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Return of Private Foundation 2017

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.irs.gov/form990pf.

		t of the Treasury	social security numbers on m 990-PF and its separate	this form as	it may be ma	ide public.	2010
		venue Service	m ssu-er and its separate	and e		.govnomaaopi.	Open to Public Inspection
		foundation		, ани в	ung	A Employer identification	number
		LIC HEALTH MICROBIOLOGY	,			A Employer Identification	HUMDEL
		RITABLE TRUST				94-3216399	
		nd street (or P O box number if mail is not delivered to stree	t address)		Room/suite	B Telephone number	<del></del> _
		3 NW LESTER AVE			1100,711 30110	541-829-94	68
		own, state or province, country, and ZIP or foreign p	nactal cada		I	C If exemption application is pe	
-		VALLIS, OR 97330	Josiai Couc			if exemption application is pe	ending, check here
		all that apply: Initial return	Initial return of a fo	rmer nublic o	harity	D 1 Foreign organizations	check here
u	HICCK	Final return	Amended return	Annoi public (	лину	D T Toroign organizations	, oncok nord
		Address change	Name change			2 Foreign organizations med check here and attach col	eting the 85% test,
H (	heck		xempt private foundation			1	
<u></u>		ction 4947(a)(1) nonexempt charitable trust		ntion		E If private foundation stat under section 507(b)(1):	
I Fa			ing method: X Cash	Accr	ual	F If the foundation is in a 6	
		, ,	ther (specify)			under section 507(b)(1)	
,		20 , 811 . (Part I, colu		basis )		(2)(1)	(-),
	ırt I	Analysis of Revenue and Expenses	(a) Revenue and		vestment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books		ome	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	500.				
	2	Check X if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	1.		1.		STATEMENT 1
	4	Dividends and interest from securities	425.		425.		STATEMENT 2
	5a	Gross rents					
	b	Net rental income or (loss)			·		
•	6a	Net gain or (loss) from sale of assets not on line 10	478.				
Ž	b	Gross sales price for all assets on line 6a 1, 401.					
Revenue	7	Capital gain net income (from Part IV line 2)			478	PECELVES	7
<u>~</u>	8	Net short-term capital gain					
	9	Income modifications			[8]	111 7 2000 15	
	10a	Gross sales less returns and allowances			[8]	OF # 4 5014 10	
	b	Less Cost of goods sold				N N N N N N N N N N N N N N N N N N N	
	C	Gross profit or (loss)	· 			GDEN UT	
	11	Other income					
	12	Total Add lines 1 through 11	1,404.		904.		
	13	Compensation of officers directors, trustees, etc	0.		0.	0.	0.
	14	Other employee salaries and wages			<del>.</del>		
တ္	15	Pension plans, employee benefits					
nse	16a	Legal fees	710.		0.	0.	710.
ĝ	D	Accounting fees STMT 3	/10.		<u> </u>	0.	/10.
E E	_ C	Other professional fees		<del></del>			
୍ଧାନ୍ତି (ପ୍ରସ୍ଥ୍ୟ ପ୍ରକ୍ରେ Operating and Administrative Expenses	17	Interest Taxes STMT 4	16.		16.	0.	0.
stra	18	Depreciation and depletion	55.		55.	0.	<u></u>
<b>P</b>	19	Occupancy	23.			<u> </u>	
\$ 5	20 21	Travel, conferences, and meetings					
<u> </u>	22	Printing and publications					
(3 <b>to</b>	23	Other expenses				-	
Ď, <b>Ę</b>	24	Total operating and administrative					
ē 🚖		expenses. Add lines 13 through 23	781.		71.	0.	710.
j oti	25	Contributions, gifts, grants paid	2,134.			<u> </u>	2,134.
લ્હ	26	Total expenses and disbursements	2,231				
<b>≔</b> ′		Add lines 24 and 25	2,915.		71.	_0.	2,844.
	27	Subtract line 26 from line 12:	2,7,23.		· <u></u>		
		Excess of revenue over expenses and disbursements	-1,511.				
		Net investment income (if negative, enter -0-)			833.		<u> </u>
	1	Adjusted net income (if negative enter -0-)				0.	

CHARITABLE TRUST

Par	t II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	Cash - non-interest-bearing	25.	25.	25.
2	Savings and temporary cash investments	1,625.	1,766.	1,766
3	Accounts receivable ►			
	Less: allowance for doubtful accounts ▶			
4	Pledges receivable ►			
	Less: allowance for doubtful accounts ▶			
!	Grants receivable			
-   6	Receivables due from officers, directors, trustees, and other			
	disqualified persons			
7	Other notes and loans receivable	j		
	Less <sup>-</sup> allowance for doubtful accounts ▶			
<u>ရ</u> မြ	Inventories for sale or use			
Assets	Prepaid expenses and deferred charges			
₹  10	a Investments - U.S. and state government obligations			
	b Investments - corporate stock STMT 6	9,831.	8,234.	<u> 18,993</u> .
- 1	c Investments - corporate bonds			
11	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation			
12	! Investments - mortgage loans			
13	Investments - other			
14	Land, buildings, and equipment: basis > 3,163.			
	Land, buildings, and equipment: basis ► 3,163.  Less accumulated depreciation STMT 5 ► 3,136.	82.	27.	27.
15	Other assets (describe )			
16	Total assets (to be completed by all filers - see the			
_	instructions. Also, see page 1, item I)	11,563.	10,052.	20,811.
17	Accounts payable and accrued expenses			
18	Grants payable			
ဖ္တ 19	Deferred revenue			
≝  20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	Mortgages and other notes payable			
⊐  2;	2 Other liabilities (describe ▶ )			
]				
_ 23	3 Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
.	and complete lines 24 through 26 and lines 30 and 31			
Se 2	1 Unrestricted	11,563.	10,052.	
E 2	5 Temporarily restricted			
or Fund Balanc	Permanently restricted			
2	Foundations that do not follow SFAS 117, check here			
년	and complete lines 27 through 31			
S 2	7 Capital stock, trust principal, or current funds			
Net Assets	Paid-in or capital surplus, or land, bldg, and equipment fund			
8 2	Retained earnings, accumulated income, endowment, or other funds			
<b>ĕ</b>  36	Total net assets or fund balances	11,563.	10,052.	
_				
_ 3	1 Total liabilities and net assets/fund balances	11,563.	10,052.	
Par	t III Analysis of Changes in Net Assets or Fund Ba	alances		
		. <u></u>		
	tal net assets or fund balances at beginning of year - Part II, column (a), line 3	30		11 563
•	ust agree with end-of-year figure reported on prior year's return)		11	11,563
	ter amount from Part I, line 27a		2	
	her increases not included in line 2 (itemize)		3	10.053
	d lines 1, 2, and 3		4	10,052
	creases not included in line 2 (itemize)	luma (h) lur- 00	5	10.053
<u>ا د</u>	tal net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	iumn (D), line 30	6	10,052

94-3216399

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Form **990-PF** (2016)

Form 990-PF (2016)

	RITABLE TRUST	nuontmo-d	Income			9,	<u>4-321</u>	6399	Page 3
(a) List and descri	and Losses for Tax on I the the kind(s) of property sold (e.	g., real estate,	income	<b>(b)</b> Ho	w acquired	(c) Date a		(d) Da	te sold
2-story brick war	ehouse; or common stock, 200 st	ns. MLC Co.)			Purchase Donation	` (mo , da	ay, yr.)		lay, yr.)
1a 100 SHARES HP I	INC COM				P			08/2	9/16
<u>b</u>									
<u>C</u>				ļ	_			-	
<u>d</u>				ļ					
<u>e</u>	(6) Depressition allowed	(a) Coo	ut or other bears	<del>                                     </del>		(h) Co	un or (loss)		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis xpense of sale		·		(f) minus (		
a 1,401.			92	3.					<u>478.</u>
b									
C									
_d									
Complete only for exects above	a country activities (b) and average by	the foundation	10/01/00					<del></del>	
Complete only for assets snowing	g gain in column (h) and owned by				( <b>I</b> )	) Gains (Co . (k), but n	ol. (h) ga:n ot less than	minus 1 -0-1 <b>or</b>	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col (j), if any		001		from col. (		
	400.12.07.00	-	(),,,		<del></del>		<u>.</u>		478.
a b			·		<del></del> .			-	4/0.
C		<del> </del>							
d		· · · · ·					- ,		
e		1							
2 Capital gain net income or (net cap	ortal loss) { If gain, also enter-			}	2				478.
	`		•	7					
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, c		iiu (o).							
If (loss), enter -0- in Part I, line 8				<b>]</b>	3		N/A		
Part V Qualification Un	nder Section 4940(e) fo	r Reduced	Tax on Net	Inve	stment Inc	ome			
(For optional use by domestic private	foundations subject to the section	14940(a) tax on	net investment in	icome.)					
If section 4940(d)(2) applies, leave th	ıs nart hlank								
	•								
Was the foundation liable for the secti			•	riod?				Yes	X No
If "Yes," the foundation does not quality				ntrino				-	<del></del>
1 Enter the appropriate amount in ea	<del></del>	instructions be	iore making any e					(d)	
Base periód years	(b) Adjusted qualifying di	stributions	Net value of no	(C) ncharita	ahle-use assets	, l	Distrib	(d) ution ratio	(a))
Calendar year (or tax year beginnin	g (n) Nojastea daaniying ar	1,180.		Tionaria			cor. (b) div	ided by col	64225
2015 2014		3,591.			18,373 19,717				82127
2013		895.	_		16,137				55463
2012		1,734.			15,748		<del></del>		10109
2011		3,076.			22,742				35256
	<u></u>								
2 Total of line 1, column (d)						2		. 5	47180
3 Average distribution ratio for the 5	-year base period - divide the total	I on line 2 by 5,	or by the number	of year	S				
the foundation has been in existen	ce if less than 5 years					3		1	09436
							<u>-</u>		
4 Enter the net value of noncharitable	e-use assets for 2016 from Part X	l, line 5				4		19	<u>,339.</u>
5 Multiply line 4 by line 3						5		2	,116.
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)					6			8.
7 Add lines 5 and 6						7		2	,124.
O Fate and the second second	Dark VII. line 4							_	044
8 Enter qualifying distributions from If line 8 is equal to or greater than		ne 1h and comm	lete that nart usin	na 1%	tay rate	8		2	,844.
See the Part VI instructions.	r j onder the box arr art vi,	io io, and comp	note that part usin	.ya 1/0	ימא ומוני				

orm 990-PF (2016) CHARTTABLE TRUST		94 - 3216			Page 4
Part VI Excise Tax Based on Investment Income (Section 1)		948 - see i	nstru	ction	1S)
1a Exempt operating foundations described in section 4940(d)(2), check here	,				
Date of ruling or determination letter (attach copy of le		i			_
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V, chec	ck here \(\sum \textbf{\X}\) and enter 1%	_1			<u>8.</u>
of Part I, line 27b		ļ			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organization					•
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundation	ons only. Others enter -0-)	_2			<u>0.</u>
3 Add lines 1 and 2		3			8.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation	•	_4			0.
5 Tax based on investment income Subtract line 4 from line 3. If zero or less, ent	er -U-	_5			8.
6 Credits/Payments:	1 a. 1				
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a				
b Exempt foreign organizations - tax withheld at source	66	ĺ			
c Tax paid with application for extension of time to file (Form 8868)	60				
d Backup withholding erroneously withheld	6d	_			Λ
7 Total credits and payments. Add lines 6a through 6d	1990 to attached	7			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2	220 IS attached	8			8.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9			0.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount o	Refunded >	10			
11 Enter the amount of line 10 to be Credited to 2017 estimated tax Part VII-A Statements Regarding Activities		11			
1a During the tax year, did the foundation attempt to influence any national, state, or	r local legislation or did it participate or intervene	ın	T	Yes	No
any political campaign?	Total legislation of the it participate of intervene	***	1a		X
<ul><li>b Did it spend more than \$100 during the year (either directly or indirectly) for political</li></ul>	tical nurnoses (see instructions for the definition	12	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the a			-"-		
distributed by the foundation in connection with the activities	ctivities and sopies of any materials pasies				İ
c Did the foundation file Form 1120-POL for this year?			10		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed	during the year:				
(1) On the foundation. $\blacktriangleright$ \$ (2) On foundation			[ [		1
e Enter the reimbursement (if any) paid by the foundation during the year for politic					
managers ▶ \$0.	,				}
2 Has the foundation engaged in any activities that have not previously been report	ted to the IRS?		2		X
If "Yes," attach a detailed description of the activities					
3 Has the foundation made any changes, not previously reported to the IRS, in its	governing instrument, articles of incorporation, o	or .			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the	-		3		_X_
4a Did the foundation have unrelated business gross income of \$1,000 or more dur			4a		X
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 durin	g 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:			1 '	l
<ul> <li>By language in the governing instrument, or</li> </ul>				1	ł
<ul> <li>By state legislation that effectively amends the governing instrument so that no</li> </ul>	mandatory directions that conflict with the state	law .		1	
remain in the governing instrument?		-	6	X	L
7 Did the foundation have at least \$5,000 in assets at any time during the year? If	"Yes," complete Part II, col (c), and Part XV	•	7	X	↓
				]	•
8a Enter the states to which the foundation reports or with which it is registered (se	e instructions) 🕨			,	
OR			-		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-	PF to the Attorney General (or designate)		}		
of each state as required by General Instruction G? If "No," attach explanat		•	8b	X	<del> </del> -
9 Is the foundation claiming status as a private operating foundation within the me		ndar	1	{	<b> </b>
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)?			9	<del> </del>	X
10 Did any persons become substantial contributors during the tax year? it "yes" att	ach a schedule listing their names and addresses		1 10	1	l X

Form **990-PF** (2016)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)  12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualited person had advisory privileges? If "Yes," attach statement (see instructions)  13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  14 The blooks are in care of ▶ MTLATM R. FORD Telephone no. ▶ 541-753-8356  Located at ▶ 1863 NW LESTER AVE, CORVALLIS, OR Telephone no. ▶ 541-753-8356  Located at ▶ 1863 NW LESTER AVE, CORVALLIS, OR ZiP+4 ▶ 97 330  15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in the of Form 1041- Check here and enter the animon of tax-exempt interest received or accrued during the year and enter the amount of tax-exempt interest received or accrued during the year  16 At any time during calendar year 2016, dot the foundation have an interest in or a signature or other authority over a bank, yes securities, or other financial account in a foreign country?  18 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in the of Form 1412. If "Yes," enter the name of the foreigns country?  19 Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  19 Form 1420 if any item is checked in the "Yes" column, unless an exception applies.  19 Form 1420 if any item is checked in the "Yes" column, unless an exception applies.  19 Form 1420 if any item is checked in the "Yes" column, unless an exception applies.  19 Formsh goods, services, or facilities to (or accept them from) a disqualified person?  19 Formsh goods, services, or facilities to (or accept them from) a disqualified person?  19 Formsh goods, services, or facilities to (or accept them from) a disqualified person?  19 For service pay money or property for a government office (Exception Check 'No' if the foundation agreed or asked p	
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?  If Yes, "attach statement (see instructions)  13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address ► N/A  14 The books are in care of ► WILLIAM R. FORD  Telephone no. ►541-753-8356  Located at ► 1863 NW LESTER AVE, CORVALLIS, OR  IP 14 ► 97 330  15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-Pf in fleu of Form 1041 - Check here and enter the amount of fax-exempt interest received or accrued during the year and enter the amount of tax-exempt interest received or accrued during the year securities, or other financial account in a foreign country?  16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?  18 Early Will-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.  19 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?  (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  (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.)  b If I amy answer is "Yes" to 1a(1)-(6), did any of	No
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?  If Yes, 'attach statement (see instructions)  12 Jil 3 X  Website address ▶ N/A  13 The books are in care of ▶ WILLIAM R. FORD  Telephone no. ▶ 541 - 753 - 8356  Located at № 1863 NW LESTER AVE, CORVALLIS, OR  ZIP-4 ▶ 97 330  15 Section 4947(a)(1) nonexempt charitable trusts fiting Form 990-PF in heu 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 over a bank, securities, or other financial account in a foreign country?  See the instructions for exceptions and filing requirements for FinCEN Form 114. If Yes,' enter the name of the foreign country. ▶  Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Required  File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  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?  (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  (5) Transfer any income or assets to 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.)  (6) Agree to pay money or an a current notice regarding disaster assistance (see instructions)?  (7) Charaction of government service, if terminating within 90 days.)  (8) If any answer is "Yes" to 1a(1)-(6), did any of the acts fat to quality unde	
If Yes, attach statement (see instructions)  13	X
13	
Website address ▶ N/A  14 The books are in care of ▶ WILLIAM R. FORD  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 over a bank, securities, or other financial account in a foreign country?  See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foundation of exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foundation felling requirements for FinCEN Form 114. If "Yes," enter the name of the foundation felling requirements for FinCEN Form 114. If "Yes," enter the name of the foundation felling felli	X
14 The books are in care of ▶ WILLIAM R. FORD Located at ▶ 1863 NW LESTER AVE, CORVALLIS, OR 21P-4 ▶ 97 330  15 Section 4947(a)(1) nonexempt charitable trusts thing 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 over a bank, securities, or other financial account in a foreign country?  See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country ▶  Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required  File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  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?  (2) Borrow money from, lead money to, or otherwise extend credit to (or accept it from) a disqualified person?  (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  (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.)  1b If any answer is 'Yes' to 1a(1)-(6), did any of the acts did to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance check here  1c) but the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?  2 Taxes on failure to distribute	
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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.)  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)?  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)?  If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations  If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations  If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations  If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations  If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations  If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations  If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations  If any answer is any any any and any any of the acts fail to qualify under the exceptions described in Regulations  If any any any any any any any any any any	l
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b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?  2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):  a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?  It is the years 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 all years listed, answer "No" and attach	
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Organizations relying on a current notice regarding disaster assistance check here  c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?  2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):  a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?  If "Yes," list the years   h Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	
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before the first day of the tax year beginning in 2016?  2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):  a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?  If "Yes," list the years , , , , , , , , , , , , , , , , , , ,	
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defined in section 4942(j)(3) or 4942(j)(5)): <b>a</b> At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?  If "Yes," list the years <b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach	X
a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?  If "Yes," list the years ▶ , , , , , , , , , , , , , , , , , ,	1
before 2016?  If "Yes," list the years   , , , , , , , , , , , , , , , , , ,	1
If "Yes," list the years , , , , , , , , , , , , , , , , , , ,	ł
b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	İ
statement - see instructions.) N/A 2b	
c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	
<b>&gt;</b>	1
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1
during the year?	ł
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,	}
Form 4720, to determine if the foundation had excess business holdings in 2016)  N/A  3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?  4a 1000 that foundation makes any apparatus of the first Possible 21 1000 that any department is a province that	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	v
had not been removed from jeopardy before the first day of the tax year beginning in 2016?  Form 990-PF	(2016)

PUBLIC HEALTH MICROBIOLOGY Form 990-PF (2016) CHARITABLE TRUST 94-3216399 Page 6 Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section 🗌 Yes 🔀 No 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations N/A section 53.4945 or in a current notice regarding disaster assistance (see instructions)? 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A \_ Yes L If "Yes," attach the statement required by Regulations section 53 4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? Х b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b If "Yes" to 6b, file Form 8870 Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/AInformation About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred (c) Compensation (e) Expense account, other allowances (b) Title, and average hours per week devoted to position (a) Name and address (If not paid, enter -0-) compensation WILLIAM R FORD CO-TRUSTEE 1863 LESTER AVE 0 0 0. CORVALLIS, OR 97330 1.00 JANNA E FORD CO-TRUSTEE 1863 LESTER AVE 0. 1.00 0. 0 CORVALLIS, OR 97330 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deterred (e) Expense account, other (b) Title, and average (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation allowances NONE

Form **990-PF** (2016)

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

Form 990-PF (2016) CHARITABLE TRUST	94-3	216399 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundate Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	_{	
	<del> </del>	
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	<u> </u>	
	_	
T. L. Laumbar of others resource and \$50,000 for professional services	<del></del>	▶ 0
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities	<del></del>	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statisti	cal information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produ	uced, etc	Expenses
1		
SEE STATEMENT 7		0.
2		<u>~</u>
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 I	upon 1 and 2	Amount
1 N/A	illes I aliu z.	Amount
1 1/A		
2		
All other program-related investments. See instructions.		
3		
<b>*</b>		
Total. Add lines 1 through 3		0.
rotali nad into 1 tillough o	<del> </del>	_ <del></del>

## PUBLIC HEALTH MICROBIOLOGY CHARITABLE TRUST

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Ra	Tt X Minimum Investment Return (All domestic foundation	s must complete this part	Foreign foundations, see	instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out chari	table, etc., purposes:		
a /	Average monthly fair market value of securities		1a	17,605. 2,028.
b /	Average of monthly cash balances		1b	2,028.
c f	air market value of all other assets		1c	
ď	「otal (add lines 1a, b, and c)		1d	19,633.
e l	Reduction claimed for blockage or other factors reported on lines 1a and		1 1	
	Ic (attach detailed explanation)	1e	0.	
2 /	Acquisition indebtedness applicable to line 1 assets		2	<u> </u>
3 5	Subtract line 2 from line 1d		3	19,633.
4 (	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amou	unt, see instructions)	4	294.
5 (	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and	d on Part V, line 4	5	19,339.
6_!	Minimum investment return Enter 5% of line 5			967.
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3 foreign organizations check here  and do not complete this page 1941).		oundations and certain	
1 1	Minimum investment return from Part X, line 6		1	967.
2a -	Fax on investment income for 2016 from Part VI, line 5	2a	8.	
b !	ncome tax for 2016. (This does not include the tax from Part VI.)	2b		
	Add lines 2a and 2b		20	8.
	Distributable amount before adjustments. Subtract line 2c from line 1		3	959.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5 /	Add lines 3 and 4		5	959.
6 (	Deduction from distributable amount (see instructions)		6	0.
7 1	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on P	art XIII, line 1	7	959.
	rt XII Qualifying Distributions (see instructions)			
	Amounts paid (including administrative expenses) to accomplish charitable, etc., p	ourposes:		0.044
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	2,844.
	Program-related investments - total from Part IX-B		1b	0.
	Amounts paid to acquire assets used (or held for use) directly in carrying out char	ritable, etc., purposes	2	
	Amounts set aside for specific charitable projects that satisfy the.			
	Suitability test (prior IRS approval required)		3a	<del></del>
	Cash distribution test (attach the required schedule)		3b	
	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8		4	2,844.
	Foundations that qualify under section 4940(e) for the reduced rate of tax on net i	nvestment	{	•
	ncome. Enter 1% of Part I, line 27b		5	8.
	Adjusted qualifying distributions. Subtract line 5 from line 4		6	2,836.
١	Note: The amount on line 6 will be used in Part V, column (b), in subsequent year 4940(e) reduction of tax in those years.	rs when calculating whether th	e foundation qualifies for the	e section

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PUBLIC HEALTH MICROBIOLOGY CHARITABLE TRUST

(d) 2016
2010
959.
959.
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	BLE TRUST	CDIOLOGI		94-3	216399 Page 10
Part XIV Private Operating F		structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling of	determination letter tha	at it is a private operating			
foundation, and the ruling is effective for	2016, enter the date of	the ruling	<b>•</b>		
b Check box to indicate whether the found	ation is a private operati	ing foundation described	I in section	4942(j)(3) or 4	1942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		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	į	}	1		)
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,			<u> </u>		
line 4 for each year listed					
d Amounts included in line 2c not	 				
used directly for active conduct of	Į				
exempt activities					
e Qualifying distributions made directly		<del> </del>	<del> </del>	-	<del> </del>
for active conduct of exempt activities.	1				
Subtract line 2d from line 2c	Į				
3 Complete 3a, b, or c for the	<u> </u>	<del>                                     </del>	<del>                                     </del>	<del></del>	<del> </del>
alternative test relied upon:	1				1
a "Assets" alternative test - enter.	1				
(1) Value of all assets		<del> </del>	<del> </del>	<del> </del>	<del> </del>
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test - enter		<del> </del>	<del> </del>	<del></del>	<del> </del>
2/3 of minimum investment return	İ				
shown in Part X, line 6 for each year	İ			1	ĺ
listed	<del></del>	<del> </del>	<del> </del>		<del> </del>
c "Support" alternative test - enter;	Į				}
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on				1	
securities loans (section	1		}		1
512(a)(5)), or royalties)	<del> </del>		<del> </del>		
(2) Support from general public and 5 or more exempt					
organizations as provided in		1	į		
section 4942(j)(3)(B)(iii)	<u> </u>	<del> </del>			
(3) Largest amount of support from					
an exempt organization	<u> </u>	<del> </del>	<del>                                     </del>	·	·
(4) Gross investment income				1 05 000	
Part XV Supplementary Info			if the foundatio	n nad \$5,000 or m	iore in assets
at any time during t		ructions.)	<del></del>	· · · · · · ·	
1 Information Regarding Foundation	•				
a List any managers of the foundation wh year (but only if they have contributed n			ntributions received by th	ie foundation before, the cl	ose of any tax
, , , ,	iore man \$5,000). (See	Section 507 (u)(2).)			
NONE		<del></del>	<del></del>	<del></del>	
b List any managers of the foundation wh other entity) of which the foundation has			ı (or an equally large por	tion of the ownership of a	partnership or
	sa 10 % of greater filtere	551			
NONE		<del></del> -			<del></del>
2 Information Regarding Contributi		· ·	-		
Check here \( \sum_{\text{\colored}} \] If the foundation of the foundation makes gifts, grants, etc.	•	•	-	•	
	<del>`</del>			<del></del> _	iu u.
a The name, address, and telephone num			olications should be addr	essed:	
OREGON STATE UNIVERS					
DEPT OF MICROBIOLOGY			-1		
b The form in which applications should b	e submitted and informa	ation and materials they	snouia incluae:		
NONE			<del></del>		
c Any submission deadlines.					
NONE	o ouch oo by cooperate	anlawan ah-washin fial-	o lundo of partitudes = = =	- other feeters:	
d Any restrictions or limitations on awards					ひでわぐてのマ
RECIPIENTS MUST BE S	TODEMIS OF	MICKODIOTO	GI AT UREGU	M STATE ONL	AUDILI

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CHARITABLE TRUST

3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual	1	D	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	Or Substantial Contributor	- Isopian		
		}	1	
KEVIN PIGAO		þ	PROVIDED SCHOLARSHIP	
		}	TO JUNIOR MAJORING IN	
		}	MICROBIOLOGY	
		Ì	ASSISTANCE TOWARD AN	
		<del> </del>	UNDERGRADUATE DEGREE.	1,000.
NO VINOU HUIT I NY			DROVIDED COANT HOR	
MS XIHOU HUI LAU		ļī I	PROVIDED GRANT FOR	
	j	Ì	ADVANCED TRAINING AT	
	Į		THE CENTER FOR DISEASE	
			CONTROL IN ATLANTA FOR EMERGING PROCEDURES	1 124
			EMERGING PROCEDURES	1,134.
		}		
		1		
		ļ		
Total		<del></del>	<b>▶</b> 3a	2 124
b Approved for future payment				2.134
b y pproved for fatore payment			1	
NONE	}			
		1		
Total			▶ 36	
1 1/101			<b>▶</b> 30	0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ded by section 512 513, or 514	(e)					
•	(a) Business	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income					
1 Program service revenue:	code	Aillouit	code	Amount	Tunction income					
a	<del> </del>	<del></del>	<u></u>	<del></del>						
b	<del> </del>		├							
<u> </u>	<u> </u>		<del> </del> -							
•	<del> </del>	<del></del>	<del> </del>	<del></del>						
t										
g Fees and contracts from government agencies	<u> </u>		<b> </b>	<del></del>						
2 Membership dues and assessments										
iterest on savings and temporary cash										
investments 1.										
4 Dividends and interest from securities			14	425.						
5 Net rental income or (loss) from real estate:		 								
a Debt-financed property	<u> </u>	 <del></del>	<b></b>							
<b>b</b> Not debt-financed property	ļ	 	ļ		<u></u>					
6 Net rental income or (loss) from personal	ļ				}					
property	<u> </u>		ļ							
7 Other investment income	<b> </b>				<del> </del>					
8 Gain or (loss) from sales of assets other		li	10	470	1					
than inventory 18 478.										
9 Net income or (loss) from special events  O Gross profit or (loss) from sales of inventory										
0 Gross profit or (loss) from sales of inventory  1 Other revenue:										
Other revenue:										
b		<del></del>								
C										
d										
e										
12 Subtotal. Add columns (b), (d), and (e)		0.	<u> </u>	904.	0.					
13 Total. Add line 12, columns (b), (d), and (e)				13	904.					
(See worksheet in line 13 instructions to verify calculations.)										
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes						
Line No. Explain below how each activity for which incom			contrib	outed importantly to the accor	nplishment of					
the foundation's exempt purposes (other than t	<del></del>		1 20	COMPLICUED AC	WE COTT					
NO SOLICITATIONS OR CAL HAVE NOT IDENTIFIED A N										
WITHIN THE STATE OF CAL										
PUBLIC HEALTH MICROBIOL										
PROCEDURES.	.00101	101( 112 /12 /022								
TO PUBLICIZE THE TRUST	WE CON	TINUED OUR M	IEMB	ERSHIP IN THE	CORVALLIS					
CHAMBER OF COMMERCE. UN										
MEMBERSHIP FROM PERSONA	L FUND	S.								
THE ELEANOR G. FORD MEM	ORIAL	SCHOLARSHIP	WAS	AWARDED TO K	EVIN PIGAO BY					
THE DEPARTMENT CHAIR OF										
UNIVERSITY. MR PIGAO IS										
STUDENT. WITHOUT THIS S										
HIS STUDIES. THESE ENDO										
MICROBIOLOGY MONETARY A					DEGREE AND					
POSSIBLE FUTURE CAREERS	IN TH	E AREA OF PU	דחמו	C HEALTH.	<del></del>					

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Par	t XVII	Information Re Exempt Organ		sfers To a	and Transa	ctions a	nd Relations	hips With Noncha	ritable	•	
1 [	Old the ore	ganization directly or indir		of the followin	on with any other	organizatio	n described in sect	on 501(c) of	T-	Yes	No
		other than section 501(c)			-			1011 00 1(0) 0.		-	
		from the reporting founda			=		_ <del></del>				!
	1) Cash	, ,		•	3				1a(1)		Х
(	2) Other	assets							1a(2)		X
b (	Other tran	sactions:									
(	1) Sales	of assets to a noncharitat	ble exempt organizat	ion					1b(1)		_X_
(	2) Purch	ases of assets from a nor	ncharitable exempt o	rganization					1b(2)		X X X X
(	<ol><li>Renta</li></ol>	l of facilities, equipment, o	or other assets						1b(3)		<u>X</u>
(	4) Reiml	oursement arrangements							1b(4)		<u>X</u>
-	-	or loan guarantees							1b(5)		<u>X</u>
	-	rmance of services or mei							1b(6)		X
		facilities, equipment, mai							1c		<u>X</u>
C	r services	s given by the reporting fo	oundation. If the four	idation receive				narket value of the goods, or sharing arrangement, s		ets,	
		) the value of the goods, ( (b) Amount involved			e exempt organiz	ation	(d) Description	of transfers transactions and			
a) Line	e no	(b) Amount involved	(c) Name of	N/A	e exempt organiz	ation	(u) Description	of transfers transactions, and	Snaring an	rangeme	nts
	<del></del>			IN/A							
					······································		<del></del>	<del></del>			
	<del></del>						-				
	<del></del>						<del></del>				
							1	······································			
							<u> </u>				
							ļ				
2a	s the four	idation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exe	mpt organiz	ations described	_			_
I	n section	501(c) of the Code (other	r than section 501(c)	(3)) or in sect	tion 527?				Yes	X	No
<b>b</b> 1	f "Yes," co	implete the following sche						·····			
		(a) Name of org	anization		(b) Type of org	ganization		(c) Description of relations	ship		
	<del></del>	N/A									
					<u></u>						
		penalties of perjury, I declare telef, it is true, correct, and con						. h	ay the IRS	discuss	this
Sig	n j	4	17	<i> </i>		/		sh	turn with th lown below	(see ins	er :tr_)?
Her	1 744	Millagen	A. Tra	<u>/</u>		1/201	CO-TRI	JSTEE L	X Yes	: L	J No
	Sign	nature of officer or trustee			Date		Title				
		Print/Type preparer's na	ame	Preparer's s	ignature		pate 14-17	Check if PTIN			
р				110	. 1 1-	m		self- employed			
Pai		HEATHER L.		Mes	unes		youa		0092		
	parer	Firm's name ► BOL	DT CARLIS	LE + S	MITH			Firm's EIN ► 93-0	5706	15	
USE	Only	Posts de la company	0 45					ļ		-	
		Firm's address ► 20			SW					<b>~</b>	
		L AL	BANY, OR	<u>97321</u>				Phone no. 541 – 9			
								F	orm <b>99</b> 0	0-PF	(2016)

#### PUBLIC HEALTH MICROBIOLOGY CHARITABLE TRUST

CHARITABLE TRUST	94-3216399
Part XV Supplementary Information	
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution	
NAME OF RECIPIENT - MS XIHOU HUI LAU	
PROVIDED GRANT FOR ADVANCED TRAINING AT THE CENTER FOR	DISEASE CONTROL
IN ATLANTA FOR EMERGING PROCEDURES UNKNOWN TO THE CALIF	FORNIA PUBLIC
HEALTH LABS.	
	<del></del>

623655 04-01-16

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY	CASH IN	VESTMENTS	SI	'ATEMENT	1
SOURCE		REVE	NUE OOKS	NET IN	(B) VESTMENT COME			€
CENTRAL WILLAMETTE		<del></del>	1.		1.			1.
TOTAL TO PART I, LI	NE 3		1.		1.			1.
FORM 990-PF	DIVIDEND	S AND INTER	EST FRO	M SECUR	ITIES	SI	'ATEMENT	2
SOURCE	GROSS AMOUNT	GAINS	RE'	VENUE		ST-		
USAA	425	•	0.	425.	4:	25.	4:	25.
TO PART I, LINE 4	425		0.	425.	4:	25.	4:	25.
FORM 990-PF		ACCOUNTI	NG FEES			SI	ATEMENT	3
DESCRIPTION			NET IN	VEST-	(C) ADJUSTEI NET INCO	D	CHARITA	
INDIRECT ACCOUNTING	FEES -	710.		0.		0.	7:	10.
TO FORM 990-PF, PG	1, LN 16B	710.		0.		0.	7:	10.
FORM 990-PF		ТАХ	ES	<del></del>		Sī	ATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B NET IN MENT I		(C) ADJUSTE NET INCO		(D) CHARITA PURPOS	
INDIRECT TAXES/LICE	NSES -	16.		16.		0.		0.
TO FORM 990-PF, PG	1, LN 18	16.		16.		0.		0.

FORM 990-PF DEPRECIATION	OF ASSETS NO	T HELD FOR INV	ESTMENT	STATEMENT 5
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE	FAIR MARKET VALUE
COMPUTER AND SOFTWARE IPAD 2 LAPTOP COMPUTERS	1,719. 499. 945.	1,719. 499. 918.	0. 0. 27.	0.
TO 990-PF, PART II, LN 14	3,163.	3,136.	27.	27.
FORM 990-PF	CORPORA	TE STOCK		STATEMENT 6
DESCRIPTION		ВС	OOK VALUE	FAIR MARKET VALUE
200 SHS HEWLETT PACKARD 200 SHS MICROSOFT CORP MONEY MARKET ACCOUNT		<del></del>	2,770. 5,011. 453.	6,112. 12,428. 453.
TOTAL TO FORM 990-PF, PART	II, LINE 10B		8,234.	18,993.
FORM 990-PF SUMMARY	OF DIRECT CH	ARITABLE ACTIV	/ITIES	STATEMENT 7

#### ACTIVITY ONE

UNDER THE FOUNDATIONS'S PRIMARY PURPOSE, ONE GRANT WAS AWARDED DURING 2016. AN ADDITIONAL CONTRIBUTION TO THE ELEANOR G. FORD MEMORIAL SCHOLARSHIP WAS MADE TO INCREASE THE ENDOWMENT AT OREGON STATE UNIVERSITY AS THE PRINCIPLE HAD DECREASED TO AN INSUFFICENT LEVEL TO FULLY FUND THE ANNUAL SCHOLARSHIP. THIS YEAR ONE SCHOLARSHIP WAS AWARDED FROM THE ENDOWMENT HELD BY OSU FOUNDATION.

				EXPENSES
				<del></del>
TO FOR	M 990-PF,	PART IX-A	, LINE 1	0.
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`	sar Ending n Accumulated Depreciation	0. 1,719.	.0	55. 918.	55. 3,136.
	t Current Year 9 Deduction e			<u>.</u>	
	Current Sec 179 Expense				
	Beginning Accumulated Depreciation	1,719.	499.	863.	3,081.
	Basis For Depreciation	1,719.	499.	945.	3,163.
	Reduction In Basis			_	
Č-	Section 179 Expense				
990-PF	Bus % Excl				
	Unadjusted Cost Or Basis	1,719.	499.	945.	3,163.
	Noc>	HY1 7	HX17	HY17	
	Life	5.00	5.00	5.00	
	Method	2000B	200DB	200DB	
	Date Acquired	02/01/02	08/22/10	06/20/12	
FORM 990-PF PAGE 1	Description	COMPUTER AND SOFTWARE	IPAD	2 LAPTOP COMPUTERS	* TOTAL 990-PF PG 1 DEPR
ORM 990	Asset No	1 0	2 1	3	