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Form **990-PF**
Department of the Treasury
Internal Revenue Service

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.**
▶ **Information about Form 990-PF and its instructions is at *www.irs.gov/form990pf*.**

OMB No 1545-0052

2017

Open to Public Inspection

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

Name of foundation
TAUBERT MEMORIAL FOUNDATION

A Employer identification number
95-4705413

Number and street (or P O box number if mail is not delivered to street address)
PO BOX 700

Room/suite

B Telephone number (see instructions)
(541) 767-3707

City or town, state or province, country, and ZIP or foreign postal code
COTTAGE GROVE, OR 97424

C If exemption application is pending, check here ▶ ☐

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐
2 Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

I Fair market value of all assets at end of year *(from Part II, col (c), line 16)* ▶$ 2,948,412

J Accounting method ☑ Cash ☐ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

Part I **Analysis of Revenue and Expenses** *(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))*

		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check ▶ ☑ if the foundation is **not** required to attach Sch B				
	3 Interest on savings and temporary cash investments	1,452	1,452	1,452	
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	280,084		280,084	
	12 **Total.** Add lines 1 through 11	281,536	1,452	281,536	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	38,500			
	14 Other employee salaries and wages	42,051			42,051
	15 Pension plans, employee benefits	21,250			
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	3,388			
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	7,840			4,033
	19 Depreciation (attach schedule) and depletion	43,025			
	20 Occupancy	68,496			61,646
	21 Travel, conferences, and meetings	468			
	22 Printing and publications	10			10
	23 Other expenses (attach schedule)	133,971			3,384
	24 **Total operating and administrative expenses.** Add lines 13 through 23	358,999	0		111,124
	25 Contributions, gifts, grants paid	115,800			115,800
	26 **Total expenses and disbursements.** Add lines 24 and 25	474,799	0		226,924
	27 Subtract line 26 from line 12				
	a **Excess of revenue over expenses and disbursements**	-193,263			
	b **Net investment income** (if negative, enter -0-)		1,452		
	c **Adjusted net income**(if negative, enter -0-)			281,536	

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	151,813	291,971	291,971
	2 Savings and temporary cash investments	596,977	322,612	322,612
	3 Accounts receivable ▶			
	Less allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶			
	Less allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ 2,783,850			
	Less accumulated depreciation (attach schedule) ▶ 313,620	2,499,288	2,470,230	1,920,000
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	97,880	97,880	51,712
	14 Land, buildings, and equipment basis ▶ 476,595			
	Less accumulated depreciation (attach schedule) ▶ 105,041	382,772	371,554	360,622
	15 Other assets (describe ▶)	1,495	1,495	1,495
	16 **Total assets** (to be completed by all filers—see the instructions Also, see page 1, item I)	3,730,225	3,555,742	2,948,412
Liabilities	17 Accounts payable and accrued expenses	6,807	25,587	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 **Total liabilities**(add lines 17 through 22)	6,807	25,587	
Net Assets or Fund Balances	**Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.**			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ ☑ and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	3,723,418	3,530,155	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 **Total net assets or fund balances** (see instructions)	3,723,418	3,530,155	
	31 **Total liabilities and net assets/fund balances** (see instructions)	3,730,225	3,555,742	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	3,723,418
2	Enter amount from Part I, line 27a	2	-193,263
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	3,530,155
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	3,530,155

Part IV Capital Gains and Losses for Tax on Investment Income

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

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

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

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

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☐ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016			
2015			
2014			
2013			
2012			

2	**Total** of line 1, column (d)	2	
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	
4	Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	
5	Multiply line 4 by line 3	5	
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	
7	Add lines 5 and 6	7	
8	Enter qualifying distributions from Part XII, line 4	8	

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

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter _____ **(attach copy of letter if necessary–see instructions)**		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 27b	1	29
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	
3	Add lines 1 and 2	3	29
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	
5	**Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-	5	29
6	Credits/Payments		
a	2017 estimated tax payments and 2016 overpayment credited to 2017 — 6a		
b	Exempt foreign organizations—tax withheld at source — 6b		
c	Tax paid with application for extension of time to file (Form 8868) — 6c		
d	Backup withholding erroneously withheld — 6d		
7	Total credits and payments Add lines 6a through 6d	7	40
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
11	Enter the amount of line 10 to be **Credited to 2018 estimated tax** ▶ 11 **Refunded** ▶	11	

Part VII-A **Statements Regarding Activities**

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?	1b		No
	*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*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year **(1)** On the foundation ▶ $ _____ **(2)** On foundation managers ▶ $ _____			
e	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? *If "Yes," attach a detailed description of the activities*	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*	3		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T*	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col (c), and Part XV*	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ CA, 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* .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017 (see instructions for Part XIV)? *If "Yes," complete Part XIV*	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses*	10		No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶ N/A

14 The books are in care of ▶ PETE ROZSA Telephone no ▶ (541) 767-3707

Located at ▶ PO BOX 700 COTTAGE GROVE OR ZIP+4 ▶ 97424

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 ▶ 15

16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		No

See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		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? ☐ Yes ☑ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☑ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☑ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☑ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☑ No			
	(6) Agree to pay money or property to a government official? (**Exception.** Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). ☐ Yes ☑ No			
b	If any answer is "Yes" to 1a(1)–(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	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		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? ☐ Yes ☑ No			
	If "Yes," list the years ▶ 20____ , 20____ , 20____ , 20____			
b	Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement—see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here ▶ 20____ , 20____ , 20____ , 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☑ No			
b	If "Yes," did it have excess business holdings in 2017 as a result of **(1)** any purchase by the foundation or disqualified persons after May 26, 1969, **(2)** the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or **(3)** the lapse of the 10-, 15-, or 20-year first phase holding period? *(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017).*	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		No

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

5a	During the year did the foundation pay or incur any amount to				
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes	☑ No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes	☑ No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes	☑ No		
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions)	☐ Yes	☑ No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes	☑ No		
b	If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?			**5b**	
	Organizations relying on a current notice regarding disaster assistance check here ▶	☐			
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	☐ Yes	☐ No		
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)				
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes	☑ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			**6b**	**No**
	If "Yes" to 6b, file Form 8870				
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes	☑ No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			**7b**	

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

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
PETER ROZSA PO BOX 700 COTTAGE GROVE, OR 97424	PRESIDENT & 30 00	38,500	0	0
LAURIE FOX PO BOX 295 DRAIN, OR 97435	TREASURER 1 00	0	0	0
PHIL RITTER 18170 GOEBEL CT LOS GATOS, CA 95033	SECRETARY 1 00	0	0	0

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

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

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

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than $50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over $50,000 for professional services. . . . . ▶

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 PROVIDED A FACILITY OPEN TO THE PUBLIC WITH A HEALTH- RELATED LIBRARY & COMPUTERS WITH FREE ACCESS FOR RESEARCHING HEALTH TOPICS	88,899
2 OFFERED 16 FREE EDUCATIONAL PROGRAMS AND COMMUNITY- BUILDING EVENTS	5,556
3 PROVIDED A FACILITY FOR 3 OTHER NONPROFITS AND THE VETERANS ADMINISTRATION TO HOLD MEETINGS AND EDUCATIONAL PROGRAMS	11,112
4 FACILITATED COORDINATED EFFORTS BETWEEN FOUR OTHER NONPROFITS THAT CONTRIBUTE TO COMMUNITY HEALTH, EDUCATION AND SUSTAINABILITY	5,557

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

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

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	677,365
c	Fair market value of all other assets (see instructions)	1c	2,280,063
d	**Total** (add lines 1a, b, and c)	1d	2,957,428
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	2,957,428
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	44,361
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,913,067
6	**Minimum investment return.** Enter 5% of line 5	6	145,653

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

1	Minimum investment return from Part X, line 6			1	145,653
2a	Tax on investment income for 2017 from Part VI, line 5	2a	29		
b	Income tax for 2017 (This does not include the tax from Part VI)	2b			
c	Add lines 2a and 2b			2c	29
3	Distributable amount before adjustments Subtract line 2c from line 1			3	145,624
4	Recoveries of amounts treated as qualifying distributions			4	
5	Add lines 3 and 4			5	145,624
6	Deduction from distributable amount (see instructions)			6	
7	**Distributable amount** as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1			7	145,624

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	226,924
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	**Qualifying distributions.** Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	226,924
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	226,924

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				145,624
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.			33,340	
b Total for prior years 20___, 20___, 20___				
3 Excess distributions carryover, if any, to 2017				
a From 2012.				
b From 2013.				
c From 2014.				
d From 2015.				
e From 2016.				
f **Total** of lines 3a through e.				
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ $ 226,924				
a Applied to 2016, but not more than line 2a			33,340	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2017 distributable amount.				145,624
e Remaining amount distributed out of corpus	47,960			
5 Excess distributions carryover applied to 2017				
(If an amount appears in column (d), the same amount must be shown in column (a).)				
6 **Enter the net total of each column as indicated below:**				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	47,960			
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount —see instructions				
e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)				
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions) . . .				
9 **Excess distributions carryover to 2018.** Subtract lines 7 and 8 from line 6a	47,960			
10 Analysis of line 9				
a Excess from 2013. . . .				
b Excess from 2014. . . .				
c Excess from 2015. . . .				
d Excess from 2016. . . .				
e Excess from 2017. . . . 47,960				

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. . . . . ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
2a Enter the lesser of the adjusted net income from Part I or the minimum 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					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ▶ ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

TAUBERT MEMORIAL FOUNDATION
PO BOX 700
COTTAGE GROVE, OR 97424
(541) 767-3707

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

SEND SHORT LETTER OF REQUEST STATING PROPOSED USE OF FUNDS

c Any submission deadlines

NONE, YEAR ROUND

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

NONE

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year* See Additional Data Table				
Total . . . . . ▶ **3a**				115,800
b *Approved for future payment*				
Total . . . . . ▶ **3b**				

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 function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments. . . .					
3 Interest on savings and temporary cash investments			14	1,452	
4 Dividends and interest from securities. . . .					
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a RENTAL INCOME- NONINVESTMEN			25	280,084	
b CREDIT CARD REWARDS			1		
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e). .				281,536	
13 **Total.** Add line 12, columns (b), (d), and (e).				13	281,536

(See worksheet in line 13 instructions to verify calculations)

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

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)

Part XVII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

			Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a	Transfers from the reporting foundation to a noncharitable exempt organization of			
	(1) Cash	1a(1)		No
	(2) Other assets	1a(2)		No
b	Other transactions			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
	(3) Rental of facilities, equipment, or other assets	1b(3)		No
	(4) Reimbursement arrangements	1b(4)		No
	(5) Loans or loan guarantees	1b(5)		No
	(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No

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	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☑ No

b If "Yes," complete the following schedule

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

Sign Here

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

******	2018-11-15	******
Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below (see instr)? ☐ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
DENISE BEAN		2018-11-15		P00056012

Firm's name ▶ BEAN COUNTER TAX SERVICES — Firm's EIN ▶20-1805831

Firm's address ▶ 1293 18TH STREET SPRINGFIELD, OR 974773416 — Phone no (541) 726-0908

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
AWE FOREST WEBPO BOX 853 COTTAGE GROVE, OR 97424	NONE		CLEAN WATER AND SOIL PROJECTS	500
BEDS FOR FREEZING NIGHTS PO BOX 1110 COTTAGE GROVE, OR 97424	NONE		TEMPORARY SHELTER FOR THE HOMELESS	1,000
BEYOND TOXICS 1192 LAWRENCE STREET EUGENE, OR 97401	NONE		CLEAN AIR, WATER, SOIL SUPPORT	1,000
Total . . . . . ▶ 3a				115,800

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
BREAST CANCER ACTION 55 NEW MONTGOMERY ST SUITE 323 SAN FRANCISCO, CA 94105	NONE		CANCER RESEARCH	2,000
CENTER FOR NEUROLOGICAL PROGRAMMING 114 MIDDLE RINCON RD SANTA ROSA, CA 954093409	NONE		PROFOUND BRAIN INJURY ASSISTANCE	16,000
CHARITY WATCHPO BOX 578460 CHICAGO, IL 60657	NONE		CHARITY RATINGS	100
Total . . . . . ▶ 3a				115,800

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
COMMUNITY SHARING1440 BIRCH AVE COTTAGE GROVE, OR 97424	NONE		COMMUNITY SUPPORT	1,500
CONSUMER FOR DENTAL CHOICE 316 F STREET NE SUITE 210 WASHINGTON, DC 20002	NONE		MERCURY HEALTH RESEARCH	2,000
ENVIRONMENTAL WORKING GROUP 2201 BROADWAY 308 OAKLAND, CA 94612	NONE		CLEAN AIR AND WATER RESEARCH	1,000
Total . . . . . ▶ 3a				115,800

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
FLIPPIN LYME DISEASE FOUNDATION 2155 BERWIN LANE EUGENE, OR 974042191	NONE		LYME DISEASE RESEARCH & EDUCATION	2,500
FOOD & WATER WATCH1616 P ST NW WASHINGTON, DC 20036	NONE		CONSERVATION FOR CLEAN FOOD & WATER	2,500
FREEDOM FROM AERIAL HERBICIDES ALLI PO BOX 261 COTTAGE GROVE, OR 97424	NONE		RESEARCH & EDUCATION OF TOXINS	1,000
Total . . . . . ▶ 3a				115,800

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
FRIENDS OF THE EARTH 2150 ALLISTON WAY SUITE 360 BERKELEY, CA 94704	NONE		ENVIRONMENTAL EDUCATION	1,000
IRAQ & AFGHANISTAN VETS OF AMERICA 119 W 40TH ST 19TH FLOOR NEW YORK, NY 10018	NONE		VETERANS ASSISTANCE	1,000
KINDTREEPO BOX 40847 EUGENE, OR 97404	NONE		AUTISM SUPPORT	5,000
Total . . . . . ▶ 3a				115,800

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
NATURAL RESOURCES DEFENSE COUNCIL 40 WEST 20TH STREET 11TH FLOOR NEW YORK, NY 10011	NONE		ENVIRONMENT & CLIMATE DEFENSE	1,000
PLANNED PARENTHOOD 1450 BIRCH AVE COTTAGE GROVE, OR 97424	NONE		WOMEN'S HEALTH SCREENING	2,000
PRIMARY CONNECTION 721 SOUTH R STREET COTTAGE GROVE, OR 97424	NONE		ASSISTANCE FOR TEEN MOTHERS	2,000
Total 3a . . . . . ▶				115,800

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
PUBLIC CITIZEN1600 20TH ST NW WASHINGTON, DC 20009	NONE		HEALTH RESEARCH & EDUCATION	1,000
SOUTH LANE CHILDRENS DENTAL CLINIC 1275 S RIVER RD COTTAGE GROVE, OR 97424	NONE		LOW COST/FREE CHILDRENS DENTAL CARE	1,000
SOUTH LANE SCHOOL DISTRICT PO BOX 218 COTTAGE GROVE, OR 97424	NONE		AT RISK YOUTH JOB TRAINING	5,000
Total . . . . . ▶ 3a				115,800

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
TAMARACK AQUATIC CENTER 3575 DONALD ST 120 EUGENE, OR 97405	NONE		PHYSICAL REHAB FOR THE DISABLED	500
THE TRAUMA HEALING PROJECT 2222 COBURG RD SUITE 300 EUGENE, OR 97401	NONE		HELPING VETS WITH TRAUMA	500
TREES WATER & PEOPLE 633 REMINGTON ST FORT COLLINS, CO 80524	NONE		SOLAR SYSTEMS FOR NATIVE AMERICANS	500
Total . . . . . ▶ 3a				115,800

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
UNIVERSITY OF CA BERKELEY 142 LSA 3200 BERKELEY, CA 947203200	NONE		CANCER RESEARCH	5,000
VITAMIN ANGELSPO BOX 4490 SANTA BARBARA, CA 93140	NONE		SUPPLEMENTS FOR LOW INCOME MOTHERS	500
WESTERN ENVIRONMENTAL LAW CENTER 1216 LINCOLN STREET EUGENE, OR 97401	NONE		ENVIRONMENTAL CONSERVATION	500
Total . . . . . ▶ 3a				115,800

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
WOMENSSPACE1577 PEARL STREET 400 EUGENE, OR 97401	NONE		INTERVENTION OF DOMESTIC VIOLENCE	1,000
WORLD MERCURY PROJECT 1227 N PEACHTREE PKWY PEACHTREE CITY, GA 30269	NONE		MERCURY RESEARCH AND EDUCATION	2,000
APPORVECHOPO BOX 1175 COTTAGE GROVE, OR 97424	NONE		IMPROVES WOOD BURNING COOKING STOVES	2,200
Total . . . . . ▶ 3a				115,800

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
WHITE BIRD CLINIC341 E 12TH AVE EUGENE, OR 97401	NONE		LOW INCOME SERVICES	500
SAFEHAVEN32220 OLD HWT 34 TANGENT, OR 97389	NONE		ANIMAL SHELTER	2,000
LYME LIGHT FOUNDATION 1229 BURLINGAME AVE 205 BURLINGAME, CA 94010	NONE		LYME DISEASE SUPPORT FOR FAMILIES	1,000
Total . . . . . ▶ 3a				115,800

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
FARM TO CONSUMER LEGAL DEFENSE COUNCIL8116 ARLINGTON BLVD STE 263 FALL CHURCH, VA 22042	NONE		PROTECT RIGHTS OF FAMILY FARMS	500
NARF1506 BROADWAY BOULDER, CO 80302	NONE		PROTECT RIGHTS OF NATIVE AMERICANS	500
ORGANIC SEED ALLIANCE 210 POLK ST 2 PORT TOWNSEND, WA 98368	NONE		ORGANIC SEED SAVING	500
Total . . . . . ▶ 3a				115,800

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
BIODYNAMIC ASSOCIATIONPO BOX 557 EAST TROY, WI 53120	NONE		SUPPORT BIODYNAMIC AGRICULTURE	500
WILLY'S BRAIN TUMOR RECOVERY PO BOX 700 COTTAGE GROVE, OR 97424	NONE		SUPPORT BRAIN TUMOR RECOVERY	1,000
KENNEDY SCHOOL 79980 DELIGHT VALLEY SCHOOL RD COTTAGE GROVE, OR 97424	NONE		GREENHOUSE	34,000
Total . . . . . ▶ 3a				115,800

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
BREAST WELLNESS EDUCATION FUND 315 GOODPASTURE ISLAND RD EUGENE, OR 97401	NONE		SUPPORT BREAST WELLNESS	7,500
MERCURY FREE DENTISTRY 316 F STREET NE SUITE 210 WASHINGTON, DC 20002	NONE		MERCURY FREE DENTISTRY	2,000
KPFK3729 CAHUENGA BLVD WEST NORTH HOLLYWOOD, CA 92604	NONE		PUBLIC RADIO	500
Total . . . . . ▶ 3a				115,800

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
CRESWELL OHSET33390 NIBLOCK LANE CRESWELL, OR 97426	NONE		CRESWELL HIGH SCHOOL	500
WHIRLWIND WHEELCHAIRS 2703 7TH STREET 134 BERKELEY, CA 94710	NONE		WHEELCHAIR DONATIONS	1,000
THE PATCH INC12 BEEMAN CIRCLE ESTANCIA, NM 87016	NONE		SUPPORT FOR THE DISABLED	500
Total . . . . . ▶ 3a				115,800

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
SEED SAVERS3094 N WINN RD DECORAH, IA 52101	NONE		SEED PRESERVATION	500
Total . . . . . ▶ 3a				115,800

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TY 2017 Accounting Fees Schedule

Name: TAUBERT MEMORIAL FOUNDATION

EIN: 95-4705413

Accounting Fees Schedule

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INDIRECT ACCOUNTING FEES	3,388			

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Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Depreciation Schedule

Name: TAUBERT MEMORIAL FOUNDATION

EIN: 95-4705413

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
SIGNAL GENERATOR	2005-10-04	650	650	200DB	5 0000				
LAPTOP COMPUTER	2007-02-28	1,686	1,686	200DB	5 0000				
COMPUTER	2008-08-13	1,499	1,499	200DB	5 0000				
AUDIO-VISUAL EQUIPMENT	2008-09-11	1,298	1,298	200DB	5 0000				
HARD DRIVE	2009-01-09	274	274	200DB	5 0000				
HP ALL-IN-ONE PRINTER	2009-03-15	550	550	200DB	5 0000				
CANON CAMERA	2010-04-21	472	456	200DB	7 0000	16			
SERVER & HARD DRIVES	2010-04-21	745	745	200DB	5 0000				
LAND - FOR EXEMPT PURPOSE	2010-10-08	65,000							
BUILDING - EXEMPT PURPOSE	2011-07-18	306,406	42,886	S/L	39 0000	7,857			
WATER HEATER - HM	2010-12-13	500	462	200DB	7 0000	38			
FREQUENCY GENERATOR	2011-04-04	2,370	2,053	200DB	7 0000	211			
SECURITY CAMERAS	2010-11-18	1,880	1,736	200DB	7 0000	144			
DE-HUMIDIFIER	2011-01-07	899	777	200DB	7 0000	81			
CHAIRS FOR EDUCATN EVENTS	2011-07-18	1,499	1,298	200DB	7 0000	134			
COUCH & 3 TABLES	2011-07-18	840	728	200DB	7 0000	75			
BOOKCASE	2011-04-04	398	346	200DB	7 0000	35			
IMAC COMPUTER	2011-07-18	1,344	1,344	200DB	5 0000				
RACK FOR FOLDING CHAIRS	2011-07-18	380	328	200DB	7 0000	35			
IMAC COMPUTER PART&WARNTY	2011-07-18	1,100	1,100	200DB	5 0000				

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
COUCH & FUTON	2011-07-18	650	563	200DB	7 0000	58			
FURNITURE FOR PUBLIC	2011-07-18	748	648	200DB	7 0000	67			
NEON SIGN-HM	2011-09-08	404	350	200DB	7 0000	36			
MEMORY BACKUP &BATTERY PK	2011-10-09	499	432	200DB	7 0000	45			
2 COUCHES FOR PUBLIC	2011-10-10	600	521	200DB	7 0000	53			
KITCHEN CABINETS	2011-08-05	1,868	1,618	200DB	7 0000	167			
KITCHEN REMODEL	2012-10-03	10,137	1,094	S/L	39 0000	260			
BROTHER COPIER	2011-11-05	260	224	200DB	7 0000	24			
STAINLESS COUNTERTOP	2011-08-05	788	682	200DB	7 0000	71			
HD LCD PROJECTOR	2012-01-11	2,150	1,382	S/L	7 0000	154			
DOLLY	2012-01-03	200	130	S/L	7 0000	14			
HP TOUCHSMART 520T	2012-03-15	930	877	200DB	5 0000	53			
STOVE HOOD	2012-08-03	13,000	8,358	S/L	7 0000	929			
FIRE SUPPRESSION SYSTEM	2012-08-03	3,140	2,019	S/L	7 0000	224			
2 PART SINK & PRE-RINSE	2012-08-03	901	580	S/L	7 0000	64			
1 PART SINK & PRE-RINSE	2012-08-03	630	405	S/L	7 0000	45			
24 X30 STAINLESS TABLE	2012-08-03	210	135	S/L	7 0000	15			
30 X72 STAINLESS TABLE	2012-08-03	300	193	S/L	7 0000	21			
FOGEL PREP TABLE	2012-08-03	2,157	1,386	S/L	7 0000	154			
ROYAL 6 BURNER STOVE/OVEN	2012-08-03	1,590	1,022	S/L	7 0000	114			

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
STEERO DISHWASHER	2012-08-03	1,500	963	S/L	7 0000	107			
HANDWASHING SINK	2012-08-03	259	166	S/L	7 0000	19			
MANITOWOC ICE MACHINE	2012-08-03	2,000	1,287	S/L	7 0000	143			
COMPACT FRIDGE	2012-08-13	158	103	S/L	7 0000	11			
FOGEL COOLER	2012-11-06	458	293	S/L	7 0000	33			
FIREPROOF SAFE	2012-12-14	1,519	976	S/L	7 0000	109			
CONCRETE SLAB	2013-09-21	6,550	1,529	S/L	15 0000	335			
KITCHEN SHELVING	2013-04-08	792	396	S/L	7 0000	57			
15 MACBOOK	2014-03-31	3,253	1,627	S/L	5 0000	325			
MAC COMPUTER	2015-08-24	1,570	471	S/L	5 0000	220			
ROOF	2016-07-14	23,800	280	S/L	39 0000	610			
BATHROOM FLOORS	2016-06-27	682	97	200DB	7 0000	167			
FURNITURE 2016	2016-06-23	354	51	200DB	7 0000	86			
CA BUILDING	2007-03-16	1,133,305	284,563	S/L	39 0000	29,059			
CA LAND	2007-03-16	1,650,545							
MATRIX EQUIP	2017-04-19	2,699		200DB	5 0000	540			
15" MACBOOK	2017-02-08	50		200DB	5 0000	10			

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TY 2017 Investments - Land Schedule

Name: TAUBERT MEMORIAL FOUNDATION

EIN: 95-4705413

Category/ Item	Cost/Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
BUILDINGS	1,133,305	313,620	819,685	781,700
LAND	1,650,545		1,650,545	1,138,300

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TY 2017 Investments - Other Schedule

Name: TAUBERT MEMORIAL FOUNDATION

EIN: 95-4705413

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MONEX INVESTMENTS	AT COST	97,880	51,712

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TY 2017 Land, Etc. Schedule

Name: TAUBERT MEMORIAL FOUNDATION

EIN: 95-4705413

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
FURNITURE & EQUIPMENT	64,020	51,833	12,187	16,322
BUILDING & IMPROVEMENTS	347,575	53,208	294,367	265,100
LAND	65,000		65,000	79,200
	1,715,545		1,715,545	

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TY 2017 Other Assets Schedule

Name: TAUBERT MEMORIAL FOUNDATION

EIN: 95-4705413

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
SECURITY DEPOSIT	1,495	1,495	1,495

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TY 2017 Other Expenses Schedule

Name: TAUBERT MEMORIAL FOUNDATION

EIN: 95-4705413

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
BOOKS & MEDIA	485			485
COMPUTER & INTERNET	923			923
DUES & SUBSCRIPTIONS	24			24
SUPPLIES-PROGRAM	238			238
KITCHEN SUPPLIES	526			526
WEBSITE DEVELOPMENT	1,188			1,188
CONTRACT SERVICES	20,950			
MEALS & ENTERTAINMENT	165			
LICENSES, FEES & PERMITS	259			

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE EXPENSE	1,650			
PENALTIES	33			
POSTAGE	30			
PROFESSIONAL FEES	374			
REPAIRS	53			
SECURITY	359			
SUPPLIES	208			
RENTAL EXPENSES	106,506			

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TY 2017 Other Income Schedule

Name: TAUBERT MEMORIAL FOUNDATION

EIN: 95-4705413

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
RENTAL INCOME- NONINVESTMENT	280,084		280,084

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TY 2017 Taxes Schedule

Name: TAUBERT MEMORIAL FOUNDATION

EIN: 95-4705413

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	7,726			4,033
STATE TAX	114			