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Return of Private Foundation

OMB No 1545-0052

DLN: 93491299000147

2016

Form 990-PF
Department of the Treasury

Internal Revenue Service

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 instructions is at www.irs.gov/form990pf.

Open to Public Inspection

For	caler	ndar year 2016, or tax year beginning 01-01-20)16 , aı	nd er	nding 12-31-	2016	
		indation YLER PERPETUAL TRUST			A Employer ide	entification numbe	r
		DERS BROWN CHAIRMAN			95-6967787		
		d street (or P O box number if mail is not delivered to street address) RREN AVENUE NORTH	Room/suite		B Telephone nu	mber (see instructio	ns)
2-	131 WA	INNER AVENUE NORTH			(206) 669-8452	2	
		, state or province, country, and ZIP or foreign postal code A 98109	•		C If exemption	application is pendin	g, check here
							▶ ∟
G Ch	neck al		former public charity			ganızatıons, check h	▶ ∟
		☐ Final return ☐ Amended return ☐ Address change ☐ Name change				rganizations meeting k here and attach co	
u	ook tu	pe of organization ✓ Section 501(c)(3) exempt private	foundation			undation status was	
		1 4947(a)(1) nonexempt charitable trust Other taxable			under sectio	n 507(b)(1)(A), ched	ck here 🕨 🗀
		T T	☑ Cash ☐ Accru	al	F If the founda	ation is in a 60-mont	h termination
of '	year (f e 16) ⊳	from Part II, col (c), \$ 10,167,208				n 507(b)(1)(B), ched	
Da	et T		<u>, </u>	<u> </u>			(4) Dishiman and
Pα	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	(a) Revenue and expenses per books	(Ь)	Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach					
	2	schedule) Check ▶ ☑ If the foundation is not required to attach					
	2	Sch B					
	3	Interest on savings and temporary cash investments	2,643		2,643		
	4	Dividends and interest from securities	187,657		187,657		
	5a	Gross rents					
Revenue	b	Net rental income or (loss)					
	6a	Net gain or (loss) from sale of assets not on line 10	733,086				
	ь	Gross sales price for all assets on line 6a 5,705,437					
	7	Capital gain net income (from Part IV, line 2)			733,086		
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)	1				
	11	Other income (attach schedule)	116		116		
	12	Total. Add lines 1 through 11	923,502		923,502		
	13	Compensation of officers, directors, trustees, etc	57,000		5,696		51,304
_	14	Other employee salaries and wages					
ses	15 16a	Pension plans, employee benefits					
ē	_	Accounting fees (attach schedule)	8,525		4,263		4,262
EX	b				•		4,20.
۸e	17	Other professional fees (attach schedule)	77,862		77,862		
ratı	17 18	Interest	16,649		0		,
<u> </u>	19	Taxes (attach schedule) (see instructions)	10,045				`
Ē	20	Occupancy					
Ad	21	Travel, conferences, and meetings	26,715		2,671		24,044
Ē	22	Printing and publications			_,		
Ď.	23	Other expenses (attach schedule)	4,825		549		4,276
Operating and Administrative Expenses	24	Total operating and administrative expenses.					
ber		Add lines 13 through 23	191,576		91,041		83,886
ō	25	Contributions, gifts, grants paid	396,444				396,444
	26	Total expenses and disbursements. Add lines 24 and 25	588,020		91,041		480,330
	27	Subtract line 26 from line 12			·		
	а	Excess of revenue over expenses and	335,482				
	ь	disbursements Net investment income (if negative, enter -0-)			832,461		
	c	Adjusted net income(if negative, enter -0-)			,		
For		work Reduction Act Notice, see instructions.	<u> </u>		Cat No 11289>	I Foi	<u> </u> m 990-PF (2016

5,544,021

1,764,690

3,063

3,377

3,377

8,016,239

8,016,239

8,019,616

8,019,616

9

6,163,509

1,483,359

3,483

8,356,347

4,626

4,626

8,351,721

8,351,721

8,356,347

2

3

4

5

6

8,016,239

8,351,721

8,351,721 Form 990-PF (2016)

335,482

n

7,964,887

1,478,870

3,483

10,167,208

Investments—corporate bonds (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow SFAS 117, check here 🕨 🗹

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

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

Analysis of Changes in Net Assets or Fund Balances

Investments—land, buildings, and equipment basis ▶

Less accumulated depreciation (attach schedule) ▶ _____

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

Permanently restricted

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) ▶ _

Other increases not included in line 2 (itemize) ▶ _____

and complete lines 24 through 26 and lines 30 and 31.

Paid-in or capital surplus, or land, bldg, and equipment fund

Less accumulated depreciation (attach schedule)

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe ▶_

Unrestricted

Temporarily restricted

Assets 10a

b

c

11

12 13

14

15

16

17 18

19 20

21

22 23

24

25

28

29

30

31

Part III

2

3

Liabilities

Balances

Fund 26

5

Assets 27

Net

Page **3**

	(a) ne kınd(s) of property sold (e g , re house, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a ST GAIN/LOSS - CS			Р		
b LT GAIN/LOSS - CS			Р		
c ST GAIN/LOSS - WCT			Р		
d LT GAIN/LOSS - WCT			Р		
e CAPITAL GAINS DIVIDEN	os		Р		
(5)	(f)		(g)	(h)
(e) Gross sales price	Depreciation allowed		other basis		or (loss)
<u> </u>	(or allowable)	plus exp	ense of sale	(e) plus (f	minus (g)
	2,779		667,499		-54,720
b 1,136	·		1,064,012		72,013
c 1,604	1,912		1,662,379		-57,467
d 2,350),858		1,578,461		772,397
e	863				863
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69	((I)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col (ı) (յ), ıf any	Gains (Col (col (k), but not	h) gain minus less than -0-) or om col (h))
a					-54,720
b					72,013
С					-57,467
d					772,397
e					863
-	or (net capital loss) ain or (loss) as defined in sections 1 t I, line 8, column (c) (see instructions 1		Part İ, line 7	3	733,086
	nder Section 4940(e) for Re Ivate foundations subject to the sec				
Was the foundation liable for the	e section 4942 tax on the distributal c qualify under section 4940(e) Do		in the base period?		es 🔽 No
 Enter the appropriate am 	ount in each column for each year,	see instructions before	making any entries	i	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab		(d) Distribution rat (col (b) divided by c	col (c))
2015	615,479		10,273,271		0 059911
2014	449,288		10,444,418		0 043017
2013	584,600		9,642,809		0 060625
2012	524,697		9,307,308		0 056375
2011	341,635		9,238,015		0 036981
2 Total of line 1, column (d)		2		0 256909
number of years the found	for the 5-year base period—divide I dation has been in existence if less icharitable-use assets for 2016 from	than 5 years 🔒 🗓	or by the 3		0 051382 9,749,570
5 Multiply line 4 by line 3			5		500,952
	nt income (1% of Part I, line 27b)		6		8,325
					509,277
	ons from Part XII, line 4 ,		8		480,330
	ater than line 7, check the box in Pa			g a 1% tax rate Se	
				Fo	orm 990-PF (2016)

5a During the year did the foundation pay or incur any amount to

Page **6**

	(1) Carry on propaganda, or otherw(2) Influence the outcome of any spon, directly or indirectly, any voide.	pecific public election (see sect	cion 4955), or to carry	☐ Yes ✓	No		
	No						
	No						
	(4) Provide a grant to an organization section 4945(d)(4)(A)? (see iii		· •		No		
	(5) Provide for any purpose other th						
	educational purposes, or for the			∟ Yes 💌	No		
D	If any answer is "Yes" to 5a(1)–(5), Regulations section 53 4945 or in a					ь	
	Organizations relying on a current n	• •	•	•		-	
С	If the answer is "Yes" to question 5a						
	tax because it maintained expenditu			· · □ Yes □	No		
	If "Yes," attach the statement requir	red by Regulations section 53	4945-5(d)	□ les □	10		
6а	Did the foundation, during the year,	receive any funds, directly or	indirectly, to pay premit	ıms on			
	a personal benefit contract?			· 🗌 Yes 🗸			
b	Did the foundation, during the year,	pay premiums, directly or ind	lirectly, on a personal be	nefit contract?	6	ь	No
7 _	If "Yes" to 6b, file Form 8870	- 4b - 5-, , , d-4, , , , , , , , , , , , , , , , , , ,					
7a h	At any time during the tax year, was If yes, did the foundation receive an			∟ tes 💌		ь	
		Officers, Directors, Trust					
Pa	and Contractors	incers, Directors, Trust	ices, roundation ric	magers, mgmy raid Er	прюус	-3,	
1	List all officers, directors, trustee	es, foundation managers an	nd their compensation	(see instructions).			
	(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred		pense ac her allow	
See /	Additional Data Table	(B) devoted to position		compensation			
2	Compensation of five highest-pai	d employees (other than th	hose included on line 1	L—see instructions). If no	ne, ente	r "NONE	."
Na	(a) ame and address of each employee pa more than \$50,000	Title, and average hours per week	(c) Compensation	Contributions to employee benefit plans and deferred		ense acc er allowa	,
IONI	· '	(-,		(d) compensation			
ION	<u> </u>						
	I number of allers are also as						_
ota	I number of other employees paid over	er \$50,000			Fa 4	000 PF	(2016)

Form 990-PF (2016)		Page 7
Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional service	ces (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		• 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rel		r of Expenses
organizations and other beneficiaries served, conferences convened, research papers produ	ucea, etc	
1		
2		
2		
3		
4		
4		
Part IX-B Summary of Program-Related Investments (see	· · · · · · · · · · · · · · · · · · ·	
Describe the two largest program-related investments made by the foundation during t	ne tax year on lines 1 and 2	Amount
1		
2		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3		▶ 0
<u> </u>		Form 990-PF (2016)

1b

2

За 3b

Form 990-PF (2016)

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Amounts set aside for specific charitable projects that satisfy the

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

2

3

ge **9**

470.830

Form **990-PF** (2016)

Form 990-PF (2	016)
Part XIII	Und

b Total for prior years

From 2011. . . . **b** From 2012. . . . c From 2013. .

d From 2014. . . .

XII, line 4 > \$

indicated below:

e From 2015.

2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only.

Excess distributions carryover, if any, to 2016

f Total of lines 3a through e.

d Applied to 2016 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

6 Enter the net total of each column as

b Prior years' undistributed income Subtract 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 assessed. d Subtract line 6c from line 6b Taxable amount —see instructions e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions 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 may be required - see instructions) 8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2017.

10 Analysis of line 9 a Excess from 2012. .

b Excess from 2013. . c Excess from 2014. .

d Excess from 2015. .

e Excess from 2016. .

Subtract lines 7 and 8 from line 6a . . .

4 Qualifying distributions for 2016 from Part

a Applied to 2015, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions).

88.473

120.577

88.473

120.577

9.500

n 990-PF (2016)					Pag
art XIII Un	ndistributed Income (see instruc	tions)			
		(a)	(b)	(c)	(d)

(a) (b) (c) (d)	art XIII	Undistributed Income (see instruc				
Corpus Years prior to 2015 2016			(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016

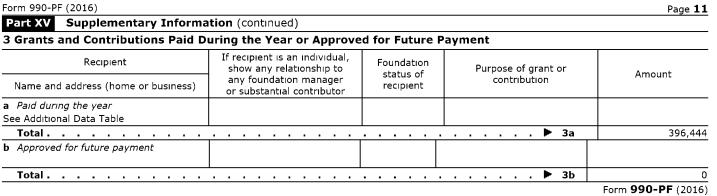
209,050

9.500

218.550

218,550

	GIT XIII	The state of the s								
		(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016					
1	Distributable amount for 2016 from Part XI, line 7				470,830					



Form 990-PF (2016)					Page 12
Part XVI-A Analysis of Income-Producing	Activities				
Enter gross amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a b					
c					
d					
e f					
g Fees and contracts from government agencies					
2 Membership dues and assessments3 Interest on savings and temporary cash					
Investments			14 14	2,643 187,657	
5 Net rental income or (loss) from real estate				20.7007	
a Debt-financed property.b Not debt-financed property..					
6 Net rental income or (loss) from personal property					
7 Other investment income			14	116	
8 Gain or (loss) from sales of assets other than inventory			18	733,086	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory11 Other revenue a					
b					
c					
e					
12 Subtotal Add columns (b), (d), and (e).		0		923,502	0
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations	ins)		13	3	923,502
Part XVI-B Relationship of Activities to th	e Accomplish	ment of Exem	pt Purposes		
Line No. Explain below how each activity for which the accomplishment of the foundation's explain tructions (instructions)					
				Fo	m 990-PF (2016)

Part XVII

Information Regarding Transfers To and Transactions and Relationships With Noncharitable
Exempt Organizations

	II G AV		Exempt Organi	zations										
			nization directly or in de (other than sectio								on 501		Yes	No
a ·	ransfer:	s fro	m the reporting foun	dation to a n	oncha	arıtable ex	empt organizatio	on d	of					
((1) Cas	sh.										1a(1)		No
((2) Oth	ner as	ssets								. [1a(2)		No
Ь	Other tra	ansad	ctions											
((1) Sale	es of	assets to a nonchar	itable exemp	t orga	anızatıon.					. [1 b(1)		No
((2) Pur	chas	es of assets from a r	oncharitable	exem	npt organiz	zation				[1b(2)		No
((3) Rer	ntal c	f facilities, equipmen	nt, or other a	ssets.						[1b(3)		No
((4) Rei	mbur	rsement arrangemen	ts							. [1b(4)		No
	•		r loan guarantees.								-	1b(5)		No
((6) Perf	orma	ince of services or m	embership oi	fund	lraising so	licitations				.	1b(6)		No
	_		cılıtıes, equipment, r								. [1c		No
d 1	f the an	iswer	to any of the above	ıs "Yes," cor	nplete	the follow	ving schedule C	olu	mn (b) should al	ways show the fair n	narket va	alue		
			other assets, or ser ction or sharing arra									9		
	,	unou	ction or onaring arra	ingerinerie, on		(a, the value of t		goods, other asse	its, or services recen				
(a)	_ine No	(1	b) Amount involved	(c) Name of	nonch	arıtable exe	mpt organization	$oxed{oxed}$	(d) Description of	transfers, transactions,	and sharı	ng arra	ngemen	its
								\vdash						
								<u> </u>						
			tion directly or indire								_	1	□	
			section 501(c) of the	•	than	section 50	O1(c)(3)) or in so	ecti	on 527?		. ∟	l Yes	✓ N	0
Ь 1	f "Yes,"		plete the following s			1 4	L) T		_ 1	(-) D	-61-b			
			(a) Name of organization	on		(b) Type of organiza	atioi	<u>1</u>	(c) Description	or relation	nsnip		
	Un	nder	penalties of perjury,	I declare tha	t I ha	ve examın	ed this return, i	nclu	uding accompany	ng schedules and sta	atements	s, and	to the	best
			nowledge and belief		orrect	, and com	plete Declaratio	n o	of preparer (other	than taxpayer) is ba	ased on a	all infor	matior	n of
Sig	,,,,		oreparer has any kno 	wieage			1			.	4 th - TD	C J		
He	re 👠	***	***				2017-10-20		*****		1ay the IR vith the pr			
		Sıg	nature of officer or t	rustee			Date		Title	(:	see ınstr)	🤊 🗹 Y	es 🗆 N	lo
		T	- ·		_									
			Print/Type preparer's	name	Prep	arer's Sigi	nature		Date	Check if self-	PTIN			
										employed ▶ □	F	00104	951	
Pai	id		KELLY R WILSON						2017-10-20	' ' ' = =				
	epare	با n												
	e Onl		ırm's name ► HOA	G & ROBI IN	С					F	Firm's EI	N ▶56	23457	16
J S	UIII		ırm's address ▶ 26	60 TOWNSG	ATE R	OAD STF	330							
		ľ								,	Phone no	(805	494-9	8414
WESTLAKE VIL					LAGE,	AGE, CA 91361					Phone no (805) 494-8414			

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, not paid, enter (e) other allowances hours per week Contributions to (b) devoted to position -0-) employee benefit plans and deferred compensation MARTHA APPELLO TRUSTEE 5,625 1 00 113 RIDGEVIEW LANE BLDG 4 MT ARLINGTON, NJ 07856 DR PAUL H BARBER TRUSTEE 5,625 1 00 2046 GLENDON AVENUE

LOS ANGELES, CA 90025				
ALLYN E BROWN ESQ	TRUSTEE	5,625	0	0
31900 NE CANTER LANE SHERWOOD, OR 97140	1 00			
COURTNEY L BROWN	TRUSTEE	5,625	0	0
119 NE MONROE STREET	1 00			

SHERWOOD, OR 97140				
COURTNEY L BROWN	TRUSTEE	5,625	0	0
119 NE MONROE STREET PORTLAND, OR 97212	1 00			
JOHN HOAG	TRUSTEE	5,625	0	0
1013 WINDMILL ROAD	1 00			

DRIPPING SPRINGS, TX 78620				
STEPHANIE PICKERING	TRUSTEE	5,625	0	0
4633 HUTSON DRIVE PARKDALE, OR 97041	1 00			

4633 HUTSON DRIVE PARKDALE, OR 97041	1 00			
NANCY SHARP	TRUSTEE	5,625	0	0
27152 B VIA CHICUELINA	1 00			

CHAIRMAN/MANAGER/TRUSTEE

5 00

17,625

SAN JUAN CAPISTRANO, CA 92675

2431 WARREN AVENUE NORTH

ANDERS M BROWN

SEATTLE, WA 98109

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
GLOBAL WILDLIFF CONSERVATION	N/A	PUBLIC	ADVANCING ENVIRONMENTAL	30.0

a Paid during the year				
GLOBAL WILDLIFE CONSERVATION PO BOX 129 AUSTIN. TX 78767	N/A	PUBLIC CHARITY	ADVANCING ENVIRONMENTAL RESEARCH	30,000

PO BOX 129 AUSTIN, TX 78767		CHARITY	RESEARCH	,
GLOBAL WILDLIFE CONSERVATION PO BOX 129 AUSTIN, TX 78767	N/A	PUBLIC CHARITY	ADVANCING ENVIRONMENTAL RESEARCH	5,500

PO BOX 129 AUSTIN, TX 78767		CHARITY	RESEARCH	,,,,,
UNIVERSITY OF CALIFORNIA SAN DIEGO 9500 GILMAN DRIVE 0352 LA JOLLA, CA 92093	N/A	EOF	ADVANCING ENVIRONMENTAL RESEARCH	35,000

UNIVERSITY OF CALIFORNIA SAN DIEGO 9500 GILMAN DRIVE 0352 LA JOLLA, CA 92093	N/A	EOF	ADVANCING ENVIRONMENTAL RESEARCH	35,000
WASHINGTON STATE UNIVERSITY 2606 WEST PIONEER AVENUE	N/A	EOF	ADVANCING ENVIRONMENTAL RESEARCH	39,444

WASHINGTON STATE UNIVERSITY 2606 WEST PIONEER AVENUE PUYALLUP, WA 98371	N/A	EOF	ADVANCING ENVIRONMENTAL RESEARCH	39,444
9500 GILMAN DRIVE 0352 LA JOLLA, CA 92093				

LA JOLLA, CA 92093				
WASHINGTON STATE UNIVERSITY 2606 WEST PIONEER AVENUE PUYALLUP, WA 98371	N/A	EOF	ADVANCING ENVIRONMENTAL RESEARCH	39,444
OREGON BRAVO YOUTH ORCHESTRA		PUBLIC	HELPING AT-RISK YOUTH	40,000

WASHINGTON STATE UNIVERSITY 2606 WEST PIONEER AVENUE PUYALLUP, WA 98371	N/A	EOF	ADVANCING ENVIRONMENTAL RESEARCH	39,444
OREGON BRAVO YOUTH ORCHESTRA PO BOX 17356		PUBLIC CHARITY	HELPING AT-RISK YOUTH	40,000

2606 WEST PIONEER AVENUE PUYALLUP, WA 98371		RESEARCH	
OREGON BRAVO YOUTH ORCHESTRA PO BOX 17356 PORTLAND. OR 97217	PUBLIC CHARITY	HELPING AT-RISK YOUTH	40,000

, , , , , , , , , , , , , , , , , , ,			
OREGON BRAVO YOUTH ORCHESTRA PO BOX 17356 PORTLAND, OR 97217	PUBLIC CHARITY	HELPING AT-RISK YOUTH	40,000
Total	 		396,444

3a

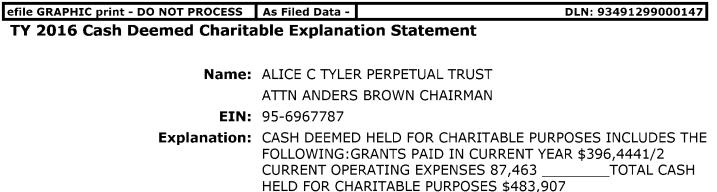
Form 990PF Part XV Line 3 - Gran	ts and Contributions Paid	During the	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
THE NEXT DOOR 965 TUCKER ROAD HOOD RIVER, OR 97031		PUBLIC CHARITY	HELPING AT-RISK YOUTH	39,000
COLUMBIA GORGE ECOLOGY INSTITUTE PO BOX 1104 HOOD RIVER, OR 97031	N/A	PUBLIC CHARITY	ADVANCING ENVIRONMENTAL RESEARCH	18,000
UNIVERSITY OF OREGON 1720 EAST 13TH AVENUE STE 312 EUGENE, OR 97403	N/A	EOF	ADVANCING ENVIRONMENTAL RESEARCH	100,000
UNIVERSITY OF WASHINGTON	N/A	EOF	ADVANCING ENVIRONMENTAL	89,500

HOOD RIVER, OR 97031		CHARITY	RESEARCH	
UNIVERSITY OF OREGON 1720 EAST 13TH AVENUE STE 312 EUGENE, OR 97403	N/A	EOF	ADVANCING ENVIRONMENTAL RESEARCH	100,000
UNIVERSITY OF WASHINGTON 4333 BROOKLYN AVENUE NE SEATTLE, WA 98105	N/A	EOF	ADVANCING ENVIRONMENTAL RESEARCH	89,500

Total . . 3a

396,444

efile GRAPHIC print - DO NOT P	ROCESS	As Filed D	ata -			DLN: 93491299000147	
TY 2016 Accounting Fees Schedule							
_							
Name: ALICE C TYLER PERPETUAL TRUST ATTN ANDERS BROWN CHAIRMAN EIN: 95-6967787							
Category	Am	ount		Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
TAX RETURN PREPARATION		8,525		4,263		4,262	



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TY 2016 Investments Corporat	e Bonds Sche	dule	
Name: /	ALICE C TYLER PE	RPETUAL TRUST	
A	ATTN ANDERS BR	OWN CHAIRMAN	

EIN: 95-6967787		
Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE BONDS & BOND FUNDS	1,483,359	1,478,870

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TV 2016 Investments Cornerat	a Stack School	dulo	
TY 2016 Investments Corporat	e Stock Sche	uule	
Name	NICE CITYLED DI	EDDETIMAL TOUCT	
name: A	ALICE C I TLER PI	ERPETUAL TRUST	
A	ATTN ANDERS BR	OWN CHAIRMAN	

EIN: 95-6967787		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
STOCK, EQUITY FUNDS, OTHER	6,163,509	7,964,887

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491299000147					
TY 2016 Investments Govern	TY 2016 Investments Government Obligations Schedule							
	_							
Name:	ALICE C TYLER	R PERPETUAL TRUST						
	ATTN ANDERS	BROWN CHAIRMAN						
EIN:	95-6967787							
US Government Securities - End of Year Book Value:		0						
US Government Securities - End of Year Fair Market Value:		0						
State & Local Government Securities - End of Year Book Value:		100,035						
State & Local Government Securities - End of Year Fair Market Value:		114,007						

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Name: ALICE CITYLER PERPETUAL TRUST

ATTN ANDERS BROWN CHAIRMAN

1099 INCOME IN EXCESS OF CY BOOK INCOME

Description

Other Assets Schedule

EIN: 95-6967787

Beginning of Year -

Book Value

3,063

Fnd of Year - Book

Value

End of Year - Fair Market Value

3,483

3,483

DLN: 93491299000147

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	N: 93491299000147		
TY 2016 Other Expenses Schedule						
Name	e: ALICE C TYLER	PERPETUAL TRUS	ST			
	ATTN ANDERS BROWN CHAIRMAN					
EIN: 95-6967787						
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
ADMIN EXPENSES	4,751	475		4,276		
FOREIGN TAX ON INVESTMENTS	74	74		0		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491299000147
TY 2016 Other Income Schedul	e	

Name: ALICE CITYLER PERPETUAL TRUST

ATTN ANDERS BROWN CHAIRMAN

EIN: 95-6967787

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Other Income Schedule			
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
OAKTREE CAPITAL GROUP LLC	116	116	116

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DI	N: 93491299000147			
TY 2016 Other Liabilities Schedule							
Name:	ALICE C TYLER	R PERPETUAL	. TRUST				
	ATTN ANDERS BROWN CHAIRMAN						
EIN:	95-6967787						
Description		Beginning of Year - Book Value	End of Year - Book Value				
FEDERAL TAXES PAYABLE			3,377	4,626			

efile GRAPHIC print - DO NOT PROCES	SS As Filed Data	-	DL	N: 93491299000147				
TY 2016 Other Professional Fees Schedule								
Nan	ne: ALICE C TYL	ER PERPETUAL TR	UST					
ATTN ANDERS BROWN CHAIRMAN								
EIN: 95-6967787								
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				
CUSTODIAN/INVESTMENT ADVISORY SERVICES	77,862	77,862		0				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491299000147				
TY 2016 Taxes Schedule								
Name: ALICE C TYLER PERPETUAL TRUST								
	ATTN ANDERS BROWN CHAIRMAN							
EIN:	95-6967787							
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				
CY FEDERAL EXCISE TAXES	16,649	0		0				