Form **990-PF**

Return of Private Foundation

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

Open to Public Inspection

Depa	artmer	nt of the Treasury	▶ Do not enter	social security numbers of	n this form as	it may be ma	ade public.	ZU /	
Inter	nai Re	evenue Service		.irs.gov/Form990PF for ins			ormation.	Open to Public Inspection	
		of foundation	or tax year beginning		, and e	naing	A F-lid-state-		
IVa	1116 0	n iounidation					A Employer identificati	on number	
S	СН	LESINGE	R FAMILY FOUNDAT	TON			93-081816	q	
			box number if mail is not delivered to stree			Room/suite	B Telephone number	<u> </u>	
6	10	SW ALE	ER STREET, SUITE	E 1221			503-223-4	.128	
			ovince, country, and ZIP or foreign (C If exemption application is	. —	
_P	OR	TLAND,	OR 97205						
G (Check	k all that apply:	Initial return	Initial return of a f	ormer public (charity	D 1 Foreign organization	ons, check here	
			Final return	Amended return	•				
			Address change	Name change		a A	2 Foreign organizations check here and attach	computation	
H_(k type of organia	· ~			M	E If private foundation s	status was terminated	
<u>L.</u> .			1) nonexempt charitable trust	Other taxable private found	ation		under section 507(b)		
_				ing method: X Cash	Accı	rual	F If the foundation is in	a 60-month termination	
		Part II, col. (c), I		ither (specify)			under section 507(b)	(1)(B), check here	
_	-\$	Analysis of D	4,476,490. (Part I, colu						
P	art l	— (The total of am	Revenue and Expenses ounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books		vestment ome	(c) Adjusted net	(0) Disbursements for charitable purposes	
			al the amounts in column (a))		11101			(cash basis only)	
	1 2		gifts, grants, etc., received If the foundation is not required to attach Sch. B	63,000.	,		N/A		
	3	Interest on savin	os and temporary	13.	 	13.	<u></u>	STATEMENT 1	
<u> </u>	4	cash investment	s Interest from securities	53,747.		$\frac{13}{3,747}$		STATEMENT 2	
91.0Z	5.	Gross rents	interest none securities	33,747.		J, / 4 / 6		SIAIEMENI Z	
3		Net rental income	a or (loss)				, į		
=1	1	// 4/	· · · 	24,955.	<u>' ' </u>		A	-	
<u></u>	T	Gross sales price	from sale of assets not on line 10 a for all 196,232.	22/3331			 	- 1	
″ JUL Revenue	7		ncome (from Part IV, line 2)	-162 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2	4,955.	† · · · · · ·		
) ř	8	Net short-term	ı capıtal gain	Con y think y process	7	- 1	1	,	
	9	Income modifi		1,14 -	1			• ,	
	10a	Gross sales less and allowances	returns			١ .	,		
DOMINICO JOE Revenu	b	Less Cost of goo	RECEIVED	7.					
D)	C	Gross profit or	(loss)	181					
	11	Other income Total. Add line	B MAY 1 6 2018	<1,346.		4.		STATEMENT 3	
	12			140,369.	7	8,719.		<u>'</u>	
	13	Compensation o	of office's, directors, trustos estados estados directors, trustos estados estad	0.		0.		0.	
	14						-		
S	15	Pension plans Legal fees	, employee benefits				· · · · · · · · · · · · · · · · · · ·		
)SC	ION	Accounting fe	es STMT 4	16 627		0 214		0 212	
ğ	ַ	Other professi		16,627. 5,393.		8,314. 5,393.		8,313.	
ē m	17	Interest	bildices SIMI S	3,393.		J, JJJ.	<u> </u>		
ati	18	Taxes	STMT 6	1,902.		788.	-	554.	
ist	19	Depreciation a		1/3020				334.	
턀	20	Occupancy						`	
Ą	21	Travel, confere	ences, and meetings	1,162.	<u> </u>	0.		1,162.	
and	22	Printing and p	ublications						
Operating and Administrative Expenses	23	Other expense		10,455.		27.		10,428.	
rati	24		g and administrative						
ğ			d lines 13 through 23	35,539.	1	4,522.		20,457.	
J	25		gifts, grants paid	223,115.	_	1	41.5	223,115.	
	26		es and disbursements.	0.70					
	-	Add lines 24 a		258,654.	1	4,522.	ļ	243,572.	
	27			110 00-	, , , ,	i,			
	1 .		e over expenses and disbursements	<118,285.		4 400			
			It income (if negative, enter -0-) RCOME (if negative, enter -0-)		6	<u>4,197.</u>		,	
_		Valagred light	neomic (ii negative, enter -0-)	<u> </u>	1		N/A	- I	

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions

Form	990-PF (2017) SCHLESINGER FAMILY FOUN			0818169 Page 2
Pa	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
$\overline{}$	1 Cash - non-interest-bearing	(a) Book Value	(b) Book Value	(c) Fair Market Value
	2 Savings and temporary cash investments	<23.>	981.	981.
	3 Accounts receivable	(23.)	301.	701.
	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 .			
	7 Other notes and loans receivable			
	Less; allowance for doubtful accounts ▶			
ş	8 Inventories for sale or use			
Assets	9 Prepaid expenses and deferred charges	259.	750.	750.
⋖ 1	IOa Investments - U.S. and state government obligations			
	b Investments - corporate stock			
ı	c Investments - corporate bonds			
1	1 Investments - land, buildings, and equipment basis			
	Less accumulated depreciation			
- 1	2 Investments - mortgage loans	1 200 200		4 00 = 0.10
- 1	3 Investments - other STMT 8	1,329,882.	1,340,502.	1,295,843.
1	Land, buildings, and equipment; basis			
١,	Less accumulated depreciation	2 210 521	2 170 016	2 170 016
- 1	5 Other assets (describe ► STATEMENT 9) 6 Total assets (to be completed by all filers - see the	3,310,531.	3,178,916.	3,178,916.
	instructions. Also, see page 1, item I)	4,640,649.	4,521,149.	1 176 100
۲,	7 Accounts payable and accrued expenses	1,238.	23.	4,476,490.
	18 Grants payable	1,230.		,
	9 Deferred revenue			
.00	U Loans from officers, directors, trustees, and other disqualified persons			
	11 Mortgages and other notes payable			* , }
2 ا ت	22 Other liabilities (describe >			_
	,			- '
2	3 Total liabilities (add lines 17 through 22)	1,238.	23.	, ,
	Foundations that follow SFAS 117, check here			. 1
	and complete lines 24 through 26, and lines 30 and 31.			i
Net Assets or Fund Balances	4 Unrestricted	4,639,411.	4,521,126.	!
[2	5 Temporarily restricted			ŧ
<u>m</u> 2	6 Permanently restricted			
š	Foundations that do not follow SFAS 117, check here			
느	and complete lines 27 through 31.			} !
<u>ي</u> 2				
8 2				ļ
₹ 2	, , , , , , , , , , , , , , , , , , , ,			;
2 3	O Total net assets or fund balances	4,639,411.	4,521,126.	}
				1
3	11 Total liabilities and net assets/fund balances	4,640,649.	4,521,149.	<u> </u>
Pa	nt III Analysis of Changes in Net Assets or Fund Ba	alances		
1 To	otal net assets or fund balances at beginning of year - Part II, column (a), line	30		
	nust agree with end-of-year figure reported on prior year's return)		1	4,639,411.
	nter amount from Part I, line 27a		2	<118,285.
3 01	ther increases not included in line 2 (itemize)		3	0.
	dd lines 1, 2, and 3		4	4,521,126.
5 D	ecreases not included in line 2 (itemize)		5	0.
6 To	otal net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	4,521,126.
		1-12		Form 990-PF (2017)

Τ	2016	289,810.	4,557,270.		.063593
	2015	268,651.	4,748,911.		.056571
	2014	92,350.	5,094,889.		.018126
_	2013	264,296.	5,213,828.		.050691
	2012	85,437.	1,458,510.		.058578
	Total of line 1, column (d) Average distribution ratio for the 5-year base	period - divide the total on line 2 by 5.0, or by th	e number of years	2	.247559
	the foundation has been in existence if less th	• • •	, ,	3	.049512
4	Enter the net value of noncharitable-use asset	s for 2017 from Part X, line 5		4	4,470,174
5	Multiply line 4 by line 3			5	221,327
6	Enter 1% of net investment income (1% of Pa	rt I, line 27b)		6	642
7	Add lines 5 and 6			7	221,969
8	Enter qualifying distributions from Part XII Jun	ρ. Д			243 572

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.

723521 01-03-18

Form **990-PF** (2017)

See the Part VI instructions.

m 990-PF (2 art VI	2017) SCHLESINGER FAMILY FOUNDATION Excise Tax Based on Investment Income (Section 4)		11/h) 4940/e			818169		Page 4
	perating foundations described in section 4940(d)(2), check here			,, 0. 4		300 111301	40110	113)
	ling or determination letter: (attach copy of letter if							
	foundations that meet the section 4940(e) requirements in Part V, check here						6	42.
of Part I, I		aliu La	enter 176	r	_1	 		44.
•	ine 276 Iomestic foundations enter 2% of line 27b. Exempt foreign organizations, ente	ur 49/ of Dort Liu	no 10 nol (h)					
		-	, , ,	,	-		-	Λ
Add lines	section 511 (domestic section 4947(a)(1) trusts and taxable foundations only	y, others, enter -	U-)		2			42.
			0.		3		0	0.
	(income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	ly; otners, enter	-0-)		4			42.
	d on investment income Subtract line 4 from line 3. If zero or less, enter -0-				5			44.
Credits/Pa				c 0 0		•		
	mated tax payments and 2016 overpayment credited to 2017	6a		600.				
•	oreign organizations - tax withheld at source	<u>6b</u>		0.	1			
	with application for extension of time to file (Form 8868)	6c		0.				
	ithholding erroneously withheld	6d		0.	-		_	
	lits and payments. Add lines 6a through 6d				7		6	00.
	penalty for underpayment of estimated tax. Check here X if Form 2220 is	attached			8			0.
	If the total of lines 5 and 8 is more than line 7, enter amount owed				9			42.
	nent. If line 7 is more than the total of lines 5 and 8, enter the amount overpai	d	1		10			
	amount of line 10 to be: Credited to 2018 estimated tax		Refund	ded 🚩	11			
	Statements Regarding Activities						157	
	e tax year, did the foundation attempt to influence any national, state, or local l	egislation or did	it participate or i	ntervene	ın	ļ	Yes	No
	cal campaign?					1 <u>a</u>		X
Did it spe	nd more than \$100 during the year (either directly or indirectly) for political pu	rposes? See the	instructions for	the defin	ition	<u>1b</u>	ļ	X
If the ansi	wer is "Yes" to 1a or 1b, attach a detailed description of the activities and copi	ies of any materi	als published or					
distribute	d by the foundation in connection with the activities.						1.	
Did the fo	undation file Form 1120-POL for this year?					1c		X
Enter the	amount (if any) of tax on political expenditures (section 4955) imposed during	the year:					ļ	
(1) On th	e foundation. > \$ 0 . (2) On foundation manage	gers. 🕨 \$		0.			1	İ
Enter the	reimbursement (if any) paid by the foundation during the year for political exp	enditure tax imp	osed on foundati	on				ļ
managers	s.▶\$0.							١.
Has the fo	oundation engaged in any activities that have not previously been reported to ti	he IRS?				2		X
	ttach a detailed description of the activities.							,
	oundation made any changes, not previously reported to the IRS, in its governi	ıng instrument. a	articles of incorpo	oration. c)r			
	r other similar instruments? If "Yes," attach a conformed copy of the changes	,				3	-1-/	x
-	undation have unrelated business gross income of \$1,000 or more during the	vear?				48	Х	
	as it filed a tax return on Form 990-T for this year?	your.				4b	X	†
	e a liquidation, termination, dissolution, or substantial contraction during the ye	ear?				5	 	x
	ttach the statement required by <i>General Instruction T</i> .						1	 ** -
	quirements of section 508(e) (relating to sections 4941 through 4945) satisfie	od either:						
	uage in the governing instrument, or	ou Gilligi.						
	,	atory directions	that conflict with	the ctata	law			,
	elegislation that effectively amends the governing instrument so that no manda	atory unections	mai connict with	uie state	IdW	`_`	- T	
	the governing instrument?	amalata D	aal (a) c=d D= t	vv i		6	X	+
טו פווו טוע נוופ 10	undation have at least \$5,000 in assets at any time during the year? If "Yes," co	umpiete Part II, o	col. (c), and Part	۸V		7	X	┼
Enter the	states to which the foundation reports or with which it is registered. See instru	ictions.						
OR								
	wer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	he Attornev Gene	eral (or designate	!)				
	ate as required by General Instruction G? If "No," attach explanation	,	. (=: :==:8::#:0	,		86	X	
) for cale	ndar	<u></u>	T	
	ndation claiming status as a private operating foundation within the meaning of	of section 4942(i	1(3) or 4942(1)(5					1
	ndation claiming status as a private operating foundation within the meaning of or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes." () ioi caic	iluai	و آ	1	X
year 2017	ndation claiming status as a private operating foundation within the meaning or or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," or the tax year? If "Yes," attach a sc	complete Part X	IV		iluai	9		X

Page 5

۲a	nt VII-A Statements Regarding Activities (continued)			
	•		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		İ	
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?		İ	
	If "Yes," attach statement. See instructions	12		<u> X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► <u>WWW.SCHLESINGERFOUNDATION.COM</u>			
14	The books are in care of ▶ PAUL SCHLESINGER Telephone no. ▶ 503-22		<u> 128</u>	
	Located at ► 610 SW ALDER STREET, SUITE 1221, PORTLAND, OR ZIP+4 ►97	<u> 205</u>		
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	N	/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	ŀ		,
	foreign country			
Pa	rt 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.		Yes	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?			• ;
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	}		4
	a disqualified person? X Yes No			,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			,
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			,
	(5) Transfer any income or assets to a disqualified person (or make any of either available	-		
	for the benefit or use of a disqualified person)?			Ι,
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			۱ ،
	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.)	ł		i
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		-	'
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	_1b		X
	Organizations relying on a current notice regarding disaster assistance, check here			:
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			(
	before the first day of the tax year beginning in 2017?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	ł		
	defined in section 4942(j)(3) or 4942(j)(5)):		,	1
8	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	1		1 1
	before 2017?			
	If "Yes," list the years \blacktriangleright ,,,,		1	
t	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	_		د
	statement - see instructions.) N/A	2b	 	ļ.—
0	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		l ·	-
			ļ	
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		1	
	during the year?	1		
t	o 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		1	
	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.) N/A	3b_	 	175
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	48	 	<u> </u>
ı	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 leopardy before the first day of the tax year beginning in 2017?	l 4h	1	l X

orm 990-PF (2				<u>93-08181</u>	<u>.69</u>	F	age 6
Part VII-B	Statements Regarding Activities for W	hich Form 4720 May Be	Required (contin	ued)		 -	
_	e year, did the foundation pay or incur any amount to:			\		Yes	No
	งก propaganda, or otherwise attempt to influence legislation	• • • • • • • • • • • • • • • • • • • •		s X No	- 1	- [,
	ence the outcome of any specific public election (see section	4955); or to carry on, directly or indir	• • • • • • • • • • • • • • • • • • • •			ļ	;
	oter registration drive?			8 X No	l	Ì)
	de a grant to an individual for travel, study, or other similar p	•	Ye	s X No	ļ	İ	. !
	de a grant to an organization other than a charitable, etc., org	ganization described in section				ļ	
	(d)(4)(A)? See instructions			8 X No	1	Ì	<u> </u>
	de for any purpose other than religious, charitable, scientific,	, literary, or educational purposes, or			l	ļ	!
	revention of cruelty to children or animals?		_	8 X No			1
	wer is "Yes" to 5a(1)-(5), did any of the transactions fail to qu		in Regulations	37/3	۱ ـ	1	ļ - i
	3.4945 or in a current notice regarding disaster assistance? S			N/A	5b		
-	ions relying on a current notice regarding disaster assistance	•	upad '				
	wer is "Yes" to question 5a(4), does the foundation claim exer	·	. —	:s 🗀 No	1	İ	'
•	re responsibility for the grant? tach the statement required by Regulations section 53.4945-		√I/A L Ye	8 L No	ļ	ļ	, i
· -	undation, during the year, receive any funds, directly or indiri	· •		Ī			,
	undation, during the year, receive any lunius, directly or morn I benefit contract?	oony, to pay piciniums on		s X No	l		,
	undation, during the year, pay premiums, directly or indirectl	Ctreated transfer contracts	11	יא בגב אי	6b	į	X
	6b, file Form 8870.	y, on a personal penent contract!		<u> </u>			-11
	ie during the tax year, was the foundation a party to a prohibi	ited tax shelter transaction?		8 X No	Í		,
	id the foundation receive any proceeds or have any net incom			N/A	7b		
Part VIII	Information About Officers, Directors,		anagers. Highly		<u></u>		`
	Paid Employees, and Contractors	,					
List all off	icers, directors, trustees, and foundation manager	s and their compensation.					
		(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred] (e) Exp	ense
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	Lau	allowar	
			İ		1		
SEE STA	TEMENT 10		0.	0.	<u>.</u>		<u>0.</u>
					1		
			i				
					↓		
					}		
					↓		
							
			İ				
			100015				
Compens	ation of five highest-paid employees (other than th		, enter "NONE."	(d) Contributions to		(e) Exp	
(a) Na	ame and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deterred	1 0	ccount,	, other
		devoted to position		compensation	+	allowa	nces
<u>N</u>	IONE						
			 	 	+	-	
			1		-		
			 		+-		
			1	1			
			 		+		
	 						
			+		╁┈		
				[
Total number	of other employees paid over \$50,000		<u>, L</u>				0
_ squi illustribut				Form	gar)-PF	(2017)
				FUIII	, 550		(EU11)

Form 990-PF (2017) SCHLESINGER FAMILY FOUNDATION	93-0	818169 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NOI	VE."	
(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 inf	ormation such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produced,	etc.	Expenses
1 N/A		
2		
		,
3		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1	and 2.	Amount
1N/A		
2		
All other program-related investments. See instructions.		
3		
· · · · · · · · · · · · · · · · · · ·		
Total. Add lines 1 through 3		0.
		Form 990-PF (2017)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations	, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	1,347,492.
b	Average of monthly cash balances	1b	11,840.
C	Fair market value of all other assets	1c	3,178,916.
đ	Total (add lines 1a, b, and c)	1d	4,538,248.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	<u> </u>
3	Subtract line 2 from line 1d	3	4,538,248.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	68,074.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,470,174.
6	Minimum investment return. Enter 5% of line 5	6	223,509.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here and do not complete this part.)	ıd certain	
1	Minimum investment return from Part X, line 6	1	223,509.
2 a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
G	Add lines 2a and 2b	2c	642.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	222,867.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	222,867.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	222,867.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	243,572.
b	Program-related investments - total from Part IX-B	1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
8	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	243,572.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	income. Enter 1% of Part I, line 27b	5	642.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	242,930.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies fo	or the section

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7		10013 \$101 10 2010	2010	
_		<u>.</u>		222,867.
2 Undistributed income, if any, as of the end of 2017 a Enter amount for 2016 only	,2			
b Total for prior years:			0.	
y rounted prior yours.	,	0.		,
3 Excess distributions carryover, if any, to 2017:				
a From 2012	- ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			
b From 2013		i.		
c From 2014		;	•	,
d From 2015 25,327.				
e From 2016 63,068.				
f Total of lines 3a through e	88,395.			
4 Qualifying distributions for 2017 from				
Part XII, line 4: ► \$ 243,572.	* *			
a Applied to 2016, but not more than line 2a	,		0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			•
d Applied to 2017 distributable amount	·			222,867.
e Remaining amount distributed out of corpus	20,705.			,
5 Excess distributions carryover applied to 2017	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a).)	A CONTRACTOR OF THE SECOND STATES			
6 Enter the net total of each column as	, , , , , , , , , , , , , , , , , , , 	` ;		
indicated below:	· · · ·			-
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	109,100.			
b Prior years' undistributed income. Subtract				,
line 4b from line 2b	* , , * , , *	0.		, ' ,
c Enter the amount of prior years' undistributed income for which a notice of	ر معرونون موفع الدوري		,	
deficiency has been issued, or on which			•	
the section 4942(a) tax has been previously	÷ '	•		,
assessed		0.	·	
d Subtract line 6c from line 6b. Taxable amount - see instructions	4	0		!
e Undistributed income for 2016. Subtract line	36 .	0.		
4a from line 2a. Taxable amount - see instr.	<i>1</i> 4 .	•	0.	
f Undistributed income for 2017. Subtract	· · · · · · · · · · · · · · · · · · ·		<u> </u>	
lines 4d and 5 from line 1. This amount must	to The State of th			ļ
be distributed in 2018				0.
7 Amounts treated as distributions out of				0.
corpus to satisfy requirements imposed by		*		
section 170(b)(1)(F) or 4942(g)(3) (Election			,	
may be required - see instructions)	0.			,
8 Excess distributions carryover from 2012		 	· · · · · · · · · · · · · · · · · · ·	
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	109,100.			
10 Analysis of line 9:				
a Excess from 2013				. !
b Excess from 2014		_		<u> </u>
c Excess from 2015 25,327.		* **		;
d Excess from 2016 63,068.	1			,
e Excess from 2017 20,705.				

723581 01-03-18

Form 990-PF (2017) SCHLES	NGER FAMILY	FOUNDATION	<u> </u>	93-08	18169 Page 10
Part XIV Private Operating F			-A, question 9)	N/A	
1 a If the foundation has received a ruling of			İ		
foundation, and the ruling is effective for	·	_	▶		
b Check box to indicate whether the foun		ng foundation described i		4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	4110010	Prior 3 years	1	/
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for					•
each year listed					
b 85% of line 2a	! 				
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets					1
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter		- //			
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from	<i>I</i> /6			-	
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or mo	re in assets
at any time during					
1 Information Regarding Foundation	on Managers:				
B List any managers of the foundation will	-	than 2% of the total cont	ributions received by the	e foundation before the clos	e of any tax
year (but only if they have contributed i					
NONE					
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large port	on of the ownership of a pa	rtnership or
NONE					
2 Information Regarding Contribut	tion, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
	only makes contributions	to preselected charitable	organizations and does	not accept unsolicited requi	ests for funds. If
a The name, address, and telephone num	·				
PAUL R. SCHLESINGER			anona anouna de adules	Jood.	
610 SW ALDER STREET	SUITE 1221	, PORTLAND,			
b The form in which applications should		_		TATO C	
LETTER DESCRIBING OF c Any submission deadlines:	(GANIZATION	AND INTENDE	USE OF F	UNDS.	
N/A					
d Any restrictions or limitations on award	ls, such as by geographic	al areas, charitable fields,	kinds of institutions, or	other factors:	
N/A					
702801 01 02 19					5 000 DE (0047)

Part XV S	Supplementary I	Information ((continued)
-------------	-----------------	---------------	-------------

3 Grants and Contributions Paid During the Y	If recipient is an individual.			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or observation solution	, copient		
AMERICAN DIABETES ASSOCIATION	N/A	PC	HEALTHCARE EDUCATION	
.701 N BEAUREGARD ST ALEXANDRIA, VA 22311			TRAINING	5,000
JUVENILE DIABETES RESEARCH FOUNDATION 26 BROADWAY, 14TH FLOOR NEW YORK, NY 10004	N/A	PC ·	RESEARCH	3,000
MARATHON EDUCATION PARTNERS 610 SW ALDER ST, #921	N/A -	PC	COLLEGE VISITS	10.000
PORTLAND, OR 97205				10,000
OHSU FOUNDATION 1121 SW SALMON ST, STE 100 PORTLAND, OR 97205	N/A	PC	GLOBAL PROGRAMS	10,000
OREGON COAST AQUARIUM 2820 SE FERRY SLIP RD NEWPORT, OR 97365	N/A	PC	SUPPORT OF MARINE WILDLIFE REHABILITATION &	
MEMPORI, OR 57505			EDUCATION CENTER	20,000
	NTINUATION SHEE	TT(S)	▶ 3a	223 115
b Approved for future payment				
OREGON COAST AQUARIUM 2820 SE FERRY SLIP RD	N/A	PC	SUPPORT OF MARINE	
NEWPORT, OR 97365			REHABILITATION & EDUCATION CENTER	80,000
OREGON SYMPHONY	N/A	PC	MUSIC EDUCATION	
909 SW WASHINGTON PORTLAND, OR 97205				5,000
UNIVESITY OF PUGET SOUND 1500 N WARNER ST, STOP 1075	N/A	PC	ENDOWED SCHOLARSHIP	
TACOMA, WA 98416	1	.1	1	80,000

Part XVI-A Analy	ysis of Income-P	roducing Activities
------------------	------------------	---------------------

ter gross amounts unless otherwise indicated.	Uillelateu L	usiness income		y section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d)	Related or exempt
Program service revenue:	code	Antount	code	Amount	function income
a					
b					
C					
d	 				
e	J———				
					
Fees and contracts from government agencies			- 	 +	
Membership dues and assessments				+	
Interest on savings and temporary cash	\		امدا	1.3	
Investments			14	53,747.	
Dividends and interest from securities	 		14	53,/4/.	
Net rental income or (loss) from real estate:	 	· · · · · · · · · · · · · · · · · · ·			··
a Debt-financed property	\				
b Not debt-financed property					
Net rental income or (loss) from personal	1		1 1		
property		<1,350	14	4.	
Other investment income	 	<1,350	J.>14	4.	
Gain or (loss) from sales of assets other	1		18	24,955.	
than inventory	 		19 -	24,935.	
Net income or (loss) from special events Gross profit or (loss) from sales of inventory	 				
Other revenue:	 				
_	1		1		
a	 				
b	-		1-1-		
d			 		
d				 - T	
Subtotal. Add columns (b), (d), and (e)		<1,350		78,719.	
Total Add line 12, columns (b), (d), and (e)		<u> </u>	<u> </u>		77,36
ee worksheet in line 13 instructions to verify calculations.)					,
		.1: 1			
Part XVI-B Relationship of Activities t	o the Accom	pushment of	Exempt Po	urposes	
ine No. Explain below how each activity for which inco	me is reported in o	Olumn (e) of Part XV	/I-A contributed	importantly to the accome	olishment of
the foundation's exempt purposes (other than				or taking to the account	

me No. ▼	the foundation's exempt purposes (other than by providing funds for such purposes).
	•
	
}	
- 1	

Form 99		O17) SCHLE	SINGER F	AMILY F	OUN	DATI	N		93-	0818169	Pa	ge 1 3
Part 2	XVII	Information Re Exempt Organ		nsfers to a	nd T	ransac	tions a	nd Relation	ships With Nor	charitable		
1 Did	the ord	anization directly or indi		of the followin	o weth s	nu othor	organizatio	an described in so	etion E01/c)	· - r - ·	Yes	No
		section 501(c)(3) organ							cuon so r(c)			
		rom the reporting found				_	inzations:			,		
	Cash				gumeun	o., o.,				1a(1)		X _
	Other	assets								1a(2)		X
		sactions:										
(1)	Sales	of assets to a noncharita	ble exempt organiza	ation						16(1)	-	X
		ases of assets from a no								1b(2)		Х
(3)	Renta	of facilities, equipment,	or other assets							1b(3)		X
(4)	Reimb	ursement arrangements								1b(4)		X
		or loan guarantees								<u>1b(5)</u>		<u>X</u>
		mance of services or me								1b(6)		X
		facilities, equipment, ma								1c	<u> </u>	_X_
		er to any of the above is									sets,	
		given by the reporting for				than fair r	narket valu	ie in any transacti	on or sharing arrange	ment, show in		
		the value of the goods,				+ 0.000		(4) -				
(a) Line n	-	(b) Amount involved	(c) Name (of noncharitable	exemp	it Organiza	illon	(u) Descript	on of transfers, transaction	ns, and sharing ar	rangeme	nts
	+			N/A								
	+	-,	 			 -						
	+		 									
	\dashv								·			
	\neg		· · -									
	_											
					,							
			•						·			
		 										
												
		dation directly or indirec			or mor	e tax-exei	npt organi	zations described		<u>г</u>	ree	٦
		501(c) (other than sectio		section 52/?						Yes	LA	No
<u>D II</u>	Yes, co	mplete the following sch (a) Name of org			(h) T	ype of org	anization		(c) Description of re	elationshin		
		N/A	Janization		(6) 1)	po or org	unizanon		(a) Description of the	nutionality		
		11/11			 							
					<u> </u>			<u> </u>				
		 										
		penalties of perjury, I declare								May the IRS	discuss	this
Sign	.	lief, it is true correct and cor	mplete Declaration of p	preparer (other tha	n taxpay		ı		er has any knowledge	return with the	e prepar	er
Here		Vand 1L	- Selling			05)	18/501	PRESI	DENT	X Yes		No
	Sign	ature of officer or trustee				Date		Title				
		Print/Type preparer's na		Preparer's s	ignature	e		Date	Check if	PTIN		
D		CYNTHIA P.		UYBOR	iki	olon	كسا]	self- employed			
Paid		BARTHOLOME		CYNTHI	<u>A P</u>	. BA	RTHO	05/08/18		P01313		
Prepa		Firm's name PER	KINS & CO	OMPANY,	P.	C.			Firm's EIN ► 9	3-09289	24	
Use (ן אווויט								I			

Form **990-PF** (2017)

Phone no. 503-221-0336

Firm's address > 1211 SW FIFTH AVE, SUITE 1000 PORTLAND, OR 97204-3710

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Name of the organization **Employer identification number** SCHLESINGER FAMILY FOUNDATION 93-0818169 Organization type (check one). Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 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 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 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990 EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

Employer identification number

93-0818169

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BARRY D. SCHLESINGER 610 SW ALDER STREET, SUITE 1221 PORTLAND, OR 97205	\$11,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	N. JOSH SCHLESINGER 610 SW ALDER STREET, SUITE 1221 PORTLAND, OR 97205	\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	BPM ASSOCIATES (1995), LLC 610 SW ALDER STREET, SUITE 1221 PORTLAND, OR 97205	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
; ;		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

SCHLESINGER FAMILY FOUNDATION

93-0818169

art II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
			990, 990-EZ, or 990-PF) (

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor OREGON JEWISH MUSEUM AND CENTER FOR N/A CAPACITY BUILDING PC HOLOCAUST EDUCATION SUPPORT 724 NW DAVIS ST 4,250. PORTLAND, OR 97209 PITZER COLLEGE N/A PC ENDOWED SCHOLARSHIP 1050 N MILLS AVE 25,000. CLAREMONT CA 91711 PSU FOUNDATION N/A PC \$35,000 - SCHOLARSHIP 2125 SW 4TH AVE, SUITE 510 PROGRAMS; \$14,115 -PORTLAND, OR 97201 EVENT SPONSORSHIP 50,115, READING RESULTS N/A PC EDUCATIONAL PROGRAMS 3115 NE SANDY BLVD, #229 7.500. PORTLAND, OR 97232 VARIOUS 501(C)(3)'S THROUGH N/A PC GRANTS TO 24 COMMUNITY WILLAMETTE WEEK'S GIVE GUIDE ORGANIZATIONS FOR 2220 NW QUIMBY ST GENERAL OPERATIONS 20,000. PORTLAND, OR 97210 SUPPORT FOREST PARK CONSERVANCY N/A PC ECOLOGICAL RESTORATION 210 NW 17TH AVE SUITE 201 & VOLUNTEER MANAGEMENT 7.500. PORTLAND OR 97209 NEW AVENUES FOR YOUTH N/A PC GENERAL OPERATIONS 314 SW 9TH AVE SUPPORT PORTLAND, OR 97205 1,000. ENDOWED SCHOLARSHIP OSU FOUNDATION N/A PC 850 SW 35TH AVE CORVALLIS OR 97333 26 250, TRANSITION PROJECTS N/A PC GENERAL OPERATIONS 665 NW HOYT SUPPORT PORTLAND OR 97209 1,000. UNIVERSITY OF PORTLAND N/A PC ENDOWED SCHOLARSHIP 5000 N WILLAMETTE BLVD PORTLAND, OR 97203 12,500. Total from continuation sheets 175 115.

Total from continuation sheets

FORM 990-PF INTERE	ST ON SAVING	S AND	TEMPORA	ARY	CASH	INV	/ESTMENTS	ST	ATEMENT	1
SOURCE			(A) EVENUE R BOOKS	5	NET	INV	(B) VESTMENT COME		(C) ADJUSTED ET INCOME	i.
UNION BANK - OPERAT	ING ACCOUNT		:	13.			13.			
TOTAL TO PART I, LINE 3			13.			13.				
FORM 990-PF	DIVIDENDS	AND IN	TEREST	FRO	M SEC	CUR	ITIES	ST	'ATEMENT	2
SOURCE	GROSS AMOUNT	CAPI GAI DIVID	ns	RE	(A) VENUI BOOI		(B) NET INVES MENT INCO		(C) ADJUSTE NET INCO	
ACCOUNTS HELD AT ROBERT W. BAIRD & CO. INC. CONTRIBUTED NOTE	22,845.		0.		22,84		22,84			
RECEIVABLE PASS-THROUGH ENTITIES, AMOUNTS FROM SCHEDULE K-1	30,873.		0.		30,8	73.	30,87 2	3. 9.		
TO PART I, LINE 4	53,747.	====	0.		53,74	47.	53,74	7.		
FORM 990-PF		OTHE	R INCO	ME			***	ST	'ATEMENT	3
DESCRIPTION			RE	(A) VENU BOO	E KS		(B) ET INVEST- ENT INCOME		(C) ADJUSTEI NET INCOM	
INCOME FROM PASS-TH REPORTED ON SCHEDUL		ES,		<1	,346	•>	4	 ·•		
TOTAL TO FORM 990-F	F, PART I, I	LINE 11		<1	,346	 ·>	4		· · · · · · · · · · · · · · · · · · ·	

FORM 990-PF	ACCOUNTI	NG FEES	S:	PATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
ACCOUNTING FEES	16,627.	8,314.		8,313.		
TO FORM 990-PF, PG 1, LN 16B	16,627.	8,314.		8,313.		
FORM 990-PF C	THER PROFES	SIONAL FEES	S	ratement 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
INVESTMENT MANAGEMENT FEES	5,393.	5,393.		0.		
TO FORM 990-PF, PG 1, LN 16C	5,393.	5,393.		0.		
FORM 990-PF	TAX	ES	S	FATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
FOREIGN TAXES OREGON INCOME TAX OREGON CT-12 FEE FEDERAL TAXES	638. 150. 554. 560.	150. 0.		0. 0. 554.		
TO FORM 990-PF, PG 1, LN 18	1,902.	788.		554.		

FORM 990-PF	OTHER E	XPENSES		STATEMENT	7	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
WEBSITE INSURANCE OREGON CORPORATE FEE	8,574. 1,693. 50.		0.		8,5 1,6	
INVESTMENT EXPENSES FROM K-1S OFFICE EXPENSES MISCELLANEOUS	27. 62. 49.		27. 0. 0.			0. 62. 49.
TO FORM 990-PF, PG 1, LN 23	10,455.		27.		10,4	28.
FORM 990-PF	OTHER INV				STATEMENT	8
DESCRIPTION		LUATION ETHOD	вос	OK VALUE	FAIR MARKE VALUE	r
ROBERT W. BAIRD - SEE ATTACHE	<u> </u>	COST	1	L,340,502.	1,295,8	43.
TOTAL TO FORM 990-PF, PART II	, LINE 13		1	1,340,502.	1,295,8	43.
FORM 990-PF	OTHER	ASSETS			STATEMENT	9
DESCRIPTION		NING OF K VALUE		OF YEAR OK VALUE	FAIR MARKE VALUE	г
CONTRIBUTED NOTE RECEIVABLE - RALPH SCHLESINGER	3,	310,531.	3	3,178,916.	3,178,9	16.
TO FORM 990-PF, PART II, LINE	15 3.	310,531.		3,178,916.	3,178,9	16.

	IST OF OFFICERS, IN THE STATE OF STREET OF STR		STATI	EMENT 10
NAME AND ADDRESS	TITLE AND AVRG HRS/WK			EXPENSE
PAUL R. SCHLESINGER 610 SW ALDER ST. SUITE 1221 PORTLAND, OR 97205	PRESIDENT, DII		0.	0.
BRAND SCHLESINGER 610 SW ALDER ST. SUITE 1221 PORTLAND, OR 97205	SECRETARY, DII	RECTOR 0.	0.	0.
MAX SCHLESINGER 610 SW ALDER ST. SUITE 1221 PORTLAND, OR 97205	TREASURER, DII		0.	0.
N. JOSH SCHLESINGER 610 SW ALDER ST. SUITE 1221 PORTLAND, OR 97205	DIRECTOR 2.00	0.	0.	0.
MARK R. SCHLESINGER 610 SW ALDER ST. SUITE 1221 PORTLAND, OR 97205	DIRECTOR 1.00	0.	0.	0.
HAZEL SCHLESINGER 610 SW ALDER ST. SUITE 1221 PORTLAND, OR 97205	DIRECTOR 1.00	0.	0.	0.
BRUCE BURNS 610 SW ALDER ST. SUITE 1221 PORTLAND, OR 97205	DIRECTOR 1.00	0.	0.	0.
LEAH CRONN 610 SW ALDER ST. SUITE 1221 PORTLAND, OR 97205	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.