

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

Name of foundation KMR Group Foundation		A Employer identification number 32-0185357	
Number and street (or P O box number if mail is not delivered to street address) 9604 NE 126th Ave 2330		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code Vancouver, WA 98682		B Telephone number (see instructions) (360) 859-4070	
G Check all that apply <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Initial return of a former public charity</div> <div><input type="checkbox"/> Final return</div> <div><input type="checkbox"/> Amended return</div> <div><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check here and attach computation	
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	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 20,896,471		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	
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 )			

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)	1,200,000			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	46,477	46,477		
	4 Dividends and interest from securities	179,075	179,075		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	340,496			
	b Gross sales price for all assets on line 6a	2,280,674			
	7 Capital gain net income (from Part IV, line 2)		340,496		
	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)	10,798	0		
	12 Total. Add lines 1 through 11	1,776,846	566,048		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages	86,942	0		86,942
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)	4,301	0		4,301
	b Accounting fees (attach schedule)	9,906	1,981		7,924
	c Other professional fees (attach schedule)	20,405	20,405		0
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	5,919	1,422		12
	19 Depreciation (attach schedule) and depletion	240	0		
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	3,594	0		3,594
	24 Total operating and administrative expenses. Add lines 13 through 23	131,307	23,808		102,773
	25 Contributions, gifts, grants paid	1,001,043			1,001,043
	26 Total expenses and disbursements. Add lines 24 and 25	1,132,350	23,808		1,103,816
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	644,496			
	b Net investment income (if negative, enter -0-)		542,240		
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 . . . . .	10,141	31,758	31,758		
	2	Savings and temporary cash investments . . . . .	5,921,147	6,038,660	6,038,660		
	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 . . . . .					
	10a	Investments—U S and state government obligations (attach schedule)					
	b	Investments—corporate stock (attach schedule) . . . . .	12,657,623	14,826,053	14,826,053		
	c	Investments—corporate bonds (attach schedule) . . . . .					
	11	Investments—land, buildings, and equipment basis ▶ _____ 1,390 Less accumulated depreciation (attach schedule) ▶ _____ 1,390	240				
	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	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	18,589,151	20,896,471	20,896,471			
Liabilities	17	Accounts payable and accrued expenses . . . . .	18,700	31,063			
	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 ▶ _____)					
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	18,700	31,063			
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>						
	24	Unrestricted . . . . .	18,570,451	20,865,408			
	25	Temporarily restricted . . . . .					
	26	Permanently restricted . . . . .					
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 27 through 31.</b>						
	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	<b>Total net assets or fund balances</b> (see instructions) . . . . .	18,570,451	20,865,408			
	31	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	18,589,151	20,896,471			

**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	18,570,451
2	Enter amount from Part I, line 27a . . . . .	2	644,496
3	Other increases not included in line 2 (itemize) ▶ _____	3	1,650,461
4	Add lines 1, 2, and 3 . . . . .	4	20,865,408
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	20,865,408

**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 )
<b>1 a</b> Bessemer - Publicly Traded Securites			
<b>b</b> Bessemer - Publicly Traded Securites			
<b>c</b> Fidelity - Publicly Traded Securities			
<b>d</b> Capital Gains Dividends	P		
<b>e</b>			

(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)
<b>a</b> 514,120		511,084	3,036
<b>b</b> 823,543		775,950	47,593
<b>c</b> 641,833		653,144	-11,311
<b>d</b> 301,178			301,178
<b>e</b>			

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	
<b>a</b>			3,036
<b>b</b>			47,593
<b>c</b>			-11,311
<b>d</b>			301,178
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	<b>2</b>	340,496
<b>3</b> 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		<b>3</b>	

**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	1,173,153	16,762,166	0 069988
2015	892,612	16,909,056	0 052789
2014	648,847	15,339,666	0 042299
2013	815,302	14,458,557	0 056389
2012	493,018	661,484	0 745321

<b>2</b> Total of line 1, column (d)	<b>2</b>	0 966786
<b>3</b> 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	<b>3</b>	0 193357
<b>4</b> Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	<b>4</b>	18,946,315
<b>5</b> Multiply line 4 by line 3	<b>5</b>	3,663,403
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	5,422
<b>7</b> Add lines 5 and 6	<b>7</b>	3,668,825
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	1,103,816

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)**

<b>1a</b>	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>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	10,845
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	10,845
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	10,845
<b>6</b>	Credits/Payments		
<b>a</b>	2017 estimated tax payments and 2016 overpayment credited to 2017	<b>6a</b>	3,120
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	0
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	3,120
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	0
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . <b>▶</b>	<b>9</b>	7,725
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . <b>▶</b>	<b>10</b>	
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2018 estimated tax</b> <b>▶</b> <b>Refunded</b> <b>▶</b>	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> 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? . . . . .	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <b>▶</b> \$ _____ 0 (2) On foundation managers <b>▶</b> \$ _____ 0		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <b>▶</b> \$ _____ 0		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . If "Yes," attach a detailed description of the activities	<b>2</b>	No
<b>3</b> 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? If "Yes," attach a conformed copy of the changes . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T	<b>5</b>	No
<b>6</b> 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? . . . . .	<b>6</b>	Yes
<b>7</b> 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 . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <b>▶</b> _____		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	<b>8b</b>	Yes
<b>9</b> 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)? If "Yes," complete Part XIV . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	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).	<b>11</b>		<b>No</b>
<b>12</b>	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)	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>WWW KMRGRP COM</b>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>MARTIN RIFKIN</b> Telephone no <b>(360) 882-0756</b>			

Located at **9604 NE 126TH AVE 2330 VANCOUVER WA** ZIP+4 **98682**


<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . <b>15</b>			
<b>16</b>	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? 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 <b>▶</b>	<b>16</b>	<b>Yes</b>	<b>No</b>

**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.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
	(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? ( <b>Exception.</b> 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>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	<b>1b</b>		
<b>c</b>	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? <input type="checkbox"/>	<b>1c</b>		<b>No</b>
<b>2</b>	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))			
<b>a</b>	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 <b>▶ 20____, 20____, 20____, 20____</b>			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions). <input type="checkbox"/>	<b>2b</b>		
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here <b>▶ 20____, 20____, 20____, 20____</b>			
<b>3a</b>	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>b</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). <input type="checkbox"/>	<b>3b</b>		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</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?	<b>4b</b>		<b>No</b>

**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

<b>5a</b>	During the year did the foundation pay or incur any amount to			
	<b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	<b>(2)</b> 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		
	<b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	<b>(4)</b> 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		
	<b>(5)</b> 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>b</b>	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> 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)?	<b>5b</b>	<b>No</b>	
	Organizations relying on a current notice regarding disaster assistance check here. 			
<b>c</b>	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>			
<b>6a</b>	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>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>6b</b>	<b>No</b>	
	<i>If "Yes" to 6b, file Form 8870</i>			
<b>7a</b>	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>b</b>	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	<b>7b</b>		

**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
MARTIN RIFKIN 9604 NE 126TH AVE VANCOUVER, WA 98682	PRESIDENT 10 00	0	0	0
KATHRYN JONES 9604 NE 126TH AVE VANCOUVER, WA 98682	SECRETARY 10 00	0	0	0

**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. . . . . 0**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. . . . . 0**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
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**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
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	

**Total.** Add lines 1 through 3. . . . . 0

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	13,865,188
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	5,369,650
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	19,234,838
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	19,234,838
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	288,523
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	18,946,315
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	947,316

**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.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	947,316
<b>2a</b>	Tax on investment income for 2017 from Part VI, line 5.	<b>2a</b>	10,845
<b>b</b>	Income tax for 2017 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	10,845
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	936,471
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	10,798
<b>5</b>	Add lines 3 and 4.	<b>5</b>	947,269
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	947,269

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	1,103,816
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	1,103,816
<b>5</b>	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).	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	1,103,816

**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
<b>1</b> Distributable amount for 2017 from Part XI, line 7				947,269
<b>2</b> Undistributed income, if any, as of the end of 2017				
<b>a</b> Enter amount for 2016 only. . . . .			0	
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2017				
<b>a</b> From 2012. . . . .	459,944			
<b>b</b> From 2013. . . . .	94,616			
<b>c</b> From 2014. . . . .				
<b>d</b> From 2015. . . . .	54,253			
<b>e</b> From 2016. . . . .	328,567			
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	937,380			
<b>4</b> Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ <u>1,103,816</u>				
<b>a</b> Applied to 2016, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2017 distributable amount. . . . .				947,269
<b>e</b> Remaining amount distributed out of corpus	156,547			
<b>5</b> Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,093,927			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> 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. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018 . . . . .				0
<b>7</b> 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). . . . .	0			
<b>8</b> Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions). . . . .	459,944			
<b>9</b> <b>Excess distributions carryover to 2018.</b> Subtract lines 7 and 8 from line 6a . . . . .	633,983			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2013. . . . .	94,616			
<b>b</b> Excess from 2014. . . . .				
<b>c</b> Excess from 2015. . . . .	54,253			
<b>d</b> Excess from 2016. . . . .	328,567			
<b>e</b> Excess from 2017. . . . .	156,547			

**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 ☐ 4942(j)(3) or ☐ 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>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> 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) )

**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 ☐ 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

MARTIN RIFKIN  
9604 NE 126TH AVE  
VANCOUVER, WA 98682  
(360) 737-7700

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

THE FOUNDATION RELIES UPON SELECTED EDUCATIONAL INSTITUTIONS TO PUBLICIZE, SOLICIT, AND ANNOUNCE THE FOUNDATIONS PROGRAM

**c** Any submission deadlines

NONE

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

MUST BE OUT OF HIGH SCHOOL FOR AT LEAST TWELVE MONTHS AND HAVE FINANCIAL NEED

**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)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			<b>3a</b>	1,001,043
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			<b>3b</b>	0

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	
<b>1</b>	Program service revenue					
<b>a</b>	Refund of prior year grants					10,798
<b>b</b>						
<b>c</b>						
<b>d</b>						
<b>e</b>						
<b>f</b>						
<b>g</b>	Fees and contracts from government agencies					
<b>2</b>	Membership dues and assessments. . . . .					
<b>3</b>	Interest on savings and temporary cash investments . . . . .			14	46,477	
<b>4</b>	Dividends and interest from securities. . . . .			14	179,075	
<b>5</b>	Net rental income or (loss) from real estate					
<b>a</b>	Debt-financed property. . . . .					
<b>b</b>	Not debt-financed property. . . . .					
<b>6</b>	Net rental income or (loss) from personal property					
<b>7</b>	Other investment income. . . . .					
<b>8</b>	Gain or (loss) from sales of assets other than inventory . . . . .			18	340,496	
<b>9</b>	Net income or (loss) from special events					
<b>10</b>	Gross profit or (loss) from sales of inventory					
<b>11</b>	Other revenue <b>a</b>					
<b>b</b>						
<b>c</b>						
<b>d</b>						
<b>e</b>						
<b>12</b>	Subtotal Add columns (b), (d), and (e). . . . .		0		566,048	10,798
<b>13</b>	<b>Total.</b> Add line 12, columns (b), (d), and (e). . . . . (See worksheet in line 13 instructions to verify calculations )					576,846

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

[illegible]

## Part XVII

		<b>Yes</b>	<b>No</b>
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<b>1a(1)</b>	<b>No</b>
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<b>1a(2)</b>		<b>No</b>
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<b>1b(1)</b>	<b>No</b>
--------------	-----------

<b>1b(2)</b>		<b>No</b>
--------------	--	-----------

<b>1b(3)</b>		<b>No</b>
--------------	--	-----------

<b>1b(4)</b>		<b>No</b>
--------------	--	-----------

<b>1b(5)</b>	<b>No</b>
--------------	-----------

<b>1b(6)</b>		<b>No</b>
--------------	--	-----------

1c		No
----	--	----

value  
ue[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations

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

<b>Sign Here</b>	*****	2018-04-25	*****
	Signature of officer or trustee	Date	Title

(see instr )? ☐ **Yes** ☐ **No**

<b>Paid Preparer Use Only</b>					
	Firm's name ▶				Firm's EIN ▶
	Firm's address ▶				Phone no

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)				
<b>a</b> <i>Paid during the year</i>				
Accion International 56 Roland Street No 300 Boston, MA 02129	NONE	PC	ASSIST IN THE IMPROVEMENT OF SOCIAL, ECONOMIC, AND CULTURAL CONDITIONS IN THE WORLD	3,000
American Friends of Lubavitch of Finland 22 Blackwatch Trail Morristown, NJ 07960	None	PC	To Support the NEEDS THROUGH THEIR SYNAGOGUE, SCHOOL, ACTIVITIES, AND CELEBRATIONS	20,000
Beaches Summertime Cruisin' 1919 SE Columbia River Drive Vancouver, WA 98661	NONE	PC	PROMOTION AND DEVELOPMENT OF THE ARTS AND EDUCATION FOR THE BENEFIT OF CHILDREN AND YOUTH	1,000
Bridge the Gap411 NW 112th St Vancouver, WA 98685	NONE	PC	Enrich the lives of abused and neglected children in Clark and Skamania County	5,000
Chabad of Clark County 9604 NE 126th Avenue Vancouver, WA 98682	NONE	PC	FILL NEEDS THROUGH THEIR SYNAGOGUE, SCHOOL, ACTIVITIES, AND CELEBRATIONS	227,900
<b>Total . . . . . ►</b> <b>3a</b>				1,001,043

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)				
<b>a</b> <i>Paid during the year</i>				
Chabad Lubavitch of Central Oregon 61023 Snowberry Place Bend, OR 97702	NONE	PC	To Support the NEEDS THROUGH THEIR SYNAGOGUE, SCHOOL, ACTIVITIES, AND CELEBRATIONS	20,000
Child Protective Services 907 Harney Street Vancouver, WA 98666	NONE	PC	To transform the lives of children	4,054
Clark College for Angelina Albulov 1933 Fort Vancouver Way Vancouver, WA 98663	noNE	I	Provide higher education for science and the arts	3,500
Clark College for Madison Armes 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
Clark College for Castine Cruz 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
<b>Total . . . . . ►</b> <b>3a</b>				1,001,043

**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)				
<b>a</b> <i>Paid during the year</i>				
Clark College for Cody Cumbra 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
Clark College for Stephanie Do 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
Clark College for Morgan Dunn 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
Clark College for Roe Dyer 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
Clark College for Leeanna Edman 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
<b>Total . . . . .</b> ► <b>3a</b>				1,001,043



**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)				
<b>a</b> <i>Paid during the year</i>				
Clark College for Bailey Haines 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
Clark College for Beau Holladay 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
Clark College for Paige Horton 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
Clark College for Makena Kerr 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
Clark College for Kinai Kiyokawa 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
<b>Total . . . . . ►</b> <b>3a</b>				1,001,043

**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)				
<b>a</b> <i>Paid during the year</i>				
Clark College for Lilly Kovalenko 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
Clark College for Kody Laurence 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
Clark College for Elyia Lebow 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
Clark College for Jocelyn Macugay 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
Clark College for Samantha Nguyen 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
<b>Total . . . . .</b> ► <b>3a</b>				1,001,043

**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)				
<b>a</b> <i>Paid during the year</i>				
Clark College for Emma Reyes 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
Clark College for Madison Rooney 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
Clark College for Hailey Runyon 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
Clark College for Htu Shan 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
Clark College for Riley Smetzler 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
<b>Total . . . . . ►</b> <b>3a</b>				1,001,043

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)				
<b>a</b> <i>Paid during the year</i>				
Clark College for Felix Valencia 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
Clark College for Caroline Wade 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	3,500
Clark College for Anna Fedorva 1933 Fort Vancouver Way Vancouver, WA 98663	NONE	I	Provide higher education for science and the arts	538
Clark County Food Bank 9604 NE 126th Avenue Vancouver, WA 98682	NONE	PC	Provide Food to the Less Fortunate	1,000
Club Green Meadows3006 NE 96th St Vancouver, WA 98665	NONE	PC	PROVIDE EDUCATION TO JEWISH CHILDREN	100
<b>Total . . . . .</b> ► <b>3a</b>				1,001,043

**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)				
<b>a</b> <i>Paid during the year</i>				
Elaxis Cadena Grant 2501 NE 138th Ave Apt Q114 Vancouver, WA 98684	NONE	PC	Provide Bus Passes	152
Evergreen High School14300 NE 18th St Vancouver, WA 98684	NONE	PC	Support of educational programs through donation of school supplies	396
Federation of Jewish Communities 531 Crown St Brooklyn, NY 11213	NONE	PC	To provide support for the Good Family Orphanage in Odessa, Ukraine	120,000
Fort Vancouver High School 5700 E 18th St Vancouver, WA 98661	NONE	PC	Support of educational programs through donation of school supplies	331
Friends of Doernbecher 3181 SW Sam Jackson Park Road Portland, OR 97239	NONE	PC	OFFERS PEDIATRIC PRIMARY CARE AND ADVANCED TREATMENT	4,800
<b>Total . . . . .</b> ► <b>3a</b>				1,001,043

**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)				
<b>a</b> <i>Paid during the year</i>				
Friendship Circle International 816 Eastern Parkway Brooklyn, NY 11213	NONE	PC	TO BUILD FRIENDSHIPS AND EMPOWER CHILDREN WITH SPECIAL NEEDS	85,000
Gaiser Middle School 3000 NE 99th St Vancouver, WA 98686	NONE	PC	Support of educational programs through donation of school supplies	316
Hudson Bay High School 1601 E McLoughlin Blvd Vancouver, WA 98663	NONE	PC	Support of educational programs through donation of school supplies	331
Jewish Federation of Greater Portland 6680 SW Capitol Hwy Portland, OR 97219	NONE	PC	BUILD AND STRENGTHEN THE JEWISH COMMUNITY	3,000
Maimonides Jewish Day School 6612 SW Capitol Highway Portland, OR 97239	NONE	PC	PROVIDE EDUCATION TO JEWISH CHILDREN	10,000
<b>Total . . . . .</b> ► <b>3a</b>				1,001,043

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)				
<b>a</b> <i>Paid during the year</i>				
Make-A-Wish Foundation of Oregon Inc 2000 SW FIRST AVENUE SUITE 410 PORTLAND, OR 97201	NONE	PC	GRANTS WHISHES OF CHILDREN STRUGGLING WITH LIFE-THREATENING MEDICAL CONDITIONS	1,000
MADD511 E John Carpenter Freeway Ste 700 Irving, TX 75062	NONE	PC	Donation to General Fund	1,000
Northwest Association for Blind Athletes 311 West Evergreen Suite 200 Vancouver, WA 98660	NONE	PC	Provide opportunities through sports and physical activity to individuals who are visually impaired	83,667
Pacific Foundation for Blind Children 2214 East 13th Street Vancouver, WA 98661	NONE	PC	To broaden and enhance educational and employment opportunities for the visually impaired	3,768
Pacific Northwest College Arts 511 NW Broadway Portland, OR 97209	NONE	PC	Provide higher education for science and the arts	495
<b>Total . . . . . ▶</b> <b>3a</b>				1,001,043

**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)				
<b>a</b> <i>Paid during the year</i>				
Raphael House 4110 SE Hawthorne Blvd 503 Portland, OR 97214	NONE	PC	To support programs that fight the causes and effects of domestic violence	11,000
Saint James School of Medicine for 1480 Renaissance Dr Park Ridge, IL 60068	Nephew	I	Provide higher education for science and the arts	8,900
Salmon Creek Hospital Foundation PO BOX 4484 Portland, OR 97208	NONE	PC	IMPROVE THE HEALTH OF THE COMMUNITY AND THE REGION	2,500
Share HousePO Box 1209 Vancouver, WA 98666	NONE	PC	CARE FOR THE HOMELESS AND HUNGRY IN THE VANCOUVER AREA	52,370
Special Olympics Washington 2150 N 107th Street Suite 220 Seattle, WA 98188	NONE	PC	FUND ATHLETIC ACTIVITIES FOR THOSE WITH SPECIAL NEEDS	1,000
<b>Total . . . . . ▶</b> <b>3a</b>				1,001,043



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)				
<b>a</b> <i>Paid during the year</i>				
The Shluchim Office 816 Eastern Parkway Brooklyn, NY 11213	NONE	PC	TO SUPPORT AND MEET THE NEEDS OF SHLUCHIM THROUGH OUTREACH AND COMMUNITY-BUILDING	5,000
Lindsey Szieber4706 NE 143rd Circle Vancouver, WA 98686	None	I	Donation for summer mission program	500
TJ Stiles Grant1506 Summit Road Berkeley, CA 94708	None	I	Art Grant	20,000
United States Holocaust Memorial Museum 100 Raoul Wallenberg Place SW Washington, DC 20024	None	PC	Donation to General Fund	150
WA Services for the Blind 2214 East 13th Street Suite 208 Vancouver, WA 986614120	NONE	PC	INCLUSION, INDEPENDENCE, AND ECONOMIC VITALITY FOR PEOPLE WITH VISUAL DISABILITIES	2,187
<b>Total . . . . .</b> ► <b>3a</b>				1,001,043

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

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Washington State University for Je PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Ka PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Ele PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Arn PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Cat PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
<b>Total . . . . .</b> ► <b>3a</b>				1,001,043

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

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Washington State University for Cor PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Ale PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Hea PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Cou PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Kie PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
<b>Total . . . . . ▶</b> <b>3a</b>				1,001,043

**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)				
<b>a</b> <i>Paid during the year</i>				
Washington State University for Bet PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Mac PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Mel PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Noe PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Mor PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
<b>Total . . . . .</b> ► <b>3a</b>				1,001,043

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

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Washington State University for Tay PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Ale PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Mag PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for My PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Bra PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
<b>Total . . . . .</b> ► <b>3a</b>				1,001,043

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

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Washington State University for Hun PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Abi PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Inn PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for And PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Ade PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
<b>Total . . . . .</b> ► <b>3a</b>				1,001,043

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

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Washington State University for Dan PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Jad PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Mad PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Tay PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Mon PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
<b>Total . . . . .</b> ► <b>3a</b>				1,001,043

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Washington State University for Han PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Lia PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Jer PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Zac PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Rus PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
<b>Total . . . . . ►</b> <b>3a</b>				1,001,043



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)				
<b>a</b> <i>Paid during the year</i>				
Washington State University for Jus PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Tra PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Lin PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Mar PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Inn PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
<b>Total . . . . . ▶</b> <b>3a</b>				1,001,043

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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)				
<b>a</b> <i>Paid during the year</i>				
Washington State University for Ian PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Tay PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	3,500
Washington State University for Jes PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	1,647
Washington State University for Cas PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	988
Washington State University for Jai PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	1,647
<b>Total . . . . .</b> ► <b>3a</b>				1,001,043

**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)				
<b>a</b> <i>Paid during the year</i>				
Washington State University for Ren PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	2,305
Washington State University for Oks PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	1,976
Washington State University for Bri PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	1,647
Washington State University for Jen PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	1,976
Washington State University for Mar PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	1,976
<b>Total . . . . . ▶</b>				1,001,043
<b>3a</b>				

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)				
<b>a</b> <i>Paid during the year</i>				
Washington State University for Mic PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	988
Washington State University for Bla PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	1,976
Washington State University for Ann PO Box 641067 Pullman, WA 99164	NONE	I	Provide higher education for science and the arts	2,962
YWCA Clark County3609 Main Street Vancouver, WA 98663	NONE	PC	ELIMINATE RACISM, EMPOWER WOMEN AND PROMOTE PEACE, JUSTICE, FREEDOM AND DIGNITY FOR ALL	10,000
Rabbi Gedalya Shemtov 816 Eastern Parkway Brooklyn, NY 11213	NONE	I	BUILD AND STRENGTHEN THE JEWISH COMMUNITY	35,000
<b>Total . . . . .</b> ► <b>3a</b>				1,001,043

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)				
<b>a</b> <i>Paid during the year</i>				
Florida Chi Alumni Association Inc 10016 Brompton Drive Suite 106 Tampa, FL 33626	NONE	PC	To provide financial assistance and encourage the focus of education at the University of Tampa	1,000
<b>Total . . . . . ▶</b> <b>3a</b>				1,001,043

**TY 2017 Accounting Fees Schedule****Name:** KMR Group Foundation**EIN:** 32-0185357**Accounting Fees Schedule**

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING	9,906	1,981		7,924

**TY 2017 Investments Corporate Stock Schedule****Name:** KMR Group Foundation**EIN:** 32-0185357

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
BESSEMER - DETAIL AVAILABLE UPON REQUEST	8,848,395	8,848,395
FIDELITY - DETAIL AVAILABLE UPON REQUEST	5,977,658	5,977,658

**TY 2017 Legal Fees Schedule****Name:** KMR Group Foundation**EIN:** 32-0185357

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
Legal	4,301	0		4,301



**TY 2017 Other Expenses Schedule****Name:** KMR Group Foundation**EIN:** 32-0185357**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Advertising	785	0		785
Office Supplies & Expenses	179	0		179
IT Services	2,265	0		2,265
Bank Service Fees	65	0		65
Dues & Subscriptions	300	0		300

## TY 2017 Other Income Schedule

**Name:** KMR Group Foundation

**EIN:** 32-0185357

### Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
Refund of prior year grants	10,798		10,798

**TY 2017 Other Increases Schedule**

**Name:** KMR Group Foundation  
**EIN:** 32-0185357

Description	Amount
Unrealized gain	1,650,461

**TY 2017 Other Professional Fees Schedule****Name:** KMR Group Foundation**EIN:** 32-0185357

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
INVESTMENT MANAGEMENT FEES	20,405	20,405		0

**TY 2017 Taxes Schedule****Name:** KMR Group Foundation**EIN:** 32-0185357

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Foreign Investment Taxes	1,422	1,422		0
Federal Income Taxes	4,485	0		0
USE TAX	12	0		12

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93491115001278	
<b>Schedule B</b> (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		<b>Schedule of Contributors</b> ▶ 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 <a href="http://www.irs.gov/form990">www.irs.gov/form990</a>			OMB No 1545-0047  <b>2017</b>
<b>Name of the organization</b> KMR Group Foundation				<b>Employer identification number</b> 32-0185357	

Organization type (check one)

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> 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 33<sup>1</sup>/<sub>3</sub>% 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).

<b>Name of organization</b> KMR Group Foundation	<b>Employer identification number</b> 32-0185357
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<b>Part I</b> <b>Contributors</b> (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	MARTIN RIFKIN 9604 NE 126TH AVE 2330 VANCOUVER, WA 98682	\$ 1,200,000	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions )





<b>Name of organization</b> KMR Group Foundation	<b>Employer identification number</b> 32-0185357
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<b>Part III</b>	<b>Exclusively</b> 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 <b>exclusively</b> religious, charitable, etc., contributions of <b>\$1,000 or less</b> 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
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
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