18	Grants payable	<u> </u>		*				
S	19	Deferred revenue							
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons							
abi	21	Mortgages and other notes payable			* * * * * * * * * * * * * * * * * * * *				
=	22	Other liabilities (describe))		, ' , ' , ' ,				
		· · · · · · · · · · · · · · · · · · ·							
	23	Total liabilities (add lines 17 through 22)	0.	0.	, , ,				
		Foundations that follow SFAS 117, check here] ,				
		and complete lines 24 through 26 and lines 30 and 31.		ļ	\ ^ .				
es	24	Unrestricted	2,984,732.	3,070,972.	* .				
Ž,	25	Temporarily restricted	= 13 = 1. = = 1		1				
3ale	26	Permanently restricted			1				
ā	20	Foundations that do not follow SFAS 117, check here			1				
Ţ		and complete lines 27 through 31.			· '*'', , , , , , , , , , , , , , , , , ,				
Net Assets or Fund Balances	0.7	Capital stock, trust principal, or current funds	1						
əts	27	Paid-in or capital surplus, or land, bldg., and equipment fund			****				
889	28			 					
¥	29	Retained earnings, accumulated income, endowment, or other funds	2,984,732.	3,070,972.					
ž	30	Total net assets or fund balances	2,364,134.	3,010,314.					
			2 004 722	2 070 070					
_	31	Total liabilities and net assets/fund balances	2,984,732.	3,070,972.					
P	art	III Analysis of Changes in Net Assets or Fund	Balances						
=									
1		l net assets or fund balances at beginning of year - Part II, column (a), lir	ne 30						
	•	st agree with end-of-year figure reported on prior year's return)		1	2,984,732.				
2	Ente	r amount from Part I, line 27a		2	86,240.				
3	Othe	er increases not included in line 2 (itemize)		3	0.				
4	Add	lines 1, 2, and 3		4	3,070,972.				
5		reases not included in line 2 (itemize)		5	0.				
6_	Tota	ıl net assets or fund balances at end of year (line 4 minus line 5) - Part II,	column (b), line 30	6	3,070,972.				
					Form 990-PF (2015)				

93-6027213

Form 990-PF (2015)

C/O FRERES LUMBER CO.

Pa	rt IV Capital Gains a	ind Losses for Tax on Ir	nvestment	Income	,	 			
	(a) List and descri 2-story brick war	be the kind(s) of property sold (e.g ehouse; or common stock, 200 sh	g., real estate, s. MLC Co.)		1. b	low acquired - Purchase - Donation		acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a .	L8WEST COAST TE	RUST				P	VARI	OUS	09/22/16
b				·· · · · · · · · · · · · · · · · · · ·	<u> </u>	,			
C			 -						
d					├				
е		(6) Depresention allowed	(=) Coo	at or other bosis			(5) (Coup or (loc	.\
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus e	st or other basis			(e) plu	Gain or (loss is (f) minus	(g)
<u>a</u>	1,819,630.		 	<u>1,813,10</u>	0.				6,530.
<u>b</u>		<u> </u>	 						
_ <u>c</u>			 						·
d									· · · · · · · · · · · · · · · · · · ·
<u>e</u> (Complete only for assets showing	g gain in column (h) and owned by	the foundation	on 12/31/69	-+		(I) Gains (I	Col. (h) gair	n minus
		(j) Adjusted basis		cess of col. (i)		(ol. (k), but	not less tha	an -0-) or
	(i) F.M.V. as of 12/31/69	as of 12/31/69		col. (j), if any			Losses	s (from col.	(h))
a									6,530.
b									
С									
d			<u> </u>						
е_									
2 C	apital gain net income or (net cap	ortal loss) { If gain, also enter-			}	2			6,530.
3 N	et short-term capital gain or (los	s) as defined in sections 1222(5) a							
	gain, also enter in Part I, line 8, o		\ -,] [
	(loss), enter -0- in Part I, line 8	-d Cti 4040/5\4-	n Dadusad	Tour on No.		3		<u>N/</u>	<i>Ā</i>
ــــــــــــــــــــــــــــــــــــــ		nder Section 4940(e) for					come		
(For	optional use by domestic private	foundations subject to the section	4940(a) tax on	ı net investment ir	ncome	9.)			
If sec	tion 4940(d)(2) applies, leave th	is part blank.							
Moo	the foundation liable for the each	on 4942 tax on the distributable ar	mount of any w	ar in the bace pe	riod?				Yes X No
		fy under section 4940(e). Do not c	• -	•	iiou?				L TES LALINO
		ach column for each year; see the			entries				
_	(a)	(b)		<u>, </u>	(c)				(d)
Ca	Base periód years ilendar year (or tax year beginnin	Adviated avalitions du	stributions	Net value of no			ts	(col. (b) d	bùtión ratio vided by col. (c))
	2014		12,881.		2	,937,48	2.	· · · · · · · · · · · · · · · · · · ·	.048641
	2013		L8,950.			,746,55			.043309
	2012		07,225.		2	,441,68	7.		.043914
	2011		06 <u>,550</u> .			,132,72			.049960
	2010	1:	<u>10,359.</u>		1	,994,49	8.		.055332
							l		
	otal of line 1, column (d)				_		2	 	.241156
	=	5-year base period - divide the total	on line 2 by 5,	or by the number	of ye	ars		į	040001
tr	ne foundation has been in exister	nce if less than 5 years					3_	 -	.048231
4 6	ntor the not value of noncharitah	le-use assets for 2015 from Part X	lina E						2 041 665
4 [mer the het value of noncharitab	e-use assets for 2015 from Part A	, iiiie 5				4	 	3,041,665.
5 M	fultiply line 4 by line 3						5	}	146,703.
· ·	ionipiy iiio 4 by iiio o						-	 	140,703.
6 E	nter 1% of net investment incom	e (1% of Part I, line 27b)					6		892.
		,						T	
7 A	dd lines 5 and 6						7		147,595.
8 E	nter qualifying distributions from	Part XII, line 4					8	<u> </u>	141,975.
	line 8 is equal to or greater than	line 7, check the box in Part VI, lin	e 1b, and comp	plete that part usir	ng a 1	% tax rate.			

	990-PF (2015) C/O FRERES LUMBER CO. rt VI Excise Tax Based on Investment Income (Section 4940	1/2)	4040/b) 4040/e) or 4			7213		Page 4
	<u></u>), UI 4		- 500	III201	<u> </u>	15)
1a	Exempt operating foundations described in section 4940(d)(2), check here and en					(· ·	×	,
	Date of ruling or determination letter: (attach copy of letter if nece			l	1	, y x	*	, ,	٥.
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%							<u>, , ,</u>	<u>85.</u>
	of Part I, line 27b		40		1 -	٥ ټر ,			,
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%)		*			^
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other	ners er	nter -U-)		2	 		1 7	<u> </u>
3	Add lines 1 and 2				3	ļ		1,7	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Of	ners e	nter -U-)		4	├		1 7	<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				5_			1,7	00.
	Credits/Payments:	۔ ما	ا ء	600	, (, , ,		
	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	4,	<u>600.</u>	·,	, *, *	τ, τ	*	
	Exempt foreign organizations - tax withheld at source	6b	+		· * .	1	٠, ، , .		
	Tax paid with application for extension of time to file (Form 8868)	6c	 		43.00	1	~~,	4	. *
	Backup withholding erroneously withheld	<u>6d</u>	L			` , *	, ,	2 6	^^
_	Total credits and payments. Add lines 6a through 6d				7	<u> </u>		2,6	00.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attack.	nea		_	8	├			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				9	 -			1 5
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		015		10	 -	 -	8	<u>15.</u>
	Enter the amount of line 10 to be: Credited to 2016 estimated tax Int VII-A Statements Regarding Activities		815. Refun	aea 💌	11	<u> </u>			0.
	During the tax year, did the foundation attempt to influence any national, state, or local legisl	ation o	or did it participate or	ntervene			1 6	Yes	No
14	any political campaign?	anon c	or the it participate or	HILEI VEHIC	; 111		18	1.00	X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	oc Ica	a instructions for the	definition	113		1b		X
U	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	•					10	7	<u>A</u>
	distributed by the foundation in connection with the activities.	COPI	es or arry materials	publish	eu oi				,
_	Did the foundation file Form 1120-POL for this year?						10	1	х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	vear:					<u> </u>		
	(1) On the foundation. > \$ O . (2) On foundation managers.	-	1	0.			0,	<u> </u>	
۵	Enter the reimbursement (if any) paid by the foundation during the year for political expendit				-			1	ų
٠	managers. > \$ 0.		A Impood on loginal				l *		ľ
2	Has the foundation engaged in any activities that have not previously been reported to the IF	RS?					2]	x
	If "Yes," attach a detailed description of the activities.	_					,		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in	nstrum	ent, articles of incorp	oration,	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change		,				3		X_
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	?					4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?				N	I/A	4b		
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.						2		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied en	ther:					1 **		
	By language in the governing instrument, or						J`	}	٠,
	By state legislation that effectively amends the governing instrument so that no mandatory	direct	tions that conflict with	the stat	e law		΄,		*
	remain in the governing instrument?						6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," con	nplete	Part II, col. (c), and	Part XI	/		7	X	
							?	\ ``-	
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ns) 🕨	`_ 				-5	ļ.	
	OR						٠,٠		` .
b	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Ai	ttorney	General (or designat	9)			12.	-	1
_	of each state as required by General Instruction G? If "No," attach explanation						86	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of ser) for cal	endar		137	٧.,	<u> </u>
4.0	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," c	•					9	<u> </u>	X
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedu	le listing	their names and address	:es			10	I	X

Form 990-PF (2015)

Pa	art V(I-A Stateme	ents Regarding Activities (continued)					
					Yes	No	
11		ear, did the foundation, directly or indirectly, own a controlled entity within the meaning of		1	}		
		es," attach schedule (see instructions)		11	<u> </u>	X	
12	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	· ·		12	<u> </u>	X	
13	· · · · · · · · · · · · · · · · · · ·	ly with the public inspection requirements for its annual returns and exemption application?		13	X	<u> </u>	
	Website address ▶1		CO2 OF		101		
14		► FRERES LUMBER CO. Telepho OX 276, LYONS, OR	one no. ► 503-85				
15		xempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	ZIP+4 ▶ <u>97</u>	330			
13		tax-exempt interest received or accrued during the year	▶ 15	N	/A	- Ш	
16		dar year 2015, did the foundation have an interest in or a signature or other authority over a bank			Yes	No	
	-	cial account in a foreign country?	•	16		Х	
		exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		₹.a	> ×5		
	foreign country			<u> L</u>	·	<u> </u>	
Pa	art VII-B Stateme	ents 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	a During the year did the fo	oundation (either directly or indirectly):					
	• • • • • • • • • • • • • • • • • • • •	r exchange, or leasing of property with a disqualified person?	Yes X No	3,5		,	
	` '	i, lend money to, or otherwise extend credit to (or accept it from)		, x	Ì		
	a disqualified person		Yes X No				
	• •	ices, or facilities to (or accept them from) a disqualified person?	Yes X No	\ \ \	, ,		
	• • •	o, or pay or reimburse the expenses of, a disqualified person? e or assets to a disqualified person (or make any of either available	Tes LAL NO				
	• •	e of a disqualified person)?	Yes X No				
		or property to a government official? (Exception. Check "No"	160 (22) 180	1.			
	• • • • • • • •	reed to make a grant to or to employ the official for a period after		`."			
		rnment service, if terminating within 90 days.)	Yes X No	, , ,			
b	If any answer is "Yes" to	1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations				'	
	section 53.4941(d)-3 or	in a current notice regarding disaster assistance (see instructions)?	N/A	1b			
	Organizations relying on	a current notice regarding disaster assistance check here	▶□				
C		ge in a prior year in any of the acts described in 1a, other than excepted acts, that were not corre	cted	1			
_		e tax year beginning in 2015?		1c	,	X	
2	defined in section 4942()	bute income (section 4942) (does not apply for years the foundation was a private operating foul 1)(3) or 4942(1)(5)):	ndation	-	Ì		
а		15, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) i	oeainnina				
	before 2015?		Yes X No				
	If "Yes," list the years ▶		_	r v			
b		d in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to				-,	
		e year's undistributed income? (if applying section 4942(a)(2) to all years listed, answer "No" ar		«تر در		,	
	statement - see instruction	•	N/A	2b			
C	trine provisions of sections	on 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		~			
99	Dud the foundation hold i	more than a 2% direct or indirect interest in any business enterprise at any time		<u> </u> ,			
-	during the year?	more than a 2.76 direct of maneet interest in any business enterprise at any time	Yes X No	7			
b		ss business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified per		.		-	
		pse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)		, ,	5 6		
		gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Scho		*** ep		,	
	Form 4720, to determ	nine if the foundation had excess business holdings in 2015.)	N/A	3b			
		t during the year any amount in a manner that would jeopardize its charitable purposes?		4a		Х	
b		any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable	purpose that	, ,			
	nad not been removed fr	om jeopardy before the first day of the tax year beginning in 2015?		4b		X	
			Fo	rm 99 0)-PF	(2015)	

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

Form **990-PF** (2015)

orm <u>990-P</u> F (<u>2</u> 01	5) C/O FRERES LUMBER CO.	93-6	5027213 Page 7
	Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)		
3 Five highest	-paid independent contractors for professional services. If none, ente	r "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NO	NE		
			
			ii
]"
			
			
		 	
		- 	
Total number of	others receiving over \$50,000 for professional services	- L	▶ 0
Part IX-A	Summary of Direct Charitable Activities	······	
		tical information augh as the	
number of organ	on's four largest direct charitable activities during the tax year. Include relevant statis izations and other beneficiaries served, conferences convened, research papers pro	duced etc	Expenses
		added, oto.	
1 <u>N/</u>	A		
·			
3			
4			
Part IX-R	Summary of Program-Related Investments		
Describe the two	largest program-related investments made by the foundation during the tax year on	lines 1 and 2	Amount
1 N /		intes i and z.	Amount
111/	Α		
All other program	n-related investments. See instructions.		
3	n related involutions. Odd indiadelions.		
Total, Add lines	1 through 3		<u> </u>

Form **990-PF** (2015)

C/O FRERES LUMBER CO.

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	idations, s	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	- 30	
	Average monthly fair market value of securities	1a	2,813,967.
	Average of monthly cash balances	1b	274,018.
	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	1d	3,087,985
	Reduction claimed for blockage or other factors reported on lines 1a and	, ×,	
	1c (attach detailed explanation)	(a) (c)	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,087,985.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	46,320.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,041,665.
6	Minimum investment return. Enter 5% of line 5	6	152,083.
P	foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	152,083.
2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015. (This does not include the tax from Part VI.)	- 25	
C	Add lines 2a and 2b	2c	1,785.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	150,298.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	150,298.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	150,298
P	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	141,975
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	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	141,975
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0. 141,975.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	jualifies for	the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(D) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				150,298.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only	10.10.10.10.10.10.10.10.10.10.10.10.10.1		4,430.	, , , , , , , , , , , , , , , , , , ,
b Total for prior years:				, **, *, /,
		0.		* * * * * * * * * * * * * * * * * * * *
3 Excess distributions carryover, if any, to 2015:				
a From 2010				, , , , , , , , , , , , , , , , , , ,
b From 2011				***
c From 2012				
d From 2013				,,,
e From 2014				,
f Total of lines 3a through e	0.		** ** ** ** ** ** ** ** ** ** ** ** **	t
4 Qualifying distributions for 2015 from				, ,
Part XII, line 4: ► \$ 141,975.			**************************************	* * *
a Applied to 2014, but not more than line 2a		AN THIS SITE OF	4,430.	× ,
b Applied to undistributed income of prior				*
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	_			,
(Election required - see instructions)	<u> </u>			, ,
d Applied to 2015 distributable amount	£,7 % , 7 .			137,545.
e Remaining amount distributed out of corpus	0.			,
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount	0.		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	0.
must be shown in column (a))				*
6 Enter the net total of each column as		a infa hai		* *, ` , ` , ` , ` , ` ,
indicated below:				, x
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	<u> </u>			**
b Prior years' undistributed income. Subtract				· x ** ,
line 4b from line 2b		0.	**	X
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		**************************************
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		* * *
e Undistributed income for 2014. Subtract line				, , , , , , , , , , , , , , , , , , , ,
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				12,753.
7 Amounts treated as distributions out of				<u> </u>
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010		of the same of		4 7 2 4
not applied on line 5 or line 7	0.	4.1.2.00		
9 Excess distributions carryover to 2016.			5.54 A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	# 2
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:			XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				The state of the s
e Excess from 2015	公本 经以 各 种、运文整治	Mary Company of the C		

FRERES FOUNDATION C/O FRERES LUMBER

CO.

Form 990-PF (2015)

523601 11-24-15

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling **b** Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(1)(5) Tax year Prior 3 years 2 a Enter the lesser of the adjusted net (a) 2015 (b) 2014 (c) 2013 (d) 2012 (e) Total 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 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(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 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) Support from general public and 5 or more exempt organizations as provided in section 4942(i)(3)(B)(iii) Largest amount of support from an exempt organization (4) Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) 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. 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; b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

93-6027213

Page 10

Form 990-PF (2015) C/O FRERES LUMBER CO.

93-6027213 Page 11

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation status of show any relationship to **Amount** any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year CANYON GLEANERS 1,600. CAPITAL FUTBOL CLUB 5,000. CASCADE HIGH SCHOOL 2,500. CASCADE POLICY INSTITUTE 7_500. CATHOLIC COMMUNITY SERVICES 1 000. SEE CONTINUATION SHEET(S) → 3a Total 141 975. b Approved for future payment NONE Total **▶** 3b

Part XVI-A Analysis of Income-Producing Activities

Tatas areas amounts unless atherways indicated	Unrelated	business income	Excluded	by section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	7470011	1011011011110
b					
c					
d					
e					
f					
g Fees and contracts from government agencies	<u> </u>				
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			<u> </u>		
4 Dividends and interest from securities		- ***.	14	82,703.	
5 Net rental income or (loss) from real estate:			1-19-14-1		, , , , , , , , , , , , , , , , , , ,
a Debt-financed property	<u> </u>				
b Not debt-financed property	<u> </u>				
6 Net rental income or (loss) from personal					
property 7. Other revisetment recome					
7 Other investment income 8 Gain or (loss) from sales of assets other					
than inventory			18	6,530.	
9 Net income or (loss) from special events	-	· · · · · · · · · · · · · · · · · · ·	1 - 0	0,330.	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:			1 1		
a					
b					
C					
d					
e		·			
12 Subtotal. Add columns (b), (d), and (e)	* 1 × 4 × 7	0.	2 2	89,233.	<u> </u>
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations				13	89,233.
Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which i	ncome is reported in	column (e) of Part XVI-A			Dishment of
the foundation's exempt purposes (other the	nan by providing fund	s for such purposes).			
					· · · · · · · · · · · · · · · · · · ·
			-		
			-		

Form 990-PF (2015) C/O FRERES LUMBER CO. 93-6027213

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

		Exempt Organ	izations									
1 Dic	the org	janization directly or indi	rectly engage in any o	of the following	g with an	y other organizat	tion des	scribed in section	on 501(c) of		Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?								,				
a Tra	nsfers f	from the reporting found	ation to a noncharitat	ole exempt org	ganızatıor	of:				,		
(1)	Cash									1a(1)		X
	Other	assets								1a(2)		X
		sactions:										
(1)	Sales	of assets to a noncharita	ible exempt organizati	ion						. 1b(1)		X
(2)	Purch	ases of assets from a no	ncharitable exempt o	rganization						15(2)		_X_
(3)	Renta	l of facilities, equipment,	or other assets							1b(3)		X
(4)	Reimt	oursement arrangements	i							1b(4)	L	<u> </u>
(5)	Loans	or loan guarantees								1b(5)		X
(6)	Perfor	rmance of services or me	embership or fundrais	sing solicitatio	ns					1b(6)		X
c Sh	aring of	facilities, equipment, ma	ailing lists, other asset	ts, or paid emp	ployees					10	L	X
d lf1	he answ	ver to any of the above is	"Yes," complete the f	ollowing sche	dule. Col	umn (b) should a	always :	show the fair m	arket value of the goods, o	other as	sets,	
					ed less th	an fair market va	ilue in a	iny transaction	or sharing arrangement, s	how in		
) the value of the goods,										
(a) Line i	10	(b) Amount involved	(c) Name of	noncharitable	exempt	organization	_	(d) Description	of transfers, transactions, and	sharing a	rrangeme	nts
			<u> </u>	N/A			_					
			 				-					
			 									
-		-	 									
	-		 									
	-		 					·	<u> </u>			
			 									
			 									
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			 				\dashv					
	-											
	-											
	_		<u> </u>						· · · · · · · · · · · · · · · · · · ·			
2a Is	the four	ndation directly or indirec	tly affiliated with, or r	elated to, one	or more	tax-exempt organ	nization	ns described				
ın	section	501(c) of the Code (othe	er than section 501(c)	(3)) or in sect	tion 527?	, -				Yes	X] No
b If	Yes," co	implete the following sch	nedule.		_							
		(a) Name of or	ganization		(b) Typ	e of organization			c) Description of relationsl	hip		
		N/A										
					<u> </u>							
					ļ							
	Tit		A		<u> </u>							
Sign	1	penalties of perjury, I declare elief, it is true, correct, and co						of which preparer	has any knowledge May		discuss he prepar	
Here					- 10	2-3-17		VICE	sho	wn belov	v (see ins	tr)?
	 	nature of officer or truster	Home	5		ate	_ Z	PRESII	ENT L	X Yes	s L	J No∣
	Oigi	Print/Type preparer's n		Preparer's s		ale	Date	····	Check x if PTIN			
		i jpo proparor s ii	willed				Dale	$I \cup I$	seif- employed			
Paid		BRAD BINGE	ZNHRTMRP /	BRACE	TNCE	NHEIMER	1 2	42/17	· · ·	1355	7744	
Prep		Firm's name ► BOI				H, LLC			Firm's EIN ▶ 93-0!			
_	Only	o name > DOL	, <i>wa</i> ndi	SALI G	DIT I	, DUC				<i>5 1</i> 0 6	. 1)	
	-	Firm's address > 48	30 CHURCH	ST S.E					 			
			ALEM, OR 9						Phone no. 503-70	69-2	186	

Schedule B (Form 990, 990-EZ. or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

or (ii) Form 990-EZ, line 1. Complete Parts I and II.

the prevention of cruelty to children or animals. Complete Parts I, II, and III.

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.lrs.gov/form990 .

OMB No. 1545-0047

Employer identification number

FRERES FOUNDATION 93-6027213 C/O FRERES LUMBER Organization type (check one). Filers of: Section: 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under

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

is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc.,

sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h.

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, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for

☐ 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

☐ 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

☐ 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

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any or (10) filing Form 990 or 990-EZ that received from 990-EZ that receive year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box

but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization
FRERES FOUNDATION
C/O FRERES LUMBER CO.

Employer identification number

93-6027213

			T
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FRERES TIMBER COMPANY PO BOX 276 LYONS, OR 97358	\$150,000.	Person X Payroll
(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 Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Complete Part II for noncash contributions.)
(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 Payroll Complete Part II for noncash contributions)

Name of organization
FRERES FOUNDATION
C/O FRERES LUMBER CO.

Employer identification number

93-6027213

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

		· · · · · · · · · · · · · · · · · · ·	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of organization

Employer identification number

	RERES LUMBER CO.		93-6027213			
Part III	Exclusively religious charitable, etc., cont	ributions to organizations described in	section 501(c)(7), (8), or (10) that total more than \$1,000 fo			
C	the year from any one contributor. Complete (olumns (a) through (a) and the follows	nn line entry. For organizations			
	completing Part III, enter the total of exclusively religiou Use duplicate copies of Part III if addition	s, charitable, etc., contributions of \$1,000 or le	ss for the year (Efferthis into once)			
a) No.	Ose duplicate copies of Fast III II addition	a space is needed.				
from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I						
1						
		-	_			
ŀ						
-						
		(e) Transfer of gift				
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
1			· · · · · · · · · · · · · · · · · · ·			
a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I	(b) Ful pose of gift	(c) Use of gift	(u) Description of now girt is field			
		(e) Transfer of gift				
Ì	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
Γ						
1						
a) No.						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
ļ						
ſ	(e) Transfer of gift					
1	(a) transies of But					
1	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
, t						
1						
a) No.						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
1						
}	(a) Transfer of site					
-	(e) Transfer of gift					
	Transferente name address and 7ID + 4					
	Transferee's name, address, a	ng ZIP + 4	Relationship of transferor to transferee			

Name and address (home or business) Show any restorance or substantial contributor Show any restorance or contributor Amount Show any restorance or contributor Amount Show any restorance or contributor Amount Amount Show any restorance or contributor Show any restorance or contributo	3 Grants and Contributions Paid During the				
ORESTS FOREVER, INC. OOD SAMARITAN HOSPITAL OURDES PUBLIC CHARTER SCHOOL YONS RURAL FIRE PROTECTION DISTRICT SAMI-LINN SCHOOL EALS-ON WHEELS ERAMA COMMUNITY CHURCH 17, ORTH SANTIAM SCHOOL	Recipient	If recipient is an individual, show any relationship to		Purpose of grant or contribution	Amount
OCD SAMARITAN HOSPITAL OURDES PUBLIC CHARTER SCHOOL YONS RURAL FIRE PROTECTION DISTRICT ARI-LINN SCHOOL ERAMA COMMUNITY CHURCH 17. OURTH SANTIAM SCHOOL	Name and address (home or business)	or substantial contributor			
OCD SAMARITAN HOSPITAL OUNDES PUBLIC CHARTER SCHOOL YONS RURAL FIRE PROTECTION DISTRICT ARI-LINN SCHOOL EALS-ON-WHEELS EHAMA COMMUNITY CHURCH 17. ORTH SANTIAM SCHOOL					
ORESTS POREVER, INC. 2. OOD SAMARITAN HOSPITAL 1. OURDES PUBLIC CHARTER SCHOOL YONS RURAL FIRE PROTECTION DISTRICT 5. ARI-LINN SCHOOL 2. EALS-ON-WHEELS EHAMA COMMUNITY CHURCH 17. ORTH SANTIAM SCHOOL	ITY OF MILL CITY				
OOD SAMARITAN HOSPITAL 1 OURDES PUBLIC CHARTER SCHOOL YONS RURAL FIRE PROTECTION DISTRICT 5. ARI-LINN SCHOOL LEALS-ON-WHEELS LEHAMA COMMUNITY CHURCH 17. JORTH SANTIAM SCHOOL					10,00
OOD SAMARITAN HOSPITAL 1 OURDES PUBLIC CHARTER SCHOOL YONS RURAL FIRE PROTECTION DISTRICT 5 ARI-LINN SCHOOL EALS-ON-WHEELS EHAMA COMMUNITY CHURCH 17 ORTH SANTIAM SCHOOL					İ
OURDES PUBLIC CHARTER SCHOOL YONS RURAL FIRE PROTECTION DISTRICT SARI-LINN SCHOOL EALS-ON-WHEELS EHAMA COMMUNITY CHURCH 17. ORTH SANTIAM SCHOOL	ORESTS FOREVER, INC.				2,50
OURDES PUBLIC CHARTER SCHOOL YONS RURAL FIRE PROTECTION DISTRICT 5. ARI-LINN SCHOOL 2. EALS-ON-WHEELS EHAMA COMMUNITY CHURCH 17. ORTH SANTIAM SCHOOL					
OURDES PUBLIC CHARTER SCHOOL YONS RURAL FIRE PROTECTION DISTRICT 5, MARI-LINN SCHOOL 2, MEALS-ON-WHEELS MEHAMA COMMUNITY CHURCH 17, MORTH SANTIAM SCHOOL	OOD CAMADIMAN WOCDIMAI				
YONS RURAL PIRE PROTECTION DISTRICT 5, IARRI-LINN SCHOOL 2, IEALS-ON-WHEELS IEHAMA COMMUNITY CHURCH 17, IORTH SANTIAM SCHOOL	OOD SAMARITAN HOSPITAL				1,00
YONS RURAL FIRE PROTECTION DISTRICT 5, ARRI-LINN SCHOOL 2, EALS-ON-WHEELS IEHAMA COMMUNITY CHURCH 17, ORTH SANTIAM SCHOOL					
YONS RURAL FIRE PROTECTION DISTRICT 5. IARI-LINN SCHOOL 2. IEALS-ON-WHEELS IEHAMA COMMUNITY CHURCH 17. IORTH SANTIAM SCHOOL	OURDES PUBLIC CHARTER SCHOOL				
IARI-LINN SCHOOL 2. IEALS-ON-WHEELS IEHAMA COMMUNITY CHURCH 17. IORTH SANTIAM SCHOOL					22
IARI-LINN SCHOOL 2. IEALS-ON-WHEELS IEHAMA COMMUNITY CHURCH 17. IORTH SANTIAM SCHOOL					
DREGON SOCIETY OF A	LYONS RURAL FIRE PROTECTION DISTRICT				5,50
DREGON SOCIETY OF A					
DREGON SOCIETY OF A	MARI-LINN SCHOOL				
DEHAMA COMMUNITY CHURCH 17. FORTH SANTIAM SCHOOL DREGON SOCIETY OF A					2,00
DEHAMA COMMUNITY CHURCH 17. FORTH SANTIAM SCHOOL DREGON SOCIETY OF A					
OREGON SOCIETY OF A	MEALS-ON-WHEELS				25
OREGON SOCIETY OF A					
OREGON SOCIETY OF A	MEHAMA COMMUNITY CHURCH				
DREGON SOCIETY OF A					17,00
DREGON SOCIETY OF A					
DREGON SOCIETY OF A	NORTH SANTIAM SCHOOL				30
			 -		
	DREGON SOCIETY OF A				
				<u></u>	50 124_37

Part XV **Supplementary Information** 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or Foundation **Amount** status of contribution Name and address (home or business) recipient OREGON STATE UNIVERSITY 10,250, OUR LADY OF LOURDES SCHOOL 250. REGIS FOUNDATION 50,000. SALEM FIRE FOUNDATION 500. SANTIAM CANYON SCHOOL 500. SCIO PUBLIC LIBRARY 100, ST. MARY CATHOLIC SCHOOL 500. STAYTON MIDDLE & INTERMEDIATE SCHOOL 250. STAYTON PUBLIC LIBRARY 500, SUBLIMITY PARENT TEACHERS CLUB 5,250. Total from continuation sheets

Part XV Supplementary Information	<u> </u>			 _
3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
THE GRAVENTON ADMI				
THE SALVATION ARMY		i		1,000
WESTERN RESOURCES				7 500
				7,500
]
WORLD FORESTRY CENTER				
······				1,000
YOUNG ENTREPRENEURS				
		:		7,500
				<u></u>
				}
]
				(
				
				}
				
				}
Total from continuation sheets	<u> </u>	<u></u>		

FORM 990-PF	DIVIDENDS	AND INTER	EST FROM SECUR	ITIES ST	ATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE S PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
WEST COAST TRUST	82,703	. (0. 82,703.	82,703.	
TO PART I, LINE 4	82,703	. (82,703.	82,703.	
FORM 990-PF	O'.	THER PROFES	SIONAL FEES	នា	CATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
WEST COAST BANK		12,056.	0.		0.
TO FORM 990-PF, PG 1	, LN 16C	12,056.	0.		0.
FORM 990-PF		TAX	ES	នា	PATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DEPT OF JUSTICE FEDERAL TAXES		398. <1,486.) · 0.		0.
TO FORM 990-PF, PG 1	., LN 18	<1,088.	> 0.		0.
FORM 990-PF		OTHER E	XPENSES	Si	CATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
CORP LICENSE	-	50.	0.		0.
TO FORM 990-PF, PG 1	., LN 23	50.	0.		0.

FORM 990-PF OTHER	INVESTMENTS		STATEMENT	5
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	!
WEST COAST BANK	FMV	2,855,388.	2,966,23	34.
TOTAL TO FORM 990-PF, PART II, LINE 1	.3	2,855,388.	2,966,23	34.