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Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052

Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Department of the Treasury ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection For calendar year 2016 or tax year beginning , and ending Name of foundation A Employer identification number 47-1685714 THE KOMAL FOUNDATION Number and street (or P.O. box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 706 NW CULPEPPER TERRACE 503-222-5322 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here PORTLAND OR 97210 G Check all that apply Initial return Initial return of a former public charity 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the Address change Name change 85% test, check here and attach computation Check type of organization. X Section 501(c)(3) exempt private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation I Fair market value of all assets at J Accounting method X Cash If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col (c), Other (specify) 2,651,717 Ine 16) ▶ \$ (Part I, column (d) must be on cash basis) (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per income income pumoses the amounts in column (a) (see instructions)) books (cash basis only) 1 Contributions, gifts, grants, etc., received (attach schedule) Check ▶ X if the foundation is **not** required to attach Sch B 2 3 Interest on savings and temporary cash investments 28,184 28,184 Dividends and interest from securities 38,588 38,588 Gross rents Net rental income or (loss) 50,693 Net gain or (loss) from sale of assets not on line 10 774,797 Gross sales price for all assets on line 6a 50,693 Capital gain net income (from Part IV, line 2) Net short-term capital gain 8 9 Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) Stmt 1 128 128 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 117,593 117,593 0 13 Compensation of officers, directors, trustees, etc. n Operating and Administrative Expenses Other employee salaries and wages 14 Pension plans, employee benefits 15 SCANNED MAY 2 4 2017 Legal fees (attach schedule) See Stmt 5,532 2,766 16a 2,766 Accounting fees (attach schedule) Stat 9 2,725 1,362 1,363 21,320 Stmt 21,320 Other professional fees (attach schedule) Interest Taxes (attach schedule) (see instructions) 18 1,583 621 509 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications Stmt 6 23 Other expenses (att. sch.) 625 625 Total operating and administrative expenses. 31,785 Add lines 13 through 23 26,069 0 5,263 25 Contributions, gifts, grants paid 98,503 98,503 26 Total expenses and disbursements. Add lines 24 and 25 130,288 26,069 0 103,766 27 Subtract line 26 from line 12. Excess of revenue over expenses and disbursements -12,695 Net investment income (if negative, enter -0-) 91,524

For Paperwork Reduction Act Notice, see instructions.

Adjusted net income (if negative, enter -0-)

Form 990-PF (2016);

3 67 2,576,031 4 5 6 2,576,031

2

Form 990-PF (2016)

2,588,659

-12,695

end-of-year figure reported on prior year's return)

5 Decreases not included in line 2 (itemize) ▶

3 Other increases not included in line 2 (itemize) ▶ See Statement 10

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

2 Enter amount from Part I, line 27a

4 Add lines 1, 2, and 3

Part IV Capital Gains a	nd Losses for Tax on Investme	ent Income				
	ribe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 sns. MLC Co.)		(b) How acquired P = Purchase D = Donation	(c) Date a (mo , da		(d) Date sold (mo_day, yr.)
1a See Worksheet						
_ b						
<u>c</u>			}			
_d			 	 		
<u>e</u>	(f) Depreciation allowed	In) Cost or	other basis	 	(b) Cara	
(e) Gross sales price	(or allowable)		nse of sale	ļ		or (loss)) minus (g)
a						
_b			· · · · · · · · · · · · · · · · · · ·	L		
С						
<u>d</u>						
Complete only for assets showing	g gain in column (h) and owned by the fo	oundation on 12/31/6	 69			
(i) F M V as of 12/31/69	(J) Adjusted basis as of 12/31/69	(k) Exces	s of col (i) (j), if any		(k), but not	(h) gain minus less than -0-) or om col (h))
a						
<u>b</u>				 		
<u>c</u>				 		
e				 		
2 Capital gain net income or (net ca	apital loss) If gain, also enter in If (loss), enter -0- in			2		50,693
If gain, also enter in Part I, line 8,	ss) as defined in sections 1222(5) and (6, column (c) (see instructions). If (loss), e) _				
Part V Qualification Ur	nder Section 4940(e) for Reduc	od Toy on Not	Investment Ince	3		32,548
	foundations subject to the section 4940)IIIe		
If section 4940(d)(2) applies, leave th		(4) 143 511 1151 117551	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	tion 4942 tax on the distributable amountify under section 4940(e). Do not complete	• •	pase period?		····	Yes X No
	each column for each year, see the instri	uctions before makin	ng any entries			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value	(c) of noncharitable-use asse	its		(d) ribution ratio divided by col (c))
2015	15	,810	2,295,	315		0.006888
2014						
2013 2012					~~~~	
2012						
					T	
2 Total of line 1, column (d)				2	1	0.006888
_	5-year base period – divide the total on l			- [
number of years the foundation h	as been in existence if less than 5 years	•		3_	 	0.006888
4 Enter the net value of noncharital	ble-use assets for 2016 from Part X, line	5		4	 	2,497,647
5 Multiply line 4 by line 3				5	ļ	17,204
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)			6		915
7 Add lines 5 and 6				7	-	18,119
8 Enter qualifying distributions from	n Part XII, line 4 n line 7, check the box in Part VI, line 1b	and complete that	nart using a 104 tow	8 see th		103,766
Part VI instructions						

	 	685714				<u>P</u>	age 4	
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	 ,			
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A"	on line 1		·			٠,	
	Date of ruling or determination letter. (attach copy of letter if necessary—se	e instructions)					·	
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check	• •	_1_				<u>915</u>	
	here ▶ X and enter 1% of Part I, line 27b		8.		•	٠.	,	
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of	إ لـ	. :	, 4.	,		`,	
	Part I, line 12, col. (b).							
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others en	ter -0-)	2				0	
3	Add lines 1 and 2	_	3	L			915	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others en	ter -0-)	4				0	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5				915	
6	Credits/Payments.		J. 6				જેવારે	
а	2016 estimated tax payments and 2015 overpayment credited to 2016		15/15	7 5		Y 7		
Þ	Exempt foreign organizations – tax withheld at source 6b		ر د ر د	1, 2		• ,		
C	Tax paid with application for extension of time to file (Form 8868) 6c		``,	13 28	1	, ,		
đ	Backup withholding erroneously withheld 6d		1	1 1		<i>``</i>		
7	Total credits and payments Add lines 6a through 6d		7_					
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	ļ	8				<u> 14</u>	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶]	9				929	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶	10					
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶	Refunded ▶	11					
Pa	art VII-A Statements Regarding Activities			·	, ,			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation of	r did it				Yes	No	
	participate or intervene in any political campaign?				1a		X	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see							
	Instructions for the definition)?				16		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any m	atenals						
	published or distributed by the foundation in connection with the activities					1		
С	Did the foundation file Form 1120-POL for this year?				1c		X	
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					;		
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$		_			į		
8	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax	imposed				•		
	on foundation managers > \$							
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		<u> X</u>	
	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 instrume	•						
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the char	nges			3		<u> </u>	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			· .	4a		<u> </u>	
b	If "Yes," has it filed a tax return on Form 990-T for this year?			N/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.							
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 directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that no mandatory directively amends the governing instrument so that it is not a second to the governing instrument so that it is not a second to the governing instrument so the g	ons that						
_	conflict with the state law remain in the governing instrument?				6	X		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Pe	art II, col (c), and Par	tXV		7	X		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) OR					1		
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney	Conoral				3		
J	(or designate) of each state as required by General Instruction G? If "No," attach explanation	Schelai						
9	Is the foundation claiming status as a private operating foundation within the meaning of section 49	42(i)(2) or			8b	<u> X</u>		
•	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XI)	•. , ,				:		
	complete Part XIV	vj: II 185,					v	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule lis	ting their			9_		<u> </u>	
	names and addresses	ang aren			10		x	
		 			om 99	0-PF		
							(4010)	

P	art VII-A Statements Regarding Activities (continued)			
	,		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	1		
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			1
	person had advisory privileges? If "Yes." attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	Ĺ
	Website address ► N/A	_		
14	The books are in care of ▶ GAINOR ARZT Telephone no ▶ 503-2	222 -	532	2
	706 CULPEPPER TER	_		
	Located at ▶ PORTLAND OR ZIP+4 ▶ 9721	0		-
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here			▶ [_]
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority	لسيم	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	ــــبـــــــــــــــــــــــــــــــــ	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of		-	ĺ
	the foreign country ▶	┸		
Pa	art 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?			ĺ
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			1
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		-	
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.) Yes X No			
Þ	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		•	ĺ
	· · · · · · · · · · · · · · · · · · ·	1b		
_	Organizations relying on a current notice regarding disaster assistance check here Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
С	were not corrected before the first day of the tax year beginning in 2016? N/A	1c	1	İ
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	10		
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		1	
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and			ĺ
_	6e, Part XIII) for tax year(s) beginning before 2016?			
	if "Yes," list the years ▶ 20 , 20 , 20 , 20			ĺ
b	Are there any years listed in 2a for which the foundation is not 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		1	
	all years listed, answer "No" and attach statement – see instructions) N/A	2b	Ì.,	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	▶ 20 , 20 , 20			ĺ
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2016 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			1
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			1
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			1
	foundation had excess business holdings in 2016) N/A	3b	<u> </u>	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	X
þ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			1
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016? N/A		1	<u></u>
		Form 99	50-PI	(2016)

Forn	, n 990-PF (2016) THE KOMAL FC	UNDATION	47-1	685714			Page 6			
P	art VII-B Statements Regardi	ng Activities for Which Fo	rm 4720 May Be R	equired (cont	inued)					
5a	During the year did the foundation pay or	incur any amount to:			_					
	(1) Carry on propaganda, or otherwise a	ttempt to influence legislation (sec	tion 4945(e))?	\	res X No	1 1				
	(2) Influence the outcome of any specific	public election (see section 4955), or to carry on,		_	. 4				
	directly or indirectly, any voter registr	ation drive?		\ <u></u>	res 🗓 No	1				
	(3) Provide a grant to an individual for tra	evel, study, or other similar purpos	es?		res X No	1 1				
	(4) Provide a grant to an organization of	ner than a charitable, etc., organiz	ation described in			1	5			
	section 4945(d)(4)(A)? (see instruction	ons)			res 🗓 No	1 4	·			
	(5) Provide for any purpose other than re	eligious, charitable, scientific, litera	iry, or educational			18				
	purposes, or for the prevention of cru	elty to children or animals?			Yes X No					
b	If any answer is "Yes" to 5a(1)-(5), did a	ny of the transactions fail to qualify	under the exceptions d	escribed in		5 (V)				
	Regulations section 53 4945 or in a curre				N/A	5b				
	Organizations relying on a current notice	regarding disaster assistance che	ck here		▶ 🗍	137	<u> </u>			
c	If the answer is "Yes" to question 5a(4), of	loes the foundation claim exemption	on from the tax		<u></u>					
	because it maintained expenditure respo	nsibility for the grant?		N/A 🗍	res No	1	31			
	If "Yes," attach the statement required by	Regulations section 53 4945-5(d)	_	_	1 1				
6a	Did the foundation, during the year, recei	ve any funds, directly or indirectly,	to pay premiums				` /			
	on a personal benefit contract?				res X No		<u> </u>			
ь	Did the foundation, during the year, pay i	premiums, directly or indirectly, on	a personal benefit contr	act?		6b	x			
	If "Yes" to 6b, file Form 8870	•	·							
7a	At any time during the tax year, was the	oundation a party to a prohibited t	ax shelter transaction?		res X No					
	If "Yes," did the foundation receive any p			tion?	N/A	76				
Pi	art VIII Information About Of	icers, Directors, Trustees	, Foundation Mana	agers, Highly	Paid Employ	ees,				
	and Contractors					•				
1 1	List all officers, directors, trustees, four	dation managers and their com	pensation (see instruc	tions).						
	(a) Name and a	ddress	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		ense account, ratiowances			
G	INOR ARZT	PORTLAND	CHAIR			 				
	O6 NW CULPEPPER TER	OR 97210	0.00	o	,	,J	0			
	NOTT WESSINGER	SAN FRANCISCO	SECRETARY/TR	<u>~</u>	·	1				
	50 MONTGOMERY ST SUITE 108	CA 94111	0.00	0		J	0			
	D WESSINGER	KIRKLAND	VICE CHAIR	<u>`</u>	·	 	×			
	005 LAKEVIEW DR. NE	WA 98033	0.00	o		,	0			
	O MARIOVEDIN D.K. NO.				·	 	<u>~</u>			
						1				
2	Compensation of five highest-paid em "NONE."	ployees (other than those include	ded on line 1 – see inst	tructions). If non	e, enter					
	(a) Name and address of each employee p	aid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		ense account, r allowances			
NO	ONE									
							 			
						-				
						 				
Tota	Il number of other employees paid over \$5	0.000					0			
100	in transport of outlot employees paid over 40	·,~~~				1	U			

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Part VIII	Information About Officers, Directors, Trustees, Found Contractors (continued)	oundation Managers, Highly Paid E	mployees,
3 Five high	est-paid independent contractors for professional services (see i	nstructions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50 000	(b) Type of service	(c) Compensation
NONE			
Total number of	others receiving over \$50,000 for professional services		
Part IX-A	Summary of Direct Charitable Activities		
	s four largest direct charitable activities during the tax year. Include relevant statistical infom ther beneficiaries served, conferences convened, research papers produced, etc.	nation such as the number of	Expenses
1 N/A			
			
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see in	note (stinns)	<u> </u>
	rgest program-related investments made by the foundation during the tax year on lines 1 and	~ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Amount
1 N/A		· · · · · · · · · · · · · · · · · · ·	Amount
•			
2		······································	
· -	elated investments. See instructions		
3			1
			1
Total. Add lines	1 through 3		<u> </u>

Form 990-PF (2016)

qualifies for the section 4940(e) reduction of tax in those years

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	art X Minimum Investment Return (All domestic foundations must complete this part Forei	gn foun	
	see instructions.)		•
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes	-	
а	Average monthly fair market value of securities	1a	2,483,612
b	Average of monthly cash balances	1b	52,070
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	2,535,682
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	2,535,682
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	38,035
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	2,497,647
6	Minimum investment return. Enter 5% of line 5	6	124,882
Pi	Tri XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	founda	
	and certain foreign organizations check here ▶ and do not complete this part.)	•	
1	Minimum investment return from Part X, line 6	1	124,882
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016 (This does not include the tax from Part VI)]]	
С	Add lines 2a and 2b	2c	915
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	123,967
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	123,967
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	123,967
	- A Will Overlife in a Distantant land (and materials)		
P*	Qualifying Distributions (see Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	_1a	103,766
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	103,766
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	915
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	102,851
	Note: The amount on line 6 will be used in Part V. column (b) in subsequent years when calculating whether the found	tation	

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	art XIII · Undistributed Income)			
1	. Distributable amount for 2016 from Part XI		(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
•	line 7	'•				123,967
2	Undistributed income, if any, as of the end	l of 2016 ⁻	>	,		,
а	Enter amount for 2015 only				98,503	, , , , , , , , , , , , , , , , , , , ,
	Total for prior years 20 20	. 20				1 2 1 1 1 1
3	Excess distributions carryover, if any, to 2			J47 J43 J	34 1 1 2 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
a			1997			
b	From 2012	······································				114 18 18 18
c	From 2013					St. Darther
d	From 2014					
e	From 2015					
f	Total of lines 3a through e		V	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	(1 (1 (1 (1 (1 (1 (1 (1 (1 (1	
4	Qualifying distributions for 2016 from Part	XII	> / · · · · · · · · · · · · · · · · · ·	K Christ,	रक्ष चित्रम्य असेर	3 17 7 13 13 13
-	line 4 > \$ 103,766	,				
а	Applied to 2015, but not more than line 2a	:		. , ,	98,503	
	Applied to undistributed income of prior ye					. /
_	(Election required – see instructions)]		
c	Treated as distributions out of corpus (Elec	ction				·····
·	required – see instructions)			,		
d	Applied to 2016 distributable amount					5,263
e	Remaining amount distributed out of corpu	ıs	······································			
5	Excess distributions carryover applied to 2					
•	(If an amount appears in column (d), the sa		-,,			
	amount must be shown in column (a))					
6	Enter the net total of each column as				!	
•	indicated below:					`
а	Corpus Add lines 3f, 4c, and 4e Subtract	line 5				•
	Prior years' undistributed income Subtract					
	line 4b from line 2b					
С	Enter the amount of prior years' undistribut	ted				
	income for which a notice of deficiency has					`
	been issued, or on which the section 4942		,		,	
	tax has been previously assessed					,
d	Subtract line 6c from line 6b Taxable					
	amount - see instructions		<u> </u>			
e	Undistributed income for 2015 Subtract lin	ne				,
	4a from line 2a Taxable amount - see	i				
	instructions					,
f	Undistributed income for 2016 Subtract lin	ies				
	4d and 5 from line 1. This amount must be					
	distributed in 2017	į				118,704
7	Amounts treated as distributions out of cor	pus				
	to satisfy requirements imposed by section	1				`
	170(b)(1)(F) or 4942(g)(3) (Election may be	e !				
	required—see instructions)			,		
8	Excess distributions carryover from 2011 n	ot				}
	applied on line 5 or line 7 (see instructions))				
9	Excess distributions carryover to 2017.					,
	Subtract lines 7 and 8 from line 6a					
10	Analysis of line 9					
а	Excess from 2012					
b	Excess from 2013		:			:
C	Excess from 2014					}
d	Excess from 2015					
_ e_	Excess from 2016			<u> </u>		

Pa	rt XIV Private Operating Fou	indations (see in	structions and Pa	rt VII-A, question 9))	
1a	If the foundation has received a ruling or	determination letter th	at it is a private opera	ting		
	foundation, and the ruling is effective for	2016, enter the date o	f the ruling	•		
ь	Check box to indicate whether the foundation			bed in section 49	42(j)(3) or 4942	?(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
20	income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
		(4) 20 10	(3,23.0	(0,2011	<u> </u>	
	investment return from Part X for			İ	į	
	each year listed	 		 		
Ь	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					
đ	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				1	
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
2	"Assets" alternative test - enter			1	ļ	
a	(1) Value of all assets				1	
	• •		 	 		
	(2) Value of assets qualifying under					
_	section 4942(j)(3)(B)(i)					
þ	"Endowment" alternative test – enter 2/3					
	of minimum investment return shown in		1		1	
	Part X, line 6 for each year listed					
C	"Support" alternative test – enter					
	(1) Total support other than gross				1	
	investment income (interest,					
	dividends, rents, payments on			<u> </u>		
	securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization	,		l		
	(4) Gross investment income					
Da	rt XV Supplementary Inform	nation (Complete	this part only if	the foundation h	ad \$5 000 or more	in accete at
	any time during the ye			the loundation in	au 40,000 or more	in assets at
1	Information Regarding Foundation Ma					
a	List any managers of the foundation who		e than 2% of the total	contributions received	by the foundation	
•	before the close of any tax year (but only				*	
	N/A	andy make continuate	more man \$5,000)	(See Section 307(d)(2)	,	
b	List any managers of the foundation who	own 10% or more of t	he stock of a comprat	ion for an equally large	nortion of the	
	ownership of a partnership or other entity		·		portion of the	
	N/A	, or willow the roundall	ioninasa 1076 Ur grea	HELESE		
		Cont Cift Lana Cata	olombia cta Da			
2	Information Regarding Contribution, G					
				ble organizations and d		
	unsolicited requests for funds. If the foun	• • •	ants, etc (see instruct	ions) to individuals or o	organizations under	
	other conditions, complete items 2a, b, c					
а	The name, address, and telephone numb	er or e-mail address o	of the person to whom	applications should be	addressed	
	GAINOR ARZT					
	706 NW CULPEPPER TER	RACE, PORTI	LAND, OR 97	210		
b	The form in which applications should be	submitted and informa	ation and materials the	ey should include		
	See Statement 11		· · · · · · · · · · · · · · · · · · ·			
С	Any submission deadlines.					
	N/A					
d	Any restrictions or limitations on awards,	such as by geographic	cal areas, charitable fi	elds, kinds of institution	ns, or other	
	factors	-				
	See Statement 12					
						000 DE

Part XV . Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual Foundation Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year LEGACY HEALTH FOUNDATION 1919 NW LOVEJOY ST NONE PUBLIC PORTLAND OR 97209 **HUMAN SERVICE** 35,000 OHSU FOUNDATION 1121 SW SALMON ST #200 NONE PUBLIC PORTLAND OR 97205 HUMAN SERVICE 30,000 RANDALL'S CHILDREN HOSPITAL FOUND 2801 N GANTENBEIN AVE NONE PUBLIC PORTLAND OR 97227 HUMAN SERVICE 20,000 PROVIDENCE SEASIDE HOSPITAL 725 S WAHANNA RD NONE PUBLIC SEASIDE OR 97138 HUMAN SERVICE 13,503 Total **▶** 3a 98,503 b Approved for future payment N/A Total ▶ 3b

Part	XVI-A	 Analysis of Income-Producing Ac 	ctivities	 			
Enter gr	oss amo	unts unless otherwise indicated.	Unrelate	ed business income	Exclude	d by section 512, 513, or 514	(•)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
		vice revenue	}	\ 	 		(See instructions.)
a			- }				
۰_			-				
° –			-				
				<u> </u>		 	
			- }	 			
f			-		+		
_		d contracts from government agencies	 		+		
		dues and assessments			14	28,184	
		avings and temporary cash investments in interest from securities	 		14	38,588	
		come or (loss) from real estate	1 3 3 4 T		1-3		3, , , ,
		anced property					
		-financed property			+		
		come or (loss) from personal property			+		
		ment income			14	128	
		from sales of assets other than inventory			14	50,693	
		or (loss) from special events			1==		
		or (loss) from sales of inventory					
		ue`a					
12 Sub	total. Ad	d columns (b), (d), and (e)			ol .	117,593	0
13 Tota	il. Add lii	ne 12, columns (b), (d), and (e)				13	117,593
		n line 13 instructions to verify calculations)					· · · · · · · · · · · · · · · · · · ·
Part	XVI-B	Relationship of Activities to the A					
Line		Explain below how each activity for which incom					
V		accomplishment of the foundation's exempt purp	poses (other than	by providing funds f	or such p	urposes) (See instructi	ons)
<u> N/</u>	<u> </u>			····			
				 			
		 					
							
			 -				
							
							
							
		······································					
							
						 	
	T						
]						
						·	
]						
							
		 					
							

orm 99	U-PF (201	6) THE KUMAI	T L COM	DATION		4/-1002/1	L 72			Pag	<u>ge 13</u>
Part 2			_	ransfers To an	d Transactio	ns and Relationships	With	Noncharitat	ole		
1 D		Exempt Organiza		acous any of the fall	lowego with one o	ther organization described			Ţ	Yes	No
						ction 527, relating to politica				163	100
	ganization		or man sect	1011 301(0)(3) 019811	zations, or in se	ction 327, relating to politica				-	
		om the reporting found	lation to a n	oncharitable evemi	nt organization o	! -					
	Cash	on the reporting round	iation to a n	iononamable exemp	or organization o				12/11) [*]	Y
	Other as	cote							1a(1)		X
	her transa								1a(2)	-	-
		assets to a noncharit	ahla avemn	t organization		•			15(1)	1 1	x
٠,		es of assets from a no	-	•	22				1b(1) 1b(2)		X
		of facilities, equipment,			Jii				1b(3)		X
		rsement arrangements		55615					1b(4)		X
• •		r loan guarantees	•						1b(5)		X
		ance of services or mi	embershin r	or fundraising solici	lations				1b(6)		X
٠,		acilities, equipment, m	•						1c	1	X
	•		•	•	• •	nn (b) should always show t	the fair i	market	<u> </u>	لـــــا	
		•				the foundation received less					
		-		= -	=	the goods, other assets, or					
	ne no	(b) Amount involved		ne of nonchantable exemp		(d) Description of transf			arrangeme	ents	
N/A											
.,,											
							· · · ·				
											
2a is	he founda	ation directly or indirec	tly affiliated	with, or related to,	one or more tax	exempt organizations					
de	scribed in	section 501(c) of the	Code (other	r than section 501(c	c)(3)) or in sectio	n 527?			Y	es X	No
b If"	Yes," com	nplete the following sc	hedule	- 							
) Name of organization		(b) Type of o	rganization	D (a)	Description	of relationship			
N/.	<u>A</u>										
											
											
											
			 	<u> </u>		<u> </u>					
1						edules and statements, and to the bo which preparer has any knowledge	est of my	knowledge and belie	a, a is true	e,	
. 1								May the IRS dis			- 1
Sign		<u> </u>	_	λ				(see instructions		Yes	No
lere	` ′	Sain	MA	4	سو ا	700/171				<u> </u>	
ł		at unit of officer or to rate	1 Dr X	4		11211 (D = CI	HAIR				
1	, -	sturfer of officer or trustee			Date	- P 1016					
	Print/Tyl	pe preparer's name	,		Preparer's signatur		n_	Date		Check	
Paid	Carmi	ACE J. DUNBAR			can	dau J Dun	10y	- - /-	0/1-	1	nployed
repare	,	71.55	BD G	EIBERT, PO	OLLARD &	CO TTC	- i -		8/17		
Jse Only	y Firm's n			enship Rd					0286		
	Firm's 8			OR 9706		1 30	<u> </u> -		-062		

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212567 05/08/2017 1 41 PM Capital Gains and Losses for Tax on Investment Income 990-PF 2016 For calendar year 2016, or tax year beginning and ending **Employer Identification Number** Name 47-1685714 THE KOMAL FOUNDATION (b) How acquired P-Purchase D-Donation (C) Date acquired (a) List and describe the kind(s) of property so'd, e.g., real estate, 2-story brick warehouse, or common stock 200 shs. MLC Co. (d) Date so'd (mo, day yr) (mo , day, yr) 10/31/16 12/19/16 42.2 SHS ADIENT PLC P (1)905 SHS ALLEGHENY TECH INC P Various 03/10/16 (2)01/22/16 11/15/16 45 SHS AMERICAN EXPRESS CO P (3)1225 SHS BG GROUP PLC P 03/10/15 03/07/16 (4)175 SHS CHUBB CORPORATION P 02/25/15 01/19/16 (5)105.3325 SHS CHUBB LTD P 01/19/16 04/12/16 (6)01/22/16 SHS COGNIZANT TECH SOLU P Various (7)EMC CORP MASS P 10/21/15 09/07/16 535 SHS (8) 525 SHS HARLEY DAVIDSON INC P Various Various (9) 09/06/16 0.0285 SHS JOHNSON CTLS INTL P 09/07/16 (10)320 SHS KEYCORP INC P 03/14/16 11/07/16 (11)635 SHS KEYSIGHT TECH INC P Various 12/02/16 (12)02/12/15 225 SHS MCDONALDS CORP P 01/25/16 (13)06/24/16 215 SHS MORGAN STANLEY P 12/05/16 (14)03/06/15 06/02/16 345 SHS AGCO CORP P (f) Depreciation allowed (or allowable) (e) Gross sales price (h) Gain of (loss)
(e) plus (f) minus (g) (g) Cost or other basis plus expense of sale 2,223 1,966 257 (1) 14,239 16,251 -2,012 (2)3,226 2,482 744 (3)18,611 15,988 2,623 (4) 22,707 17,572 5,135 (5) 807 12,501 11,694 (6) 16,375 16,608 -233 (7)12,867 11,168 1,699 (8) 27,351 21,307 6,044 (9)(10)4,634 3,594 1,040 (11)22,486 15,266 7,220 (12)21,436 26,991 5,555 (13)8,991 5,319 3,672 (14)17,962 1,088 (15)16,874 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) OF Losses (from col. (h)) (j) Adjusted basis as of 12/31/69 (i) FMV as of 12/31/69 (k) Excess of col (i) over col (j), if any 257 (1) -2,012 (2)<u>(3)</u> 744 2,623 <u>(4)</u> <u>(5)</u> 5,135 (6) 807 -233 (7)(8) 1,699 6,044 (9)

1,040

7,220 5,555

3,672

1,088

(9)

(10)

(11)(12)

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(14)

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212567 05/06/2017 1 41 PM Capital Gains and Losses for Tax on Investment Income Form 990-PF 2016 For calendar year 2016, or tax year beginning and ending **Employer Identification Number** Name THE KOMAL FOUNDATION 47-1685714 (b) (C) Date acquired (mo , day, yr) How acquired P-Purchase (d) Date sold (mo , day, yr) (a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co. D-Donation P 02/18/15 12/19/16 40 SHS AETNA INC (1)P 35 AMGEN INCORPORATED 02/02/15 09/23/16 SHS (2)09/19/16 P 540 SHS ARCHER DANIELS Various (3)P 02/15/15 12/21/16 215 SHS AVNET INC (4) 590 SHS BWX TECHNOLOGIES P 02/12/15 08/03/16 (5) 295 SHS BABCOCK & WILCOX ENT P 02/12/15 03/02/16 (6)02/25/15 03/02/16 \$30K BAXTER INTERNATIONSL P (7)SHS BECTON DICKINSON & CO P 03/25/15 10/12/16 120 (8) 500 SHS BED BATH & BEYOND P Various 09/29/16 (9) 385 SHS CONOCOPHILLIPS P Various Various (10)0.7583 SHS DELL TECHNOLOGIES P 02/12/15 09/08/16 (11)1320 SHS EMC CORP P Various 09/07/16 (12)02/12/15 530 SHS GENERAL ELECTRIC CO P 09/23/16 (13)P 02/12/15 09/19/16 495 SHS INTEL (14)P ISHARES RUSSELL 2000 02/18/15 08/03/16 SHS 140 (e) Gross sales price (g) Cost or other basis plus expense of sale (h) Gain or (loss) (e) plus (f) minus (g) (f) Depreciation allowed (or allowable) 4,995 3,842 1,153 (1) 5,349 769 6,118 (2)22,907 25,724 -2,817 (3)10,507 9,617 890 (4) 21,842 12,498 9,344 (5) 5,604 4,662 942 (6)30,143 30,007 136 (7)20,836 17,175 3,661 (8) 21,278 38,541 -17,263 (9) 16,632 26,197 -9,565 (10)38 36 (11)31,746 30,002 1,744 (12)15,864 13,211 2,653 (13)18,390 16,868 1,522 (14)16,803 17,037 (15)-234 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) OF Losses (from col. (h)) (j) Adjusted basis as of 12/31/69 (k) Excess of col (i) over col (j), if any (i) FMV as of 12/31/69 1,153 (1) 769 (2)-2,817 (3) (4)890 9,344 <u>(5)</u> 942 (6) 136 (7) 3,661 (8)

-17,263

-9,565

1,744 2,653

1,522

-234

2

	Comital Colon and Lane	oo for Tow on Invest			
Form 990-PF	Capital Gains and Loss dar year 2016 or tax year beginning		ment Inco	ome	2016
Name	dai year 2010 di tax year beginning	<u>.</u> 2	no enoing	Employer Ider	ntification Number
	7.1 1			45 1605	71
THE KOMAL FOUNDA		(6)	low acquired	47-1685	
(a) List end descrit 2-story brick wa	pe the kind(s) of property sold, e.g., real estate, arehouse, or common stock, 200 shs. MLC Co	\ '-' i	-Purchase -Donation	(C) Date acquired (mo , day, yr)	(d) Date sold (mo day yr)
1) 65 SHS JOHNSON	& JOHNSON		P	07/07/15	09/23/16
2) 505 SHS JOHNSON				Various_	09/06/16
(3) 100 SHS JPMORG				02/12/15 02/24/15	12/19/16
	DIA NATIONAL CO	•		Various	05/03/16
6) 140 SHS MCDONA				Various	11/15/16
(7) 580 SHS MICROS				Various	Various
	STANLEY			Various	Various
(9) 225 SHS NESTLE (10) 270 SHS NEWMON	r MINING CORP			02/12/15 04/23/15	11/15/16
(10) 270 SHS NEWMON (11) 470 SHS PFIZER		·		02/12/15	10/28/16
(12) 825 SHS TRIMBLE				08/18/15	11/29/16
	OUTFITTERS			Various	Various
	N UNION CO			02/12/15	08/04/16
(15) 960 SHS WEYERH	AEUSER CO		<u>P</u>	Various	04/12/16
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sele	T	(h) Gain (e) plus (f)	or (loss) minus (a)
7,723		6,3	168		1,355
22,166		24,6			-2,469
(3) 8,489		5,9			2,540
(4) 26,719 24,178	 	26,0			670 10,138
(5) 24,178 (6) 16,469		13,2			3,215
36,530		25,0			11,473
(8) 18,219		16,7			1,464
(9) 15,410		17,0			-1,671
(10) 10,095 (11) 15,042	}	6,2			3,885 -1,355
(11) 15,042 (12) 23,423	 	16,5			6,913
(13) 27,817		27,5			237
(14) 19,231		17,0			2,185
(15) 30,282	1	26,0	45		4,237
Complete only for assets showing	ng gain in column (h) and owned by the	he foundation on 12/31/69			
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		(i) Gains (Co col (k), but not les Losses (from	
1)					1,355
(2) (3)					-2,469 2,540
(4)					670
(5)					10,138
(6)					3,215
(7) (8)	 				11,473
9)					-1,671
(10)					3,885
11)					-1,355
(12)	 				6,913
(13) (14)	 				237 2,185
(15)	 			· · · · · · · · · · · · · · · · · · · 	4,237

Form 990-PF		apital Gains and Loss	es for Tax on Ir		come	2016
Name	ror calend	ar year 2016, or tax year beginning		, and ending	Employer Ide	ntification Number
THE KOMAL I	OUNDAT	ION		· ya	47-1685	714
(a)	List and describe 2-story brick war	e the kind(s) of property sold, e.g., real estate, ehouse or common stock, 200 shs. MLC Co		(b) How acquired P-Purchase D-Donation	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
(1) 100 SHS 3	M COMP	ANY		P	Various	12/14/16
(2) BLACKSTON				P	Various	Various
(3) BLACKSTON	IE			P	Various	Various
(4) SCHWAB		······		 		
(5)				 	 	
(6) (7)		 		 	 	
(8)				 	 	
(9)				 		
(10)						
(11)						
(12)						
(13)		 		 	 	_
(14)					 	ļ
(15)				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>	L
(e) Gross sales pric	₂₀	(f) Depreciation allowed	(a) Cost or of	her basis	(h) Gain	or (loss)
		(or allowable)	(g) Cost or of plus expense		(e) plus (f) minus (g)
(1) 17,				16,557		1,148
	133				 	133
(3)	298			3	 	-3
,	490					298
(5) (6)				 	 	
(7)					1	
(8)						
(9)						
(10)						
(11)						
(12)					 	
(13)					 	
(14) (15)					 	
(1.5)					<u> </u>	`
Complete only for as	ssets showing	gain in column (h) and owned by t	he foundation on 12/31/	69	1	·
(i) FMV as of 12/31/		(j) Adjusted basis as of 12/31/69	(k) Excess over col ((I) Gains (Co col (k), but not les Losses (from	ol (h) gain minus ss than -0-) Of a col (h))
(1)						1,148
(2)						133
(3)					ļ	- 3
(4)					 	298
(5)					 	
(6) (7)					 	
(8)					 	
(9)						
(10)						
(11)						
(12)						
(13)						
(14)					 	
(15)			ı		1	

5/8/2017 1:41 PM		Adjusted Net Income	\$	\$
	ne L	Net Investment Income	128	128
ts	Form 990-PF, Part I, Line 11 - Other Income		128 \$	128 \$
Federal Statements	-PF, Part I, Line	Revenue per Books	တ	\$
	Statement 1 - Form 990	Description		
212567 THE KOMAL FOUNDATION 47-1685714 FYE: 12/31/2016			BLACKSTONE	Total

	Charitable Purpose	\$ 2,766
al Fees	Adjusted Net	w w
ıt 2 - Form 990-PF, Part I, Line 16a - Legal Fees	Net Investment	\$ 2,766
Statement 2 - Form 990-PF	Total	\$ 5,532
St	Description	LEGAL FEES Total

	Charitable Purpose	\$ 1,363	\$ 1,363
nting Fees	Adjusted Net	w.	\$
0-PF, Part I, Line 16b - Accounting F	Net Investment	\$ 1,362	\$ 1,362
Form 99	Tot	\$ 2,725	\$ 2,725
Statement 3 -	Description	ACCOUNTING FEES	Total

Charitable Purpose	\$	\$
Adjusted Net	\$	\$
Net Investment	\$ 21,320	\$ 21,320
Total	\$ 21,320	\$ 21,320
Description	INVESTMENT FEES	Total

Statement 4 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Description	212567 THE KOMAL FOUNDATION 47-1685714 FYE: 12/31/2016	Federal S	Federal Statements		5/8/2017 1:41 PM
Description	V)	- , }	.PF, Part I, Line 18 - Ta	xes	•
Statement 6 - Form 990-PF, Part II, Line 10a - US and State Government Investments Statement 7 - Form 990-PF, Part II, Line 10a - US and State Government Investments Statement 7 - Form 990-PF, Part III, Line 10a - US and State Government Investments Statement 7 - Form 990-PF, Part III, Line 10a - US and State Government Investments Statement 7 - Form 990-PF, Part III, Line 10a - US and State Government Investments Statement 7 - Form 990-PF, Part III, Line 10a - US and State Government Investments Statement 7 - Form 990-PF, Part III, Line 10a - US and State Government Investments Statement 7 - Form 990-PF, Part III, Line 10a - US and State Government Investments Statement 7 - Form 990-PF, Part III, Line 10a - US and State Government Investments Statement 8 - 443, 339	Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Statement 6 - Form 990-PF, Part I, Line 23 - Other Expenses	CORPORATE LICENSE RENEWAL FOREIGN TAX TAXES - FEDERAL			w	7
Statement 6 - Form 990-PF, Part I, Line 23 - Other Expenses	. <u>5</u>	1,			
Net	Stater	- Form		xpenses	
Statement 7 - Form 990-PF, Part II, Line 10a - US and State Government Investments Description	Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Statement 7 - Form 990-PF, Part II, Line 10a - US and State Government Investments Statement 7 - Form 990-PF, Part II, Line 10a - US and State Government Investments Fair Market Description of Year of Year TREASURY S 455,986 oct 8 455,986 oct 8 443,39 Cost 8 443,39	Expenses ADMIN	į	₩.	ধ্	
Statement 7 - Form 990-PF, Part II, Line 10a - US and State Government Investments Description End of Year of Year Valuation End of Year Valuation Fair Market Value TREASURY \$ 455,986 Cost \$ 443,39 \$ 455,986 \$ 455,986 443,39	Total				
Description Beginning of Year Of Year Of Year Of Year Of Year TREASURY End of Year Valuation Value Value Value Value Value Value Valuation Value Value Value Value Value Value Value Value Value Valuation Value Value Value Value Value Value Value Value Value Valuation Value	Statement 7 - Forn	Par	and	ernment Investments	
TREASURY \$ 455,986 \$ 455,986 Cost \$ 443,39 \$ \$ 443,39	Description	Beginning of Year	i	Basis of Valuation	Fair Market Value
7-6	SCHWAB US TREASURY Total	455,	\$ 455, \$ 455,		443,
2-9					
2-5					
2-2					
					5-7

212567 THE KOMAL FOUNDATION 47-1685714 FYE: 12/31/2016	Federal Statements	ments		5/8/2017 1:41 PM
Statement 8 - F	Statement 8 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments	0b - Corporate Stock	Investments	•
Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
SCHWAB STOCKS BLACKSTONE	\$ 1,636,269	\$ 1,637,225 16,876	Cost	\$ 1,739,604
Total	\$ 1,636,269	\$ 1,654,101		\$ 1,756,633
Statement 9 - I	Statement 9 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments	0c - Corporate Bond	Investments	
Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
SS	\$ 405,825		Cost	
Total	\$ 405,825	\$ 427,057		\$ 412,801
				6-8

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Federal Statements

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Statement 10 - Form 990-PF, Part III, Line 3 - Other Increases

Description	Am	ount
NONTAXABLE ADJUSTMENTS	\$	67
Total	\$	67

Statement 11 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

SEE COPY OF ATTACHED GRANT APPLICATION AND GRANT AGREEMENT.

Statement 12 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

ALTHOUGH THE FOUNDATION HAS A SPECIFIC INTEREST IN MEDICAL AND MENTAL HEALTH ISSUES, THE BOARD OF DIRECTORS ANTICIPATES THAT IT WILL ALSO MAKE AWARDS FOR VARIOUS OTHER CHARITABLE CAUSES. THE MAJORITY OF AWARDS WILL BE MADE TO OREGON ORGANIZATIONS; HOWEVER, THE BOARD MAY ALSO MAKE AWARDS TO NON-OREGON CHARITABLE ORGANIZATIONS.

Gainor Arzt 706 NW Culpepper Terrace Portland, OR 97210

APPLICANT CONTACT INFORMATION

NAME					
Address					
City	State		Zip:	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
CountryPho	one				
Email		-			
What is the best way to reach you?					
Amount Requested					
Have you collected funds for your project	t? Y/N	If Yes, How	v Much?		
PROJECT INFORMATION					
Project Name or Title					
Provide a brief summary of the project:					
					
					
Briefly describe prior experience impleme					

DETAILED PROJECT INFORMATION (If more space is needed attach additional sheets)
Project Description:
Why do you think this is an important project?
In what way will your project benefit the community?

PROJECT PLANNING PROCESS

Can you list the se	quential steps/tasks yo	u will take to implement the propos	ed project?
			
Will you have assis	stance or others partici	pating in the project with you? Y/	N
Name:	·	Role:	
Name:		Role:	
Name:		Role:	
	nallenges or obstacles:		
PROJECT TIME	LINE		
Planning:	Start Date:	End Date:	
Implementation:	Start Date:	End Date	

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PROJECT BUDGET

Please attach the project budget.	•	
Budget Narrative: Describe any o	other sources of funds for this project:	
		_
		_
		_
		_
Signature	Date	

KOMAL FOUNDATION

GRANT AGREEMENT

This Agreement is made as of, 2016 between the Komal Foundation, an Oregon nonprofit corporation, EIN: 47-1685714 (the "Foundation"), located at 706 NW Culpepper Terrace, Portland, OR 97210 and ("Grantee"), [Address].
BACKGROUND
The Foundation is pleased to inform that its Board of Directors has approved a grant in the amount of \$ for the general support of the program. The Foundation is tax-exempt under IRC 501(c)(3) and characterized as a private foundation. Your organization is a public charity and dependent upon continual support for the general public for classification as a public charity; therefore, Foundation enters into this grant agreement to ensure compliance with the Code and to set forth the terms of this grant.
AGREEMENT
Therefore, the parties agree as described below.
1. Grant. The Foundation agrees to make a \$ grant to Grantee payable in [NUMBER] equal [annual or quarterly] installments of [AMOUNT] each, subject to the terms and conditions of this Agreement.
2. <u>Purpose</u> . The purpose of this grant and the programs it supports are more fully described in Grantee's grant application to the Foundation dated [DATE] which is incorporated herein by reference. The Grantee agrees that the funds will be used in accordance with the budget submitted by the Grantee as part of its grant request and attached to this Agreement. Grantee shall use the grant funds exclusively for these purposes and any amount not so used shall be repaid by Grantee to the Foundation.
Reports. Grantee shall submit to the Foundation a full and complete report regarding the use of grant funds. Grantee shall submit such reports within 60 days after the end of Grantee's annual accounting period during which the grant funds were received, and for all such subsequent periods until the grant funds are fully expended or the grant is otherwise terminated. Further, Grantee shall send the Foundation a copy of its annual information return (Form 990) for the current year and any succeeding year in which the Grantee receives funding.
4. <u>Public Charity</u> . Grantee represents to the Foundation that the grant will not cause Grantee to lose its status as a public charity, that its determination letter from the Internal Revenue Service as to Grantee's public charity status is still valid and that the Grantee has not undergone a change in its character, purpose, activities, method of operation, or sources of support that would be inconsistent with Grantee's status as a public charity.
Grant Agreement Page 1

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- 5. Restriction on Use. Grantee agrees that it will not use any portion of the grant proceeds to: (a) carry out propaganda or otherwise attempt to influence legislation; (b) to influence the outcome of any specific election or to carry on, directly or indirectly, any voter registration drive; (c) for grants to individuals for travel or study unless the Grantee has received approval from the Service for such program; (d) for a grant to another organization; (e) for any purpose other than one specified in IRC Section 170(c)(2)(B).
- 6. <u>Use of Name</u>. Grantee hereby authorizes the Foundation to use the name of the Grantee as part of press releases, brochures, newsletters, websites and other publications prepared by the Foundation for the purpose of public education or to demonstrate the scope of grant making by the Foundation. The use of the name of Grantee in publications is for example only and shall not be deemed to be a promise of future awards to Grantor.
- 7. <u>Intellectual Property</u>. For any copyright, patent, trade name, trademark or service mark created in connection with the Program described in Section 2 above ("Intellectual Property"), Grantor is hereby granted a royalty free, non-exclusive worldwide license to use any or all of the Intellectual Property in perpetuity for any purpose or purposes that Grantor desires, including republication or sublicensing of such Intellectual Property.
- 8. <u>Assignment</u>. Neither party shall assign nor transfer any interest in this Agreement, nor assign any claims for money due or to become due during this Agreement without the prior written approval of the other party.
- 9. <u>Communications</u>. All communications and correspondence to Grantor shall be directed to:

Gainor Arzt 706 NW Culpepper Terrace Portland, OR 97210

10. Entire Agreement. This Agreement represents the entire agreement between the parties. No change or amendment hereto shall be effective unless made in writing and duly executed by the parties.

KOMAL FOUNDATION	GRANTEE
[NAME]	[NAME]
Ву:	Ву:
[TITLE]	[TITLE]