Form **990-PF**

Return of Private Foundation

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

1709

2016

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. OCT 1, 2016 SEP 30, For calendar year 2016 or tax year beginning , and ending 2017 A Employer identification number Name of foundation THE N.B. AND JACQUELINE GIUSTINA 93-1139522 FOUNDATION Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone number (541)345-2301P.O. BOX 989 City or town, state or province, country, and ZiP or foreign postal code C If exemption application is pending, check here 97440-0989 EUGENE, OR Initial return D 1 Foreign organizations, check here G Check all that apply: Initial return of a former public charity Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization 9 E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: | X | Cash Accrual F If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here (from Part II, col (c), line 16) 8,334,725. (Part I, column (d) must be on cash basis) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (c) Adjusted net (b) Net investment (The total of amounts in columns (b), (c) and (d) may not necessarily equal the amounts in column (a)) charitable purposes (cash basis only) expenses per books income income N/A Contributions, gifts, grants, etc., received でなは正常。 2 Check X if the foundation is not required to attach Sch B Interest on savings and temporary cash investments 2,065 2,065 STATEMENT 177,280 177,280 STATEMENT. Dividends and interest from securities 5a Gross rents b Net rental income or (loss) ~ .4K ? 10 499,726 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 2,318,229. 499,726. Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances OGDEN, UT b Less Cost of goods sold N c Gross profit or (loss) 206. STATEMENT 206 11 Other income SCANNED JAN 679,277 679,277 12 Total Add lines 1 through 11 0. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 975. 975 0. **b** Accounting fees STMT 4 46,845. 46,845. 0. c Other professional fees STMT 5 17 Interest 596. 447 149. STMT 6 18 Taxes 19 Depreciation and depletion 21 Travel, conferences, and meetings 50. 50. 0 22 Printing and publications 23 Other expenses Operating 24 Total operating and administrative 48,466. 48,267 199. expenses Add lines 13 through 23 350,200. 350,200 25 Contributions, gifts, grants paid 26 Total expenses and disbursements 48,267 350,399. 398,666 Add lines 24 and 25 27 Subtract line 26 from line 12 280,611 2 Excess of revenue over expenses and disbursements 631,010 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

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Par	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
- all	column should be for end of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	48,257.	63,797.	63,797.
2	Savings and temporary cash investments	282,302.	196,619.	196,619.
3	Accounts receivable ►			
	Less: allowance for doubtful accounts ▶			
4				
İ	Less: allowance for doubtful accounts ▶		1	
5				
6				
	disqualified persons			
7	· · · · · · · · · · · · · · · · · · ·			
'		1	}	
, ,	Less: allowance for doubtful accounts			
Assets	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
ASS 6	., ,			
10	a Investments - U.S and state government obligations	4 622 246	5 000 040	0.054.200
	b Investments - corporate stock STMT 7	4,633,316.	5,038,213.	8,074,309.
	c Investments - corporate bonds			
11	Investments land, buildings and equipment basis	İ		
	Less accumulated depreciation			
12	Investments - mortgage loans			
13	Investments - other			
14	Land, buildings, and equipment: basis ▶		•	
	Less accumulated depreciation			
15	Other assets (describe ►)			
16	Total assets (to be completed by all filers - see the			
	instructions. Also, see page 1, item ()	4,963,875.	5,298,629.	8,334,725.
17				-
18	Grants payable			• • •
١				, i
Lrabilities 02 21 20 21				•
를 21				
روا تر	Other habilities (describe)			
	Other Habilities (describe)			
23	Total liabilities (add lines 17 through 22)	0.	0.	
-120	Foundations that follow SFAS 117, check here			
8 04	and complete lines 24 through 26 and lines 30 and 31	4,963,875.	5 208 620	
	Unrestricted	4,903,873.	5,298,629.	
25	Temporarily restricted			
B 26	Permanently restricted Foundations that do not follow SEAS 117, check here			
5	Touristant and the following of the Try, the ok here			
<u>ا</u> و	and complete lines 27 through 31			
\$ 27				
es 28	· · · · · · · · · · · · · · · · · · ·			
₹ 29	Retained earnings, accumulated income, endowment, or other funds			
g 30	Total net assets or fund balances	4,963,875.	5,298,629.	
1				
31	Total liabilities and net assets/fund balances	4,963,875.	5,298,629.	
Parl	Analysis of Changes in Net Assets or Fund B	alances		
				
	al net assets or fund balances at beginning of year - Part II, column (a), line	30		4 062 075
•	ist agree with end-of-year figure reported on prior year's return)		11	4,963,875.
	er amount from Part I, line 27a		. 2	280,611.
	er increases not included in line 2 (itemize) STOCK BASIS	ADJUSTMENT	3	54,143.
	I lines 1, 2, and 3		4	5,298,629.
_	reases not included in line 2 (itemize)	 		0.
6 Tot	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	. 6	5,298,629.
				Form 990-PF (2016)

Part IV	Capital Gains a	and Losses for Tax on In	vestmen	t Income						
		be the kind(s) of property sold (e.g. ehouse; or common stock, 200 shs			(b)	How acquired - Purchase - Donation		e acquired , day, yr.)	(d) Date sold (mo., day, yr.)	
1a BEC	KER CAPITAL	MANAGEMENT, INC	•			P			12/31/16	
b										
C					ļ		ļ			
<u>d</u>							}			
<u>e</u>	0 1	(f) Depreciation allowed	(a) Cos	st or other basis	١		(h)	Gain or (loss	.)	
(e)	Gross sales price	(or allowable)		expense of sale				lus (f) minus		
a	2,318,229.			1,818,50	3.				499,726.	
<u>b</u>										
C										
<u>d</u>										
Comp	ete only for assets showing	gain in column (h) and owned by t	he foundation	on 12/31/69			(I) Gains	(Col. (h) gain	minus	
		(j) Adjusted basis		cess of col. (I)		C	òl. (k), bu	t not less that s (from col. i	n -0-) or	
(1) F.	M.V. as of 12/31/69	as of 12/31/69	over	col. (j), if any				s (iroin coi.		
<u>a</u>									499,726.	
<u>b</u>										
d		 		· · · · · · · · · · · · · · · · · · ·						
e						· · · · · · · · · · · · · · · · · · ·				
		∫ If gain, also enter	ın Part I, line	7)					
2 Capital	gain net income or (net cap		ın Part İ, line	7	1	2			499,726.	
		s) as defined in sections 1222(5) and	d (6):							
	also enter in Part I, line 8, c , enter -0- in Part I, line 8	column (c).				2		N/A		
Part V	Qualification Ur	nder Section 4940(e) for	Reduced	Tax on Net	inv	estment Ir	come	= 1,7 = 1		
(For option	al use by domestic private	foundations subject to the section 4	940(a) tax on	net investment in	come	2.)				
If section 4	940(d)(2) applies, leave thi	is part blank.								
	, ,, , , ,	·		ar in the book name	40				Yes X No	
		on 4942 tax on the distributable am fy under section 4940(e). Do not coi		•	100?				Yes No	
		ach column for each year; see the in			ntries					
	(a) Base period years	(b)			(c)			Distril	(d) oution ratio	
Calenda	r year (or tax year beginnin	9 "'/	Adjusted qualifying distributions		Net value of noncharitable-use assets			(col. (b) divided by col. (c))		
	2015		372,397.			,051,66				
	2014		1,317.			<u>,585,32</u> ,166,55			.044997	
	2013 2012		6,207. 5,155.			, 846, 32			.043644	
	2011		$\frac{3}{186}$,099,78			.049843	
	line 1, column (d)						2		.229835	
_		-year base period - divide the total of	on line 2 by 5,	or by the number	of ye	ars			0.45067	
the four	ndation has been in existen	ce it less than 5 years					3		.045967	
4 Enter th	e net value of noncharitable	e-use assets for 2016 from Part X, I	ine 5				4	1	7,957,137.	
	o not raide of hemonamasis	0 000 00000 101 20 10 11 01111 01111					\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		. 133.123	
5 Multiply	line 4 by line 3						5		365,766.	
								}		
6 Enter 1	% of net investment income	e (1% of Part I, line 27b)					6	 	6,310.	
7 Add line	ac 5 and 6						7		372,076.	
r Muu iiili	o a anu v						<u> </u>	 	312,010.	
8 Enter q	ualifying distributions from	Part XII, line 4					8		350,399.	
	is equal to or greater than Part VI instructions	line 7, check the box in Part VI, line	1b, and comp	lete that part usin	g a 1	% tax rate.				

THE N.B. AND JACQUELINE GIUSTINA FOUNDATION

	n 990-PF (2016) FOUNDATION Surt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49		13952		Page 4
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.		300 11130	dotte	
Ια	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)				
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1		12 6	520.
·	of Part I, line 27b			12,	20.
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0.
	Add lines 1 and 2	3		12.6	520.
-	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4		/	0.
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5		12.6	520.
	Credits/Payments				201
	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 8, 495.				
	Exempt foreign organizations - tax withheld at source 6b				
	Tax paid with application for extension of time to file (Form 8868) 6c				
	Backup withholding erroneously withheld 6d				
	Total credits and payments. Add lines 6a through 6d	7		8 4	195.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			<u>. , , , , , , , , , , , , , , , , , , ,</u>
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		1	125.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			<u> </u>
	Enter the amount of line 10 to be Credited to 2017 estimated tax	11			
	ert VII-A Statements Regarding Activities	-!!-			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene i			Yes	No
	any political campaign?		1a	1	
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)	?	1b	1	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published		1	-	
	distributed by the foundation in connection with the activities	, ,			1
c	Did the foundation file Form 1120-POL for this year?		1c		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		<u>'''</u>		
٠	(1) On the foundation \blacktriangleright \$ 0. (2) On foundation managers. \blacktriangleright \$0.				
P	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		- 1		
	managers. > \$ 0.				1
	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	1	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, or				İ
•	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		<u>x</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N/	'A 4b		1
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•	5		X
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law			j
	remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	OR				
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 explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for caler	ıdar	-		
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses		10		X

THE N.B. AND JACQUELINE GIUSTINA Form 990-PF (2016) FOUNDATION 93-1139522 Page 5 Part VII-A | Statements Regarding Activities (continued) No Yes 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) X 11 Did the foundation make a distribution to a donor advised fund over which the foundation or a disgualified person had advisory privileges? X If "Yes," attach statement (see instructions) 12 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A The books are in care of **THE FOUNDATION** Telephone no. \triangleright (541)345-2301 $ZIP+4 \rightarrow 97440-0989$ Located at ► P.O. BOX 989, EUGENE, OR 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 **▶** 15 Yes No 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? 16 Х 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 Yes No 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): Yes X No (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) Yes X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No 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 Yes X No termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations N/A section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? 1b 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 X before the first day of the tax year beginning in 2016? 1c Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(1)(3) or 4942(1)(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 Yes X No before 2016? b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach N/A 2b statement - see instructions) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes X No during the year?

b If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the 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?

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X

3Ъ

4a

N/A

THE N.B. AND JACQUELINE GIUSTINA FOUNDATION

THE N.B. AND JACQUELINE	GIODIII			
FORM 990-PF (2016) FOUNDATION	4700 May Da I	Da audina di	<u>93-11395</u>	22 Page 6
Part VII-B Statements Regarding Activities for Which I	orm 4/20 May Be I	Requirea (contin	ued)	
5a During the year*did the foundation pay or incur any amount to:	10.15()\ 5	<u></u>	[••]	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indir		es X No	
any voter registration drive?	n.			
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section		es X No	
4945(d)(4)(A)? (see instructions)			S LA J NO	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or		es X No	
the prevention of cruelty to children or animals?	1 46 - 4 4 4 4 4		es La No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		in Regulations	NT / 3	c .
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for				
expenditure responsibility for the grant?		1/A L Y	es L No	
If "Yes," attach the statement required by Regulations section 53 4945				1 1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		es X No	
a personal benefit contract?	espend horsels 1 40	Ye	es LALINO	ch v
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal Denetit contract?		<u> </u>	6b X
If "Yes" to 6b, file Form 8870	halter transportion?		es X No	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y (<u> </u>	7b
b If "Yes," did the foundation receive any proceeds or have any net income attributed Part VIII Information About Officers, Directors, Trusto		nagore Highly		70
Paid Employees, and Contractors	ees, i oundation wie	mayers, rngm	,	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
		(c) Compensation	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other
(a) Name and address (b) Title, and average hours per week devoted to position (f) Compensation (d) Contributions (d) Contributions (lif not paid, and deterred to position enter -0-)				
	to position	Cities o y	compensation	allowances
SEE STATEMENT 8		ľ	i	
		0.	0.	0.
		0.	0.	0.
		0.	0.	0.
		0.	0.	0.
		0.	0.	0.
		0.	0.	0.
		0.	0.	0.
		0.	0.	0.
		0.	0.	0.
		0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,			
	(b) Title, and average	enter "NONE."	(d) Contributions to employee benefit plans	(e) Expense
Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000			(d) Contributions to	
	(b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other

THE N.B. AND JACQUELINE GIUSTINA

FOUNDATION FOUNDATION	93-	1139522 Page 7
Part VIII Information About Officers, Directors, Trustees, F Paid Employees, and Contractors (continued)	Foundation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If no	ne, 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 relevant per of organizations and other beneficiaries served, conferences convened, research per per organizations.	vant statistical information such as the apers produced, etc.	Expenses
1 N/A		-
2		
3		
4		
D-4IV D O		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the ta	vy year on lines 1 and 2	Amount
1 N/A	ix year on lines 1 and 2.	Airioditt
1 Ν/ Ω		
2		
All other program-related investments See instructions.		
3		
Total. Add lines 1 through 3	>	0.

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P	Part X Minimum Investment Return (All domestic foundations	must o	omplete this p	art Foreign foui	ndations	s, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charital	ble, etc.	, purposes:			
a	Average monthly fair market value of securities				1a	7,785,798.
b	Average of monthly cash balances				1b	7,785,798.
	Fair market value of all other assets				1c	
d	Total (add lines 1a, b, and c)				1d	8,078,312.
	Reduction claimed for blockage or other factors reported on lines 1a and					
	1c (attach detailed explanation)	1e		0.		
2	Acquisition indebtedness applicable to line 1 assets				2	0.
3	Subtract line 2 from line 1d				3	8,078,312.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amour	nt. see ii	structions)		4	121,175.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and of		•		5	7,957,137.
6	Minimum investment return Enter 5% of line 5		•		6	397,857.
P	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) a	and (1)() private operati	no foundations ar	d certain	
	foreign organizations check here and do not complete this par		,			
1	Minimum investment return from Part X, line 6				1	397,857.
2a	Tax on investment income for 2016 from Part VI, line 5	2a		12,620.		
Ь	Income tax for 2016 (This does not include the tax from Part VI.)	2b	- · · · · · · · · · · · · · · · · · · ·			
С					2c	12,620.
3	Distributable amount before adjustments. Subtract line 2c from line 1				3	385,237.
4	Recoveries of amounts treated as qualifying distributions				4	0.
5	Add lines 3 and 4			1	5	385,237.
6	Deduction from distributable amount (see instructions)				6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Par	rt XIII, li	ne 1		7	385,237.
P	Part XII Qualifying Distributions (see instructions)					
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pu	rposes:				
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26				1a	350,399.
b	Program-related investments - total from Part IX-B				1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charita	able, etc	., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:					
a	Suitability test (prior IRS approval required)				3a	
b	Cash distribution test (attach the required schedule)				3b	
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, 3	and Par	XIII, line 4		4	350,399.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inv	estmen/	t			
	income. Enter 1% of Part I, line 27b				5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4				6	350,399.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years 4940(e) reduction of tax in those years	when c	alculating whethe	r the foundation o	jualifies f	or the section

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Part XIII Undistributed Income (see instructions)

1 Distributable amount for 2016 from Part XI, line 7 2 Undistributed income if any as of the end of 2016 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 d From 2014 e From 2015 f Total of lines 3a through e 4 Qualifying distributions for 2016 from		(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
Inine 7 385, 237	1 Distributable amount for 2016 from Part XI.		····		
2 Undistributed income if any as of the end of 2016 a Enter amount for 2015 only b Total for prior years. O. 3 Excess distributions carryover, if any, to 2016: a From 2011 b From 2012 c From 2013 d From 2014 e From 2015 f Total of lines 3a through e 4 Qualifying distributions for 2016 from	•				385,237.
a Enter amount for 2015 only b Total for prior years. 0. Excess distributions carryover, if any, to 2016: a From 2011 b From 2012 c From 2013 d From 2014 e From 2015 f Total of lines 3a through e 4 Qualifying distributions for 2016 from	2 Undistributed income if any as of the end of 2016				
Total of lines 3a through e Q. Sexcess distributions carryover, if any, to 2016: a From 2011 b From 2012 c From 2013 d From 2014 e From 2015 f Total of lines 3a through e Qualifying distributions for 2016 from	1			347,441.	
a From 2011 b From 2012 c From 2013 d From 2014 e From 2015 f Total of lines 3a through e 4 Qualifying distributions for 2016 from	b Total for prior years.				
a From 2011 b From 2012 c From 2013 d From 2014 e From 2015 f Total of lines 3a through e 4 Qualifying distributions for 2016 from	,		0.		
b From 2012 c From 2013 d From 2014 e From 2015 f Total of lines 3a through e 4 Qualifying distributions for 2016 from	1 ' 1				
c From 2013 d From 2014 e From 2015 f Total of lines 3a through e 4 Qualifying distributions for 2016 from	a From 2011			!	
d From 2014 e From 2015 f Total of lines 3a through e 4 Qualifying distributions for 2016 from		. ,			
e From 2015 f Total of lines 3a through e Oualifying distributions for 2016 from	c From 2013	1			
f Total of lines 3a through e O. 4 Qualifying distributions for 2016 from	d From 2014		~		
4 Qualifying distributions for 2016 from	e From 2015				
	f Total of lines 3a through e	0.			
	4 Qualifying distributions for 2016 from				
	Part XII, line 4 ► \$ 350,399.				
a Applied to 2015, but not more than line 2a 347,441.	a Applied to 2015, but not more than line 2a			347,441.	
b Applied to undistributed income of prior	b Applied to undistributed income of prior				
years (Election required - see instructions)	years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	c Treated as distributions out of corpus				
(Election required - see instructions) 0.	(Election required - see instructions)	0.		'	
d Applied to 2016 distributable amount 2,958	d Applied to 2016 distributable amount				2,958.
e Remaining amount distributed out of corpus	e Remaining amount distributed out of corpus	0.			•
		0.			0.
(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:	1				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.		· ·	<u>, , , , , , , , , , , , , , , , , , , </u>
b Prior years' undistributed income. Subtract	b Prior years' undistributed income. Subtract	, , , , , , ,			
line 4b from line 2b	line 4b from line 2b		0.	,	
c Enter the amount of prior years'	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 O.			0.		
d Subtract line 6c from line 6b. Taxable	d Subtract line 6c from line 6b. Taxable				
amount - see instructions 0.	amount - see instructions		0.		
e Undistributed income for 2015 Subtract line	e Undistributed income for 2015 Subtract line				
4a from line 2a. Taxable amount - see instr.	4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016 Subtract	f Undistributed income for 2016 Subtract				
lines 4d and 5 from line 1. This amount must	lines 4d and 5 from line 1. This amount must				
be distributed in 2017 382, 279	be distributed in 2017				<u>382,279.</u>
7 Amounts treated as distributions out of	7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	corpus to satisfy requirements imposed by	;			
section 170(b)(1)(F) or 4942(g)(3) (Election	section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions) 0.	may be required - see instructions)	0.			
8 Excess distributions carryover from 2011	8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2017	9 Excess distributions carryover to 2017	·			
Subtract lines 7 and 8 from line 6a 0.	Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:	10 Analysis of line 9:				
a Excess from 2012	a Excess from 2012				
b Excess from 2013	b Excess from 2013			.	
c Excess from 2014	c Excess from 2014				
d Excess from 2015	d Excess from 2015	:	li.		
e Excess from 2016	e Excess from 2016				

THE N.B. AND JACQUELINE GIUSTINA Form 990-PF (2016) Page 10 FOUNDATION 93-1139522 Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling 4942(1)(5) b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or Prior 3 years 2 a Enter the lesser of the adjusted net Tax year (c) 2014 (d) 2013 (e) Total (a) 2016 (b) 2015 income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII. line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: "Assets" alternative test - enter (1) Value of all assets (2) Value of assets qualifying under section 4942(1)(3)(B)(1) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed c "Support" alternative test - enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets Part XV at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2	Information Regarding	j Contribution, G	arant, Gift, Loan,	Scholarship, etc	c., Programs:

Check here ► [X] if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Form 990-PF (2016)

FOUNDATION

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Part XV Supplementary Informatio	··	D		
3 Grants, and Contributions Paid During the		Payment		
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		
a Paid during the year				
SACRED HEART MEDICAL CENTER	NONE	PC	GENERAL ASSISTANCE	
FOUNDATION				
P.O. BOX 10905				05.000
EUGENE, OR 97440				95,000
PACIFIC LEGAL FOUNDATION	NONE	PC	GENERAL ASSISTANCE	
930 G STREET		1		
SACRAMENTO, CA 95814				30,000
OREGON STATE UNIVERSITY FOUNDATION	NONE	PC	GENERAL ASSISTANCE	
850 SW 35TH STREET				
CORVALLIS, OR 97333				100,000
MCKENZIE RIVER CLINIC	NONE	PC	GENERAL ASSISTANCE	
P.O. BOX 183				10,000
BLUE RIVER, OR 97413				10,000
VOLUNTEERS IN MEDICINE CLINIC	NONE	PC	GENERAL ASSISTANCE	
2260 MARCOLA ROAD				05.000
SPRINGFIELD OR 97477	NTINUATION SHEE	፲ የጥ / ር \	▶ 3a	25,000 350,200
b Approved for future payment	MIINOAIION SHEE	1(5)	Ja	330,200
NONE				
NONE				
Total		<u> </u>	▶ 36	0 DE (2016

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor CASA OF LANE COUNTY NONE PC GENERAL ASSISTANCE 174 DEADMOND FERRY ROAD 20,000. SPRINGFIELD OR 97477 LANE COMMUNITY COLLEGE FOUNDATION NONE PC GENERAL ASSISTANCE 4000 EAST 30TH AVENUE EUGENE OR 97405 5,000. SCIENCE FACTORY NONE PC GENERAL ASSISTANCE P.O. BOX 1518 EUGENE OR 97440 5,000. MARIST HIGH SCHOOL NONE GENERAL ASSISTANCE PC 1900 KINGSLEY ROAD 50,000. EUGENE OR 97401 EUGENE MISSION NONE PC GENERAL ASSISTANCE P.O. BOX 1149 5,000. EUGENE, OR 97440 ANGEL HAIR FOUNDATION NONE PC GENERAL ASSISTANCE P.O. BOX 2727 5 200. EUGENE OR 97402 Total from continuation sheets 90 200.

Part XVI-A	Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a			1	h	
b					
c	1				
d		· · · · · · · · · · · · · · · · · · ·			
е	T .				
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments	1		14	2,065.	
4 Dividends and interest from securities			14		
5 Net rental income or (loss) from real estate:					
a Debt-financed property		,			
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			18	206.	
8 Gain or (loss) from sales of assets other					
than inventory			18	499,726.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b					
C					
d					
е					
2 Subtotal. Add columns (b), (d), and (e)	<u> </u>	0.		679,277.	
3 Total Add line 12, columns (b), (d), and (e)				13	679,277.
See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Acc	omplishment of E	xemp	t Purposes	
Line No Explain below how each activity for which income the foundation's exempt purposes (other than			\ contrib	outed importantly to the accom	plishment of
with teathers of exempt purposes (other than	by providing id	indo for odon parposco).			
					
					
					·
					
					
					
					
					
					·
					

Form 99						93-113		Page 13
Part .	XVII		egarding Transfers To	and Transactions a	nd Relationsl	nips With Noncha	ritable	
	<u> </u>	Exempt Organ	·			· · · · · · · · · · · · · · · · · · ·		
			rectly engage in any of the follow	-		on 501(c) of	ין ן	es No
)(3) organizations) or in section 5		zations?		1 1	ļ
		from the reporting founda	ation to a noncharitable exempt o	irganization of:				1,,
	Cash						1a(1)	X X
	Other						1a(2)	X
		sactions.					1	\
		of assets to a noncharital	· •				1b(1)	X
			ncharitable exempt organization				1b(2)	X
		of facilities, equipment,					1b(3)	X
		oursement arrangements					1b(4)	X
		s or loan guarantees	umbarahin or fundraising adjustat	1000			1b(5)	
			embership or fundraising solicitati				1b(6)	X X
			uling lists, other assets, or paid er "Yes," complete the following sch	•	rave chow the fair m	arket value of the goods	1c	
			oundation. If the foundation recei					.5,
			other assets, or services received		, in any transaction	or snaring arrangement, a	11000	
(a) Line n		(b) Amount involved	(c) Name of noncharitab		(d) Description	of transfers, transactions, and	sharing arrar	ngements
<u> </u>	-	(-/-	N/A		(-,			
			14/11		 			
				······································				
		·						
								
	1							
								
2a Ist	he four	idation directly or indirect	tly affiliated with, or related to, on	e or more tax-exempt organiz	ations described			
เกร	section	501(c) of the Code (other	r than section 501(c)(3)) or in sei	ction 527?			Yes	X No
b_lf "\	Yes," cc	implete the following sch	edule.					
		(a) Name of org	ganization	(b) Type of organization	(c) Description of relations	hip	
		N/A	- <u></u>					
								
				<u> </u>				
۵.			that I have examined this return, includ implete. Declaration of preparer (other th			Ma	the IRS dis	cuss this
Sign		(a) or (a)	1 / /	\ - o ()		sho	irn with the p wn below (s	reparer e instr)?
Here		MATICA	filletina VUU	70/116	PRESID	ENT L	Yes	L_ No
	Sign	ature of officer or trustee		Date	Title	ـــا		
		Print/Type preparer's na	ame Proper's	sionature		Check if PTIN		
D~:~					ſ	self- employed		0.0
Paid	ara-	GARY W STA		STACHLOWSK	10/30/17		01637	
Prepa		Firm's name DEL	AP LLP	<u></u> .		Firm's EIN ► 93-0	41871	U
Use (July .	Complete and desired to the co	AC 1/2-0					
			85 MEADOWS ROAL	-			0.07 4.5	1.0
		LA	KE OSWEGO, OR	97035		Phone no. 503-6		
						Fo	orm 990-	PF (2016)

FORM 990-PF INTERE	ST ON SAVI	NGS AND TE	1PORARY	CASH IN	NVESTMENTS	STATEMENT	1
SOURCE	REVI	(A) REVENUE PER BOOKS 2,065.		(B) VESTMENT VCOME	(C) ADJUSTED NET INCOME		
INTEREST INCOME	<u> </u>			2,065.			
TOTAL TO PART I, LINE 3					2,065.		
FORM 990-PF	DIVIDEND	S AND INTER	REST FR	OM SECUE	RITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAI GAINS DIVIDENI	R	(A) EVENUE R BOOKS	(B) NET INVEST MENT INCOM		
DIVIDEND INCOME	177,280	•	0.	177,280.	177,280	•	
TO PART I, LINE 4	177,280	•	0.	177,280.	177,280	•	
FORM 990-PF		OTHER :	INCOME			STATEMENT	3
DESCRIPTION			(A) REVEN PER BO		(B) NET INVEST- MENT INCOME	(C) ADJUSTE NET INCO	
MISC INCOME-SEC LITIGATION, MERGER			206.		206.		
TOTAL TO FORM 990-P	LINE 11	206.		206.			
FORM 990-PF		ACCOUNT	ING FEE	S		STATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I		(C) ADJUSTED NET INCOME		
TAX PREPARATION FEE	us —	975	•	975.			0.
TO FORM 990-PF, PG	1, LN 16B	975	•	975.			0.
	=						

(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
46,845.	46,845.		0.	
46,845.	46,845.		0.	
TAX	ES		STATEMENT 6	
(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
596. 447			149.	
596.	447.		149.	
RM 990-PF CORPORATE STOCK			STATEMENT 7	
	ВОС	OK VALUE	FAIR MARKET VALUE	
		645,840. 561,540. 268,056. 858,102. 819,351. 324,381. 1,024,765. 208,494. 75,643. 170,418. 81,623.	665,914. 667,593. 444,120. 1,868,625. 1,492,506. 689,845. 1,587,880. 268,567. 109,085. 197,704. 82,470.	
	PER BOOKS 46,845. 46,845. TAX (A) EXPENSES PER BOOKS 596.	PER BOOKS MENT INCOME 46,845. 46,845. TAXES (A) (B) EXPENSES NET INVEST- PER BOOKS MENT INCOME 596. 447. CORPORATE STOCK BOOKS	### BOOKS MENT INCOME NET INCOME ### 46,845. ### 46,845. ### 46,845. ### 46,845. ### 46,845. ### 46,845. ### 46,845. ### 46,845. ### 46,845. ### 46,845. ### 46,845. ### 46,845. ### 46,845. ### 46,845. ### Additional Content of C	

	LIST OF OFFICERS, I	STATEMENT 8		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
NATALIE GIUSTINA NEWLOVE PO BOX 989 EUGENE, OR 97440	PRESIDENT 0.00	0.	0.	0.
IRENE GIUSTINA GOLDBECK PO BOX 989 EUGENE, OR 97440	SECRETARY/TREA	ASURER 0.	0.	0.
MARK GIUSTINA PO BOX 989 EUGENE, OR 97440	VICE-PRESIDENT 0.00	0.	0.	0.
L.M. GIUSTINA PO BOX 989 EUGENE, OR 97440	DIRECTOR 0.00	0.	0.	0.
JACQUELINE L. GIUSTINA PO BOX 989 EUGENE, OR 97440	DIRECTOR 0.00	0.	0.	0.
KATE G. HUDSON PO BOX 989 EUGENE, OR 97440	DIRECTOR 0.00	0.	0.	0.
BRANDON NEWLOVE PO BOX 989 EUGENE, OR 97440	DIRECTOR 0.00	0.	0.	0.
MARISSA GIUSTINA PO BOX 989 EUGENE, OR 97440	DIRECTOR 0.00	0.	0.	0.
JUSTINA GOLDBECK PO BOX 989 EUGENE, OR 97440	DIRECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PA	GE 6, PART VIII	0.	0.	0.