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# Form 990-PF

For calendar year 2016 or tax year beginning

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public.
Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.
ar beginning JUL 19, 2016, and ending DEC 31, 2 Department of the Treasury Internal Revenue Service DEC 31, 2016

Name of foundation					A Employer identification	number
_	WANG DINWAN GAMEN GOIDINA	01 2410016				
	EVANS RUNYAN FAMILY FOUNDAT	81-3418016				
	2928 N.E. 19TH AVENUE	B Telephone number (503) 226-	2973			
	ty or town, state or province, country, and ZIP or foreign po	etal code			C if exemption application is p	
	PORTLAND, OR 97212	Star Codo			o ii exemption application is p	ending, check here
	Check all that apply: X Initial return	Initial return of a fo	rmer public cha	rity	D 1. Foreign organizations	s. check here
	Final return	Amended return			, ,	,
	Address change	Name change			<ol><li>Foreign organizations me check here and attach co</li></ol>	eting the 85% test, pmputation
H (	Check type of organization: X Section 501(c)(3) exe	empt private foundation			E If private foundation sta	
	Section 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ition		under section 507(b)(1)	
I Fa	air market value of all assets at end of year [ J Accountin	g method: X Cash	Accrual	ı	F If the foundation is in a	60-month termination
		er (specify)			under section 507(b)(1)	(B), check here
	\$ 192,966. (Part I, column	nn (d) must be on cash b	oasis)		<del></del>	
P	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net inves		(c) Adjusted net	(d) Disbursements for charitable purposes
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	205,000.			N/A	(cash basis only)
	1 Contributions, gifts, grants, etc., received 2 Check if the foundation is not required to attach Sch. B	203,000.			N/A	<del></del>
	nterest on savings and temporary					
	3 cash investments 4 Dividends and interest from securities	677.	<del></del> -	677.	<del></del>	STATEMENT 1
	5a Gross rents					
	b Net rental income or (loss)					
•	6a Net gain or (loss) from sale of assets not on line 10				<del></del>	
ğ	Gross sales price for all assets on line 6a					
Revenue	7 Capital gain net income (from Part IV, line 2)			0.		
Œ	8 Net short-term capital gain					
	9 Income modifications Gross sales less returns					
	10a and allowances	· · · · · · · · · · · · · · · · · · ·				<u> </u>
	<b>b</b> Less Cost of goods sold					ļ
	c Gross profit or (loss)					
	11 Other income	205,677.	<u> </u>	677.	<del></del>	
	12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc	203,077.		0,7.		0.
	14 Other employee salaries and wages					·
	15 Pension plans, employee benefits	<del></del>			<del></del>	<del> </del>
es -	16a Legal fees STMT 2	2,800.		0.		2,800.
/III/ pens	b Accounting fees		<del></del>			
/ ///// Expenses	c Other professional fees					
ے رح	I F					n \
rati	18 Taxes				ar IV	ED 18/
- E	19 Depreciation and depletion				のドレー	r 101
عَ وَ	20 Occupancy				TEST JUN OF	13/ 100
¥	21 Travel, conferences, and meetings				10/11/05	100
Operating and Administrative	22 Printing and publications				18/ 10/4	117
ing	23 Other expenses		 		18/	W. S
ia t	24 Total operating and administrative	2 900		0.	In LUGI	2 200
ď	expenses. Add lines 13 through 23	2,800. 11,000.	<del></del>		<del></del>	2,800.
	25 Contributions, gifts, grants paid 26 Total expenses and disbursements	11,000.			<del></del>	11,000.
	Add lines 24 and 25	13,800.		0.		13,800.
	27 Subtract line 26 from line 12:	23,000.				13,000.
	2 Excess of revenue over expenses and disbursements	191,877.				
	b Net investment income (if negative, enter -0-)			677.		
	c Adjusted net income (if negative, enter -0-)				N/A	
	For the said   LIA For Panaryork Reduction Act Natice	ann instructions				Form 000 DE (2016)

m 990-PF (2016) EVANS RUNYAN FAMILY FOUN  art II Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	<b>3418016</b> Page
Balance Sheets Autached 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
Cash - non-interest-bearing     Savings and temporary cash investments			
3 Accounts receivable ►	<del></del>	<del></del>	<del></del>
Less; allowance for doubtful accounts	Į.		
4 Pledges receivable ►			
Less; allowance for doubtful accounts	1		
5 Grants receivable	<del></del>		<del></del>
6 Receivables due from officers, directors, trustees, and other	<del></del>	···	<del></del>
disqualified persons	1		
7 Other notes and loans receivable			
Less: allowance for doubtful accounts	}		
8 Inventories for sale or use			
9 Prepaid expenses and deferred charges			
10a Investments - U.S. and state government obligations			
b Investments - corporate stock			
c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis			
Less accumulated depreciation			
12 Investments - mortgage loans			
13 Investments - other STMT 3	0.	191,877.	192,966
14 Land, buildings, and equipment, basis			
Less accumulated depreciation			
15 Other assets (describe ►)			
16 Total assets (to be completed by all filers - see the		101 077	100 064
instructions. Also, see page 1, item I)	0.	191,877.	192,966
17 Accounts payable and accrued expenses	<del></del>		
18 Grants payable	<del>}</del> -	<del></del>	
19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable	<del></del>		
22 Other habilities (describe )	<del></del>		
22 Other Habilities (desorring -	<del></del>	<del></del>	
23 Total liabilities (add lines 17 through 22)	0.	0.	
Foundations that follow SFAS 117, check here	<del></del>		
and complete lines 24 through 26 and lines 30 and 31	}	}	
24 Unrestricted	0.	191,877.	
25 Temporarily restricted	<del></del>		
26 Permanently restricted	<del></del>	<del></del>	
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31	{		
27 Capital stock, trust principal, or current funds			
28 Paid-in or capital surplus, or land, bldg, and equipment fund			
29 Retained earnings, accumulated income, endowment, or other funds			
30 Total net assets or fund balances	0.	191,877.	
31 Total liabilities and net assets/fund balances	0.	191,877.	
Analysis of Changes in Alat Assats as Fried Be	alances		
art III Analysis of Changes in Net Assets or Fund Ba		<del></del>	
art III Analysis of Changes in Net Assets or Fund Ba Total net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
Total net assets or fund balances at beginning of year - Part II, column (a), line 3	30	1	
Total net assets or fund balances at beginning of year - Part II, column (a), line 3 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a	0	1 2	
Total net assets or fund balances at beginning of year - Part II, column (a), line 3 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize)	00	<u> </u>	0 191,877 0
Total net assets or fund balances at beginning of year - Part II, column (a), line 3 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a	00	2	191,877

	and Losses for Tax on Ir ribe the kind(s) of property sold (e g		t Income	<b>[</b> (b)]	How acquired - Purchase	(c) Date a	caured	(d) Date sold
2-story brick warehouse; or common stock, 200 shs. MLC Co.)			b	- Purchase - Donation	`(mo., da		(mo., day, yr.)	
1a				$\Box$				
b NO	NE			┼				
d	<del></del>		<del></del>	+				<del></del>
e				$\vdash$				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Ga (e) plus	in or (loss) (f) minus (	g)
<u>a</u>	<del> </del>	ļ						
<u>b</u>	<u></u>	<del> </del>			<del></del> -		• • • • • •	
<u>d</u>		<del> </del>						
e								
Complete only for assets shown	ng gain in column (h) and owned by	<del></del>	<del></del>			(I) Gains (Co	l. (h) gain	minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i)		CI	ol. (k), but no Losses (	from col. (	
<u>a</u>		<del> </del>			<del></del>		<del></del>	<del></del>
<u>b</u>		<del>                                     </del>						<del></del>
d		<del> </del>						
е								
2 Capital gain net income or (net co	apital loss) { If gain, also ente	r in Part I, line )- in Part I, line	7 : 7	}	2			
If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8	. ,	• •		}	3			
Part V Qualification U	Inder Section 4940(e) for	r Reduced	Tax on Ne	t Inv	estment In	come		
(For optional use by domestic privat	e foundations subject to the section	4940(a) tax or	net investment i	ncom	e.)			N/A
If section 4940(d)(2) applies, leave t	his part blank.							
	ction 4942 tax on the distributable an		•	riod?				Yes No
	lify under section 4940(e). Do not co each column for each year; see the r			entries				
(a)	(b)	1134 4040113 00	nore making any t	(c)		<del></del>		(d)
Base periód years Calendar year (or tax year beginn	Adjusted auglifung die	stributions	Net value of no		ritable-use asset	s_  _ (	Distrib col (b) div	utión ratio ided by col. (c))
2015								
2014		<del></del>	<u> </u>					
2013 2012			<b> </b>					<del></del>
2011	<del></del>							
			<del></del>		<del> : -</del>			
2 Total of line 1, column (d)	E was been sowed douds the total	an line O hij E	a - hu tha ausaha			2		
the foundation has been in existe	5-year base period - divide the total ence if less than 5 years	on line 2 by 5,	, or by the numbe	rorye	ears	3		
4 Enter the net value of noncharita	ble-use assets for 2016 from Part X,	, line 5				4		
5 Multiply line 4 by line 3						5		
6 Enter 1% of net investment incom	me (1% of Part I, line 27b)					6		
7 Add lines 5 and 6						7		
8 Enter qualifying distributions fro	m Part XII, line 4					8		
If line 8 is equal to or greater tha See the Part VI instructions	n line 7, check the box in Part VI, line	e 1b, and comp	plete that part usi	ng a 1	% tax rate.			

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Part V	I Excise Tax Based on Investment Income (Section 4940	)(a), 4940(b), 4940(e), o	r 4948	- see i	nstru	ctio	ns)
	npt operating foundations described in section 4940(d)(2), check here 🕨 🔛 and en			,			
Date	of ruling or determination letter: (attach copy of letter if nece	essary-see instructions)					
<b>b</b> Dom	estic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%	1				14.
of Pa	art I, line 27b	ļ					
c All o	ther domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Part I, line 12, col. (b).					
2 Tax	under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Oth	hers enter -0-)	2				0.
3 Add	lines 1 and 2		3				14.
4 Sub	itle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	thers enter -0-)	4				0.
5 Tax	based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5				14.
6 Cred	lits/Payments:						
a 201	6 estimated tax payments and 2015 overpayment credited to 2016	6a		ł			
<b>b</b> Exer	npt foreign organizations - tax withheld at source	6b		ł			
c Tax	paid with application for extension of time to file (Form 8868)	6c	_]	1			
d Back	kup withholding erroneously withheld	6d		1			
7 Tota	l credits and payments. Add lines 6a through 6d		7				0.
8 Ente	r any penalty for underpayment of estimated tax. Check here 🗔 if Form 2220 is attac	ched	8	[			
9 Tax	due. If the total of lines 5 and 8 is more than line 7, enter amount owed	)	▶ 9				14.
10 Ove	rpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		▶ 10				
11 Ente	r the amount of line 10 to be: Credited to 2017 estimated tax	Refunded	<u>► 11</u>				
Part V	II-A Statements Regarding Activities						
1a Duri	ng the tax year, did the foundation attempt to influence any national, state, or local legisl	ation or did it participate or interv	ene in			Yes	No
-	political campaign?				1a		X
<b>b</b> Did	t spend more than \$100 during the year (either directly or indirectly) for political purpos	es (see instructions for the defini	:ion)?		1b		X
If th	e answer is "Yes" to 1a or 1b, attach a detailed description of the activities ar	nd copies of any materials pub	lished or				
dıst	ributed by the foundation in connection with the activities						
	the foundation file Form 1120-POL for this year?				1c		X
<b>d</b> Ente	r the amount (if any) of tax on political expenditures (section 4955) imposed during the						
(1)	On the foundation > \$ 0 . (2) On foundation managers	<b>&gt;</b> \$	<u>) .</u>				
e Ente	r the reimbursement (if any) paid by the foundation during the year for political expendit	ture tax imposed on foundation					
man	agers. ► \$O.			,	,		
2 Has	the foundation engaged in any activities that have not previously been reported to the IR	IS?		1	2		X
/f "Y	es," attach a detailed description of the activities						
3 Has	the foundation made any changes, not previously reported to the IRS, in its governing in	nstrument, articles of incorporatio	n, or				
byla	ws, or other similar instruments? If "Yes," attach a conformed copy of the change	es		į	3		X
	the foundation have unrelated business gross income of \$1,000 or more during the year	?		. (	4a		X
b If "Y	es," 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?			ļ	5		X
	es," attach the statement required by General Instruction T			[			
6 Are	the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eit	ther:		ļ		ł	
	/ language in the governing instrument, or			ļ			
• B	$\gamma$ state legislation that effectively amends the governing instrument so that no mandatory	directions that conflict with the s	tate law		, {	- 1	
rem	ain 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," $com$	nplete Part II, col (c), and Part	XV	}	7	X	
				{	(		
8a Ente	er the states to which the foundation reports or with which it is registered (see instruction	ns) ▶		{		- (	
0		<del></del>		{	ļ	ļ	
<b>b</b> If th	e answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	torney General (or designate)		_	ļ	ļ	
of e	ach state as required by General Instruction G? If "No," attach explanation			ł	8b	Х	
	e foundation claiming status as a private operating foundation within the meaning of sec		alendar	- [	Ţ	Ţ	
	2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," co				9	[	X
10 Did	any persons become substantial contributors during the tax year? If "Yes," attach a schedul	le listing their names and addresses	STMT	'4	10	X	

X

X

3ь

4a

N/A

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 Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C.)

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2016)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

orm 990-PF (2016) EVANS RUNYAN FAMILY FOUN			<u>81-34180</u>	16	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	ued)		
5a During the year did the foundation pay or incur any amount to.					Ţ
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Y6	s 🛣 No	]	1
(2) Influence the outcome of any specific public election (see section 4955); or		]	]	1	
any voter registration drive?			s X No	1	1
(3) Provide a grant to an individual for travel, study, or other similar purposes?	?	Ĺ Y6	s X No	}	)
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		}	ł	1
4945(d)(4)(A)? (see instructions)		Ye	s 🛣 No		1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f		\	ł	ł
the prevention of cruelty to children or animals?		Ye	s X No	ł	1
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify und	er the exceptions described i	n Regulations		- 1	1
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b	<u> </u>
Organizations relying on a current notice regarding disaster assistance check hi	ere				]
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it maintai	ined		į	Ţ
expenditure responsibility for the grant?	N	「/A □ Y∈	s No	į	ļ .
If "Yes," attach the statement required by Regulations section 53 4945	5-5(d)		ļ	ĺ	1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on		[	1	1
a personal benefit contract?		Y6	s X No	Į	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a po	ersonal benefit contract?		]	6b	X
If "Yes" to 6b, file Form 8870					T
7a At any time during the tax year, was the foundation a party to a prohibited tax si	helter transaction?	Y6	s 🗶 No		<u>L</u> _
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Trusto Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	/		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
( ) Name and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans	(e) Ext	pense
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowa	inces
		}			
SEE STATEMENT 5		0.	0.		0.
		(			
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		(		ļ	
				<u> </u>	
·					
		Į į			
		<u> </u>			
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	Tell's		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Ext account allowa	ense . other
	devoted to position	(0)	compensation	allowa	inces
NONE		]			
	<u> </u>	ļ		<b></b>	
		[		ļ	
<u> </u>	<u> </u>	<b> </b>		<del></del>	
		1			
		ļ		<del></del>	
		1		I	
	<del></del>	<b></b>		<b></b> _	
		1	ŀ		
	<u> </u>		<u> </u>	<b></b>	
Total number of other employees hald over \$50,000			<b>▶</b> I		0

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		<del>-  </del>
<del></del>		
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities	<del></del> _	<b>▶</b>   0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produced.	information such as the i, etc.	Expenses
1 N/A		
2		
		·
3		
4		
		····
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
		0.
Total, Add lines 1 through 3	▶ }	U.

Part X Minimum Investment Return (All domestic for	oundations must complete this pa	rt Foreign foun	dations, see	instructions)
1 Fair market value of assets not used (or held for use) directly in carrying	g out charitable, etc., purposes:			
Average monthly fair market value of securities			1a	<u>55,681.</u>
b Average of monthly cash balances		Γ	1b	
c Fair market value of all other assets			1c	
d Total (add lines 1a, b, and c)		ſ	1d	55,681.
e Reduction claimed for blockage or other factors reported on lines 1a an	d	<b>.</b>		
1c (attach detailed explanation)	1e	0.		
2 Acquisition indebtedness applicable to line 1 assets			2	0.
3 Subtract line 2 from line 1d		[	3	55,681.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for gr	reater amount, see instructions)		4	835.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Entit	er here and on Part V, line 4	ſ	5	54,846.
6 Minimum investment return. Enter 5% of line 5 ADJUSTED	FOR SHORT TAX PER	CIOD [	6	1,247.
Part XI Distributable Amount (see instructions) (Section foreign organizations check here  and do not comp		g foundations and	d certain	
1 Minimum investment return from Part X, line 6			1	1,247.
2a Tax on investment income for 2016 from Part VI, line 5	2a	14.		
b Income tax for 2016. (This does not include the tax from Part VI.)	2b			
c Add lines 2a and 2b	<del></del>		2c	14.
3 Distributable amount before adjustments. Subtract line 2c from line 1			3	1,233.
4 Recoveries of amounts treated as qualifying distributions			4	0.
5 Add lines 3 and 4		[	5	1,233.
6 Deduction from distributable amount (see instructions)		[	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter her	e and on Part XIII, line 1		7	1,233.
Part XII Qualifying Distributions (see instructions)  1 Amounts paid (including administrative expenses) to accomplish charita	able, etc , purposes:			
a Expenses, contributions, gifts, etc total from Part I, column (d), line 2		ľ	1a	13,800.
b Program-related investments - total from Part IX-B		ſ	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carryin	ng out charitable, etc., purposes	f	2	— ———————
3 Amounts set aside for specific charitable projects that satisfy the:		ſ		
a Suitability test (prior IRS approval required)		}	3a	
<b>b</b> Cash distribution test (attach the required schedule)		ţ	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Pa	art V, line 8, and Part XIII, line 4	Ţ	4	13,800.
5 Foundations that qualify under section 4940(e) for the reduced rate of to		į		<del></del>
income. Enter 1% of Part I, line 27b	•	}	5	0.
6 Adjusted qualifying distributions Subtract line 5 from line 4		1	6	13,800.
Note: The amount on line 6 will be used in Part V, column (b), in subset 4940(e) reduction of tax in those years.	equent years when calculating whether	the foundation q	ualifies for the	

Page 9 Part XIII Undistributed Income (see instructions) (b) (c) Corpus Years prior to 2015 2015 2016 1 Distributable amount for 2016 from Part XI, 1,233. line 7. 2 Undistributed income, if any, as of the end of 2016 0. a Enter amount for 2015 only b Total for prior years: 0 3 Excess distributions carryover, if any, to 2016: a From 2011 **b** From 2012 c From 2013 dFrom 2014 e From 2015 0 f Total of lines 3a through e 4 Qualifying distributions for 2016 from 13,800. Part XII, line 4: ►\$ 0. a Applied to 2015, but not more than line 2a b Applied to undistributed income of prior 0. years (Election required - see instructions) c Treated as distributions out of corpus 0 (Election required - see instructions) 1,233. d Applied to 2016 distributable amount 12,567 e Remaining amount distributed out of corpus 0 Excess distributions carryover applied to 2016 (if an amount appears in column (d), the same amount must be shown in column (a) ) 6 Enter the net total of each column as indicated below: 12,567 a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract 0. line 4b from line 2b 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 0. assessed dSubtract line 6c from line 6b Taxable 0. amount - see instructions e Undistributed income for 2015. Subtract line 0 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election 0 may be required - see instructions) 8 Excess distributions carryover from 2011 0. not applied on line 5 or line 7 9 Excess distributions carryover to 2017 12,567 Subtract lines 7 and 8 from line 6a 10 Analysis of line 9. a Excess from 2012 b Excess from 2013

c Excess from 2014 dExcess from 2015

e Excess from 2016

12,567.

Part XIV   Private Operating Fo	oundations (see ins			N/A	10010 rage n
1 a If the foundation has received a ruling or			<del></del>	<del></del>	<del></del>
foundation, and the ruling is effective for	2016, enter the date of the	ne ruling	▶		
b Check box to indicate whether the found		=	n section	4942(j)(3) or 49	)42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	<u> </u>	Prior 3 years		
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed			ı		į.
b 85% of line 2a			<del></del>	· · · · · · · · · · · · · · · · · · ·	<del></del>
c Qualifying distributions from Part XII.	<del></del>			<del> </del>	
line 4 for each year listed	ĺ			i	
d Amounts included in line 2c not		<del></del>		<del> </del>	<del></del>
used directly for active conduct of				(	
exempt activities					
e Qualifying distributions made directly				1	<del></del>
for active conduct of exempt activities.					
Subtract line 2d from line 2c			1		
3 Complete 3a, b, or c for the				<del>                                     </del>	<del></del>
alternative test relied upon: a "Assets" alternative test - enter;				1	1
(1) Value of all assets	1				
(2) Value of assets qualifying			<del></del>	<u> </u>	
under section 4942(j)(3)(B)(i)			l	(	
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:		<del></del>	·	<del> </del>	
(1) Total support other than gross				}	
investment income (interest,				<b>\</b>	
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public			<del></del>	<del></del>	<del></del>
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)				)	
(3) Largest amount of support from	<del></del>	<del></del>	<del></del>	<del> </del>	<del></del>
an exempt organization					
(4) Gross investment income	<del></del>				
Part XV   Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or me	ore in assets
at any time during t			ii tiic iodiidatioii	παα ψο,σσο σε πικ	ore iii assets
1 Information Regarding Foundatio	<del></del>		<del></del>		
a List any managers of the foundation who		han 2% of the total contr	thutions received by the	foundation before the clos	e of any tay
year (but only if they have contributed m			ibations received by the	iodildadon belolo die elos	oc or any tax
SEE STATEMENT 6					
b List any managers of the foundation who	o own 10% or more of the	e stock of a corporation (	or an equally large portio	n of the ownership of a na	ertnership or
other entity) of which the foundation has			or an equally large portio	in or the ownership of a pe	irthoromp of
NONE					
2 Information Regarding Contributi	on Grant Gift Loan	Scholarship etc. Pr	ograme:	<del></del>	<del></del>
Check here ► X if the foundation o				ot accent unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc. (					
a The name, address, and telephone numl		<del></del> _	<del></del>		<del>· · · · · · · · · · · · · · · · · · · </del>
a the hame, address, and telephone ham	or or c man address or t	ne person to whom appir	cations should be addres	oou,	
b The form in which applications should b	e submitted and informat	on and materials they sh	only include.		<del></del>
b The form in which applications should b	e submitted and informat	ion and materials mey si	logia ilicidae.		
c Any submission deadlines:				<del></del>	<del></del>
- 7, Tablinian addantas.					
d Any restrictions or limitations on awards	s, such as by geographica	Il areas, charitable fields,	kınds of institutions, or o	ther factors:	<del></del>

Part XV Supplementary Informatio			<del></del>	
3 Grants and Contributions Paid During the		Payment	<del></del>	
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	<u> </u>	
a Paid during the year	+			
	·			
			}	
OUTSIDE IN		PC	GENERAL OPERATIONS.	
1132 S.W. 13TH AVENUE PORTLAND, OR 97205		ļ		1,00
	<del></del>	<del> </del>	<del>                                     </del>	1,00
BLANCHET HOUSE		PC	GENERAL OPERATIONS.	
310 N.W. GLISAN STREET		}		
PORTLAND, OR 97209				1,00
FRIENDS OF THE CHILDREN		PC	GENERAL OPERATIONS.	
44 N.E. MORRIS STREET		1	1	
PORTLAND, OR 97212			<del> </del>	1,00
OREGON FOOD BANK	,	PC	GENERAL OPERATIONS.	
7900 N.E. 33RD DRIVE PORTLAND, OR 97211				1,00
TONIBATE, ON STREET	<del></del>	<del> </del>	<del> </del>	
		1		
CASA FOR CHILDREN		PC	GENERAL OPERATIONS.	
1401 N.E. 68TH AVENUE				
PORTLAND, OR 97213	_			1,000
	NTINUATION SHEE	T(S)	<b>▶</b> 3a	11,000
<b>b</b> Approved for future payment				
		1		
NONE		,	1	
			1	
			1	
	†		1	
			1	
		<del> </del>	<del> </del>	
Total			<b>▶</b> 3b	
1 0121				m <b>990-PF</b> (20

Part XVI-A	Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income		Exclu	ded by section 512, 513, or 514	(e)		
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income		
•	- code		-				
å	<del> </del>	<del></del>					
b	<del>                                     </del>	<del></del>		<del></del>			
· · · · · · · · · · · · · · · · · · ·	}	<del></del>	<u> </u>				
d	<b> </b>		<del></del>				
e	<b> </b>	<del></del>		<del></del>			
g Fees and contracts from government agencies	<del>                                     </del>						
2 Membership dues and assessments	<del> </del>				<del></del>		
3 Interest on savings and temporary cash	<del> </del>	<del></del>					
investments	1 1						
4 Dividends and interest from securities	<del> </del>		14	677.			
5 Net rental income or (loss) from real estate:	<del>-</del>				<del></del>		
a Debt-financed property				<del></del>			
b Not debt-financed property			-				
6 Net rental income or (loss) from personal							
property	1						
7 Other investment income					<del></del>		
8 Gain or (loss) from sales of assets other				<del></del>			
than inventory	ļ ļ		į .				
9 Net income or (loss) from special events		<del></del>					
10 Gross profit or (loss) from sales of inventory							
11 Other revenue					<del></del>		
a	1 [		ļ				
b							
С							
d					<del></del>		
e							
12 Subtotal. Add columns (b), (d), and (e)		0.		677.	0.		
13 Total. Add line 12, columns (b), (d), and (e)				13	677.		
(See worksheet in line 13 instructions to verify calculations.)				<del></del>			
Part XVI-B Relationship of Activities t	o the Acco	omplishment of Ex	emp	t Purposes			
					<del></del>		
Line No Explain below how each activity for which inco			contrit	outed importantly to the accom	plishment of		
the foundation's exempt purposes (other than	by providing fur	nds for such purposes).					
		<del></del>					
					<del></del>		
		<del></del>					
				<del></del>			
				· · · · · · · · · · · · · · · · · · ·	·		
	<del></del>						
		<del>, , , , , , , , , , , , , , , , , , , </del>					
	<del></del>			······································			
	<u>.                                    </u>	<del> </del>		· · · · · · · · · · · · · · · · · · ·			
623621 11-23-16					Form <b>990-PF</b> (2016)		

Phone no. (503) 222-2515 Form **990-PF** (2016)

Form 990	-PF (2016) <b>EVANS</b>	RUNYAN F	AMILY	FOUNDATION		81-34	<b>F8019</b>	Pa	age_13
Part >	(VII Information R Exempt Organ	egarding Tran nizations	sfers To a	nd Transactions a	and Relation	ships With Nonch	aritable	•	
1 Did	the organization directly or indi	rectly engage in any	of the following	g with any other organization	on described in sec	ction 501(c) of		Yes	No
the	Code (other than section 501(c	(3) organizations) o	or in section 52	7, relating to political organ	uzations?		1		
<b>a</b> Trai	nsfers from the reporting found	ation to a noncharita	able exempt org	anization of:					1
(1)	Cash						1a(1)		X
(2)	Other assets						1a(2)		X
<b>b</b> Oth	er transactions:								
(1)	Sales of assets to a noncharita	ible exempt organiza	ition				1b(1)		X
(2)	Purchases of assets from a no	ncharitable exempt o	organization				1b(2)		X
(3)	Rental of facilities, equipment,	or other assets					1b(3)		X
(4)	Reimbursement arrangements	;					1b(4)		X
(5)	Loans or loan guarantees						1b(5)		X
(6)	Performance of services or me	embership or fundrai	ısıng solicitatioi	ns			1b(6)		X
	ring of facilities, equipment, ma	•		•			1c		X
	e answer to any of the above is							ets,	
	ervices given by the reporting t			ed less than fair market valu	ie in any transactio	on or sharing arrangement	, show in		
	ımn (d) the value of the goods,								
(a)Line no	(b) Amount involved	(c) Name of		exempt organization	(0) Description	on of transfers, transactions, an	d sharing ari	angeme	ents
	<del> </del>	<u> </u>	N/A	<del></del>		<del></del>			
	<del></del>	<del> </del>			<del></del>				
	<del> </del>	<del> </del>	<del></del>		<del></del> -	<del> </del>			
	<del> </del>	<del> </del>							
	<del>                                     </del>	<del> </del>	<del></del> .	<del></del>	<del>-}</del>	<del></del>			
	<del> </del>	<del> </del>		<del></del>	<del>-}</del>				
	<del> </del>	<del> </del>		<del></del>	<del></del>				
	<del></del>	<del> </del>							
	<del> </del>	<del></del>			<del></del>				
	<del> </del>	<del> </del>	-						
	<del></del>	<del> </del>			<del> </del> -	<del></del>	<del></del> -		
	<del></del>	<del> </del>		<del></del>	<del> </del>				
	<del> </del>	<del> </del>	<del></del>	<del></del>		<del></del>			
	<del> </del>	<del> </del>	·			<del></del>			
	<del> </del>	<del> </del>		<del></del>	<del></del>	<del></del>			
2a ls ti	he foundation directly or indirec	tly affiliated with or	related to one	or more tay-eyempt organi	zations described	<del></del>	<del></del>		
	ection 501(c) of the Code (othe	=		· -	24110713 403071504	I	Yes	X	No
	es," complete the following sch	•	.,(0,, 0, 000					عما	
	(a) Name of or		<u>_</u>	(b) Type of organization	Γ -	(c) Description of relation	iship		
	N/A			<del></del>	<del> </del>	<del></del>	<del></del>		
				<del></del>	<del> </del>	·			
	<del></del>								
	Under penalties of perjury, I declare						lay the IRS d	iscuss i	this
Sign	and belief, it is true, correct, and co	mplete Declaration of pi	reparer (other than	taxpayer) is based on all inform	nation of which prepar	er has any knowledge	turn with the	prepar	er
Here	<b>▶</b> (>/)/(			15/31/17	PHO	10001	X Yes		] No
	Signature of officer of truster	e		Date	Title				
	Print/Type preparer's n	ame	Preparer's si	gnature	Date	Check if PTIN			
			/		5/1-	self- employed			
Paid	GARY MCGE		100	169h	13/17	P(	0743	279	
Prepa		RY MCGEE &	CO. L	LP		Firm's EIN ▶			
1100 (	393334 1								

Firm's address ► 808 S.W. THIRD AVENUE, SUITE 700 PORTLAND, OR 97204

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

Department of the Treasury Internal Revenue Service

## **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

2016

Name of the organization

Employer identification number

	EV	ANS RUNYAN FAMILY FOUNDATION	81-3418016				
Organiz	zation type (check or	ne)					
Filers o	f:	Section:					
Form 990 or 990-EZ		501(c)( ) (enter number) organization					
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
		527 political organization					
Form 990-PF		501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
	only a section 501(c)(	covered by the <b>General Rule</b> or a <b>Special Rule.</b> 7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule. See instructions				
Genera	raie						
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 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, or (ii) Form 990-EZ, line 1 Complete Parts I and II						
	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 the prevention of cruelty to children or animals Complete Parts I, II, and III						
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 if this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
but it m	ust answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (F Part IV, line 2, of its Form 990, or check the box on line H of its Form 990·EZ or on its F ne 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) (2016)

Employer identification number

#### EVANS RUNYAN FAMILY FOUNDATION

81-3418016

E A WIA P	KONTAN PARTET POUNDATION	<u> </u>	7 3410010
Part I	Contributors (See instructions) Use duplicate copies of Part I i	f additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DEAN RUNYAN AND LIZ EVANS 2928 N.E. 19TH AVENUE PORTLAND, OR 97212	\$\$	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 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
623452 10-1	9.16	\$Schedule B (Form	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2016)

Employer identification number

### EVANS RUNYAN FAMILY FOUNDATION

81-3418016

(b) Description of noncash property given  (b) Description of noncash property given  (b) Description of noncash property given	(c) FMV (or estimate) (See instructions)  \$ (c) FMV (or estimate) (See instructions)  \$ (c) FMV (or estimate) (See instructions)	(d) Date received  (d) Date received
Description of noncash property given	(c) FMV (or estimate) (See instructions)  \$ (c) FMV (or estimate) (See instructions)	Date received
Description of noncash property given	(c) FMV (or estimate) (See instructions)  \$ (c) FMV (or estimate) (See instructions)	Date received
Description of noncash property given	\$	Date received
	(c) FMV (or estimate) (See instructions)	l e
	FMV (or estimate) (See instructions)	l e
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	(b) Description of noncash property given  (b) Description of noncash property given	Description of noncash property given  (b)  Description of noncash property given  (c)  FMV (or estimate)  (c)  FMV (or estimate)  (See instructions)  (b)  FMV (or estimate)  (See instructions)  (c)  FMV (or estimate)  (See instructions)

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

623454 10-18-16

3 Grants and Contributions Paid During the Recipient	If recipient is an individual.	T -	<del>                                     </del>	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	<del> </del>	<del></del>
NEW AVENUES FOR YOUTH		PC	GENERAL OPERATIONS.	
1220 S.W. COLUMBIA STREET PORTLAND, OR 97201		]	1	1,00
PORTURAD, OR 37201	<del></del>		<del> </del>	
RAPHAEL HOUSE		PC	GENERAL OPERATIONS.	
4110 S.E. HAWTHORNE BLVD.			DENEME OF ENGINEERS.	
PORTLAND, OR 97214		İ		1,00
<del></del>				<del></del> -
FOREST PARK CONSERVANCY		PC	GENERAL OPERATIONS.	
210 N.W. 17TH AVENUE		}	1	
PORTLAND, OR 97209	<del>                                     </del>	ļ	<del> </del>	1,00
OUTDOOR SCHOOL		PC	GENERAL OPERATIONS.	
11611 N.E. AINSWORTH CIRCLE		1		
PORTLAND, OR 97220	<del> </del>	<del> </del>	<del> </del>	1,00
HABITAT FOR HUMANITY		PC	GENERAL OPERATIONS.	
1478 N.E. KILLINGSWORTH STREET		}		1 00
PORTLAND, OR 97211	<del></del>		<del> </del>	1,00
TRANSITION PROJECTS		PC	GENERAL OPERATIONS.	
665 N.W. HOYT STREET		1.0	DENDINE OF ENGLISHED.	
PORTLAND, OR 97209		1		1,00
		1		
	<del> </del>	<del> </del>	<del> </del>	
	<del></del>	<del> </del>	<del></del>	<del></del>
		}		
- <del></del>				
Total from continuation sheets		<del></del>	<del></del>	6,00

FORM 990-PF	DIVIDENDS	AND INTER	EST FROM	SECUR	ITIES	STATEMENT	1	
GROSS SOURCE AMOUNT		GAINS REV		(A) VENUE BOOKS	(B) NET INVES MENT INCO		.(C) ADJUSTED NET INCOME	
VANGUARD	677.		0.	677.	<del></del>	0.		
TO PART I, LINE 4	677.		0.	677.	·	0.		
FORM 990-PF		LEGAL	FEES			STATEMENT	2	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET IN MENT II	EST-	(C) ADJUSTED NET INCOM			
SCOTT PRATT, ATTORNEY		2,800.		0.		2,80	00.	
TO FM 990-PF, PG 1,	LN 16A	2,800.		0.		2,80	00.	
FORM 990-PF		OTHER INV	ESTMENTS	<del></del>		STATEMENT	3	
DESCRIPTION			LUATION ETHOD	воо	K VALUE	FAIR MARKET VALUE	e	
VANGUARD BROKERAGE ACCOUNT		<del></del>	COST		191,877.	192,966.		
TOTAL TO FORM 990-P	LINE 13		191,877		192,966.			

FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10			STATEMENT 4		
NAME OF CONTRIBUTOR	ADDRESS				
DEAN RUNYAN AND LIZ EVANS	2928 N.E. 19T PORTLAND, OR				
	ST OF OFFICERS, D ND FOUNDATION MANA		STAT	EMENT 5	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB		
DEAN RUNYAN 2928 N.E. 19TH AVENUE PORTLAND, OR 97212	PRESIDENT 2.00	0.	0.	0.	
LIZ EVANS 2928 N.E. 19TH AVENUE PORTLAND, OR 97212	TREASURER 1.00	0.	0.	0.	
HUGH SCOTT RUNYAN 2928 N.E. 19TH AVENUE PORTLAND, OR 97212	TRUSTEE 1.00	0.	0.	0.	
ALEC THOMAS RUNYAN 2928 N.E. 19TH AVENUE PORTLAND, OR 97212	TRUSTEE 1.00	0.	0.	0.	
GRANT EVANS RUNYAN 2928 N.E. 19TH AVENUE PORTLAND, OR 97212	TRUSTEE 1.00	0.	0.	0.	
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.	

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

NAME OF MANAGER

DEAN RUNYAN LIZ EVANS