Return of Private Foundation

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

OMB No 1545 0052

Department of the Treasury Internal Revenue Service

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 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

For	calend	dar year 2017 or tax year beginning , a	and ending				
N	ame of fou	undation			A Emplo	oyer identification number	
		SINGERK FOUNDATION .				-1928733	
		d street (or P.O. box number if mail is not delivered to street address)	R	com/suite		none number (see instructions)
_		SW MONTGOMERY DRIVE			50.	3-224-5842	
_	•	state or province country and ZIP or foreign postal code LAND OR 97201			C If exemption application is pending check here		
_			- of a farmar subline	h	0.4.5.		
G	Check		rn of a former public c	nanty	1	reign organizations check he	_
		Final return Amended				reign organizations meeting th % test: check here and attach	
		Address change Name cha			Į.	A lest check liefe and sites.	Computation P
H		type of organization $ \mathbf{X} $ Section 501(c)(3) exempt private		$-\overline{\circ \psi}$	E If prive	ate foundation status was term	inated under
	Section	n 4947(a)(1) nonexempt charitable trust Other taxab			section	n 507(b)(1)(A), check here	- '_
		rket value of all assets at J Accounting method	X Cash Acc	rual	1	foundation is in a 60-month ter	_ 1 1
e	nd of y	ear (from Part II, col (c), Other (specify)		1	under	section 507(b)(1)(8) check hi	ere 🕨 📋
	ne 16)	▶ \$ 459,403 (Part I, column (d) must	be on cash basis)		L		·
P	art i	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net inv	estment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b) (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	incor		ıncome	purposes (cash basis only)
<u></u>	1	Contributions, gifts, grants, etc , received (attach schedule)					/vessi pasis dilis/
Y	2	Check ► X if the foundation is not required to attach Sch B		 			
	3	Interest on savings and temporary cash investments	190		190		
١.	- 4	Dividends and interest from securities				·	
		Gross rents					
	5a						
a	b	Net rental income or (loss)	L	 			
evenue	6a	Net gain or (loss) from sale of assets not on line 10					······
. Š	b	Gross sales price for all assets on line 6a			0		
Re	7	Capital gain net income (from Part IV, line 2)		<u></u>			
Ð	8	Net short-term capital gain		<u> </u>		0	
•	9	Income modifications					······································
R	10a	Gross sales less returns and allowances					
Š	b	Less Cost of goods sold					
	L C	Gross profit or (loss) (attach schedule)		·····			
	11	Other income (attach schedule)	100	<u> </u>	100	0	
	12	Total. Add lines 1 through 11	190	<u> </u>	190		
ŝ	13	Compensation of officers, directors, trustees, etc	0				
cpenses	14	Other employee salaries and wages	· · · · · · · · · · · · · · · · · · ·				
ğ	15	Pension plans, employee benefits		<u> </u>			
X	16a	Legal fees (attach schedule)	075	<u> </u>	400		407
é	þ	Accounting fees (attach schedule) Stmt 1	975		488		487
ij	C .	Other professional fees (attach schedule)	·-	 			
ij	17	Interest		7			
<u>=</u>	18	Taxes (attach schedule) (see instructions) Stmt 2	68		-RE()EIVED	
Operating and Administrative	19	Depreciation (attach schedule) and depletion		-			
Ad	20	Occupancy	·	<u> </u>		1 2010	
קַ	21	Travel, conferences, and meetings		<u> </u>	3014		
ā	22	Printing and publications		 	L	35	
ng	23	Other expenses (att sch)			- 0:3:	\	
aţi	24	Total operating and administrative expenses.					
ē		Add lines 13 through 23	1,043		488	0	555
Q	25	Contributions, gifts, grants paid	16,500			_	16,500
_	26	Total expenses and disbursements. Add lines 24 and 25	17,543	ļ	488	0	17,055
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursements	-17,353				
	ь	Net investment income (if negative, enter -0-)		ļ	0		
	C	Adjusted net income (if negative, enter -0-)	L	l		0	

Pärt	Balance Sheets Attorned schedules and amounts in the description columns.	กก	Beginning of year	End o	f year
· Carr	should be for end-of-year amounts only (See instructions	5 }	(a) Book Value	gulsV Acc8 (d)	(c) Fair Marker Value
1	Cash – non-interest-bearing		476,756	459,403	459,403
2	Savings and temporary cash investments				
3	Accounts receivable ▶			\$ 8 CO 19 11	\$ 3 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Less allowance for doubtful accounts ▶				
4	Pledges receivable ▶		\$2.50 \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
	Less allowance for doubtful accounts ▶				
5	Grants receivable				
6	Receivables due from officers, directors, trustees, and other				ĺ
	disqualified persons (attach schedule) (see		ļ		
	instructions)				
7	Other notes and loans receivable (att schedule)		74.5	, ,	`,
	Less allowance for doubtful accounts ▶	0			
छ 8	Inventories for sale or use				
Assets 10a	Prepaid expenses and deferred charges				
∛ 10a	Investments – U S and state government obligations (attach schedule)		L		
b	Investments – corporate stock (attach schedule)			· · · · · · · · · · · · · · · · · · ·	
C	Investments – corporate bonds (attach schedule)				
11	Investments - land, buildings, and equipment basis				
ļ	Less accumulated depreciation (attach sch.)				
12	Investments – mortgage loans				
13	Investments – other (attach schedule)				
14	Land, buildings, and equipment basis				
	Less accumulated depreciation (attach sch.)				
15	Other assets (describe ▶)			
16	Total assets (to be completed by all filers – see the				
	instructions Also, see page 1, item I)		476,756	459,403	459,403
17	Accounts payable and accrued expenses				
18	Grants payable				
19	Deferred revenue				
Liabilities 02 11 20 21	Loans from officers, directors, trustees, and other disqualified persons				
<u>e</u> 21	Mortgages and other notes payable (attach schedule)				
- 22	Other liabilities (describe ▶)			
23	Total liabilities (add lines 17 through 22)		0	0	
S	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.	► X			
Sapul 24	Unrestricted		476,756	459,403	
E 25	Temporarily restricted		1,07,50	.337,103	
26	Permanently restricted				
힏~~	Foundations that do not follow SFAS 117, check here	▶ □			
Net Assets or Fund Bala 25 26 27 28 30 31	and complete lines 27 through 31.	ب ۲			
හු 27	Capital stock, trust principal, or current funds		ļ. <u> </u>		
9 28 S	Paid-in or capital surplus, or land, bldg, and equipment fund		ļ		
8 29	Retained earnings, accumulated income, endowment, or other funds				
<u>ə</u> 30	Total net assets or fund balances (see instructions)		476,756	459,403	
2 31	Total liabilities and net assets/fund balances (see				
	instructions)		476,756	459,403	
<u>Part</u>					·
	al net assets or fund balances at beginning of year – Part II, column (a), lir	ne 30 (mu	ist agree with		
	-of-year figure reported on prior year's return)			1	476,756
	er amount from Part I, line 27a			2	-17,353
	er increases not included in line 2 (itemize)			3	15.
	lines 1, 2, and 3			4	459,403
	reases not included in line 2 (itemize)		" > 1 00	5	450 400
6 Tota	al net assets or fund balances at end of year (line 4 minus line 5) - Part II,	column (D), line 30	6	459,403 Form 990-PF (2017

(a) List and describe tr	Id Losses for Tax on Investrate kind(s) of properly sold (for example, real estal ehouse, or common 8'ook 200 shs. MLC Co.)		ie	(b) How acquired P - Purchase		, qp,);)	(d) Da'e sold (m) (d)
	7 1038E, 01 CO 1310.11 0 CO 251 313 MICE 03 7			D - Donation	1,110		(1115 02)),)
<u>1a N/A</u> b	······································	 _			ļ·		
С С							
d							
e							
(e) Gross sales price	(f) Depreciation allowed (or allowable)		(g) Cost or plus exper	other basis ase of sale			n or (loss) () minus (g))
a							
b							
С							
_d					 	·	
e			40/04/6		_		······································
Complete only for assets showing	gain in column (h) and owned by the	toundation or	12/31/6	9	-	• •	(h) gain minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess				less than -0-) or rom col (h))
а							
b					 		
C							
d							
е					 		
2 Capital gain net income or (net ca	pital loss) If gain, also enter If (loss), enter -0-				2		
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) and	l (6)					
If gain, also enter in Part I, line 8,	column (c) See instructions. If (loss)), enter -0- ın	→				
Part I, line 8	der Section 4940(e) for Red				3		
Was the foundation liable for the secti If "Yes," the foundation does not qualif		• •	r in the b	ase period?			Yes X No
1 Enter the appropriate amount in e	ach column for each year, see the ins	structions befo	re makın	g any entries			
(a) Base period years	(b)			(c)		Diet	(d) tribution ratio
Calendar year (or tax year beginning in)	Adjusted qualifying distribution		Net value	of noncharitable-use asse			divided by col (c))
2016		6,935		493,			0.054601
2015	2	7,182		472,	699		0.057504
2014							
2013		···					
2012						т -	
C Taket of land on the column (d)]		0 110105
2 Total of line 1, column (d)	was been sound advised the total of	- l 2 b.		_	-	2	0.112105
3 Average distribution ratio for the 5 number of years the foundation has	s been in existence if less than 5 years	•	, or by th	e		3	0.056053
4 Enter the net value of noncharitab	le-use assets for 2017 from Part X, I	ine 5				4	470,400
5 Multiply line 4 by line 3						5	26,367
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)					6	
7 Add lines 5 and 6						7	26,367
8 Enter qualifying distributions from	Part XII, line 4					8	17,055
If line 8 is equal to or greater than Part VI instructions	line 7, check the box in Part VI, line	1b, and compl	ete that p	part using a 1% tax	rate See	e the	

Form	990-PF (2017) NWESSINGERK FOUNDATION 47-1928733				Р	age 4
Pa	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 \ and enter "N/A" on line 1	*55	N. Carlot		XXX	
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)					
ь	Domestic foundations that meet the section 4940(e) requirements in Part V check	1				
	here ▶ ☐ and enter 1% of Part I, line 27b	~%		\$ () <u>(</u>	> \0 \0 \0 1 \0 \0 \0 \0 \0	
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	Buch	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	3373	373	S. 18.
	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	<u></u>			0
3	Add lines 1 and 2	3				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5				0
6	Credits/Payments	(7)	1200		`	
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a	٠ (7	2.31		
b	Exempt foreign organizations – tax withheld at source	* /	\ \ \ \ \ \			
С	Tax paid with application for extension of time to file (Form 8868) 6c	`,	ľ			
d	Backup withholding erroneously withheld 6d		l			
7	Total credits and payments Add lines 6a through 6d	7				
8	Enter any penalty for underpayment of estimated tax. Check here 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				
11_	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ Refunded ▶	11				
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				Yes	No
	participate or intervene in any political campaign?			1a		X
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the					
	Instructions for the definition			1b		х
	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					
С	Did the foundation file Form 1120-POL for this year?			1c		х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
_	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	-				
_	on foundation managers > \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		x
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of					
•	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		.,	5		$\overline{\mathbf{x}}$
-	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					İ
-	By language in the governing instrument, or					į
	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	x	1
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Pa	t XV		7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.	• • • • • • • • • • • • • • • • • • • •		<u> </u>		
	OR					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation			8ь	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					,,,
-	4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017? See instructions for Part XIV. If "Yes,"					i ル
	complete Part XIV			9		x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			Ť		
-	names and addresses			10		х
			F	om 99	0-PF	
					•	

.∵Pa	art VII-A Statements Regarding Activities (continued)				
, 		152	% Y	es	No
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	1.	١ [- }	X
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	1:	2		\mathbf{x}
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	1:	3 3	X	
	Website address ► N/A				
14	The books are in care of ▶ NANCY KLINE Telephone no ▶ 503	3-224	- 5	842	2
	1943 SW MONTGOMERY DR.				
	Located at ▶ PORTLAND OR ZIP+4 ▶ 972	201			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here)	▶ [
	and enter the amount of tax-exempt interest received or accrued during the year				•
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Y	es	No
	over a bank, securities, or other financial account in a foreign country?	10	5		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of				
	the foreign country ▶				
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
تيستسي	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Y	es	No
1a	During the year, did the foundation (either directly or indirectly)				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	10			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a				
	disqualified person?	10			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	10		- 1	
		lo l			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			- 1	
	the benefit or use of a disqualified person)?	io			
	(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)	lo			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1	-		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	/A 1	.]		
	Organizations relying on a current notice regarding disaster assistance, check here				
С	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?	/A 1	:		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		T		
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		-		
а	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?	lo			
	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)	'A 21			
С	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		- 1		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		-		
		lo			
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)	/A 31	1	\dashv	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4	1		X
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?	41	١ .	- 1	Х

	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE					
Total numb	er of other employees paid over \$50,000		·	<u> </u>	0

Form 990-PF (2017)

Form <u>9</u> 90-PF (2	017) NWESSINGERK FOUNDATION	47-1928733	Page_
Part VIIIS	Information About Officers, Directors, Trustees, Fo and Contractors (continued)	undation Managers, Highly Paid E	mployees,
3 Five high	est-paid independent contractors for professional services. See in	nstructions. 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	f others receiving over \$50,000 for professional services		<u> </u>
Part IX-A	Summary of Direct Charitable Activities		
	's four largest direct charitable activities during the tax year. Include relevant statistical inform other beneficiaries served, conferences convened, research papers produced, etc.	ation such as the number of	Expenses
1 N/A			
,			
2			
3			
4			
			<u> </u>
Part IX-B	Summary of Program-Related Investments (see in		
	argest program-related investments made by the foundation during the tax year on lines 1 and	2	Amount
1 N/A			
			
2			
All other process	tolated investments. See instructions		
3	elated investments. See instructions		
•			
Total. Add lines	1 through 3	>	

3b Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

2

3a

5 6

Adjusted qualifying distributions Subtract line 5 from line 4 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Amounts set aside for specific charitable projects that satisfy the

Suitability test (prior IRS approval required)

Enter 1% of Part I, line 27b See instructions

Cash distribution test (attach the required schedule)

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

Form 990-PF (2017)

Form 990-PF (2017) NWESSINGERK FOUNDATION

Pa	ì rt∛XIII∜Undistributed Income	(see instructions)			
1			(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part)	KI	Corpus	Years prior to 2016	2016	2017
	line 7		4242 X X X X X X X X X X X X X X X X X X		X4044X24000	23,520
2	Undistributed income, if any as of the en	d of 2017			600 MEASON TO SERVE	
а	Enter amount for 2016 only		250 1 3 3 4 1 3 4 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		, , , , , , , , , , , , , , , , , , ,	20.00.00.00.00.00.00.00.00.00.00.00.00.0
b	Total for prior years 20, 20	, 20	* * * * * * * * * * * * * * * * * * *		**************************************	#44.0000 P.
3	Excess distributions carryover, if any, to	2017				
	From 2012					
b	From 2013					
C	From 2014					
d	From 2015	3,547		<u> </u>		(5) (5) (8)
е	From 2016	2,270				
f	Total of lines 3a through e		5,817	- Car . Car . Sar	3 () () (10° 10° 10° 10° 10° 10° 10° 10° 10° 10°
4	Qualifying distributions for 2017 from Par	t XII,	(, ,
	line 4 > \$17,055		· ` `	• 1		
а	Applied to 2016, but not more than line 2	a	· · · · · · · · · · · · · · · · · · ·			
þ	Applied to undistributed income of prior y	rears	·		,	
	(Election required – see instructions)					
C	Treated as distributions out of corpus (Ele	ection				
	required – see instructions)					
d	Applied to 2017 distributable amount		***************************************			17,055
е	Remaining amount distributed out of corp	ous				
5	Excess distributions carryover applied to	2017	5,817			5,817
	(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:					
а	Corpus Add lines 3f, 4c, and 4e Subtrac	t line 5				
þ	Prior years' undistributed income Subtra-	ct				
	line 4b from line 2b					
С	Enter the amount of prior years' undistribe	uted				
	income for which a notice of deficiency has	as				
	been issued, or on which the section 494	2(a)				
	tax has been previously assessed					
d	Subtract line 6c from line 6b Taxable					
	amount - see instructions					
e	Undistributed income for 2016 Subtract I	ine				
	4a from line 2a Taxable amount - see					
	instructions					
f	Undistributed income for 2017 Subtract I	ines				
	4d and 5 from line 1. This amount must b	e	п			
	distributed in 2018					648
7	Amounts treated as distributions out of co	•				
	to satisfy requirements imposed by section					
	170(b)(1)(F) or 4942(g)(3) (Election may I	be				
	required—see instructions)					
8	Excess distributions carryover from 2012					
_	applied on line 5 or line 7 (see instruction	<i>'</i>				
9	Excess distributions carryover to 2018	J.,				
	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		•			
<u>e</u>	Excess from 2017			L	L	L.,

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment if recipient is an individual, Recipient Purpose of grant or show any relationship to any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year PLANNED PARENTHOOD 3231 SE 50TH AVE NONE PUBLIC PORTLAND OR 97206 HUMAN SERVICE 10,000 PORTLAND PUBLIC SCHOOLS FOUNDATION 2069 NE HOYT ST PUBLIC NONE PORTLAND OR 97232 EDUCATION 1,000 OREGON HUMANE SOCIETY 1067 NE COLUMBIA BLVD NONE PUBLIC PORTLAND OR 97211 ANIMAL 2,500 OREGON FOOD BANK PO BOX 55370 NONE PUBLIC PORTLAND OR 97238 HUMAN SERVICE 3,000 16,500 Total ▶ 3a Approved for future payment N/A Total **▶** 3b

Form 990-PF (2017) NWESSINGERK FOUNDATION

Enter gross amo	ounts unless otherwise indicated	Unrelate	ed business income	Exclude	d by section 512, 513 or 514	(o)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
1 Program ser	vice revenue			_		(300113 000313)
a				 		
				 -		
		-		 		
		-				
f	d	·		 		
-	d contracts from government agencies			 		
-	dues and assessments			14	190	
	avings and temporary cash investments and interest from securities	 		+	130	
	come or (loss) from real estate	······································		-		
	anced property			-		
	t-financed property					
	come or (loss) from personal property			+		
7 Other invest						
	s) from sales of assets other than inventory			 		
	or (loss) from special events			1		
	or (loss) from sales of inventory			 		
	ue a			1		
				1		
			-			
е						
12 Subtotal Ad	d columns (b), (d), and (e)			0	190	0
	d columns (b), (d), and (e) ne 12, columns (b), (d), and (e)			0	190	0 190
13 Total. Add li				0		
See worksheet Part XVI-B	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the A		ent of Exempt F	urpose	13 <u> </u>	190
I3 Total. Add li See worksheet	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations)	e is reported in c	ent of Exempt F	ourpose	13	190
3 Total. Add II See worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in c	ent of Exempt F	ourpose	13	190
3 Total. Add li See worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in c	ent of Exempt F	ourpose	13	190
3 Total. Add li See worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in c	ent of Exempt F	ourpose	13	190
3 Total. Add li See worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in c	ent of Exempt F	ourpose	13	190
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3 Total. Add li See worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in c	ent of Exempt F	ourpose	13	190
3 Total. Add li See worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in c	ent of Exempt F	ourpose	13	190
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3 Total. Add li See worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in c	ent of Exempt F	ourpose	13	190

47-1928733 Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVIII **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described Yes No in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political a Transfers from the reporting foundation to a noncharitable exempt organization of 1a(1) (1) Cash (2) Other assets 1a(2) **b** Other transactions (1) Sales of assets to a noncharitable exempt organization 16(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) 1b(5) (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line no (c) Name of noncharitable exempt organization (d) Description of transfers transactions, and sharing arrangements (b) Amount involved N/A2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations Yes X No described in section 501(c) (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A 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 May the IRS discuss this return with the preparer shown below? Sign See instructions Yes Here PRESIDENT Print/Type preparer's name Preparer's signature Check self-employed Paid CANDACE J. DUNBAR CANDACE J. DUNBAR 05/29/18 Preparer JARRARD, SEIBERT, POLLARD & CO, LLC P00286735 Firm's name PTIN Use Only

1800 Blankenship Rd, Suite 450

West Linn, OR 97068-4191

93-0623130

Phone no

503-723-7600

Firm s address

212568 NWESSINGERK FOUNDATION 47-1928733 FYE: 12/31/2017

Federal Statements

5/29/2018 10.17. AM

Fees	
- Accounting	
e 16b	
Line	
Part I.	
990-PF.	
- Form 9	
_	
Statement	

Charitable Purpose	\$ 487		Charitable Purpose	\$	\$
Adjusted Net	0		Adjusted Net		0
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Net Investment	488	, Line 18 - T	Net Investment		0
Inve	w w	P, Part	Inve	υ	w
Total	975	ent 2 - Form 990-PF, Part I, Line 18 - Taxes	Total	68	68
	w w	Statement 2	·	\ \ \ 	w
Description	Indirect Accounting Fees Total		Description	OR DEPT OF JUSTICE FEES	Total