

For calendar year 2017, or tax year beginning 01-01-2017, and ending 12-31-2017

Name of foundation THE RESER FAMILY FOUNDATION		A Employer identification number 27-2624875	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 8		Room/suite	B Telephone number (see instructions) (503) 526-5716
City or town, state or province, country, and ZIP or foreign postal code BEAVERTON, OR 97075		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 42,763,406	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) (Part I, column (d) must be on cash basis)		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part 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	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	10,000,370			
	2 Check <input type="checkbox"/> If the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities . . .	794,875	794,875		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	911,004			
	b Gross sales price for all assets on line 6a 2,428,208				
	7 Capital gain net income (from Part IV, line 2) . . .		911,004		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	11,706,249	1,705,879		
	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	10,695			10,695
	c Other professional fees (attach schedule)	69,104	27,642		41,462
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .	28,144	16,504		11,640
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	16,555	30		16,524
	24 Total operating and administrative expenses. Add lines 13 through 23	124,498	44,176		80,321
	25 Contributions, gifts, grants paid	1,299,726			1,299,726
	26 Total expenses and disbursements. Add lines 24 and 25	1,424,224	44,176		1,380,047
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	10,282,025			
	b Net investment income (if negative, enter -0-)		1,661,703		
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	270,711	113,411	113,411
	2 Savings and temporary cash investments	200,116	10,000,593	10,000,593
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges		12,997	
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	28,958,801	32,649,402	32,649,402
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	29,429,628	42,776,403	42,763,406	
Liabilities	17 Accounts payable and accrued expenses		14,153	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)		66,497	
	23 Total liabilities (add lines 17 through 22)		80,650	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted	29,429,628	42,695,753	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 Total net assets or fund balances (see instructions)	29,429,628	42,695,753	
	31 Total liabilities and net assets/fund balances (see instructions) .	29,429,628	42,776,403	

Part III Analysis of Changes in Net Assets or Fund Balances		
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	29,429,628
2 Enter amount from Part I, line 27a	2	10,282,025
3 Other increases not included in line 2 (itemize) ▶ _____	3	3,341,630
4 Add lines 1, 2, and 3	4	43,053,283
5 Decreases not included in line 2 (itemize) ▶ _____	5	357,530
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	42,695,753

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a See Additional Data Table			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a See Additional Data Table			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	2	911,004
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?



Yes



No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	1,120,838	26,930,775	0 041619
2015	1,078,858	22,048,845	0 048930
2014	800,547	21,092,908	0 037953
2013	749,419	16,701,101	0 044872
2012	457,903	15,060,807	0 030404
2 Total of line 1, column (d)			2 0 203778
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 0 040756
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			4 32,811,292
5 Multiply line 4 by line 3			5 1,337,257
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 16,617
7 Add lines 5 and 6			7 1,353,874
8 Enter qualifying distributions from Part XII, line 4			8 1,380,047

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	16,617
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	
3	Add lines 1 and 2.	3	16,617
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	16,617
6	Credits/Payments		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	8,280
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	26,280
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	9,663
11	Enter the amount of line 10 to be Credited to 2018 estimated tax <input type="checkbox"/> 9,663 Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
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 remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> 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? <i>If "No," attach explanation</i> .	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	No

Part VII-A Statements Regarding Activities (continued)

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).	11		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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► WWW.THERESERFAMILYFOUNDATION.ORG	13	Yes	
14	The books are in care of ► MARIJO PRLAIN Telephone no ► (503) 526-5716			

Located at ► PO BOX 8 BEAVERTON OR ZIP+4 ► 97075

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here	<input type="checkbox"/>		
	and enter the amount of tax-exempt interest received or accrued during the year	15		
16	At any time during calendar year 2017, 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	Yes	No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 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)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(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)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(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).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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)?		1b	
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 2017?		1c	
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 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	If "Yes," list the years ► 20____, 20____, 20____, 20____			
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 statement—see instructions).		2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2017 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 2017).		3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?		4b	No

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				
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations 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.	<input type="checkbox"/>			
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?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>				
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	No	
	<i>If "Yes" to 6b, file Form 8870</i>				
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and 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 compensation	Expense account, (e) other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				

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

3 Five highest-paid independent contractors for professional services (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. ▶

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments See instructions	
3	

Total. Add lines 1 through 3 ▶

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	31,863,118
b	Average of monthly cash balances.	1b	1,447,838
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	33,310,956
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	33,310,956
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	499,664
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	32,811,292
6	Minimum investment return. Enter 5% of line 5.	6	1,640,565

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	1,640,565
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	16,617
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	16,617
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	1,623,948
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	1,623,948
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	1,623,948

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	1,380,047
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
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, and Part XIII, line 4.	4	1,380,047
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	16,617
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,363,430

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				1,623,948
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.			1,282,572	
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2017				
a From 2012.				
b From 2013.				
c From 2014.				
d From 2015.				
e From 2016.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ <u>1,380,047</u>				
a Applied to 2016, but not more than line 2a			1,282,572	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2017 distributable amount.				97,475
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2017 (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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
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 2016 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018				1,526,473
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 2012 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2013.				
b Excess from 2014.				
c Excess from 2015.				
d Excess from 2016.				
e Excess from 2017.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. ▶					
b Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
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					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
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					

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 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)) PATRICIA J RESER	
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	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:	
Check here <input type="checkbox"/> 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 MARI JO PRLAIN PO BOX 8 BEAVERTON, OR 97075 (503) 526-5716	
b The form in which applications should be submitted and information and materials they should include APPLICATIONS SUBMITTED VIA EMAIL OR REGULAR MAIL	
c Any submission deadlines MARCH 1ST, SEPTEMBER 1ST	
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors CHARITABLE ACTIVITIES MUST BE IN OREGON, ORGANIZATION MUST HAVE TAX EXEMPT STATUS	

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	1,299,726
b <i>Approved for future payment</i>				
Total			3b	

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount		
1 Program service revenue						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
2 Membership dues and assessments.						
3 Interest on savings and temporary cash investments						
4 Dividends and interest from securities.			14	794,875		
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.						
8 Gain or (loss) from sales of assets other than inventory			14	188,902		722,102
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue a _____						
b _____						
c _____						
d _____						
e _____						
12 Subtotal Add columns (b), (d), and (e). . .				983,777		722,102
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations)			13			1,705,879

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

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

		Yes	No
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1a(1)	No
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1a(2)	No
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1b(1)	No
--------------	-----------

1b(2)		No
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1b(3)		No
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1b(4)		No
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1b(5)		No
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1b(6)		No
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1c		No
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value
ue

[illegible]

described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

2018-07-09

* * * * *

May the IRS discuss this return with the preparer shown below

(see instr)? ☒ Yes ☐ No

Signature of officer or trustee

Date

Title

**Paid
Preparer
Use Only**

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	JOSEPH G RAKOSKI		2018-07-09		P00168178
	Firm's name ▶ VIERCK & RAKOSKI CPAS PC				Firm's EIN ▶ 91-2016086
	Firm's address ▶ 606 SE 117TH AVENUE SUITE 100 VANCOUVER, WA 98683				Phone no (360) 356-3805

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
586 SH ACCENTURE PLC	D		2017-02-17
162 MOTOROLA SOLUTIONS	D		2017-02-17
3533 569 COHEN & STEERS PREFERRED	D	2011-11-21	2017-12-11
100 ACCENTURE PLC	D	2013-10-14	2017-02-17
304 NIPPON TELEG & TELEPH	D	2013-10-14	2017-02-17
9966 777 VANGUARD TOTAL INTL STOCK	D	2011-11-21	2017-12-11
72 ACCENTURE PLC	D	2013-10-14	2017-02-17
66 PRICELINE GROUP	D		2017-02-17
6006 908 VANGUARD TOTAL STOCK MKT	D	2011-11-21	2017-12-11
28 ACCENTURE PLC	D	2013-10-14	2017-02-17

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
70,642		49,771	20,871
12,816		8,174	4,642
49,975		46,211	3,764
12,055		2,038	10,017
12,633		8,238	4,395
299,975		235,262	64,713
8,680		5,240	3,440
108,394		71,674	36,720
399,975		220,461	179,514
3,376		7,279	-3,903

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			20,871
			4,642
			3,764
			10,017
			4,395
			64,713
			3,440
			36,720
			179,514
			-3,903

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
462 PRIMERICA INC	D		2017-02-17
1158 ASPEN TECHNOLOGY INC	D		2017-02-17
400 PRIMERICA INC	D		2017-02-17
456 AUTODESK INC	D		2017-02-17
300 PRIMERICA INC	D		2017-02-17
389 CHARLES SCHWAB COR	D		2017-02-17
100 PRIMERICA INC	D		2017-02-17
356 CHUBB LTD	D	2013-10-14	2017-02-17
590 ROSS STORES INC	D		2017-02-17
22 CHUBB LTD	D	2013-10-14	2017-02-17

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
37,121		4,560	32,561
65,984		39,235	26,749
32,149		13,629	18,520
38,776		22,030	16,746
24,126		20,004	4,122
16,071		10,097	5,974
8,039		21,083	-13,044
48,199		2,079	46,120
40,324		24,997	15,327
2,978		33,630	-30,652

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			32,561
			26,749
			18,520
			16,746
			4,122
			5,974
			-13,044
			46,120
			15,327
			-30,652

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
692 TAIWAN SEMICONDUCTOR	D		2017-02-17
1552 COPART INC	D		2017-02-17
346 TORO COMPANY	D	2013-10-14	2017-02-17
668 FACEBOOK INC	D		2017-02-17
430 UNITEDHEALTH GRP INC	D		2017-02-17
834 FIDELITY NATL INFO	D		2017-02-17
1020 VISA INC	D		2017-02-17
100 FIDELITY NATL INFO	D	2013-10-14	2017-02-17
13324 45 ABERDEEN INTL EQUITY FD	D		2017-08-07
513 JP MORGAN CHASE & CO	D	2013-10-14	2017-02-17

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
22,292		12,362	9,930
91,326		53,227	38,099
20,829		9,759	11,070
89,165		51,714	37,451
67,803		35,228	32,575
67,925		42,275	25,650
89,047		54,659	34,388
8,147		4,629	3,518
199,975		183,160	16,815
46,215		27,059	19,156

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			9,930
			38,099
			11,070
			37,451
			32,575
			25,650
			34,388
			3,518
			16,815
			19,156

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
2096 436 COHEN & STEERS PREFERRED	D	2011-11-21	2017-08-07
201 MICROCHIP TECHNOLOGY	D	2013-10-14	2017-02-17
6903 693 VANGUARD TOTAL INTL STOCK	D	2011-11-21	2017-08-07

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
29,975		27,361	2,614
14,344		7,342	7,002
199,975		162,737	37,238

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l


Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			2,614
			7,002
			37,238

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(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 compensation	Expense account, (e) other allowances
PATRICIA J RESER	TRUSTEE & CH 3 00	0	0	0
8080 SW 175TH AVENUE BEAVERTON, OR 97007				
MICHELLE BOTTARO	TRUSTEE & AD 0 10	0	0	0
9110 SW 169TH AVENUE BEAVERTON, OR 97007				
DAVID BOTTARO	TRUSTEE 0 10	0	0	0
9110 SW 169TH BEAVERTON, OR 97007				
MINDY CARDENES RESER	TRUSTEE 0 10	0	0	0
8080 SW 175TH AVENUE BEAVERTON, OR 97007				
MICHAEL RESER	TRUSTEE 0 10	0	0	0
PO BOX 1788 NORTH PLAINS, OR 97133				
DEB RESER	TRUSTEE 0 10	0	0	0
PO BOX 1788 NORTH PLAINS, OR 97133				
MARK RESER	TRUSTEE 0 10	0	0	0
17576 SW BULL MOUNTAIN ROAD TIGARD, OR 97224				
LAURIE RESER	TRUSTEE & AD 0 10	0	0	0
17576 SW BULL MOUNTAIN ROAD TIGARD, OR 97224				
MARTY RESER	TRUSTEE 0 10	0	0	0
12190 NW JACKSON QUARRY ROAD HILLSBORO, OR 97124				
JANE RESER	TRUSTEE & AD 0 10	0	0	0
14195 NW HARVEST LANE PORTLAND, OR 97229				
DAVID R JUBB	TRUSTEE 0 10	0	0	0
14195 NW HARVEST LANE PORTLAND, OR 97229				
PAUL LEAVY	TRUSTEE 0 10	0	0	0
19091 SW EDY ROAD SHERWOOD, OR 97140				
BILL WESTPHAL	TRUSTEE 0 10	0	0	0
8080 SW 175TH AVENUE BEAVERTON, OR 97007				
MARIJO PRLAIN	EXECUTIVE DI 10 00	0	0	0
PO BOX 8 BEAVERTON, OR 97075				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ASSISTANCE LEAGUEON FILE ON FILE, OR 97075			OPERATION SCHOOL BELL	10,000
CASA OF POLK COUNTY INCON FILE ON FILE, OR 97075			CAPACITY BUILDING GRANT	12,400
RONALD MCDONALS CHARITIESON FILE ON FILE, OR 97075			RMHC'S GRAB AND GO PILOT PROGRAM	10,000
CASA OF MULTNOMAH AND COLUMBIA COUN ON FILE ON FILE, OR 97075			COLUMBA COUNTY CASA PROJECT	10,000
EPISCOPAL LAYMEN'S MISSION SOCIETY ON FILE ON FILE, OR 97075			CHILDREN'S CLOTHING CLOSET-RENOVATE	4,500
Total ▶ 3a				1,299,726

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COCOA - CENTRAL OREGON COUNCIL ON A ON FILE ON FILE, OR 97075			PREVENTING SENIOR HUNGER IN CENTRAL	8,000
OREGON CASCADES SENIOR SERVICES ON FILE ON FILE, OR 97075			BLIZZARD BOXES FOR MEALS ON WHEELS	6,000
BOYS AND GIRLS AIDON FILE ON FILE, OR 97075			SPECIALIZED FOSTER CARE RECRUITMENT	10,000
HOME PLATE YOUTH SERVICESON FILE ON FILE, OR 97075			DROP-IN CENTER FOR HOMELESS YOUTH	20,000
MEDICAL TEAMS INTERNATIONAL ON FILE ON FILE, OR 97075			OREGON MOBILE DENTAL PROGRAM - REACH	25,000
Total ▶ 3a				1,299,726

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SUSAN G KOMEN FOR THE CURE ON FILE ON FILE, OR 97075			LATINA INITIATIVE	25,000
VIRGINIA GARCIA MEMORIAL FOUNDATION ON FILE ON FILE, OR 97075			THE BEAVERTON WELLNESS CENTER	50,000
CHILDREN'S CANCER ASSOCIATION ON FILE ON FILE, OR 97075			CHEMO PAL PROGRAM	10,000
BREAST FRIENDSON FILE ON FILE, OR 97075			SUPPORT FOR PATIENT SRVS COORDINATOR	5,000
ECUMENICAL MINISTRIES OF OREGON ON FILE ON FILE, OR 97075			SECOND HOME	3,500
Total 				1,299,726
3a				

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

<div>Recipient</div>	<div>If recipient is an individual, show any relationship to any foundation manager or substantial contributor</div>	<div>Foundation status of recipient</div>	<div>Purpose of grant or contribution</div>	<div>Amount</div>
<div>Name and address (home or business)</div>				
<div>a <i>Paid during the year</i></div>				
<div>BOYS AND GIRLS CLUB OF ALBANY ON FILE ON FILE, OR 97075</div>			<div>STEAM AHEAD PROGRAM</div>	<div>12,500</div>
<div>CASA OF LANE COUNTYON FILE ON FILE, OR 97075</div>			<div>A VOICE FOR EVERY CHILD</div>	<div>10,000</div>
<div>LOOKING GLASS YOUTH AND FAMILY SERV ON FILE ON FILE, OR 97075</div>			<div>THE CTR FOR GETTING BETTER CAPITAL</div>	<div>50,000</div>
<div>AMERICAN RED CROSSON FILE ON FILE, OR 97075</div>			<div>HURRICANE HAVEY - SHELTER SUPPORT</div>	<div>10,000</div>
<div>OREGON CASA NETWORKON FILE ON FILE, OR 97075</div>			<div>LOGIC MODEL ST WIDE IMPLEMENTATION</div>	<div>10,000</div>
<div>Total ▶ 3a</div>				<div>1,299,726</div>

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BRIDGE MEADOWSON FILE ON FILE, OR 97075			ON-SITE RESIDENT COORDINATOR	42,500
CANDLELIGHTERS FOR CHILDREN WITH CA ON FILE ON FILE, OR 97075			IN-HOSPITAL FOOD PANTRY PROGRAM	10,000
CASCADE AIDS PROJECTON FILE ON FILE, OR 97075			CAMP KID CONNECTION SUPPORT	5,000
COMMUNITY WAREHOUSEON FILE ON FILE, OR 97075			ACCESSIBILITY PROJECT - PARKING LOT	25,000
ECUMENICAL MINISTRIES OF OREGON ON FILE ON FILE, OR 97075			SECOND HOME	25,000
Total ▶ 3a				1,299,726

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LATINO NETWORKON FILE ON FILE, OR 97075			JUNTOS APRENDEMOS	12,500
MARIO-POLK FOOD SHAREON FILE ON FILE, OR 97075			FOOD RECOVERY PRGM - CAPACITY BUILD	6,000
RAPHAEL HOUSEON FILE ON FILE, OR 97075			EMERGENCY SHELTER SUPPORT	10,000
REBUILDING TOGETHER - WASHINGTON CO ON FILE ON FILE, OR 97075			CRITICAL REPAIR PROGRAM	3,500
ROSE HAVEN CICON FILE ON FILE, OR 97075			ADVOCACY PROGRAM	10,000
Total ▶ 3a				1,299,726

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SALEM FIRE ASSOCIATION NON FILE ON FILE, OR 97075			CPR AND AED TRAINING FOR 8TH GRADE	20,000
SISTER OF THE ROAD NON FILE ON FILE, OR 97075			CAFE HOT MEALS AND BARTER PROGRAM	10,000
STORE TO DOOR NON FILE ON FILE, OR 97075			BRINING NOURISHMENT INCLUSION TO SR	10,000
SUNSHINE DIVISION NON FILE ON FILE, OR 97075			EMERGENCY FOOD AND CLOTHING	10,000
THE ANGELS IN THE OUTFIELD NON FILE ON FILE, OR 97075			PROGRAM SUPPORT FOR CHILDREN	10,000
Total ▶ 3a				1,299,726

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DOUGY CENTERON FILE ON FILE, OR 97075			MILDDLERS SUPPORT GROUP -HILLSBORO	15,000
WHEEL TO WALK FOUNDATIONON FILE ON FILE, OR 97075			DIRECT PURCHASE PROGRAM	5,000
HEALING HUNTER FOUNDATIONON FILE ON FILE, OR 97075			DISCRETIONARY ANGEL GIFT	5,000
MAKE-A-WISH FOUNDATIONON FILE ON FILE, OR 97075			DISCRETIONARY ANGEL GIFT (2)	10,000
ALBERTINA KERRON FILE ON FILE, OR 97075			KITCHEN STOVE CAFE REPLACEMENT	12,500
Total ► 3a				1,299,726

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHILDREN'S CANCER THERAPY DEVELOPME ON FILE ON FILE, OR 97075			DISCRETIONARY ANGEL GIFT	5,000
COMMUNITY TRANSITIONAL SCHOOL ON FILE ON FILE, OR 97075			TRANSPOTATION FOR HOMELESS STUDENTS	12,500
INNOVATIVE CHANGESON FILE ON FILE, OR 97075			YOUTH EDUCATION EXPANSION PROJECT	10,000
NEW FRIENDS OF THE BEAVERTON LIBRAR ON FILE ON FILE, OR 97075			ORANIZATIONAL UPGRADES & ENHANCEMENT	7,000
SERENDIPITY CENTERON FILE ON FILE, OR 97075			THERAPEUTIC RECREATION PROGRAM	5,000
Total ▶ 3a				1,299,726


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ADELANTE MUJERESON FILE ON FILE, OR 97075			CHICAS YOUTH DEVELOPMENT PROGRAM	20,000
PARK ACADEMYON FILE ON FILE, OR 97075			SCHOLARSHIP PROGRAM	50,000
PORTLAND YOUTH BUILDERSON FILE ON FILE, OR 97075			TECHNOLOGY IN SERVICE TO SENIORS	10,000
KLAMATH COMMUNITY COLLEGEON FILE ON FILE, OR 97075			CTE PROGRAM - WORK SKILLS TECHNOLOGY	25,000
ELEVATE OREGONON FILE ON FILE, OR 97075			IN- SCHOOL PROGRAM - PHASE 2	25,000
Total ▶ 3a				1,299,726

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FOUNDATIONS FOR A BETTER OREGON ON FILE ON FILE, OR 97075			EDUCATOR ADVANCEMENT	25,000
OREGON STATE UNIVERSITY FOUNDATION ON FILE ON FILE, OR 97075			DIET AND CANCER PREVENTION	90,000
COMMUNITY RESOURCES TRUST ON FILE ON FILE, OR 97075			CTE - SALEM-KEIZER TECHNICAL EDU	32,000
READING RESULTSON FILE ON FILE, OR 97075			READING TO SUCCEED	12,000
THE CHILDREN'S BOOK BANKON FILE ON FILE, OR 97075			BRINING HOME LIBRARIES- PRE- SCHOOLER	10,000
Total 3a				1,299,726

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LINFIELD COLLEGEON FILE ON FILE, OR 97075			DISCRETIONARY ANGEL GIFT - LINFIELD	5,000
SAINT PAUL PAROCHIAL SCHOOL ON FILE ON FILE, OR 97075			DISCRETIONARY ANGEL STEM IMPL SUPP	2,500
CITIZENS FOR SAFE SCHOOLSON FILE ON FILE, OR 97075			KIDS IN THE MIDLE MENTORING PROGRAM	12,000
CROOK COUNTY HS DISTRICTON FILE ON FILE, OR 97075			MUSIC FOR ALL	2,350
HARRISBURG SCHOOL DISTRICT ON FILE ON FILE, OR 97075			FOOD TO HOME PROGRAM	2,000
Total ▶ 3a				1,299,726

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SCHOOLHOUSE SUPPLIES ON FILE, OR 97075			STORE FOR TEACHERS-PROJECT TO IMPACT	6,000
WASHINGTON COUNTY MUSEUM ON FILE ON FILE, OR 97075			DYNAMIC FIELD TRIPS	10,000
BEAVERTON HIGH SCHOOL ON FILE, OR 97075			DISCRETIONARY ANGEL GIFT- BEAVER DEN	1,500
CENTRO CULTURAL DE CONDADO DE WASHI ON FILE ON FILE, OR 97075			DISCRETIONARY ANGEL GIFT	5,000
REEDVILLE ELEMENTARY SCHOOL ON FILE ON FILE, OR 97075			EVERYBODY PLAYS PROJECT	12,500
Total 3a				1,299,726

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ARTS COUNCIL OF PENDLETONON FILE ON FILE, OR 97075			ARTS ROCKS TEENS	10,000
CANNON BEACH ARTS ASSOCIATION ON FILE ON FILE, OR 97075			15TH ANNUAL SUMMER ARTS CAMP PROGRAM	6,600
CLACKAMAS COUNTRY ARTS ALLIANCE ON FILE ON FILE, OR 97075			EXPANDING YOUTH ARTS FOR CHANGE	12,000
HIGH DESERT MUSEUMON FILE ON FILE, OR 97075			KIDS CURATE	10,000
OREGON BRAVO YOUTH ORCHESTRAS ON FILE ON FILE, OR 97075			BRAVO CESAR CHAVEZ- WIND ENSEMBLE	5,000
Total ▶ 3a				1,299,726

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CORVALLIS ART CENTERON FILE ON FILE, OR 97075			YOUNG ARTIS IN HIGH-RISK SITUATIONS	6,000
TEN GRANDS CONCERTSON FILE ON FILE, OR 97075			TEN GRANDS - PLATFORMS	6,500
TEN GRANDS CONCERTSON FILE ON FILE, OR 97075			FBO OF PIXIE DUST PRODUCTIONS & TEN	12,000
BEAVERTON CIVIC THEATREON FILE ON FILE, OR 97075			THEATRE FOR YOUNG AUDIENCES	11,960
A-WOL DANCE COLLECTIVEON FILE ON FILE, OR 97075			AEROS, AERIAL ARTS TRAINING - YOUTH	5,000
Total ▶ 3a				1,299,726

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BAG AND BAGGAGE PRODUCTIONS ON FILE ON FILE, OR 97075			EMERGING ARTIST PROGRAM	21,300
ETHOSON FILE ON FILE, OR 97075			MUSIC ACROSS OREGON PROJECT	12,500
OREGON CHILDREN'S THEATREON FILE ON FILE, OR 97075			TICKET TO READ - LINKING LITERACY	12,000
OREGON SYMPHONYON FILE ON FILE, OR 97075			MUSIC EDUCATION AND COMMUNITY ENGAGE	20,000
MARYLHURST UNIVERSITYON FILE ON FILE, OR 97075			THE ART GYM - CAPACITY BUILDING	10,000
Total ▶ 3a				1,299,726

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BEAVERTON ARTS AND CULTURE FOUNDATI ON FILE ON FILE, OR 97075			DISCRETIONARY ANGEL- BEF SCHOLARSHIP	5,000
EUGENE DEBBS POTTS FOUNDATION ON FILE ON FILE, OR 97075			EFFIEICENY UPGRADES - COMMUNITY MEET	1,700
CITY OF WESTFIRON FILE ON FILE, OR 97075			PORTAL REST AREA PLAYGROUND	15,000
FRIENDS OF THE BANKS COMMUNITY LIBR ON FILE ON FILE, OR 97075			COMMUNITY ROOM WITH INCLUSION PLAN	40,000
OREGON HISTORICAL SOCIETYON FILE ON FILE, OR 97075			FORWARD CAMPAIGN - DIGITAL WEBSITE	25,000
Total ▶ 3a				1,299,726

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ROGUE FARM CORPSON FILE ON FILE, OR 97075			BEGINNING FARMER PROGRAM TRAINING	10,000
YAMHILL COUNTY HISTORICAL SOCIETY ON FILE ON FILE, OR 97075			EFFICIENCY IMPROVEMENTS-BUILT ENVIR	12,416
YMCA OF DOUGLAS COUNTYON FILE ON FILE, OR 97075			EFFICIENCY IMPROVEMENTS - SWIM POOL	50,000
LAKEVIEW COMMUNITY PARTNERSHIP ON FILE ON FILE, OR 97075			DISCRETIONARY ANGEL GIFT	5,000
LAKEVIEW COMMUNITY PARTNERSHIP ON FILE ON FILE, OR 97075			DIRECTIONARY ANGEL GIFT (2)	5,000
Total ▶ 3a				1,299,726

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
HOME PLATE YOUTH SERVICES ON FILE, OR 97075			JUNIOR BOARD INVESTMENT 2017	5,000
FRIENDS OF THE CHILDREN ON FILE, OR 97075			JUNIOR BOARD INVESTMENT 2017	7,000
SUISLAW WATERSHED CAMP ON FILE, OR 97075			WHATEVER IT CAN BE USED THE MOST	1,500
Total ▶ 3a				1,299,726

TY 2017 Accounting Fees Schedule**Name:** THE RESER FAMILY FOUNDATION**EIN:** 27-2624875**Accounting Fees Schedule**

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX, CONSULTING & PROF FEES	10,695			10,695

TY 2017 Investments Corporate Stock Schedule

Name: THE RESER FAMILY FOUNDATION

EIN: 27-2624875

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CHARLES SCHWAB STOCK & MUTUAL FUNDS	32,649,402	32,649,402

TY 2017 Other Decreases Schedule**Name:** THE RESER FAMILY FOUNDATION**EIN:** 27-2624875

Description	Amount
ACCRUAL TO CASH ADJUSTMENT	67,654
INCOME ON RETURN NOT ON BOOKS	289,876

TY 2017 Other Expenses Schedule**Name:** THE RESER FAMILY FOUNDATION**EIN:** 27-2624875**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
MEMBERSHIP/DUES	4,180			4,180
OFFICE EXPENSE	138			138
BANK FEES	50	30		20
SOFTWARE LICENSE	9,200			9,200
INSURANCE	2,987			2,986

TY 2017 Other Increases Schedule

Name: THE RESER FAMILY FOUNDATION
EIN: 27-2624875

Description	Amount
ADJUSTMENT FOR UNREALIZED GAIN/LOSS	3,341,630

TY 2017 Other Liabilities Schedule**Name:** THE RESER FAMILY FOUNDATION**EIN:** 27-2624875

Description	Beginning of Year - Book Value	End of Year - Book Value
TAXES PAYABLE		10,737
DEFERRED TAXES		55,760

TY 2017 Other Professional Fees Schedule**Name:** THE RESER FAMILY FOUNDATION**EIN:** 27-2624875

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT & FOUNDATION CONSULTI	69,104	27,642		41,462

TY 2017 Taxes Schedule**Name:** THE RESER FAMILY FOUNDATION**EIN:** 27-2624875

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CHARLES SCHWAB FOREIGN TAXES	16,504	16,504		
OREGON DEPT OF JUSTICE - CT12	2,400			2,400
TREASURY DEPT EXCISE TAX-2016 ES	9,240			9,240

Schedule B (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990	OMB No 1545-0047 2017
	Name of the organization THE RESER FAMILY FOUNDATION	Employer identification number 27-2624875

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$ _____

Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization THE RESER FAMILY FOUNDATION	Employer identification number 27-2624875
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Part I Contributors (See instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PATRICIA J RESER 8080 SW 175TH AVENUE BEAVERTON, OR 97007	\$ 10,000,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Employer identification number

27-2624875

Part II **Noncash Property** (See instructions) Use duplicate copies of Part II if additional space is needed

[illegible]

Name of organization THE RESER FAMILY FOUNDATION	Employer identification number 27-2624875
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Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	