2949120901010

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

OMB No 1545-0052 2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990PF for instructions and the latest information.

For	calend	dar year 2017 or tax year beginning	, 2017,	and endin	g		, 20
Na	ame of t	foundation			A Employer	identification number	
_F:	rank	and Margaret Bitar Foundation			91-1847	903	
N	ımber a	and street (or PO box number if mail is not delivered to street address)	1	Room/suite	B Telephone	number (see instructions)
9	B28 I	E Burnside Street Suite 200			(503) 25	4-3080	
Cı	ty or tov	wn, state or province, country, and ZIP or foreign postal code			C If exempts	on application is pending	check here
P	ortla	and, OR 97216-2363			l Cacinpa	on approcading	, oncox note
G	Check	all that apply Initial return Initial return	of a former public cha	rity	D 1. Foreign	organizations, check he	re · · · . ▶ 🗍
		Final return Amended re	turn	•			. —
		Address change Name change	ae			n organizations meeting ti here and attach computat	
H	heck 1	type of organization: X Section 501(c)(3) exempt priv		111	1	•	_
	1		taxable private founda	tion	section 50	oundation status was teri 07(b)(1)(A), check here	•
1 F		irket value of all assets at J Accounting method	X Cash	Accrual	1		
		year (from Part II, col (c), Other (specify)	ر_ دی عمود.	7100.001	3	dation is in a 60-month to tion 507(b)(1)(B), check i	- 1 1
	ne 16)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	e on cash basis)		4,,00,000	0011 001 (0)(1)(0), 01100k 1	ر
	ırt l	Analysis of Revenue and Expenses (The total of	l dadii badib j	Τ	<u></u>		(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net	investment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions))	books		come	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	 	 			
	2	Check ► X If the foundation is not required to attach Sch B · ·	 	+			
	3	Interest on savings and temporary cash investments	 				
// B 1	1	Dividends and interest from securities			202		
o zorre	5a	Gross rents · · · · · · · · · · · · · · · · · · ·	38		383		
\sim	ь	Net rental income or (loss)	96,00	0	96,000		
0		` ' 	 	+			
Revenue	6a	Net gain or (loss) from sale of assets not on line 10 · · · · ·		+			
<u> </u>	b	Gross sales price for all assets on line 6a					
₹§	7	Capital gain net income (from Part IV, line 2)	<u> </u>	- -			
	8	Net short-term capital gain		 			
Į.	9	Income modifications	ļ	 			
	10a	Gross sales less returns and allowances	 				
'	Ь	Less Cost of goods sold · · · · · ·	ļ	↓			
	C	Gross profit or (loss) (attach schedule)	ļ				<u> </u>
	11	Other income (attach schedule) STM106	54	5	545		
	12	Total. Add lines 1 through 11	96,92	8	96,928		<u></u>
ဖ	13	Compensation of officers, directors, trustees, etc · · · · ·					
penses	14	Other employee salaries and wages				·	
ē	15	Pension plans, employee benefits					
ĒX	16a	Legal fees (attach schedule) ED STM108		<u> </u>			
	b	Accounting fees (attach schedule) STM108	1,00	0	1,000		
Administrative	C	Other professional fees (attach schedule)					
ta	17					L	
Jis	18	Taxes (attach scriedule) (see instructions)					
Ē	19	Depreciation (attach/schedule) and depletion STMI 26	18,96	2	18,962		
Ad	20	Occupancy	19,29	o	19,290		
<u> </u>	21	Travel, conferences, and meetings					
and	22	Printing and publications · · · · · · · · · · · · · · · · · · ·					
Operating	23	Other expenses (attach schedule) · · · STM103 · · · ·	3,30	8	3,258		
ati	24	Total operating and administrative expenses.					
Der	ļ	Add lines 13 through 23 · · · · · · · · · · · · · · · · · ·	42,56	ol	42,510		0
ō	25	Contributions, gifts, grants paid	42,25				42,250
	26	Total expenses and disbursements. Add lines 24 and 25	84,81		42,510		42,250
	27	Subtract line 26 from line 12	1	1	,510		12,255
	а	Excess of revenue over expenses and disbursements .	12,11	R			
	ь	Net investment income (if negative, enter -0-)		7	54,418		
	c	Adjusted net income (if negative, enter -0-)		+	J-2, 4±0	· · ·	0
			 _			<u> </u>	<u> ~</u>

l Pa	ırt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	E/10 0/	year
<u> </u>		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	24,678	54,043	54,043
	2 .	Savings and temporary cash investments			
	3	Accounts receivable >			
	ł	Less allowance for doubtful accounts	-		
	4	Pledges receivable >			
	ł	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)			
	l	Less allowance for doubtful accounts			
g	la	Inventories for sale or use · · · · · · · · · · · · · · · · · · ·			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments - U S and state government obligations (attach schedule)			
	١.				
	b	Investments - corporate stock (attach schedule)			
	l	Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equisiment 12 asis 893,970			
	40	Less accumulated depreciation (attach schedule) 306,246	606,686	587,724	1,938,580
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule) · · · · · · STM118	21,052	21,370	19,771
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item I)	652,416	663,137	2,012,394
	17	Accounts payable and accrued expenses	373		
S	18	Grants payable			
Liabilities	19	Deferred revenue			
ij	20	Loans from officers, directors, trustees, and other disqualified persons			
ā	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			
	23_	Total liabilities (add lines 17 through 22)	373		
es		Foundations that follow SFAS 117, check here · · · · · · • L and complete lines 24 through 26, and lines 30 and 31.			
alances	24	Unrestricted			
<u>8</u>	25	Temporanly restricted			
<u> </u>	26	Permanently restricted			
or Fund		Foundations that do not follow SFAS 117, check here · · ▶ X			
ī	ĺ	and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
Assets	29	Retained earnings, accumulated income, endowment, or other funds	652,043	663,137	
٦	30	Total net assets or fund balances (see instructions)	652,043	663,137	
Ž	31	Total liabilities and net assets/fund balances (see			
		instructions)	652,416	663,137_	
Pa	art II	Analysis of Changes in Net Assets or Fund Balance	es		
1		net assets or fund balances at beginning of year - Part II, column (a), line 3			[
		of-year figure reported on prior year's return)			652,043
		amount from Part I, line 27a			12,118
3	Other	r increases not included in line 2 (itemize)		3_	
		nes 1, 2, and 3 · · · · · · · · · · · · · · · · · ·			664,161
		eases not included in line 2 (itemize) STM116		5	1,024
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	lumn (b), line 30 · · · ·	6	663,137
EEA					Form 990-PF (2017)

	Capital Gaills	BIIU LUSSES IUI TRA UII IIIVE	Sunent income	7			
•	(a) List and descri 2-story brick ware	be the kind(s) of property sold (for example ehouse, or common stock, 200 shs MLC (e, real estate, co)	(b) How acquired P-Purchase D-Donation	(c) Date acqu (mo , day,		
1a							
b							
С							
d							
е				<u> </u>			
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or o		((h) Gain or (loss) (e) plus (f) minus (g))	
_a							
_b							
С							
d							
θ			<u> </u>				
Com	plete only for assets show	wing gain in column (h) and owned by	the foundation on 1	2/31/69		ains (Col (h) gain minus	
(1)	FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col (of col (i) j), if any		, but not less than -0-) o osses (from col (h))	r
a							
b					·		
С							
d							
е			<u> </u>				
2 Capi	tal gain net income or (ne	et capital loss)	so enter in Part I, lin enter -0- in Part I, lin	7 1	2		
3 Nets	short-term capital gain or	(loss) as defined in sections 1222(5)	and (6)				
If gai	n, also enter in Part I, lini	e 8, column (c) See instructions If (lo	oss), enter -0- ın	٠٠٠ ٢			
	<u></u>	<u> </u>			3		
Part V	Qualification U	Inder Section 4940(e) for Re	educed Tax on	Net Investme	nt Income) 	
For option	onal use by domestic priv	rate foundations subject to the section	1 4940(a) tax on net	investment income	e)		
f caction	4940(d)(2) applies, leave	a this part blank					
Section	4340(u)(z) applies, leavi	e triis part blank					
Vas the	foundation liable for the s	section 4942 tax on the distributable a	mount of any year in	the base period?		Yes	X No
f "Yes," t	he foundation doesn't qu	alify under section 4940(e) Do not co	mplete this part				_
1 Ente		ın each column for each year, see th	e instructions before	making any entrie	s		
Calend	(a) Base penod years lar year (or tax year beginnir	ng in) Adjusted qualifying distribution	Net value of	(c) nonchantable-use as	sets	(d) Distribution ratio (∞I (b) divided by col (c))
	2016	89,	850	1,736,0	022	0.051756	
	2015	83,	190	1,484,9	37	0.056023	
	2014		200	1,479,9	913	0.058247	
	2013	95,	150	1,485,1	175	0.064067	
	2012	110,	090	1,680,7	756	0.0655	
					2	0.295592	
3 Aver	age distribution ratio for t	he 5-year base period - divide the tot	al on line 2 by 5 0, o	r by			
the r	umber of years the found	dation has been in existence if less th	an 5 years 🕠 🛶		3	0.059118	
					} }		
4 Ente	r the net value of noncha	iritable-use assets for 2017 from Part	X, line 5		4	1,976	,457
5 Multi	ply line 4 by line 3 · ·		· · · · · · · · · · · ·		5	116	,844
6 Ente	r 1% of net investment in	icome (1% of Part I, line 27b) · · ·			6		544
7 Add	lines 5 and 6 · · · ·	• • • • • • • • • • • • • • • • • • • •		· · · · · · · · · ·	7	117	,388
8 Ente	r qualifying distributions f	from Part XII line 4			8		
		than line 7, check the box in Part VI, I			لـــــــــــــــــــــــــــــــــــــ		2,250
	VI instructions	man line 7, oneck the box in Part VI,	me ro, and complet	e mai pari using a	1 /0 LAX TALE S	Jed Hig	
ı aıt	** ************************************						

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Form	990-PF (2017) Frank and Margaret Bitar Foundation	91-18479	0.3	P:	age 4
	990-PF (2017) Frank and Margaret Bitar Foundation 5 1 VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -				ige 4
1a		1		<u>-, </u>	
	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		1	,088
U	here And enter 1% of Part I, line 27b				000
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of				
·	Part I, line 12, col (b)			-	1
2		2			^
3	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) Add lines 1 and 2	3			0
4		4		_ _	880,
5	Subtrile A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) Tay be and an investment income. Subtract less 4 feet less 3 (feets a less and a control of the control of	5			
6	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	-			,088
_	Credits/Payments				
a	2017 estimated tax payments and 2016 overpayment credited to 2017 6a Exempt foreign organizations - tax withheld at source 6b				
b					
C	Tax paid with application for extension of time to file (Form 8868) 6c 1,025				
_d	Backup withholding erroneously withheld	_		_	
7	Total credits and payments Add lines 6a through 6d	7		1	,025
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			<u>63</u>
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			
Ц	t VII-A Statements Regarding Activities			. . T	
Та	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		4-	Yes	No
	participate or intervene in any political campaign?		1a		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			ľ	
	instructions for the definition		1b		<u>X</u>
	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			. [1
	Did the foundation file Form 1120-POL for this year?		1c		<u>X</u>
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 \$	_			Ì
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				Ì
	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				'
	, , ,		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		<u>X</u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T		i '		1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or		İ		
	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?	<i>.</i> .	6	X	<u></u>
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	l Part XV-	7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions ▶				
	OR				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		1	İ	1

(or designate) of each state as required by General Instruction G? If "No," attach explanation

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 tax year beginning in 2017? See instructions for Part XIV)? If "Yes," complete Part XIV

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

7

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Form 990-PF (2017) Frank and Margaret E Part VII-B Statements Regarding Activities				May Be	Requi	91-1847		Р	age 6
				may bo	10 4	04 (00//)		Yes	No
3 - , ,			10151		Г	Yes X No	 	162	-140
' (1) Carry on propaganda, or otherwise attempt to influ	_	-	•	• •	F	_ Yes ⊠ No			
(2) Influence the outcome of any specific public electric	•	,.		•	Г	7 v			
directly or indirectly, any voter registration drive?					-	Yes X No		i 1	
(3) Provide a grant to an individual for travel, study, or					[Yes X No			
(4) Provide a grant to an organization other than a cha					г		1		
		• • • • • • •			· · · [Yes X No			
(5) Provide for any purpose other than religious, chari	table, sc	entific, literary,	or educa	ational	_				
purposes, or for the prevention of cruelty to children					L	_ Yes ∑ No	}		
b If any answer is "Yes" to 5a(1)-(5), did any of the trans	actions f	ail to qualify un	der the	exceptions d	escribed	ın			
Regulations section 53 4945 or in a current notice rega							5b		
Organizations relying on a current notice regarding dis	aster ass	sistance check	here			▶ [_]	1		
c If the answer is "Yes" to question 5a(4), does the found	dation cla	im exemption	from the	tax	_				
because it maintained expenditure responsibility for the	e grant?				[Yes No			
If "Yes," attach the statement required by Regulations	section 5	3 4945-5(d)			_	_			
6a Did the foundation, during the year, receive any funds,	directly (or indirectly, to	pav pren	niums					
on a personal benefit contract?					[Yes X No			
b Did the foundation, during the year, pay premiums, dire					-		6b		Х
If "Yes" to 6b, file Form 8870	cony or "	idiroony, on a p	Cisonaii	ochem com	uor		<u></u>		
7a At any time during the tax year, was the foundation a p	artu to a	prohibited tax	shaltar tr	aneaction?	. [Yes X No	1		
· · · · · · · · · · · · · · · · · · ·	-	•					7b		
Part VIII Information About Officers, Dire								WAAS	<u></u>
and Contractors	ciors,	iiustees, i	Ouna	ation ma	layers	, mgmy raid	LIIIPIC	yees	,
						·			
1 List all officers, directors, trustees, and foundation r									
(a) Name and address		e, and average ' rs per week		mpensation ot paid,		Contributions to byee benefit plans		ense ad allowar	
	devote	ed to position	en	ter -0-)	and det	erred compensation		unovva	
William F Bitar	Presi	dent							
9828 E Burnside Street Suite 2, 97216		2.00		0		0			_0_
Mary Bitar Korek	Vice :	President							
9828 E Burnside Street Suite 2, 97216		2.00		0		0			0_
Lisa J Lucas	Direc	tor							
9828 E Burnside Street Suite 2, 97216		1.00		0		0			0_
	ļ				ļ	1	ı		
2 Compensation of five highest-paid employees (other	than th	ose included o	on line 1	- see instru	ictions).	If none, enter			
"NONE."									
						(d) Contributions to			
(a) Name and address of each employee paid more than \$50	,000	(b) Title, and a hours per w		(c) Compe	nsation	employee benefit plans and deferred	(e) Exp	ense ac allowar	
		devoted to po	sition	(0,00		compensation	oniei	allowal	ices
NONE				 			-		
				 					
		1							
		 							
		1							
									
		l				[
		 				<u></u>	L		
		{		}					
				L					
Total number of other employees paid over \$50,000 · · ·		<u> </u>		<u></u>		>	L		0
FFA							Form 9	90-PF	(2017)

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Part VIII Information About Officers, Directors, Trustees, Found and Contractors (continued)	lation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional services. See instruc	ctions. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		<u> </u>
		
Total number of others receiving over \$50,000 for professional services		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistic	al information such as the number of	Expenses
organizations and other beneficianes served, conferences convened, research papers produced, etc		
1		
2		
3		
4		
F==		<u> </u>
Part IX-B Summary of Program-Related Investments (see Instru		1
Describe the two largest program-related investments made by the foundation during the tax year on la	nes 1 and 2	Amount
•		
		1
2	-	
Allahan		
All other program-related investments See instructions 3		
Total. Add lines 1 through 3		
EEA	-	Form 990-PF (2017)

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

91-1847903

1 .	Distributable amount for 2017 from	m Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
	line 7					97,735
2	Undistributed income, if any, as o	f the end of 2017				3.7,00
а	Enter amount for 2016 only · ·			ļ		1
b	Total for prior years	, [
3	Excess distributions carryover, if a					
а	From 2012	3,960	ļ			}
b	From 2013	21,275	l	ļ		
c	From 2014	12,576				}
d	From 2015	9,297	1			}
Ð	From 2016	4,073				1
f	Total of lines 3a through e		51,181			<u> </u>
4	Qualifying distributions for 2017 fr	rom Part XII,			-	
	line 4 ▶ \$42	,250				
а	Applied to 2016, but not more tha	n line 2a				<u> </u>
b	Applied to undistributed income o	f pnor years)
	(Election required - see instruction	ns)				
С	Treated as distributions out of cor	pus (Election				
	required - see instructions) · ·					L
d	Applied to 2017 distributable amo	unt				42,250
e	Remaining amount distributed out	t of corpus				
5	Excess distributions carryover ap	plied to 2017 .	51,181			51,181
	(If an amount appears in column	(d), the same	ļ			
	amount must be shown in column	ı (a))				
6	Enter the net total of each colu	mn as				
	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e	ř				<u> </u>
b	Prior years' undistributed income	1				
	line 4b from line 2b	}	· 			ļ <u>.</u>
С	Enter the amount of pnor years' u	ı				
	income for which a notice of defic	, ,				
	been issued, or on which the sect	` ′				
	tax has been previously assessed					
a	Subtract line 6c from line 6b Taxa					,
_	amount - see instructions · · ·	ŀ				
е	Undistributed income for 2016 S 4a from line 2a Taxable amount -	t				
						1
f	Undistributed income for 2017 Si	Į-				
•	4d and 5 from line 1. This amount					
	distributed in 2018	i i				4 204
7	Amounts treated as distributions					4,304
•	to satisfy requirements imposed b	· · ·				
	170(b)(1)(F) or 4942(g)(3) (Election	· 1				
	required - see instructions) · ·	· ·				
8	Excess distributions carryover fro	}				
•	applied on line 5 or line 7 (see ins]
9	Excess distributions carryover	· }				
-	Subtract lines 7 and 8 from line 6					
10	Analysis of line 9					
. а	Excess from 2013	ţ [
b	Excess from 2014					
c	Excess from 2015					
d	Excess from 2016					
	Excess from 2017 · · · · ·				!	

m 9 art	Private Operating Four	idations (see in:	structions and Pa	rt VII-A, question	9))3 Pag
ì	If the foundation has received a ruling or	determination letter th	nat it is a private opera	iting		
	foundation, and the ruling is effective for 2	2017, enter the date of	of the ruling		<u> </u>	,
0	Check box to indicate whether the foundation	ition is a private oper	ating foundation desc	ibed in section	4942(j)(3) or	4942(j)(5)
1	Enter the lesser of the adjusted net	Tax year		Pnor 3 years		(-) T-4-1
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
)	85% of line 2a					<u> </u>
	Qualifying distributions from Part XII, line 4 for each year listed					<u> </u>
)	Amounts included in line 2c not used directly for active conduct of exempt activities					
Э	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
	Complete 3a, b, or c for the alternative test relied upon					
1	"Assets" alternative test - enter (1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i) "Endowment" alternative test - enter 2/3					
•	of minimum investment return shown in Part X, line 6 for each year listed					
•	"Support" alternative test - enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
ا ما ا	(4) Gross investment income	/ tion (0 1 - 1 - 1	4hin	Allo a Book and Allo		
Ţ	XV: Supplementary Informa			tne toundation na	ad \$5,000 or more	in assets at
	any time during the yea		ons.)			
1	Information Regarding Foundation M. List any managers of the foundation who before the close of any tax year (but only	have contributed m				
0	List any managers of the foundation who ownership of a partnership or other entit				e portion of the	
_	Information Regarding Contribution,	Grant, Gift, Loan, So	cholarship, etc Pro	grams:		
	Check here ► X if the foundation on unsolicited requests for funds. If the foundation complete items 2a, b, c, and d. See inst.	y makes contributions indation makes gifts, (s to preselected chan	able organizations and	does not accept der other conditions,	
1	The name, address, and telephone num		of the person to who	m applications should b	e addressed	
•	The form in which applications should b	e submitted and infor	mation and materials	they should include		
 C	Any submission deadlines		 			
	Any restrictions or limitations on awards					

Frank and Margaret Bitar Foundation Part XV | Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to any foundation manager Purpose of grant or Amount contribution recipient Name and address (home or business) or substantial contributor Paid during the year Please see attached list Continuing services 42,250 ······ 42,250 Approved for future payment

3b

Total

Part XVI-A | Analysis of Income-Producing Activities Enter gross amounts unless otherwise indicated Unrelated business income Excluded by section 512, 513, or 514 (e) Related or exempt (b) (d) function income (a) (c) (See instructions) Business Amount Exclusion code Amount 1 Program service revenue code b f g Fees and contracts from government agencies · · · Interest on savings and temporary cash investments 383 14 5 Net rental income or (loss) from real estate: 55,275 6 Net rental income or (loss) from personal property . . . 8 Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events · · · 10 Gross profit or (loss) from sales of inventory 11 Other revenue 12 Subtotal Add columns (b), (d), and (e) 55,658 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI-B | Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the Line No. accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions) V

		Organization	ns		•				
1	Did the o	rganization direc	tly or indirectly engage	e in any of the following with any	other organization desc	cribed		Yes	No
,	ın sectioi	n 501(c) (other th	an section 501(c)(3) o	organizations) or in section 527,	relating to political				
	organizat	tions?							ŀ
а	Transfers	s from the reporti	ng foundation to a nor	nchantable exempt organization	of:			} ,	
							- · · 1a(1)		X
	(2) Othe	rassets · · ·					· · · 1a(2)		X
b	Other tra	nsactions						. '	
	(1) Sales	s of assets to a r	onchantable exempt	organization			- · · 1b(1)		X
				exempt organization				4	X
				ets				1	X
	(4) Reim	ibursement arrai	ngements				1b(4)	<u> </u>	<u>X</u>
	• •	•					· · · 1b(5	4	X
	(6) Perfo	ormance of servi	ces or membership or	fundraising solicitations			· · · 1b(6	4	X
	-		-	her assets, or paid employees	• • • • • • • • • •				<u>X</u>
				plete the following schedule Col					
				ven by the reporting foundation					
	value in a	any transaction of	r sharing arrangemen	t, show in column (d) the value	of the goods, other asse	ets, or services r	eceived		
(a) Lini	e no (b)	Amount involved	(c) Name of nonc	haritable exempt organization	(d) Description of tran	sfers, transactions	and sharing arr	angeme	ents
						_			
					ļ	·-			
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	-								
	-	-			<u> </u>				
									
	-								
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						-			
	- -					_			
	- 4b - 6-				l	_			
		•	•	with, or related to, one or more to			ш	_ 5	7
				501(c)(3)) or in section 527?			· · · · □ ۲	es X	∐ No
<u>D</u>	If "Yes,"		owing schedule	(b) Time of annual time	· · · · · · · · · · · · · · · · · · ·	(a) Danasataa	-f.ualatiab		
		(a) Name of organ	ization	(b) Type of organization		(c) Description	or relationship		
		,						_	
									
									
				·					
	Under	penalties of perjury, 1	declare that I have examined	this return, including accompanying sche	dules and statements, and to t	the best of my knowle	dge and belief, it is	true,	
Sig	correct	and complete Decla	ration of preparer (other than	n taxpayer) is based on all information of	which preparer has any knowle	dge			
_		()	W MITTE	17.11.18	President	<u> </u>	May the IRS discu with the preparer s		
Her		nature of officer or tru	istee	Date	Title	 [See instructions		No
		Pnnt/Type prepare		Preparer's signature	Date	<u></u>	Te , PTIN		
Paid	t			(P 00)			죠") C E O F	z
	parer	Alyce L D			97-08-20 مصلط	T	loyed P002	20095	,
	•	Firm's name	Alyce L Daw		105	Firm's EIN			
USE	Only	Firm's address	Pond OR 977		-172	Phone no	201 0045		
EEA		<u> </u>	Bend OR 977	U.L.		503-	-201-8245 Form 9	90-PF	(2017)
								• •	, /

Federal Supporting Statements

Name(s) as shown on return

Frank and Margaret Bitar Foundation

Form 990PF - Part III - Line 5

Other Decreases Schedule

Adjustment for Federal taxes

1,024

Total

2017 PG01

FEIN

91-1847903

Form 990PF - Part II - Line 13 Investments: Other Schedule PG01 Statement #118

Category	Book value (BOY)	Book value (EOY)	FMV (EOY)
Transamerica Mutual Fund	21,052	21,370	19,771
Total	21,052	21,370	19,771

		Federal Su	Federal Supporting Statements	nents	2017 PG01	
Name(s) as shown on return Frank and Margaret Bitar Foundation	uo				Your Social Security Number 91-1847903	
		Form 990PF - Part I - Line 23	- Line 23 - Other Expenses Schedule	chedule	Statement #103~	
Description	Revenue and expenses	Net investment	Adjusted net income	Charitable purpose		
Rental expenses Oregon business license Oregon annual report fee Investment fees	3,018 50 175 65	3,018 0 175 65	0 0 0	0000		
Totals	3,308	3,258	0	0		
	Form 990PE	Form 990PF - Part I - Line 11	- Line 11 - Other Income Schedule	edule	PG01 Statement #106~	
Description Common Area Maintenance	Revenue and expenses	Net investment 545	Adjusted net income			
Totals	545	545	0			

		Federal Su	Federal Supporting Statements	nents	2017	7 PG01 '
Name(s) as shown on return Frank and Margaret Bıtar Foundation	uo				Your Soci	Your Social Security Number 91-1847903
	Form 990PF - Part I		- Line 16(b) - Accounting Fees Schedule	Schedule		Statement #108~
Description	Revenue and expenses	Net ınvestment	Adjusted net income	Charitable purpose		
Accounting fees Totals	1,000	1,000	0	0		
	Form 990PF - Part II	- Line 11	- Investments: Land Schedule	Schedule		PG01 Statement #117~
Description Building and land	Cost or other basis 893,970	Accumulated depreciation 306,246	End of year book value EN 587,724 1,99	EMV 1,938,580		
Total	079,893	306,246	587,724 1,93	1,938,580		

				_							
PG01 '	Your Social Security Number 91-1847903	Statement #126	Adjusted Net	Income	0	O	0	0	0 (
2017	Your Social S	St	Net Investment Adjusted Net	Income	14,826	1,640	65	0	1,764	1	
			Current Year	Depreciation	14,826	1,640	65	0	1,764	18,962	
Ø				Life	39	9 9	39		15) 1	
Federal Supporting Statements		- Depreciation Schedule		Rate	2.564	2.564	2.564	0	6.667)))	
			Computation	Method	SL	SI	SL	NDA	TS TS		
		Part I - Line 19	Prior year	Depreciation	261,925	23,508	636		882	287,284	
		Form 990PF - Part		8	578,200	63,975	2,532	212,800	26,463	893,970	
	`oundatıon		Date	Acquired	B 04-20-1999	09-06-2002	03-15-2007	04-20-1999	05-25-2016		
	Name(s) as shown on retum Frank and Margaret Bıtar Foundatıon			Description	Building -10750 NE Sandy B 04-20-1999	Roof	Building improvements	Land	New LED lighting	Totals	

Charity Name	<u>Address</u>	City	State	Zip	Amount
Agia Sophia School	14485 SW Walker Rd	Portland	OR	97006	\$1,000.00
ASHA-INC	11124 NE Halsey Street #589	Portland	OR	97220	\$500.00
Blanchet House of Hospitality	310 NW Glisan	Portland	OR	97209	\$500.00
Camp Angelos	32149 SE Stevens Rd.	Corbett	OR	97019	\$500.00
Cappella Romana	620 SW Main St. Ste. 714	Portland	OR	97205	\$1,000.00
Central East Rotary Foundation	PO Box 30477	Portland	OR	97294	\$10,000.00
Christian Brothers High School	4315 Martin Luther King, Jr. Blvd	Sacramento	CA	95820	\$1,000.00
De La Salle North Catholic High School	7528 N Fenwick Ave.	Portland	OR	97217	\$1,000.00
Dress For Success	1532 B NE 37th Avenue	Portland	OR	97232	\$1,000.00
Edwards Center Inc.,	PO Box 6269	Aloha	OR	97007	\$1,000.00
Eva Khallaf Scholarship Fund	PO Box 66465	Portland	OR	97290	\$1,500.00
Guide Dogs	32901 SE Kelso Road	Boring	OR	97009	\$250.00
Halprin Landscape Conservacy	150 SW Harrision, Suite 200	Portland	OR	97201	\$1,000.00
Helienic-American Cultrual Center & Museum (HACCM)	3131 NE Glisan St.	Portland	OR	97232	\$500.00
Lake Oswego School District Foundation	PO Box 70	Lake Oswego	OR	97034	\$500.00
Lebanese American University	211 East 46th Street	New York	NY	10017-2935	\$1,000.00
Loaves & Fishes Center, Inc.	7710 SW 31st Ave.	Portland	OR	97280-0477	\$500.00
Make-A-Wish Foundation of Oregon	2000 SW 1st Ave.	Portland	OR	97201	\$1,000.00
Mother's Against Drunk Drivers (MADD)	511 E John Carpenter Frwy., Suite 700	Irving	TX	75062-8187	\$500.00
Muscular Dystrophy Association	4800 SW Macadam Ave. # 205	Portland	OR	97239-3929	\$500.00
NW Catholic Counseling Center	PO Box 56142	Portland	OR	97238	\$500.00
OHSU Knight Cancer Institute	3181 SW Jackson Park Rd., CR145	Portland	OR	97239-3098	\$1,000.00
OMMP	6200 Virginia Ave., Suite 210	Portland	OR	97239	\$2,000.00
Oregon Human Society	PO Box 11364	Portland	OR	97211	\$500.00
Oregon Scottish Rite Clinics - Speech	709 SW 15th Ave.	Portland	OR	97205	\$500.00
Pacific Crest Acadamy	324 NE Oak St., Camas	Camas	WA	98607	\$1,000.00
Parkinson's Disease Foundation	PO Box 6012	Albert Lea	MN	56007-9805	\$1,000.00
Portland Rescue Mission	PO Box 3713	Portland	OR	97208-3713	\$500.00
Project Mexico & St. Innocent Orphanage	PO Box 120028	Chula Vista	CA	91912-3128	\$1,000.00
Providence Child Center Foundation	PO Box 4900, Unit 16	Portland	OR	97208-4900	\$3,000.00
Ronald McDonald House Charities of Oregon & SW Washington	2620 N Commercial Ave.	Portland	OR	97227-1631	\$1,000.00
RoseMary Anderson High School	717 N Killingsworth Ct.	Portland	OR	97217	\$1,000.00
Serendipity	PO Box 33350	Portland	OR	97292	\$2,000.00
Special Olympics-Oregon	5901 SW Macadam Ave., Suite 200	Portland	OR	97239	\$1,000.00
St. Jude Children's Research Hospital	501 St. Jude Place	Memphis	TN	38105-9959	\$2,000.00
Victory Academy	PO Box 428	Tualatin	OR	97062	\$1,000.00
Sycamore Lane Therapeutic Center 2016 Donation was voided					(\$1,500.00)

Total Donations for 2017

EIN 91-1847903 2017 Form 990-PF

Frank and Margaret Bitar Foundation

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\$42,250.00