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.

| For | caler | dar year 2017 or tax year beginning JUI | 1, 2017 | , and ending | JUN 30, 2018 | |
|--------------------|---|--|--|--|--|--|
| Na | me of | foundation 4 | | | A Employer identification | number |
| 1 | | | | | | |
| <u>r</u> | 'HE | FRIENDS OF PAUL BUNYAN | 91-1830032 | | | |
| Nur | nber a | nd Street (or P O box number if mail is not delivered to stree | B Telephone number | . | | |
| P | 0 | BOX 12339 | | | 503-364-13 | 30 |
| | | own, state or province, country, and ZIP or foreign p | postal code | | C If exemption application is p | |
| | | EM, OR 97309-0339 | | | in examplion application to p | |
| _ | | all that apply: Initial return | Initial return of a fo | ormer public charity | D 1 Foreign organizations | check here |
| - | | Final return | Amended return | ormor public oriality | , rororgin organizations | , |
| | | Address change | Name change | 1 | Foreign organizations me check here and attach co | eting the 85% test, |
| н (| hack | type of organization: X Section 501(c)(3) e | | 74 | 1 | |
| <u>`</u> ` | _ | ction 4947(a)(1) nonexempt charitable trust | Other taxable private found | 9] | E If private foundation sta | |
| | | rket value of all assets at end of year J Account | | Accrual | under section 507(b)(1) | |
| | | · — | • | Acciuai | F If the foundation is in a | |
| | .\$ | lart II, col. (c), line 16) [Part I, colu | ther (specify) | ie) | under section 507(b)(1) | (B), check here |
| | irt I | | | 1 | | (d) Disbursements |
| . [.F | 1111 | The total of amounts in columns (b), (c), and (d) may not | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net | for charitable purposes |
| ´ — | | necessarily equal the amounts in column (a) | | · | <u> </u> | (cash basis only) |
| | 1 | Contributions, gifts, grants, etc., received | 15,200. | TRANSPORTER STATE | N/A | STEEL CONTRACTOR OF THE STEEL |
| 19 | 2 | Check If the foundation is not required to attach Sch B | The state of the s | (1) 大學 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) | (第二十五十五十五十五十五十五十五十二 | 大學學院 河南南南南南 |
| 2019 | 3 | Interest on savings and temporary cash investments | 40.040 | 10.010 | | 新疆市市市市市市市市市市市市市市市市市市市市市市市市市市市市市市市市市 |
| 4 | 4 | Dividends and interest from securities | 18,010. | 18,010. | | STATEMENT 124 |
| 0 | 5a | Gross rents | LEX WINDS - parties and the | The CARLA man (Protect Amount - State - 7) | المراجع | STORE LA |
| | b | Net rental income or (loss) | 海洲海洲南部北京 | Programme Constitution | "高","高","高","高","高","高","高","高","高","高", | 被影響的影響。 |
| 14 | 6a | Net gain or (loss) from sale of assets not on line 10 | 19,179. | E. C. | 高级企业的企业 | (等)。 |
| <u> </u> | b | Gross sales price for all assets on line 6a 548,966. | 是是經過學的學術 | 建筑地震的 | 美国的一种 | The state of the s |
| <u>ڇ</u> | 7 | Capital gain net income (from Part IV, line 2) | 於其他的學術的學 | 19,179. | PECE | 心上自然智慧的政 |
| SCANNED EEB | 8 | Net short-term capital gain | 於自動性類性泛紅 | 战中的经历。 对自己的 | KEUL | 100 PM |
| Ž | 9 | Income modifications | 2000年代1000年代第二十四日 | 可能理解的证明 | | 2000 E Q |
| × | 10a | Gross sales less returns and allowances | の対象を表現を表現 | 政立政府制度系統 | 総数 C MEN BY MEN | 2014年11日 (1915年) 12日本 |
| S | b | Less Cost of goods sold | は対象を表現である。 | 国际公司 | 以 (1) | 1985年 1985日 1985日 |
| | C | Gross profit or (loss) | | 是多個學家的學 | OGDI | EN語の可能表 |
| | 11 | Other income | | | | 可是一种种的影片的 |
| | 12 | Total. Add lines 1 through 11 | 52,389. | 37,189. | | 一种的人们们们们们们们们们们们们们们们们们们们们们们们们们们们们们们们们们们们们 |
| | 13 | Compensation of officers, directors, trustees, etc | 0. | 0. | | 0. |
| | 14 | Other employee salaries and wages | | | | |
| | 15 | Pension plans, employee benefits | | | | |
| ses | 16a | Legal fees | | | | |
| ë | Ь | Accounting fees STMT 2 | 1,350. | 135 | RECEIVE | 1,215. |
| Expenses | C | Other professional fees STMT 3 | 2,935. | 294 | | Ø 2,641. |
| | l . | Interest | | | PI OCT DAVOIL | 19 |
| rati | 18 | Taxes | | | BI OCT OF SOIL | 8 |
| ist | 19 | Depreciation and depletion | | | \ | |
| ä | 20 | Occupancy | | | OGDEN, L | |
| and Administrative | 21 | Travel, conferences, and meetings | | | - | |
| Ď | 22 | Printing and publications | | | | |
| g g | 23 | Other expenses STMT 4 | 8,719. | 0. | | 8,720. |
| Ē | 1 | Total operating and administrative | <u> </u> | | | <u> </u> |
| Operating | -" | expenses Add lines 13 through 23 | 13,004. | 429. | | 12,576. |
| Q | 25 | Contributions, gifts, grants paid | 31,550. | | 经过过的证据 | 31,550. |
| | | Total expenses and disbursements. | 31,330 | - Andread Committee and the Committee of the | in the spicious of the 1.1 in the second of the second | 31,330. |
| | ۲۰ | Add lines 24 and 25 | 44,554. | 429. | | 44,126. |
| | 27 | Subtract line 26 from line 12: | 設度認識を支払には過過過過 | 447· | CCC 1894公司任企业XXXIII Y | · · · · · · · · · · · · · · · · · · · |
| | | | 7,835. | | | |
| | l | Excess of revenue over expenses and disbursements | AND THE PROPERTY OF THE PARTY O | 36,760. | THE THE PROPERTY OF THE PROPER | · 题并可能则是现象的对象是数约数字 · 如此位式是1994年在一色。 |
| | 1 | Net investment income (if negative, enter -0-) | 大学社会の中である。 よっていまする。 よっていまする。 よっていまする。 はいままする。 はいままする。 はいままする。 はいままする。 はいまままする。 はいまままする。 はいまままする。 はいまままままままままままままままままままままままままままままままままままま | 50, /00. | MI / Y | 李·杜·李·李·李·林·林·西·西·林· |
| | <u>, , , , , , , , , , , , , , , , , , , </u> | Adjusted net income (if negative, enter -0-) | 1-42-1-25-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1 | LANGUAGO CONTRACTOR ACTION AND ACTION | N/A_ | (水) からない はいまな はいまな はいまい はいいい |

| Form 9 | 1830032 Page 2 | | | | | |
|--|--|--|--|--|--|--|
| Parl | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year | · | nd of year | | |
| | column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value | | |
| 1 | Cash - non-interest-bearing | 110 010 | 4 04 5 | 4 015 | | |
| 2 | | 112,240. | <4,015. | <4,015.> | | |
| 3 | Accounts receivable - | THE REPORT OF THE | | The second of the second of the second | | |
| | Less: allowance for doubtful accounts | | and the state of t | 73783 - 2 5 741 TV \$3 4 4 | | |
| 4 | Pledges receivable | \$ 67 TENEX 123 - 6 - 123 TENEX | FEE FEE STATE | Maria Cara Cara Cara Cara Cara Cara Cara | | |
| _ | Less; allowance for doubtful accounts ▶ | | | | | |
| 5 | | | | | | |
| 6 | , , | | | | | |
| _ | disqualified persons | Transport & Arm Arthronic | ed the second second second second | | | |
| ' | Other notes and loans receivable | The state of the s | The state of the s | and the state of t | | |
| _ _ | Less; allowance for doubtful accounts | | | | | |
| Assets | | 760. | 760. | 760. | | |
| Ass | | 700. | 700. | 700. | | |
| 10 | a Investments - U.S. and state government obligations b Investments - corporate stock STMT 6 | 389,894. | 546,916. | 522,193. | | |
| | • | 303,034. | 340,310. | 322,133. | | |
| | c Investments - corporate bonds Investments - land, buildings, and equipment basis | CARTEST TO THE STATE OF THE STA | Herman Landon and Angles | 2017年6年12日本 | | |
| 1,1 | | Late But with Water to Charles | المُعَلِّمُونَ عَلَى الْمُطَالِّعُ فَيْهِمِ مِنْ مِنْ فَصَلَّمُونَا السَّمَالُونَا السَّمَالُونِ السَّمَالُون | [本語句 [] [] [] [] [] [] [] [] [] [] [] [] [] | | |
| 40 | Less accumulated depreciation Investments - mortgage loans | | | | | |
| 12 | | ······································ | | | | |
| 13 | | 是我们的对象。 第二章 | 一般のないないないないないない。 | GENERAL AND | | |
| 14 | Less accumulated depreciation | Called Art of Charles and | [16] 也不是,今世下主任人, 45. 950 Law | Later to the Control of the second | | |
| 15 | | 32,932. | <24,723. | > 0. | | |
| | Total assets (to be completed by all filers - see the | 32,332. | \Z=11\Z3. | | | |
| ٠, ا | instructions. Also, see page 1, item I) | 535,826. | 518,938. | 518,938. | | |
| 17 | Accounts payable and accrued expenses | 3337020: | 32073331 | 运作法的 医扩张点面 | | |
| 18 | | | | | | |
| | | | | | | |
| tie | Loans from officers, directors, trustees, and other disqualified persons | | | | | |
| Liabilities 51 20 21 | | | | | | |
| تا اتا 122 | Other liabilities (describe | | | | | |
| | | | | | | |
| 23 | Total liabilities (add lines 17 through 22) | 0. | 0. | | | |
| | Foundations that follow SFAS 117, check here | | | | | |
| | and complete lines 24 through 26, and lines 30 and 31. | | | | | |
| 8 24 | Unrestricted | 535,826. | 518,938. | 的现在分词的 | | |
| <u>E</u> 25 | | | | | | |
| E 26 | | | | | | |
| Net Assets or Fund Balances 25 26 27 29 30 30 30 30 30 30 30 30 30 30 30 30 30 | Foundations that do not follow SFAS 117, check here | | | | | |
| 띤 | and complete lines 27 through 31. | | | | | |
| g 27 | Capital stock, trust principal, or current funds | | | | | |
| 항 28 | | | | | | |
| ₹ 29 | Retained earnings, accumulated income, endowment, or other funds | | | | | |
| S 30 | Total net assets or fund balances | 535,826. | 518,938. | | | |
| | | | | | | |
| 31 | Total liabilities and net assets/fund balances | 535,826. | 518,938. | 以於,是所名的接受加亞特內 | | |
| Par | Analysis of Changes in Net Assets or Fund B | Balances | | | | |
| | | | | 1 | | |
| | al net assets or fund balances at beginning of year - Part II, column (a), line | : 30 | | E25 026 | | |
| | ust agree with end-of-year figure reported on prior year's return) | | 1 | 535,826. | | |
| | er amount from Part I, line 27a | | 2 | 7,835. | | |
| | er increases not included in line 2 (itemize) | | 3 | 543,661. | | |
| | d lines 1, 2, and 3 creases not included in line 2 (itemize) | SEE ST | ATEMENT 5 5 | 24,723. | | |
| | al net assets or fund balances at end of year (line 4 minus line 5) - Part II, c | | ATEMENT 5 5 | 518,938. | | |
| <u>U 101</u> | and access of turno calaboos at end of year times 4 timins line of * Fait II, C | olulini (o), ililo oo | | Form 990-PF (2017) | | |

| | | ENDS OF PAUL | | | TI | ON | | 91 | L-183 | 0032_ | Page 3 |
|--|--------------|--|-----------------|---|--|-------------------|-----------------|------------------------|------------------------------|-----------------------------------|---|
| | the kınd(s | s) of property sold (for exam | nple, real esta | | (b) ! | How ac - Purci | quired (d | :) Date a | | (d) Dat | |
| 2-Story brick warehouse, or common stock, 200 Sris. MLC Co.) D - Donatio | | | | ition | (mo., da | y, yr.) | (mo., d | ay, yr.) | | | |
| 12 PUBLICLY TRADE | | | | | <u> </u> | | P | | | | |
| b PUBLICLY TRADE | D SEC | CURTTIES | | | ╁ | | P | _ | | | |
| | | | | | \vdash | | | | | | |
| e | | | | | | - | | | | | |
| (e) Gross sales price | (f) [| Depreciation allowed (or allowable) | | st or other basis expense of sale | | | (| | ın or (loss) (f) mınus (| | |
| a 109,576. | | | | 116,10 | 6. | | | - | | <6 | ,5 <u>30.</u> : |
| b 439,390. | | | | 413,68 | 1. | | | | | | ,709. |
| <u>C</u> | | | | | . | | ··· | | | | |
| <u>d</u> | | | | | | | | | | . | |
| e Complete and the constant of a | | column (b) and award by | ha faundatio | n on 10/01/60 | | | | 2 (0 | | | - |
| Complete only for assets showing | | | | | | | (1) (col. (| sains (Co k), but n | ol. (h) gaın ot less thar | minus 1 - 0-) or | |
| (i) FMV as of 12/31/69 | (| (j) Adjusted basis as of 12/31/69 | | xcess of col. (ı) r col. (ı), ıf any | | | | Losses (| from col. (| h)) | |
| 2 | | | | | - | | | | | <6 | ,530. |
| b b | | | ** | | | _ | | | | | ,709. |
| C | | | | | | | | | | | <u>,, , , , , , , , , , , , , , , , , , ,</u> |
| d | | | | | | | | | | | |
| е | | | | | | | | | - | | |
| 2 Capital gain net income or (net ca | ipital loss) | If gain, also enter If (loss), enter -0- | | | } | 2 | | | · · | 19 | ,179. |
| 3 Net short-term capital gain or (los | | • | | | | | | | | | |
| If gain, also enter in Part I, line 8, | | | G (O). | |] | | | | | | |
| If (loss), enter -0- in Part I, line 8 | | 10.404.) (| D. L. | 1 7 - 1 - 1 - 1 - 1 | | 3 | | | <u> N/A</u> | | |
| Part V. Qualification U | | | | | | - | nent inco | me | | | |
| (For optional use by domestic private | e foundation | ons subject to the section 4 | 940(a) tax or | n net investment ir | ncome | e.) | | | | | |
| If section 4940(d)(2) applies, leave t | his part bl | ank. | | | | | | | | | |
| Was the foundation liable for the sec | tion 4042 | tay on the distributable am | ount of any v | year in the hace no | riodo | | | | | ☐ Vac | X No |
| If "Yes," the foundation doesn't quali | | | | | i lou · | | | | | | 140 |
| Enter the appropriate amount in | | | | | entries | S. | | | | | |
| (a) | | (b) | - | | (c) | | | | Dietrib | (d) ution ratio | |
| Base periód years Calendar year (or tax year beginni | ng in) | Adjusted qualifying dist | ributions | Net value of no | ncha | rıtable- | use assets | (| col. (b) div | ided by col | . (c)) |
| 2016 | | | 7,642. | | | | 0,972. | | | | <u>91448</u> |
| 2015 | | | <u>0,479.</u> | | | | 2,088. | | | | <u>96687</u> |
| 2014 | | | <u>3,188.</u> | | | | <u>4,158.</u> | ļ | | | <u>97744</u> |
| 2013 | | | <u>8,940.</u> | | | | <u>2,485.</u> | | | | <u>95495</u> |
| 2012 | | 4 | <u>8,002.</u> | | | 46 | <u>3,162.</u> | | | | 03640 |
| O Tatal of loss 4 column (d) | | | | | | | | , | | 1 | 85014 |
| 2 Total of line 1, column (d)3 Average distribution ratio for the | 5-vear had | se period - divide the total o | n line 2 hy 5 | O or by the numb | or of | waare | | 2 | | • = | 07014 |
| the foundation has been in existe | - | · | лішь гру э. | .o, or by the manns | 61 01 | years | | 3 | | - 0 | 97003 |
| the foundation has been in existe | 1100 11 1033 | than 5 years | | | | | | | | | 2,000 |
| 4 Enter the net value of noncharital | ole-use as: | sets for 2017 from Part X, I | ine 5 | | | | | 4 | | 518 | ,724. |
| 5 Multiply line 4 by line 3 | | | | | | | | 5 | | 50 | ,318. |
| 5 Multiply line 4 by line 3 | | | | | | | | | | | |
| 6 Enter 1% of net investment incor | ne (1% of | Part I, line 27b) | | | | | | 6 | | | 368. |
| 7 Add lines 5 and 6 | | | | | | | | 7 | | 50 | <u>,686.</u> |
| 8 Enter qualifying distributions from | n Part XII, | line 4 | | | | | | 8 | | 44 | ,126. |
| If line 8 is equal to or greater that See the Part VI instructions | n line 7, ch | neck the box in Part VI, line | 1b, and com | plete that part usir | ng a 1 | % tax r | rate. | | | | |

| | | <u>91-183</u> | | | age 4 |
|----|---|---------------|------------------|----------|-------------|
| | rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4 | 948 - see | ınstru | ction | <u>s)</u> |
| 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% | _1 | | <u> </u> | <u> 35.</u> |
| | of Part I, line 27b | | | | |
| С | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b). | | | | |
| | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) | 2 | | | 0. |
| | Add lines 1 and 2 | 3 | | 7: | 35. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) | 4 | | | 0. |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | 5 | | 7: | 35. |
| _ | Credits/Payments: | | | | |
| | 2017 estimated tax payments and 2016 overpayment credited to 2017 6a 320. | | | | |
| | Exempt foreign organizations - tax withheld at source 6b 0. | | | | |
| | Tax paid with application for extension of time to file (Form 8868) 6c 0. | | | | |
| | Backup withholding erroneously withheld 6d 0. | | | | |
| | Total credits and payments. Add lines 6a through 6d | 7 | | 3 | 20. |
| | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | 8 | | <u> </u> | 0. |
| | | 9 | | 1 | 15. |
| 9 | Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed | 10 | | | <u> </u> |
| | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2018 estimated tax | 11 | | | |
| | Enter the amount of line 10 to be: Credited to 2018 estimated tax ► Refunded ► Int VII-A Statements Regarding Activities | 1,1 1 | | | |
| _ | | | | 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 | 1113 | 10 | 103 | X |
| | any political campaign? Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition of the de | 4 | 1a | | X |
| b | 1b | | | | |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or | | . | | |
| | distributed by the foundation in connection with the activities. | | 1.1 | | 37 |
| | Did the foundation file Form 1120-POL for this year? | | 1c | | <u>X</u> |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | | |
| | (1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 . | | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | | | |
| | managers. ► \$0. | | ۱۰. | | <u></u> . |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | 2 | | <u>X</u> |
| | If "Yes," attach a detailed description of the activities. | | | : i | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or | r | | | |
| | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | 3 | | <u>X</u> |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | 4a | | <u>X</u> |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | N/A | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | 5 | | _X_ |
| | If "Yes," attach the statement required by General Instruction T | | | , | |
| 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 | X | |
| 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 | X | |
| | | | • | • ` | |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instructions. | | _ ` | | _ |
| | OR | | _ | | - |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | | | _ | |
| | of each state as required by General Instruction G? If "No," attach explanation | | 8b | X | ^ |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale | ndar | i i | | `V |
| | year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV | | 9 | | <u>X</u> ´ |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | | 10 | L | <u>X</u> |
| | | | Form 99 0 |)-PF | (2017) |

91-1830032 THE FRIENDS OF PAUL BUNYAN FOUNDATION Page 5 Part 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 section 512(b)(13)? If "Yes," attach schedule. See instructions 11 Х 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 13 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A 364-1330 Telephone no. \triangleright (503) 14 The books are in care of ► THE FOUNDATION Located at ▶ 2015 MADRONA AVE SE, SALEM, OR ZIP+4 ▶97302 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here **▶** 15 N/Aand enter the amount of tax-exempt interest received or accrued during the year 16 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, Yes 16 securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required Yes No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (either directly or indirectly): Yes X No (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) Yes 🗶 No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (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 __ Yes X No for the benefit or use of a disqualified person)? (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 Yes X No termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations N/A section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions 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? 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 Yes X No before 2017? If "Yes," list the years 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 N/A statement - see instructions.) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes X No during the year? 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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2017.)

had not been removed from leopardy before the first day of the tax year beginning in 2017?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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3b

N/A

| orm 990-PF (2017) THE FRIENDS OF PAUL BUNY. | AN FOUNDATION |) | <u>91-10300</u> | 134 | raye 6 | | | |
|---|------------------------------------|-----------------------------|--|--|--------------------|--|--|--|
| Part VII-B Statements Regarding Activities for Which F | orm 4/20 May Be F | sequirea (continu | ued) | N | | | | |
| 5a During the year, did the foundation pay or incur any amount to: | | | | Yes | No | | | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? | | | | | | | | |
| (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, | | | | | | | | |
| any voter registration drive? | | | s X No | | | | | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | | Ye | s X No | | | | | |
| (4) Provide a grant to an organization other than a charitable, etc., organization | n described in section | | | | | | | |
| 4945(d)(4)(A)? See instructions | | L Ye | s X No | | | | | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | or educational purposes, or f | | | | 1 | | | |
| the prevention of cruelty to children or animals? | | Ye | s X No | | | | | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc | der the exceptions described i | n Regulations | | ļ | | | | |
| section 53.4945 or in a current notice regarding disaster assistance? See instru | uctions | | N/A | 5b | <u> </u> | | | |
| Organizations relying on a current notice regarding disaster assistance, check h | пеге | | ▶□ | | | | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr | om the tax because it maintai | ined | | .` |] | | | |
| expenditure responsibility for the grant? | N | ſ/A ☐ Ye | s 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? | | Ye | s X No | 1. | 1. | | | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | ersonal benefit contract? | | | 6b | X | | | |
| If "Yes" to 6b, file Form 8870. | | | | - | | | | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | helter transaction? | Ye | s X No | ' , | 1 | | | |
| b. If "Yes," did the foundation receive any proceeds or have any net income attribu | | | N/A | 7b | | | | |
| Part VIII. Information About Officers, Directors, Trusto | | nagers, Highly | | • | | | | |
| Paid Employees, and Contractors | | | | | | | | |
| List all officers, directors, trustees, and foundation managers and t | heir compensation. | | | | | | | |
| | (b) Title, and average | (c) Compensation | (d) Contributions to employee benefit plans and deferred | (e) Ex | pense | | | |
| (a) Name and address | hours per week devoted to position | (If not paid, enter -0-) | and deferred compensation | allowa | ances | | | |
| | | | | | | | | |
| | | | | | | | | |
| SEE STATEMENT 8 | | 0. | 0. | , | 0. | | | |
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| | | | | | | | | |
| Compensation of five highest-paid employees (other than those inc | luded on line 1). If none, | enter "NONE." | | | | | | |
| 4 | (b) Title, and average | | (d) Contributions to employee benefit plans | (e) Ex | pense | | | |
| (a) Name and address of each employee paid more than \$50,000 | hours per week devoted to position | (c) Compensation | and deterred compensation | allow | it, other ances | | | |
| NONE | | | | | | | | |
| 210212 | | | | | | | | |
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| | | | | | | | | |
| | | | | 1 | | | | |
| Total number of other employees paid over \$50,000 | L , , , | <u> </u> | | 1 | 0 | | | |
| otal number of other employees paid over \$30,000 | - | | Form | n 990-PF | | | | |
| | | | FULL | 000-1 1 | (2011) | | | |

| Form 990-PF (2017): THE FRIENDS OF PAUL BUNYAN FOUND Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued) | | 1830032 Page 7 |
|---|--------------------------------|------------------|
| | | |
| 3 Five highest-paid independent contractors for professional services. If none, enter (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | (b) Type of Service | (C) Compensation |
| 110111 | _ | |
| | | |
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| | | |
| | | ▶ 0 |
| Part IX-A Summary of Direct Charitable Activities | <u></u> | <u> </u> |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statis | stical information such as the | 5 |
| number of organizations and other beneficiaries served, conferences convened, research papers pro | duced, etc. | Expenses |
| 1 N/A | | - |
| | | - |
| 2 | | |
| | | |
| | | |
| 3 | | |
| | | |
| 4 | | |
| | | |
| Port IV P.O | | |
| Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year or | lines 1 and 2. | Amount |
| 1 N/A | | |
| | | |
| | | |
| 2 | | - |
| | <u>.</u> | - |
| All other program-related investments. See instructions. | | |
| 3 | | |
| | | |
| | | 1 |
| | | 1 |
| | | |
| Total. Add lines 1 through 3 | <u> </u> | 0. |

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| P | art·X Minimum Investment Return (All domestic foundations must | complete this part. Foreign four | ndations, see | instructions) |
|----|--|--------------------------------------|-------------------|---------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. | C., purposes: | | |
| a | Average monthly fair market value of securities | , N P | 1a | 472,510. |
| | Average of monthly cash balances | | 1b | 472,510. 54,113. |
| | Fair market value of all other assets | | 1c | |
| d | Total (add lines 1a, b, and c) | | 1d | 526,623. |
| | Reduction claimed for blockage or other factors reported on lines 1a and | | | |
| | 1c (attach detailed explanation) | 0. | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | | 2 | 0. |
| 3 | Subtract line 2 from line 1d | | 3 | 526,623. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see | instructions) | 4 | 7,899. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Par | t V, line 4 | 5 | 518,724. |
| 6 | Minimum investment return. Enter 5% of line 5 | | 6 | 25,936. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j) | (5) private operating foundations ar | nd certain | |
| | foreign organizations, check here and do not complete this part.) | | | |
| 1 | Minimum investment return from Part X, line 6 | | 1 | 25,936. |
| 2a | Tax on investment income for 2017 from Part VI, line 5 | 735. | | |
| b | Income tax for 2017. (This does not include the tax from Part VI.) | | , | |
| C | Add lines 2a and 2b | | 2c | <u>735.</u> |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | | 3 | <u> 25,201.</u> |
| 4 | Recoveries of amounts treated as qualifying distributions | | 4 | 0. |
| 5 | Add lines 3 and 4 | | 5 | <u> 25,201.</u> |
| 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 | 25,201. |
| P | art XII Qualifying Distributions (see instructions) | | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purpose | s. | | |
| а | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | | 1a | 44,126. |
| b | Program-related investments - total from Part IX-B | | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, e | tc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | · | |
| а | Suitability test (prior IRS approval required) | | 3a | |
| þ | 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 Pa | | 4 | 44,126. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | ent | | _ |
| | income. Enter 1% of Part I, line 27b | | 5 | 0. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | | 6 | 44,126. |
| | 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 |

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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, | | | | 25,201. |
| line 7 | | | | 25,201. |
| 2 Undistributed income, if any, as of the end of 2017 | | | 0. | |
| a Enter amount for 2016 only b Total for prior years: | | | | _ |
| g rotalion prior years. | | 0. | | |
| 3 Excess distributions carryover, if any, to 2017: | | | | |
| a From 2012 25,893. | | | | |
| b From 2013 24, 633. | | | | |
| c From 2014 26,610. | | | | |
| d From 2015 24,830. | | | | |
| e From 2016 21,885. | | | | |
| f Total of lines 3a through e | 123,851. | | | |
| 4 Qualifying distributions for 2017 from | | | | |
| Part XII, line 4: ▶\$ 44,126. | | | | |
| 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 | | | | 25,201. |
| e Remaining amount distributed out of corpus | 18,925. | | | |
| 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)) | | | , | |
| 6 Enter the net total of each column as indicated below: | | | | |
| 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 142,776. | | | |
| b Prior years' undistributed income. Subtract | | | | |
| line 4b from line 2b | | 0. | <u></u> | |
| 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 | | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2016. Subtract line | | | _ | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| 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 | | - 1 | • | 1 |
| may be required - see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2012 | 05 000 | | | • |
| not applied on line 5 or line 7 | 25,893. | | | - |
| 9 Excess distributions carryover to 2018. | 116 000 | | | <u>-</u> |
| Subtract lines 7 and 8 from line 6a | 116,883. | | | |
| 10 Analysis of line 9: | _ | ' | - | |
| a Excess from 2013 24,633. | · " | | ı | , |
| b Excess from 2014 26,610. | , | ; | | , |
| e Excess from 2015 24,830. | | | | |
| d Excess from 2016 21,885. e Excess from 2017 18,925. | - | | | w |
| e Excess from 2017 18,925. | <u> </u> | <u> </u> | <u>:</u> | Form 990-PF (2017) |

| | | IL BUNYAN FO | | 91-18 | 30032 Page/10 |
|--|--|------------------------------------|---------------------------|---|--------------------|
| Part XIV Private Operating Fo | undations (see in: | structions and Part VII | -A, question 9) | N/A | |
| 1 a If the foundation has received a ruling or of foundation, and the ruling is effective for 2 | | | > | | |
| b Check box to indicate whether the foundate | tion is a private operatir | ng foundation described i | n section | 4942(j)(3) or 494 | 12(1)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | , | |
| 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 | | | 7 | | |
| 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 XV4 Supplementary Informat any time during the | | | if the foundation | n had \$5,000 or mo | re in assets |
| 1 Information Regarding Foundation a List any managers of the foundation who | • | 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 mo | re than \$5,000). (See s | section 507(d)(2).) | | | |
| NONE | | | | | |
| b List any managers of the foundation who other entity) of which the foundation has a | own 10% or more of th a 10% or greater intere | ne stock of a corporation (st. | or an equally large port | ion of the ownership of a pa | rtnership or |
| NONE | | | | | |
| 2 Information Regarding Contributio | n, Grant, Gift, Loan | , Scholarship, etc., Pr | ograms: | | |
| | ly makes contributions | to preselected charitable | organizations and does | not accept unsolicited requ , b, c, and d. | ests for funds. If |
| a The name, address, and telephone number THE FRIENDS OF PAUL E | | | | | EGON |
| b The form in which applications should be CONTACT ORGANIZATION | | | nould include: | | |
| c Any submission deadlines: | | | יאחו.דאופים | | |
| CONTACT ORGANIZATION d Any restrictions or limitations on awards, | | | | other factors | |
| SUPPORT SCIENTIFIC AN | | | | | AND |
| RESOURCE EDUCATION | | | | | |

≥ 3b

Total

Part XVI-A **Analysis of Income-Producing Activities**

| Enter gross amounts unless otherwise indicated | Unrelated business income | | Excluded by section 512, 513, or 514 | | (e) ' | |
|---|---------------------------|----------------------------|--------------------------------------|--------------------------------|---------------------------------------|--|
| • | (a) | (b) | (c) Exclu- | (d) | Related or exempt | |
| 1 Program service revenue: | Business code | Amount | sion | Amount | function income | |
| | | | | | | |
| a | - | | | | · · · · · · · · · · · · · · · · · · · | |
| b | | | - | | | |
| C | | | | <u> </u> | | |
| d | | | | | | |
| e | | | | | | |
| f | | <u></u> | | | | |
| g Fees and contracts from government agencies | 1 | | | | | |
| 2 Membership dues and assessments | | | | | | |
| 3 Interest on savings and temporary cash | | | | | | |
| investments | | | | | | |
| 4 Dividends and interest from securities | | | 14 | 18,010. | | |
| | | | 1.4 | 10,010 | | |
| 5 Net rental income or (loss) from real estate: | | | | | | |
| a Debt-financed property | | | ļ | | | |
| b Not debt-financed property | | | ļ., | | | |
| 6 Net rental income or (loss) from personal | | | | | | |
| property | | | | | - <u></u> | |
| 7 Other investment income | | | | | | |
| 8 Gain or (loss) from sales of assets other | | - | | | | |
| than inventory | | | 18 | 19,179. | | |
| 9 Net income or (loss) from special events | | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | <u> </u> | | | |
| 11 Other revenue: | | | <u> </u> | | | |
| | | | | | | |
| a | + | | | | | |
| b | | | | | | |
| c | | | <u> </u> | | | |
| d | | | | | | |
| e | | | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) | · 1 | 0. | | 37,189. | | |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 37,189. | |
| (See worksheet in line 13 instructions to verify calculations.) | | | | | | |
| Part XVI-B Relationship of Activities to | the Asse | mplichment of Ex | /omn | t Dumosos | | |
| Part Avi-b Relationship of Activities to | Tille Acco | inpusiment of Ex | Kemp | i ruiposes | | |
| Line No. Explain below how each activity for which incor | ne is reported i | n column (e) of Part XVI-A | contrib | outed importantly to the accom | plishment of | |
| the foundation's exempt purposes (other than t | | | | , | | |
| • | ,, | | | | | |
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Form 990-PF (2017): THE FRIENDS OF PAUL BUNYAN FOUNDATION 91-1830032

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

| 1 | | | | | ig with any other organizations? | | ion 501(c) | Ye | s No |
|------|------------------|-------------------------------------|-------------------------|-------------------|------------------------------------|-------------------------|----------------------------------|------------------------------------|--------------------|
| a | Transfers | from the reporting founda | ition to a noncharita | ble exempt or | ganization of: | | | | |
| | (1) Cash | | | | | | | 1a(1) | <u> </u> |
| | (2) Other | assets | | | | | | 1a(2) | X |
| b | Other tran | sactions: | | | | | | 41 | |
| | | of assets to a noncharitat | | | | | | 1b(1) | X |
| | | hases of assets from a nor | · · | organization | | | | 1b(2) | X |
| | | al of facilities, equipment, o | or other assets | | | | | 1b(3) | <u> </u> |
| | | bursement arrangements | | | | | | 1b(4) | <u> </u> |
| | | s or loan guarantees | | | | | | 1b(5) | <u> </u> |
| | | rmance of services or mei | | | | | | 1b(6) | <u> </u> |
| | - | f facilities, equipment, mai | - | | | | | 1c | <u> </u> |
| d | | | | | dule. Column (b) should al | | | | |
| | | | | | ed less than fair market valu | ie in any transaction | n or sharing arrangement, | show in | |
| - 1 | | 1) the value of the goods, o | | | a systematic area properties | 1 (4) | | | |
| a) L | ine no | (b) Amount involved | (c) Name o | | e exempt organization | (0) Description | n of transfers, transactions, an | d sharing arrange | ements |
| | | | | N/A | | | | | |
| | | | | | | | | | |
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| | | | | | <u> </u> | | | | |
| 2a | | | = : | | or more tax-exempt organi | zations described | | . | — |
| | | 501(c) (other than section | | ection 5277 | | | | X Yes | No |
| b | If "Yes," co | omplete the following sche | | | (h) Tune of argonization | T | (a) Description of relation | uohin. | |
| | _ | (a) Name of orga | amzanon | | (b) Type of organization | | (c) Description of relation | 1211ih | |
| _ | COCTA | TED ODEGON | T OCCUPA | TNO | 501(C)(6) - | SEE STA | rement 9 | | |
| 15 | SOCIA | TED OREGON | LOGGERS, | INC. | TRADE AS | | | <u>.</u> | |
| | | | | | | | | | |
| | • | | | | | | | | |
| | Linder | nenalties of perium. I declare t | hat I Have examined the | s return includir | g accompanying schedules and | statements and to the | hest of my knowledge | | |
| Sig | | elief, it is true, cartect, and com | plete Declaration of pr | eparer (other tha | n taxpayer) is based on all inform | nation of which prepare | _ b N | tay the IRS discustum with the pre | uss this eparer |
| Эц | | I Ohika | July | | 11-2-18 | 5.46C | | hown below? Se | <u>e ins</u> tr |
| | Z _ | anture of officer or tructee | | | | | VIKECTOV | X Yes | No |
| | Sigr | Dript/Type property pe | | Droperer's - | Date | Title | Check If PTIN | | |
| | | Print/Type preparer's na | IIIC | Preparer's s | ignature | Date | Check if PTIN self- employed | 1 | |
| Pa | id | | | | DD 1131 DD2 | | | 110661 | • |
| | | JENNIFER V | | | ER VALDEZ | | | 126631 | |
| | eparer e Only | Firm's name ► BOL | DT CARLIS | LE + S | MITH | | Firm's EIN ► 93-0 | 12/0612 |) |
| υS | e Only | Eurmio addresse 5 4 0 | EE 755 65 | | GIITED 010 | · · · · | 1 | | |
| | | Firm's address ► 12 | | | SULTE 210 | | | -05 775 | - 1 |
| | | SA. | LEM, OR 9 | 1304 | | | | 585-775 | |
| | | | | | | | | entm 2020 i 2 | - = - 1 /111 / 1 |

91-1830032 THE FRIENDS OF PAUL BUNYAN FOUNDATION Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient FORESTS FOREVER NONE PO BOX 1320 7,500. OREGON CITY, OR 97045

7 500

Total from continuation sheets

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

| Name of the organization | Employer identification number | |
|---|---|---|
| T | 91-1830032 | |
| Organization type (check | HE FRIENDS OF PAUL BUNYAN FOUNDATION 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 | X 501(c)(3) exempt private foundation | • |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | |
| | 501(c)(3) taxable private foundation | |
| | is covered by the General Rule or a Special Rule .)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru | ule See instructions |
| General Rule | | |
| | on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling yone contributor. Complete Parts I and II. See instructions for determining a contributor | |
| Special Rules | | |
| sections 509(a)(1) any one contribut | on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a or, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount, line 1. Complete Parts I and II. | , or 16b, and that received from |
| year, total contrib | on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from utions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educ cruelty to children or animals. Complete Parts I, II, and III. | |
| year, contribution is checked, enter purpose Don't co | on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sexclusively for religious, charitable, etc., purposes, but no such contributions totaled in here the total contributions that were received during the year for an exclusively religious emplete any of the parts unless the General Rule applies to this organization because it le, etc., contributions totaling \$5,000 or more during the year | nore than \$1,000 if this box s, charitable, etc , |
| but it must answer "No" or | hat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fin Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fithe filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF) | |
| LHA For Paperwork Red | uction 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

| THE | FRIENDS | OF | PATIT | BUNYAN | FOUNDATION | |
|-------|---------|-----|-------|--------|------------|--|
| 11111 | LICTUID | O.L | LAUL | DOMITM | LOCKDULLON | |

91-1830032

| Contributors (see instructions) Use duplicate copies of Part I | of additional space is needed | |
|--|---|--|
| | | |
| (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| A.O.L. SERVICE, INC. PO BOX 12339 SALEM, OR 97309 | \$15,000. | Person X Payroll |
| (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | \$ | Person Payroll Complete Part II for noncash contributions.) |
| (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| | Name, address, and ZIP + 4 A.O.L. SERVICE, INC. PO BOX 12339 SALEM, OR 97309 (b) Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4 | Name, address, and ZIP + 4 Total contributions |

Name of organization

Employer identification number

THE FRIENDS OF PAUL BUNYAN FOUNDATION

91-1830032

| art II | Noncash Property (see instructions) Use duplicate copies of Pa | 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. 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 |
| - - - - | | \$ | |
| (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 |
| | | | |
| - | | s | |

Employer identification number

| | ENDS OF PAUL BUNYAN FO | OUNDATION | 91-1830032 | | | |
|---------------------------|---|---|--|--|--|--|
| Part III | the year from any one contributor Complete completing Part III, enter the total of exclusively religious. Use duplicate copies of Part III if additional | Olumns (a) through (e) and the follov s, charitable, etc , contributions of \$1,000 or | in section 501(c)(7), (8), or (10) that total more than \$1,000 for wing line entry. For organizations less for the year (Enter this info once) \$ | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | | |
| _ | | | | | | |
| | | (e) Transfer of gift | | | | |
| _ | Transferee's name, address, an | nd ZIP + 4 | Relationship of transferor to transferee | | | |
| (a) No. | | | | | | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | | |
| _ _ | | | | | | |
| | | (e) Transfer of gift | | | | |
| _ | Transferee's name, address, an | nd ZIP + 4 | Relationship of transferor to transferee | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | | |
| | | (e) Transfer of gift | | | | |
| | Transferee's name, address, an | od ZIP + 4 | Relationship of transferor to transferee | | | |
| (a) No | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | | |
| | | | | | | |
| | Transferee's name, address, an | (e) Transfer of gift | rfer of gift Relationship of transferor to transferee | | | |
| | | | The second of the second of | | | |
| | | | | | | |

| FORM 990-PF DI | VIDENDS | S AND INTER | EST | FROM SECUR | ITIES ST | ATEMENT | 1 |
|---------------------------------------|----------|------------------------------|------------|-----------------------------|-----------------------------------|-------------------------------|-----|
| GROSS AMOUNT | | CAPITAL GAINS DIVIDEND | | (A) REVENUE PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | |
| CD'S, BONDS, ETC. | 18,010. | • | 0. 18,010. | | 18,010. | | |
| TO PART I, LINE 4 | 18,010 | • | 0. | 18,010. | 18,010. | | |
| FORM 990-PF | | ACCOUNTI | NG F | EES | SI | ATEMENT | 2 |
| DESCRIPTION | | (A) EXPENSES PER BOOKS | | (B) INVEST- T INCOME | (C) ADJUSTED NET INCOME | (D) CHARITAN PURPOSE | |
| ACCOUNTING | | 1,350. | | 135. | - | 1,21 | 15. |
| TO FORM 990-PF, PG 1, L | N 16B | 1,350. 135. | | | 1,215 | | |
| FORM 990-PF | O | THER PROFES | SION | AL FEES | Sī | ATEMENT | 3 |
| DESCRIPTION | | (A) EXPENSES PER BOOKS | | (B) INVEST- T INCOME | (C) ADJUSTED NET INCOME | (D) CHARITAI PURPOSI | |
| INVESTMENT MANAGEMENT F | EES | 2,935. | | 294. | | 2,64 | 41. |
| TO FORM 990-PF, PG 1, L | N 16C | 2,935. | | 294. | | 2,64 | 41. |
| FORM 990-PF | | OTHER E | XPEN | SES | Sī | ATEMENT | 4 |
| DESCRIPTION | | (A) EXPENSES PER BOOKS | | (B) INVEST- T INCOME | (C) ADJUSTED NET INCOME | (D) CHARITAI PURPOSI | |
| MISCELLANEOUS EXECUTIVE DIRECTOR EXPE | - NSE | 753. | · · · · | 0. | | 75 | 54. |
| REIMBURSEMENTS | | 7,966. | | 0. | | 7,96 | 56. |
| TO FORM 990-PF, PG 1, L | | 8,719. | | 0. | | 8,72 | 20 |

| FORM 990-PF OTHER DECREASES IN | NET ASSETS OR F | FUND BALANCES | STATEMENT | 5 |
|-----------------------------------|-------------------------------|---------------------------|------------|----|
| DESCRIPTION | | | AMOUNT | |
| UNREALIZED LOSS ON MARKETABLE SEC | 24,723. | | | |
| TOTAL TO FORM 990-PF, PART III, L | 24,723. | | | |
| FORM 990-PF C | ORPORATE STOCK | | STATEMENT | 6 |
| DESCRIPTION | | BOOK VALUE | FAIR MARKE | Г |
| MUTUAL FUNDS | | 546,916. | 522,193. | |
| TOTAL TO FORM 990-PF, PART II, LI | 546,916. | 522,193 | | |
| FORM 990-PF | OTHER ASSETS | | STATEMENT | 7 |
| DESCRIPTION | BEGINNING OF YR BOOK VALUE | END OF YEAR BOOK VALUE | FAIR MARKE | T |
| SECURITIES FAIR VALUE ADJUSTMENT | 32,932. | <24,723.> | | 0. |
| TO FORM 990-PF, PART II, LINE 15 | 32,932. | | 0. | |

| FORM 990-PF | PART VIII - L TRUSTEES A | STATEMENT 8 | | | | |
|--|-----------------------------|-------------|--------------------------|-----------|---------------------------------|--------------------|
| NAME AND ADDRESS | | | TITLE AND AVRG HRS/WK | | EMPLOYEE BEN PLAN CONTRIB | EXPENSE ACCOUNT |
| BOB MAHON 2015 MADRONA AVE S SALEM, OR 97302 | SE | | BOARD VICE PRE | SIDENT 0. | 0. | 0. |
| HAP HUFFMAN 2015 MADRONA AVE S SALEM, OR 97302 | SE | | BOARD PRESIDENT | т 0. | 0. | 0. |
| DOUG LITTLEJOHN 2015 MADRONA AVE S SALEM, OR 97302 | SE | | BOARD TREASURE | R 0. | 0. | 0. |
| BOB LUOTO 2015 MADRONA AVE S SALEM, OR 97302 | SE | | BOARD MEMBER 1.00 | 0. | 0. | 0. |
| GARY BETTS 2015 MADRONA AVE S SALEM, OR 97302 | SE | | BOARD MEMBER 1.00 | 0. | 0. | 0. |
| ROBERT VAN NATTA 2015 MADRONA AVE S SALEM, OR 97302 | SE. | | BOARD MEMBER 1.00 | 0. | 0. | 0. |
| GARY JENSEN 2015 MADRONA AVE S SALEM, OR 97302 | E | | BOARD MEMBER 1.00 | 0. | 0. | 0. |
| GORDON CULBERTSON 2015 MADRONA AVE S SALEM, OR 97302 | SE . | • | BOARD MEMBER 1.00 | 0. | 0. | 0. |
| MIKE MILLER 2015 MADRONA AVE S SALEM, OR 97302 | ; SE | | EXECUTIVE DIRE | CTOR 0. | 0. | 0. |
| TED HUFFORD 2015 MADRONA AVE S SALEM, OR 97302 | E | | BOARD MEMBER 1.00 | 0. | 0. | 0. |
| JAMIE YRAGUEN 2015 MADRONA AVE S SALEM, OR 97302 | E | | BOARD MEMBER 1.00 | 0. | 0. | 0. |
| TOTALS INCLUDED ON | 1 990-PF, PAGE | 6, | PART VIII | 0. | 0. | 0. |

990-PF AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS PART XVII, LINE 2, COLUMN (C)

STATEMENT

NAME OF AFFILIATED OR RELATED ORGANIZATION

ASSOCIATED OREGON LOGGERS, INC.

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

BOARD CONTROL