Return of 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.

DLN: 93491028002559 OMB No 1545-0052

2017

Form 990-PF Department of the Treasury

Internal Revenue Service

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

Open to Public Inspection

A Employee identification number 94044666 C in Circl (Fillac Tub) 92272144 1004666 C in Circl (Fillac Tub) 92272144 1004666 C in Circl (Fillac Tub) 92272144 100466 C in Circl (Fillac Tub) 92272144 92272144 100466 C in Circl (Fillac Tub) 92272144 100466 C in Circl (Fillac Tub) 9227244	For	caler	ndar year 2017, or tax year beginning 10-01-20)17 , aı	nd ending 09-30-	2018	
Number and street (or F of less number if mail is not delivered to street address) Sourchaids Sourchaid					A Employer ıd	entification numbe	r
Different services or province, country, and ZIP or foreign postal code Code Section 497 (a) Code					93-6272124		
Control (1991) and the processor of th				Room/suite	B Telephone nu	mber (see instructio	ns)
Gorder, Aug. 10. 97290442 G Check all that apply Initial return Initial return of a former public charty 2 comparison on prediction, check here 2 comparison of a former public charty 2 compa		o box 2	2772	(503) 286-0685	5		
Final return					C If exemption	application is pendin	g, check here
Final return		acek al	U that apply	former public charity	D 1 Foreign or	ganizations shock he	7 -
More continued More	G CI	іеск аі		former public charity		-	▶ ⊔
## Check P Private foundations Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt chandable trust Other transfer protes foundation							
Section 4987(a)(1), noteways chartable trulial Other Isabels private foundation	—	ack ty		foundation			
Fair market value of all assets at end of large part (1, cot (c)) Other (speedy)	_	,			under sectio	n 50/(b)(1)(A), chec	ck here
of year (from Part II, cof. (c), inte 16) ≠ 2 0,273,078 (Part II, column (d) must be on cash basis y Part II Analysis of Revenue and Expenses (The fold of any one necessarity equal the analysis of cultures (b), (c), and (d) may not necessarity equal the analysis of cultures (b), (c), and (d) may not necessarity equal the analysis of cultures (b), (c), and (d) may not necessarity equal the analysis of cultures (b), (c), and (d) may not necessarity equal the analysis of cultures (b). (c) the cultures (c) the second of analysis of Revenue and the analysis of cultures (c). (c) the cultures (c) the cultures (c) the cultures (c) the cultures (c). (c) the cultures (c) the cultures (c). (c) the cultures (c) the c			T		F If the foundation	ation is in a 60-mont	h termination
Part	of	year <i>(f</i>	from Part II, col (c),				
Part	Pa	rt I	Analysis of Revenue and Expenses (The total				(d) Disbursements
1			•	expenses per			for charitable
100 2 Check Sin March March Sin March March Sin March			equal the amounts in column (a) (see instructions))	books	meome	meome	
Sch 8 3 Interest on savings and temporary cash investments 16,071 16,071 16,071 16,071 16,071 16,071 16,071 17,072		1					
15,072 15,073 15,075 1		2	Check ► ✓ If the foundation is not required to attach				
10 Dividends and interest from securities 416,376		_		16.074	16.071		_
Sa Gross rents Net rental income or (loss) Sale Sales price for all assets on line 10 Sales Sale		_					
10		•		416,176	416,176		
100 100							
Description Part	a)		` ,	660 393			
8	mue						
8	eve	-					
9 Income modifications	~	_			660,393		
10a Gross sales less returns and allowances		_					
Description		-	I .				
C Gross profit or (loss) (attach schedule)							
11 Other income (attach schedule) 12 Total. Add lines 1 through 11 1,092,640 1		-	-]			
12 Total. Add lines 1 through 11 1,092,640 1,0							
13 Compensation of officers, directors, trustees, etc 143,000 0 143,000 14				1 092 640	1 002 640		
14 Other employee salaries and wages			<u> </u>				143,000
15				143,000	0		143,000
16a Legal fees (attach schedule) 15,700 0 5,700 c Other professional fees (attach schedule) 21 38,570 38,570 38,570 0 17			• •				
23 Other expenses (attach schedule)	Se		• • • •				
23 Other expenses (attach schedule)	De l	l .		5,700	0		5,700
23 Other expenses (attach schedule)	EX						
23 Other expenses (attach schedule)	Ne		. , ,	2			
23 Other expenses (attach schedule)	trat			26,145	1,925		0
23 Other expenses (attach schedule)	13		, , , , , , , , , , , , , , , , , , , ,	· ·	·		
23 Other expenses (attach schedule)	Ξ						
23 Other expenses (attach schedule)	Ac		• •				
23 Other expenses (attach schedule)	and						
26 Total expenses and disbursements. Add lines 24 and 25	ξ	23	Other expenses (attach schedule)	170,002	167,505		2,497
26 Total expenses and disbursements. Add lines 24 and 25	atır	24	Total operating and administrative expenses.				
26 Total expenses and disbursements. Add lines 24 and 25	Der		Add lines 13 through 23	383,417	208,000		151,197
25 1,098,015 208,000 865,795 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income(if negative, enter -0-)	Ō	25	Contributions, gifts, grants paid	714,598			714,598
27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income(if negative, enter -0-)		26		4 222 51	222 5		205 75-
a Excess of revenue over expenses and disbursements b Net investment income (If negative, enter -0-) c Adjusted net income(If negative, enter -0-)		27		1,098,015	208,000		865,/95
disbursements b Net investment income (if negative, enter -0-) c Adjusted net income(if negative, enter -0-)				-5.375			
c Adjusted net income(ıf negative, enter -0-)		_	disbursements	,			
			· -		884,640		
	For				Ca+ No. 11300	/	m 990-PE (2017)

	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 ▶				
S.	8	Inventories for sale or use				
sets	9	Prepaid expenses and deferred charges				
ഗി	10a	Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)	12,279,178	% J	11,969,233	14,189,662
	С	Investments—corporate bonds (attach schedule)	4,920,000	چ ا	5,638,151	5,402,223
	11	Investments—land, buildings, and equipment basis ►				
		Less accumulated depreciation (attach schedule) ▶	105,000	% J	105,000	116,100
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)	465,154	% J	322,706	390,753
	14	Land, buildings, and equipment basis ▶				
		Less accumulated depreciation (attach schedule) ▶				
	15	Other assets (describe >)				

25,444,431

-7,228,826

18,215,605

18,215,605

25,444,431

-7,234,201

18,210,230

18,210,230

2

3 4

5

6

18,215,605

18,210,230

18,210,230 Form **990-PF** (2017)

0

20,273,878

16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I) 18,215,605 18,210,230

Accounts payable and accrued expenses

Foundations that follow SFAS 117, check here

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here

Capital stock, trust principal, or current funds

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Total net assets or fund balances (see instructions) . . .

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Grants payable.

Other liabilities (describe ▶_

Deferred revenue .

Unrestricted

Temporarily restricted

Permanently restricted .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize)

17

18

19

20

21 22

23

24

25

26

28 29

31 Part III

Liabilities

Balances

Fund

ŏ

Assets 27

Net 30

2

Page **3**

Part IV Capital Gair	is and Losses for Tax on In	vestment Income			
	(a) be the kınd(s) of property sold (e <u>c</u> varehouse, or common stock, 200		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a PUBLICLY TRADED SE	CURITIES				
b CAPITAL GAINS DIVII	DENDS		Р		
c					
d					
e					
(e) Gross sales price	(f) Depreciation allov (or allowable)		(g) r other basis pense of sale	Gain o	h) ir (loss)) minus (g)
a 1	,899,825		1,341,794		558,03:
b	102,362				102,362
c					
d					
<u>е</u>					
			12/21/60	_	
(i) F M V as of 12/31,	sets showing gain in column (h) an (j) Adjusted basis	Exces	(k) ss of col (ı)	Gains (Col (col (k), but not	l) h) gain minus less than -0-) or om col (h))
	as of 12/31/69	over c	ol (j), if any	Losses (III	
a					558,03:
b					102,362
d					
e					
	ome or (net capital loss)	If gain, also enter in If (loss), enter -0- in	'	2	660,393
•	al gain or (loss) as defined in secti Part I, line 8, column (c) (see inst	` , ` , ,	-0-	3	
Part V Qualificatio	n Under Section 4940(e) fo	r Reduced Tax on Ne	t Investment In	come	
(For optional use by domest	ic private foundations subject to th	e section 4940(a) tax on i	net investment incom	e)	
If section $4940(d)(2)$ applies Was the foundation liable fo	s, leave this part blank r the section 4942 tax on the distri	butable amount of any yea	ar in the base period?	,	es 🗸 No
If "Yes," the foundation does	s not qualify under section 4940(e)	Do not complete this par	rt		
1 Enter the appropriate	amount in each column for each y	ear, see instructions befo	re making any entrie:	5	
(a) Base period years Calendar year (or tax year beginning in	(b) Adjusted qualifying distributions	(c) Net value of noncharita	able-use assets	(d) Distribution rati (col (b) divided by c	
2016	970,		19,947,556		0 048675
2015	992,	,574	18,744,252		0 052954
2014	1,107	,324	20,324,518		0 054482
2013	964,	,820	20,738,545		0 046523
2012	643,	,865	20,024,631		0 032154
2 Total of line 1, colum	n (d)		2		0 234788
number of years the f	atio for the 5-year base period—div	less than 5 years	í í <u>3</u>		0 046958
	noncharitable-use assets for 2017	•	4		20,097,640
5 Multiply line 4 by line			5		943,745
	tment income (1% of Part I, line 2	,	6		8,846
			7		952,591
	butions from Part XII, line 4 🔒 .				865,795
If line 8 is equal to or instructions	greater than line 7, check the box	ın Part VI, line 1b, and co	mplete that part usin	g a 1% tax rate Se	e the Part VI

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

7b

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

1 List all officers, directors, trustee	es, foundation managers ar	nd 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
See Additional Data Table			Componibution.	
2 Compensation of five highest-pai	d employees (other than t	hose included on line :	L—see instructions). If nor Contributions to	ie, enter "NONE."
(a) Name and address of each employee pa more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE			(a) compensation	
				
Total number of other employees paid ove				
3 Five highest-paid independent co				0 E".
(a) Name and address of each person		1	e of service	(c) Compensation
NONE				
		-		
		_		
		-		
Total number of others receiving over \$50	,000 for professional services			0
Part IX-A Summary of Direct C				
List the foundation's four largest direct charitable organizations and other beneficiaries served, con			nation such as the number of	Expenses
1				
2				
3				
4				
-				
Part IX-B Summary of Program	m-Related Investments	(see instructions)		
Describe the two largest program-related inve	stments made by the foundation d	uring the tax year on lines 1	and 2	Amount
1				
				
2				
All II	<u> </u>			
All other program-related investments 3	See instructions			
Total. Add lines 1 through 3 .		· · · · · · · ·		000 PE (2017)

1a

1b

2

3a 3h

4

5

865,795

865.795

865.795

Form **990-PF** (2017)

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

16.044

971,145

Form **990-PF** (2017)

0

(d)

Page 9

b Total for prior years

a From 2012. **b** From 2013. . . . c From 2014. . . d From 2015. e From 2016.

F1 (20	17)
101	Undistributed Income (see instructions)

a Enter amount for 2016 only.

Excess distributions carryover, if any, to 2017

f Total of lines 3a through e. 4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ a Applied to 2016, but not more than line 2a

b Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election

5 Excess distributions carryover applied to 2017

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 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 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

(If an amount appears in column (d), the

6 Enter the net total of each column as

be distributed in 2018 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

9 Excess distributions carryover to 2018.

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. . .

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

indicated below:

d Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a))

Distributable amount for 2017 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2017

Corpus

(a)

0

0

Years prior to 2016

(b)

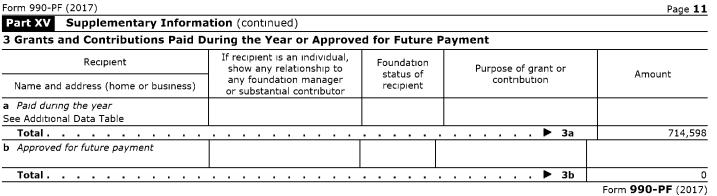
2016

849.751

849,751

(c)

Pa	rt XIV Private Operating Found	l ations (see inst	ructions and Part \	VII-A, question 9)		
	If the foundation has received a ruling or de foundation, and the ruling is effective for 20			erating		
b	Check box to indicate whether the organizat	ion is a private ope	rating foundation des	scribed in section] 4942(j)(3) or □	4942(1)(5)
	Enter the lesser of the adjusted net	Tax year		Prior 3 years		1
·a	income from Part I or the minimum	·	413.004	· · · · · · · · · · · · · · · · · · ·		(e) Total
	investment return from Part X for each	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
	year listed					
b	85% of line 2a					
	Qualifying distributions from Part XII, line 4 for each year listed					
	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					
C	omplete 3a, b, or c for the alternative test relied upon					
	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(1)(3)(B)(1)					
b	"Endowment" alternative test— enter 2/3					
	of minimum investment return shown in Part X, line 6 for each year listed					
	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest,					
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties) (2) Support from general public					
	and 5 or more exempt					
	organizations as provided in					
	section $4942(j)(3)(B)(iii)$					
	(3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income					
E	Supplementary Information			organization had	d \$5,000 or mor	e in
	assets at any time during th		tructions.)			
	Information Regarding Foundation Manust any managers of the foundation who have	e contributed more				n
Ь	before the close of any tax year (but only if list any managers of the foundation who ow					
	ownership of a partnership or other entity)				arge portion of the	
_	Information Regarding Contribution, Gr	ant, Gift, Loan, So	cholarship, etc., Pr	ograms:		
	Check here $ ightharpoonup \square$ if the foundation only mak	res contributions to	precelected charitah	le organizations and	does not accept	
	unsolicited requests for funds. If the founda					oder
	other conditions, complete items 2a, b, c, a	, , ,	ianies, etc. (500 1115till	acciona) to murvidual	o or organizations ur	idel
а	The name, address, and telephone number	or e-mail address o	f the person to whon	n applications should	be addressed	
	TRUST MANAGEMENT SERVICES					
	PO BOX 1990					
	WALDPORT, OR 97394					
	(541) 563-7279					
	INFO@TRUSTMANAGEMENTSERVICES NET					
b	The form in which applications should be su	bmitted and inform	ation and materials t	hey should include		
	APPLICATION MUST BE IN WRITING, SUBM	IT PROOF OF TAX E	EXEMPT STATUS IF A	PPLICABLE, COPY OF	BY-LAWS AND CON	STITUTION, COPY
	OF CURRENT FINANCIAL STATEMENTS, STA	TEMENT OF SPECIF	FIC ENDEAVOR, REC	ORD OF PRIOR RESU	LTS OF SIMILAR EFF	ORTS, AND OTHER
	INFORMATION TAX EXEMPT ORGANIZATION	I CONSIDERS PERT	INENT SEE TRUSTM	ANAGEMENTSERVIC	ES NET FOR COMPLE	TE APPLICATION
	REQUIREMENTS					
С	Any submission deadlines					
	SUBMISSION DEADLINES VARY, SEE TRUST	MANAGEMENTSER'	VICES NET FOR ALL I	DEADLINES		
	Any restrictions or limitations on awards, su				utions, or other	
	factors GRANTS LIMITED TO TAX-EXEMPT ORGANIZ	ATIONS WITHIN O	REGON GENERALLY	THE MAXIMUM GRA	NT IS \$15 000 NO 0	GRANTS TO
	INDIVIDUALS	_, 10 113 VY 1 I I I I I V	ALCON GENERALLI	THE HANTINON GRA	15 #15,000 NO C	2.00.113 10



Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section	(e) Related or exempt	
. Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
е						
_	and contracts from government agencies					
Intere	rship dues and assessments			14	16,071	
	ds and interest from securities			14	416,176	
Net ren	tal income or (loss) from real estate					
	financed property					
	ebt-financed property notes in the state of the					
	nvestment income					
	r (loss) from sales of assets other than					
ınvent	ory			18	660,393	
	ome or (loss) from special events					_
	profit or (loss) from sales of inventory evenue a					
	evende <u>u</u>					
d						
e	(1) (1)					
е			0	12	1,092,640	
e Subtota Total.	Al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul		0	13	1,092,640	
e Subtota Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul B Relationship of Activities to th	lations) e Accomplish	ment of Exem	pt Purposes	3	
e Subtota Total. , (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcul	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated and the second activities to the second accordance of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the second activity for which the accomplishment of the foundation's explain the second activity for which the accomplishment of the foundation's explain the second activity for which the accomplishment of the foundation's explain the second activity for which the sec	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated and the second activities to the second accordance of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the second activity for which the accomplishment of the foundation's explain the second activity for which the accomplishment of the foundation's explain the second activity for which the accomplishment of the foundation's explain the second activity for which the sec	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated and the second activities to the second accordance of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the second activity for which the accomplishment of the foundation's explain the second activity for which the accomplishment of the foundation's explain the second activity for which the accomplishment of the foundation's explain the second activity for which the sec	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. , (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated and the second activities to the second accordance of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the second activity for which the accomplishment of the foundation's explain the second activity for which the accomplishment of the foundation's explain the second activity for which the accomplishment of the foundation's explain the second activity for which the sec	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated and the second activities to the second accordance of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the second activity for which the accomplishment of the foundation's explain the second activity for which the accomplishment of the foundation's explain the second activity for which the accomplishment of the foundation's explain the second activity for which the sec	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. , (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. , (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	Bted importantly to	
e Subtota Total. ((See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. , (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. , (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. , (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. , (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. , (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. , (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. , (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	Bted importantly to	
e Subtotal (See wo lart XVI ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculated the color of the color of the color of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below the color of the	lations) e Accomplish income is report	ment of Exempled in column (e) of	pt Purposes F Part XVI-A contribut	Bted importantly to	1,092,640

orm 990-PF (<u> </u>							Pa	ge 13
Part XVII	Information Re Exempt Organiz		sfers To an	d Transactio	ns and Relati	ionships With Non	charitable		
	ganization directly or inc Code (other than section						n 501	Yes	No
a Transfers t	from the reporting found	dation to a nonch	naritable exem	pt organization	of				
(1) Cash.							. 1a(1)		No
(2) Other	assets						. 1a(2)		No
b Other tran	sactions								
(1) Sales	of assets to a nonchard	table exempt org	janization				. 1b(1)		No
	ases of assets from a n						1b(2)		No
	al of facilities, equipmen	•					1b(3)		No
	bursement arrangement						. 1b(4)		No
	s or loan guarantees						. 1b(5)		No No
• •	mance of services or me facilities, equipment, m	•	-				. 1b(6)		No
_	ver to any of the above	-							NO
	ds, other assets, or servinsaction or sharing arran		n column (d)	the value of the	goods, other as		red	ngemen	ts
2a Is the four	ndation directly or indire	ctly affiliated wit	h, or related t	o, one or more	tax-exempt orga	anizations			
described	in section 501(c) of the	Code (other than	n section 501(c)(3)) or in sect	ion 527?		🗆 Yes	✓	No
b If "Yes," co	omplete the following sc	hedule							
	(a) Name of organization	n	(b)	Type of organizatio	n e	(c) Description	of relationship		
1									
of m whic	er penalties of perjury, I ly knowledge and belief, h preparer has any kno	it is true, correc					sed on all infoi	mation	n of
Sign Here	*****		2	019-01-25	*****		May the IRS di return with the prepa below		
	Signature of officer or tr	ustee	D	ate	Title		(see instr)?	✓ Yes	□ _{No}
I	Print/Type preparer's	name Pre	parer's Signat	ure	Date		TIN		
						Check if self-	P00853	3258	
Paid	MARGARET WALLIS	S CPA				employed ▶ Ш			
Preparer Use Only		NP LLP				- F	irm's EIN ▶93	-04187	10
		85 MEADOWS RO	DAD NO 200						
	LAI	KE OSWEGO, OR	97035			P	hone no (503) 697-4	4118

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, not paid, enter Contributions to (e) other allowances hours per week (b) devoted to position -0-) employee benefit plans and deferred compensation MARTHA B COX TRUSTEE 2 00 PO BOX 25442 PORTLAND OR 97298

FORTLAND, OR 97290				
MELANIE ANN DAWSON	TRUSTEE	0	0	0
PO BOX 25442 PORTLAND, OR 97298	1 00			
KEN DAWSON	TRUSTEE	0	0	0
PO BOX 25442	1 00			

PORTLAND, OR 97298				
KEN DAWSON	TRUSTEE	0	0	0
PO BOX 25442 PORTLAND, OR 97298	1 00			
GREG SNYDER	TRUSTEE	0	0	0
PO BOX 25442 PORTLAND, OR 97298	1 00			
MARY C BIRD	GRANT	143,000	0	0
DO DOW 1000	ADMINISTRATOR			

40 00

PO BOX 1990

WALDPORT, OR 97394

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ASSISTANCE LEAGUE OF SALEM-KEISER PC. OPERATION SCHOOL BELL 5,000 1095 SAGINAW ST SALEM, OR 97302 BANDON COMMUNITY RADIO PC KBOG STUDENT BROADCASTING 9,119 500

825 2ND STREET SE BANDON, OR 97411		& TRAINING PROGRAM	
BANDON HISTORICAL SOCIETY MUSEUM 270 FILMORE AVE SE	PC	RENOVATE THE EXHIBITS	6,50

Britta ott, ott ar 111			
BANDON HISTORICAL SOCIETY MUSEUM	PC	RENOVATE THE EXHIBITS	
270 FILMORE AVE SE			

T-4-1			7	714 500
270 FILMORE AVE SE BANDON, OR 97411				
MUSEUM	1			

BANDON, OR 97411			
Total			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year **BOYS & GIRLS CLUB OF ALBANY** PC FOOD SMARTS FOR HEALTHY 10,000 1215 HILL STREET SE **FUTURES THROUGH STEM** ALBANY, OR 97332 BOYS & GIRLS CLUB OF SALEM MARION PC SUPPORT THE TRIPLE PLAY 10,000

& POLK 1395 SUMMER STREET NE SALEM, OR 97301		PROGRAM	
BRIDGEWAY HOUSE555 E 15TH AVE EUGENE, OR 97401	PC	THEATRE PROGRAM FOR & WITH KIDS W/ AUTISM	7,000

BRIDGEWAY HOUSE555 E 15TH AVE PC THEATRE PROGRAM FOR & WITH	SALEM, OR 9/301		
EUGENE, OR 97401 KIDS W/ AUTISM			

Total .

5/(EE/1)/ 5/(5/501			
BRIDGEWAY HOUSE555 E 15TH AVE EUGENE, OR 97401		THEATRE PROGRAM FOR & WITH KIDS W/ AUTISM	7,0

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CALDERA222 NW 13TH AVE STE 304 PC SUPPORT THE CENTRAL OR 10,000 PORTLAND, OR 97209 MIDDLE SCHOOL MENTOR

		PROGRAM	
CASA - VOICES FOR CHILDREN 129 NW 4TH STREET SUITE B CORVALLIS, OR 97330		RECRUIT, TRAIN, AND SUPPORT NEW ADVOCATES	10,000
CASA FOR CHILDREN OF KLAMATH COUNTY 731 MAIN ST SUITE 202 KLAMATH FALLS, OR 97601	PC	RECRUIT, TRAIN, AND SUPPORT	10,000

Total	714.598		
COUNTY 731 MAIN ST SUITE 202 KLAMATH FALLS, OR 97601		Recreati, Hvan, And Sorror	10,000
CASA FOR CHILDREN OF KLAMATH	PC	RECRUIT, TRAIN, AND SUPPORT	10,000
CORVALLIS, OR 97330			

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CASA OF DOUGLAS COUNTY PC. RECRUIT, TRAIN, & SUPPORT 10.000 545 W UMPQUA STREET SUITE 2 **NEW ADVOCATES** ROSEBURG, OR 97471 0,000 ,000

CASA OF JACKSON & JOSEPHINE COUNTIES 613 MARKET STREET MEDFORD, OR 97504	PC	"MENTORING YOUTH TOWARD INDEPENDENCE" PROGRAM	10,
CASA OF LANE COUNTY	PC	SUPPORT THE VOLUNTEER	10,

MEDFORD, OR 97504			
CASA OF LANE COUNTY 174 DEADMOND FERRY ROAD	PC	SUPPORT THE VOLUNTEER COORDINATOR POSITION	

MEDFORD, OR 97504			
CASA OF LANE COUNTY 174 DEADMOND FERRY ROAD SPRINGEIELD OR 97477		SUPPORT THE VOLUNTEER COORDINATOR POSITION	

CASA OF LANE COUNTY	PC	SUPPORT THE VOLUNTEER	10,0
174 DEADMOND FERRY ROAD		COORDINATOR POSITION	
SPRINGFIELD, OR 97477			

Total			714 508
SPRINGFIELD, OR 97477			I
174 DEADMOND FERRY ROAD	!	COORDINATOR POSITION	I

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Foundation Purpose of grant or Recipient If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CASCADE JUNIOR HIGH SCHOOL GOV PURCHASE CHROMEBOOKS AND 10,000 10226 MARION ROAD SE CART TURNER, OR 97392 CENTER FOR COMMUNITY COUNSELING PC RALLY AROUND FAMILIES 5,000

1465 COBURG ROAD EUGENE, OR 97401		TOGETHER PROGRAM	ŕ
CENTRAL POINT SCHOOL DIST #6SCENIC MIDDLE SCHOOL 300 ASH STREET CENTRAL POINT, OR 97502	GOV	STEM PROGRAM	5,000

,			
CENTRAL POINT SCHOOL DIST #6SCENIC MIDDLE SCHOOL 300 ASH STREET CENTRAL POINT, OR 97502	GOV	STEM PROGRAM	5,00
Total	 		714,598

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

a Paid during the year			_
CHEMEKETA NON-PROFIT HOUSING INC 1011 COMMERCIAL STREET NE SALEM, OR 97301	PC	BACKPACK PROGRAM	10,000

CONNECTIONS365 4890 32ND AVENUE SE SALEM, OR 97317	PC	STAFF CERTIFICATION COSTS	

or substantial contributor

3a

SALEM, OR 97317			
COOS ART MUSEUM235 ANDERSON AVE COOS BAY, OR 97420	PC	2018 BIENNIAL STUDENT ART EXHIBIT	3,00

SALLIN, OK 37317			
COOS ART MUSEUM235 ANDERSON AVE COOS BAY, OR 97420	PC	2018 BIENNIAL STUDENT ART EXHIBIT	3,000
1			

COOS ART MUSEUM235 ANDERSON AVE COOS BAY, OR 97420	PC	2018 BIENNIAL STUDENT ART EXHIBIT	3,00
Total	 		714,598

COOS ART MUSEUM235 ANDERSON AVE COOS BAY, OR 97420	PC	2018 BIENNIAL STUDENT ART EXHIBIT	3

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
COOS COUNTY HISTORICAL SOCIETY 1210 NORTH FRONT STREET COOS BAY, OR 97420		PC	SUPPORT FOR COLLECTIONS MANAGEMENT	9,966
COOS WATERSHED ASSOCIATION 300 CENTRAL AVENUE COOS BAY, OR 97420		PC	SUPPORT FOR THE 2ND MAYFLY FESTIVAL	10,000
CROSSING BRIDGES THERAPEUTIC RIDING CENTER INC 6377 MONUMENT DRIVE		PC	SCHOLARSHIPS & HORSE CARE	10,000

GRANTS PASS, OR 97526

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FAMILY ACCESS NETWORK PC SUPPORT DISADVANTAGED 8.000 **FOUNDATION** CHILDREN & THEIR FAMILIES 2125 NE DAGGETT LANE BEND, OR 97701

		1	
FAMILY BUILDING BLOCKS 2425 LANCASTER DRIVE NE SALEM, OR 97317	PC	MURAL	5,000
FERN RIDGE LIBRARY FOUNDATION	PC	CHILDREN'S AREA BOOK	7,500

SALEM,OR 97317			
FERN RIDGE LIBRARY FOUNDATION 88026 TERRITORIAL ROAD	PC	CHILDREN'S AREA BOOK DISPLAY & INTERACTIVE PLAY	7,50
VENETA OR 07407		CTATIONIC	

SALETI, GIC 37317			
FERN RIDGE LIBRARY FOUNDATION	PC	CHILDREN'S AREA BOOK	
88026 TERRITORIAL ROAD		DISPLAY & INTERACTIVE PLAY	
VENETA, OR 97487		STATIONS	

- · · · · · · · · · · · · · · · · · · ·			
FERN RIDGE LIBRARY FOUNDATION	PC	CHILDREN'S AREA BOOK	7,
88026 TERRITORIAL ROAD		DISPLAY & INTERACTIVE PLAY	1
VENETA OR 07407		CTATIONS	1

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FRIENDS OF THE ALBANY PUBLIC PC SUPPORT THE SUMMER 6,320 LIBRARY READING PROGRAM 2450 14TH AVENUE SE ALBANY, OR 97322

GORGE OWNEDLEADERS FOR TOMORROW PO BOX 402 HOOD RIVER, OR 97031	PC	TO SUPPORT THE LEADER FOR TOMORROW PROGRAM	6,250
GRACE CENTER FOR ADULT DAY SERVICES 980 NW SPRUCE AVE CORVALLIS, OR 97330	PC	ACCESSIBILITY PROJECT	10,000

714,598

Total.

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GRANTS PASS FAMILY YMCA PC YOUTH & POOL EQUIPMENT 10,000 1000 REDWOOD AVENUE GRANTS PASS, OR 97526 HEALTNC DEING THEDADELITIC DIDING DC TAKING THE DEING DOOG FOR 7.500

CENTER INC 60575 BILLADEAU ROAD BEND, OR 97702	PC	AT-RISK YOUTH	7,500
HEARTISAN FOUNDATIONPO BOX 1487	PC	SUPPORT CLASSES AT NO-	10,000

BEND, OR 97702			
HEARTISAN FOUNDATIONPO BOX 1487 TALENT, OR 97540	PC	SUPPORT CLASSES AT NO- CHARGED TO TEENS	10

Total.

714,598 За

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

10,000

10,000

during the year			
G HANDS RESOURCES 3TH STREET SE .OR 97302	PC	SUPPORT "EMPOWERING PEOPLE THROUGH OUTREACH"	

or substantial contributor

3a

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

o,, , o,			
HIGH DESERT MUSEUM59800 S HWY 97 BEND, OR 97702	PC	TEACHER DEVELOPMENT PROGRAM, STEM CONNECT	

BEND, OR 97702		PROGRAM, STEM CONNECT	
HOPE EQUESTRIAN CENTER 716 RILEY ROAD	PC	PARTNERSHIP W/ KIDS UNLIMITED CS	

HOPE EQUESTRIAN CENTER	PC	PARTNERSHIP W/ KIDS	
716 RILEY ROAD		UNLIMITED CS	
EAGLE POINT, OR 97524			

OPE EQUESTRIAN CENTER		PC	LAKTINEKOUTE M/ KIDO	
16 RILEY ROAD			UNLIMITED CS	
AGLE POINT, OR 97524				
	,			

AGLE POINT, OR 97524		ONLIMITED CS	
Total		•	-

Total		 71.4.500
EAGLE POINT, OR 97524		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year HORSES OF HOPE OREGON PC TO SUPPORT EQUINE ASSISTED 10,000 2895 CLOVERDALE DRIVE SE THERAPY FOR 22 CHILDREN TURNER, OR 97392

HUCREST BOOSTER CLUB 1810 NW KLINE STREET ROSEBURG, OR 97471	PC	PURCHASE 20 IPADS W/ CASES & READING SOFTWARE	10,000
JACKSON COUNTY SART 43 MORNINGLIGHT DRIVE	PC	SEXUAL VIOLENCE PREVENTION PROGRAM	10,000

RUSEBURG, UK 9/4/1			I
JACKSON COUNTY SART 43 MORNINGLIGHT DRIVE ASHLAND, OR 97520	· -	SEXUAL VIOLENCE PREVENTION PROGRAM	10,00

JACKSON COUNTY SART	PC	SEXUAL VIOLENCE PREVENTION	10,
43 MORNINGLIGHT DRIVE		PROGRAM	•
ASHLAND, OR 97520			

Total		•	714 500
ASHLAND, OR 97520			
43 MORNINGLIGHT DRIVE		PROGRAM	

/14,598

3a

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year KIDS CENTER1375 NW KINGSTON AVE PC CAC CARENET DATABASE & 5,000

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

BEND, OR 97703

За

BEND, OK 37703		HOLERING STSTEM	
KIDS CLUB OF JEFFERSON COUNTY JEFFERSON COUNTY YOUTH ORGANIZATION PO BOX 571 MADRAS, OR 97741	PC	LAUNCH A STEM PROGRAM AT THE CLUB	10,000
KLAMATH-LAKE CARES	PC	OLIALIEVING & MEDICAL EXAMS	10.000

TRACKING SYSTEM

PO BOX 571 MADRAS, OR 97741			
KLAMATH-LAKE CARES 2421 WASHBURN WAY H KLAMATH FALLS, OR 97603	PC	QUALIFYING & MEDICAL EXAMS AND PREVENTION ED	10,000
Total	 		714,598

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a raid daring the year			
LEBANON PUBLIC LIBRARY 55 ACADEMY STREET LEBANON, OR 97355	GOV	PURCHASE LIBRARY MATERIALS	

a Paid during the year

3a

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

LIBERTY HOUSE2685 4TH STREET NE SALEM, OR 97301	PC	PURCHASE 2 LAPTOPS AND 3 DESKTOP COMPUTERS	
LOOKING GLASS COMMUNITY SERVICES	PC	INTERACTIVE EDUCATIONAL	

LOOKING GLASS COMMUNITY SERVICES	PC	INTERACTIVE EDUCATIONAL	
1790 W 11TH AVENUE SUITE 200		TECH & TOOLS FOR CENTER	
EUGENE, OR 97402		POINT SCHOOL	

LOOKING GLASS COMMUNITY SERVICES	PC	INTERACTIVE EDUCATIONAL	
1790 W 11TH AVENUE SUITE 200		TECH & TOOLS FOR CENTER	
EUGENE, OR 97402		POINT SCHOOL	

LOOKING GLASS COMMUNITY SERVICES	PC	INTERACTIVE EDUCATIONAL	10,0
1790 W 11TH AVENUE SUITE 200		TECH & TOOLS FOR CENTER	,
EUGENE, OR 97402		POINT SCHOOL	

DOKING GLASS COMMUNITY SERVICES 790 W 11TH AVENUE SUITE 200 JGENE, OR 97402		INTERACTIVE EDUCATIONAL TECH & TOOLS FOR CENTER POINT SCHOOL	10,000

9,977

UGENE, OR 97402		POINT SCHOOL	
Total	 		714,598

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MARION POLK FOOD SHARE INC. PC SUMMER EDUCATION PROGRAM 10,000 1660 SALEM INDUSTRIAL DRIVE NE AT THE YOUTH FARM SALEM, OR 97301

MARYS RIVER WATERSHED COUNCIL 101 SW WESTERN BLVD SUITE 105 CORVALLIS, OR 97333	PC	EXPLORING OREGON'S ECOSYSTEMS	10,000
MID WILLAMETTE FAMILY YMCA	PC	PURCHASE 3 AEDS PLUS	4,500

MID WILLAMETTE FAMILY YMCA 3201 PACIFIC BLVD SW ALBANY, OR 97321	PC	PURCHASE 3 AEDS PLUS TRAINING	4,50

MID WILLAMETTE FAMILY YMCA	PC	PURCHASE 3 AEDS PLUS
3201 PACIFIC BLVD SW		TRAINING
ALBANY, OR 97321		

За

Total . 714,598

Form 990PF Part XV Line 3 - Grant	orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
MOUNTAINSTAR FAMILY RELIEF NURSERY 2125 NE DAGGETT LANE BEND, OR 97701		PC	CONTINUING ED & PROF DEVELOPMENT FOR STAFF	10,000	
NEXT DOOR INC965 TUCKER ROAD HOOD RIVER, OR 97031		PC	SUMMER YOUTH EMPLOYMENT PROGRAM	10,000	
OLD MILL CENTER FOR CHILDREN AND FAMILIES INC 1650 SW 45TH PLACE CORVALLIS, OR 97333		PC	SUPPORT THE THERAPEUTIC CLASSROOMS STAFF TRAINING	10,000	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year OPHELIA'S PLACE PC SUPPORT THE TRAUMA 10,000 1577 PEARL STREET SUITE 100 INTERVENTION & BEHAVIORAL EUGENE, OR 97401 HEALTH PROGRAM OPTIONS FOR SOUTHERN OREGON PC MENTAL HEALTH COUNSELING 10,000

1215 SW G STREET GRANTS PASS, OR 97526		IN JOSEPHINE HIGH SCHOOLS	
OREGON 4-H FOUNDATION 119 BALLARD EXTENSION HALL OSU	PC	FIND YOUR SPARK, STEM PROGRAM	10,000

OREGON 4-H FOUNDATION	PC	FIND YOUR SPARK, STEM	
119 BALLARD EXTENSION HALL OSU		PROGRAM	
CORVALLIS, OR 97331			

119 BALLARD EXTENSION HALL OSU CORVALLIS, OR 97331	PROGRAM	10,
Total	 	714,598

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year **OREGON 4-H FOUNDATION** PC STEM PROGRAMS 10,000 1320 CAPITAL STREET NE SALEM, OR 97301 PC 9.201 OREGON 4-H FOUNDATION STEM PROGRAM W/ CURRY

119 BALLARD EXTENSION HALL CORVALLIS CORVALLIS, OR 97333			WATERSHED EDUCATION PROGRAM	3,201
OREGON CASCADE WEST SENIOR SERVICES FOUNDATION 1400 QUEEN AVENUE SE SUITE206 ALBANY, OR 97322	F	_	MEALS ON WHEELS FOR LINN AND BENTON	20,000

Total . 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year OREGON COAST COMMUNITY ACTION PC RESPITE CARE PROJECT 10,000 1855 THOMAS AVE COOS BAY, OR 97420 OREGON MATHCOUNTS FOUNDATION PC SUPPORT ANNUAL PROGRAM 4,800 ,000

70 SW CENTURY DR STE 100 PMB 353 BEND, OR 97702		EXPENSES	
OREGON MUSEUM OF SCIENCE & INDUSTRY 1945 SE WATER AVE PORTLAND, OR 97214	PC	PROVIDE PROGRAMMING TO RURAL YOUTH USING STEM	10,

За

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

a Paid during the year

If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Foundation status of recipient

Purpose of grant or contribution

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

PARENTING NOW86 CENTENNIAL LOOP EUGENE, OR 97401	PC	SUPPORT FOR THE CHILDREN'S PROGRAM	10,000
PEARL BUCK CENTER INC 3690 WEST 1ST AVENUE EUGENE, OR 97402	PC	HEALTHY MEALS PROJECT	10,000
PORT ORFORD-LANGLOIS SCHOOL	GOV	IMPLEMENT A FAMILY &	10,000

Total	 		714,598
PORT ORFORD-LANGLOIS SCHOOL DISTRICT 2CJ 45525 HWY 101 SIXES, OR 97476	GOV	IMPLEMENT A FAMILY & STUDENT ENGAGEMENT ADVOCACY PROGRAM	10,000
EUGENE, OK 97402			<u> </u>

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year **OUILTS FROM CARING HANDS** PC MATERIALS TO MAKE 15 OUILTS 1,000 922 NW CIRCLE BLVD SUITE 160 CORVALLIS, OR 97330 10.000 REACHING OUR COMMUNITY FOOD PC FOR FOOD PURCHASE

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

PANTRY 564 SW FOUNDRY STREET GRANTS PASS, OR 97526			,
RIDEABLE85230 HICKS LANE	PC	INSTRUCTOR SALARY FOR A	10,000

GRANTS PASS, OR 97526			
RIDEABLE85230 HICKS LANE EUGENE, OR 97405	PC	INSTRUCTOR SALARY FOR A HIPPO-THERAPY PROGRAM	1

RIDEABLE85230 HICKS LANE EUGENE, OR 97405	PC	INSTRUCTOR SALARY FOR A HIPPO-THERAPY PROGRAM	10,0
Total	 		714,598

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ROSEBURG INDIAN BOOSTERS CLUB PC 43 LAPTOPS & MOBILE CART 9.850 PO BOX 2084 ROSEBURG, OR 97471 D.C. 10 000

600 MISSION STREET SE SALEM, OR 97302	PC	PROJECT FOR 4TH GRADERS	10,000
SALEM LEADERSHIP FOUNDATION 1300 BROADWAY ST NE SUITE 409 SALEM, OR 97301	PC	SUPPORT THE COMMUNITY PARTNERSHIP TEAMS	10,000

SALEM, OR 97302			
SALEM LEADERSHIP FOUNDATION 1300 BROADWAY ST NE SUITE 409 SALEM, OR 97301	PC	SUPPORT THE COMMUNITY PARTNERSHIP TEAMS	10,0

SALEM LEADERSHIP FOUNDATION 1300 BROADWAY ST NE SUITE 409 SALEM, OR 97301		PC	SUPPORT THE COMMUNITY PARTNERSHIP TEAMS	10,0
---	--	----	--	------

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SCIO PUBLIC LIBRARY GOV FURNISHINGS AND LIBRARY 9,875 38957 NW 1ST AVE MATERIALS SCIO, OR 97374 SIUSLAW WATERSHED COUNCIL INC PC TEACH THE TEACHERS 8,977 000

SOUTH BENTON COMMUNITY PC APT IN THE PARK	10868 E MAPLETON ROAD MAPLETON, OR 97453		WATERSHED ECOLOGY	
ENHANCEMENT 25184 WEBSTER AVE		PC	ART IN THE PARK	10,000

SOUTH BENTON COMMUNITY	PC	ART IN THE PARK	
ENHANCEMENT			
25184 WEBSTER AVE			
MONROE, OR 97456			

За

SOUTH BENTON COMMUNITY	PC	ART IN THE PARK	10,0
ENHANCEMENT			
25184 WEBSTER AVE			
MONROE, OR 97456			

25184 WEBSTER AVE		
MONROE, OR 97456		

		711 500
MONROE, OR 97456		

HOMNOL, ON 37430		
Total	 	714.598

	1	
Total		 714,598

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SOUTHEAST KEIZER COMMUNITY PC STORAGE SHED AND MISC 5.000 CENTER PROGRAM SUPPLIES 1045 CANDLEWOOD DRIVE NE KEIZER, OR 97303

ST FRANCIS SHELTER1820 BERRY ST SE SALEM, OR 97302	PC	CASE MANAGEMENT	10,000
STAR OF HOPE ACTIVITIES CENTER 657 NEWMARK AVE	PC	PURCHASE & PLACE BOTTLE/CAN RECEPTACLES	9,985

STAR OF HOPE ACTIVITIES CENTER 657 NEWMARK AVE COOS BAY, OR 97420	PC	PURCHASE & PLACE BOTTLE/CAN RECEPTACLES	

Total . 714,598 За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year STAYTON FRIENDS OF THE LIBRARY PC PURCHASE LIBRARY MATERIALS 10,000 515 N 1ST AVENUE STAYTON, OR 97383

SWEET HOME PUBLIC LIBRARY 1101 13TH AVENUE SWEET HOME, OR 97386	GOV	PURCHASE FURNITURE AND TECHNOLOGY	
THE DALLES-WASCO COUNTY LIBRARY	PC	PURCHASE STEM TECH &	

SWEET HOME, OR 97386			
THE DALLES-WASCO COUNTY LIBRARY FOUNDATION 722 COURT ST	PC	PURCHASE STEM TECH & EQUIPMENT	

THE DALLES-WASCO COUNTY LIBRARY	PC	PURCHASE STEM TECH &	
FOUNDATION		EQUIPMENT	
722 COURT ST			
THE DALLES, OR 97058			

Total . . За

THE DALLES-WASCO COUNTY LIBRARY	PC	PURCHASE STEM TECH &	10,000
FOUNDATION		EQUIPMENT	
722 COURT ST			
THE DALLES, OR 97058			

9,908

714,598

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year TRILLIUM FAMILY SERVICES PC **EQUINE ASSISTED THERAPY** 10,000 4455 NE HWY 20 CORVALLIS, OR 97330 000

UNION GOSPEL MISSION ASSOCIATION OF SALEM 745 COMMERCIAL STREET NE SALEM, OR 97301	PC	REVAMP THE LEARNING CENTER COMPUTERS	10,000
WOMEN'S CRISIS SUPPORT TEAM	PC	SUPPORT THE FAMILY	10.000

SALEM,OR 97301			
WOMEN'S CRISIS SUPPORT TEAM 560A NE F STREET 430 GRANTS PASS OR 97526	PC	SUPPORT THE FAMILY RESOURCE ADVOCATE POSITION	

За

SALEM, OR 97301			
WOMEN'S CRISIS SUPPORT TEAM 560A NE F STREET 430	F	 SUPPORT THE FAMILY RESOURCE ADVOCATE POSITION	

WOMEN'S CRISIS SUPPORT TEAM 560A NE F STREET 430	PC	SUPPORT THE FAMILY RESOURCE ADVOCATE POSITION	10,0
GRANTS PASS, OR 97526			

WOMEN'S CRISIS SUPPORT TEAM 560A NE F STREET 430	PC	SUPPORT THE FAMILY RESOURCE ADVOCATE POSITION	10,0
GRANTS PASS, OR 97526			

Total		•	714 598
560A NE F STREET 430 GRANTS PASS, OR 97526		RESOURCE ADVOCATE POSITION	,

GRANTS PASS, OR 97526		
Total	 	 714,598

·	
Total	 714,598

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

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

a Paid during the year			
WORDCRAFTERS IN EUGENE 438 CHARNELTON STREET SUITE 102 EUGENE, OR 97401	PC	WRITERS IN THE SCHOOLS PROGRAM	10,000
YOUTH SYMPHONY OF SOUTHERN	 PC	SUPPORT THE 30TH CONCERT	5,000

YOUTH SYMPHONY OF SOUTHERN	PC	SUPPORT THE 30TH CONCERT	
OREGON		SEASON SPECIAL INITIATIVES	
925 WEST 8TH STREET			
MEDFORD, OR 97501			

		_	
925 WEST 8TH STREET MEDFORD, OR 97501			
OKEGON	l	DEVIOUS DI ECTUE TIMITITATIONE	

За

Total		_	714 500
MEDFORD, OR 97501			
925 WEST 8TH STREET			i

MEDFORD, OR 97501		1
Total	 	714,598

efile GRAPHIC print - DO NOT P	ROCESS As	Filed Data -		DI	LN: 93491028002559	
TY 2017 Accounting Fees Schedule						
	Name: BR	AEMAR CH/	ARITABLE TRU	ST		
	EIN: 93	3-6272124				
Accounting Fees Schedule	Accounting Fees Schedule					
Category	Amount	t Net	t Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	

5,700

5,700

TAX RETURN PREPARATION FEES

ΓΥ	2017	Investments	Corporate	Bonds	Schedule

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93491028002559

End of Year Fair Market Value

598,690

1,969,461

982,853

585,877

1,858,683

Name: BRAEMAR CHARITABLE TRUST

EIN: 93-6272124

VANGUARD ST INF-PROT SEC. INDEX FUND

VANGUARD TOTAL BOND FUND

Investments Corporate Bonds Schedule				
Name of Bond	End of Year Book Value			
BLACKROCK	2,070,000			
PIMCO ALL ASSET	1,000,000			

efile GRAPHIC print - DO NOT	PROCESS	As Filed Data -	
TV 2017 Investments	C	- Ct	J I .

14 2017 Investments Corporate Stock Schedule

Name: BRAEMAR CHARITABLE TRUST

DLN: 93491028002559

EIN: 93-6272124		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
CHAMPLAIN	700,000	819,018
DFA GLOBAL REAL ESTATE	1,000,000	1,000,094
DODGE & COX INTL	1,300,000	1,245,122
JOHN HANCOCK GLOBAL AE	1,100,000	1,115,313
JOHCM INTL FUND	680,930	1,325,904
SCHWAB SMALL CAP SWSSX	450,000	528,348
VANGUARD INDEX 500	3,190,557	4,360,679
VANGUARD TTL INTL VTIAX	2,224,177	2,237,256
WESTWOOD EMG MKT	643,721	675,947
WHG INC OPPTY FUND	679,848	881,981

DLN: 93491028002559

Name: BRAEMAR CHARITABLE TRUST

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

FIN: 93-6272124

25 02/2121					
Category/ Item	Cost/Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value	
LAND	105,000	0	105,000	116,100	

enie GRAPHIC PHIIL - DO NOT PROCESS	AS FIIEU Data -	DLN: 93491026002559
TY 2017 Investments - Other	Schodulo	
11 2017 Investments - Other	Scriedule	
	DDA FAAAD CUADTA DUE TOUK	
Name:	BRAEMAR CHARITABLE TRUS	ol .
FTN.	93-6272124	

DI N. 03/01030003EE0

ofile CRAPHIC print - DO NOT PROCESS | As Filed Data -

E1N. 93-02/212	.4		
Investments Other Schedule 2			
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
LIFE INSURANCE POLICIES	AT COST	322,706	390,753

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491028002559	
TY 2017 Other Expenses Schedule					
Name:	BRAEMAR CHAR	RITABLE TRUST			
EIN:	93-6272124				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
OR DEPT OF JUSTICE FEE	2,222	0		2,222	
INSURANCE PREMIUMS	162,379	162,379		0	
RENT, P O BOX	140	0		140	

135

5,126

5,126

BANK CHARGES

PROPERTY MAINTENANCE

135

Category	Amount	Net Investment	Adjusted Net	Disbursements			
EIN : 93-6272124							
Name: BRAEMAR CHARITABLE TRUST							
TY 2017 Other Professional Fees Schedule							
efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLI	N: 93491028002559			

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

38,570

38,570

PORTFOLIO MANAGEMENT FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DL	N: 93491028002559			
TY 2017 Taxes Schedule							
Name: BRAEMAR CHARITABLE TRUST							
EIN: 93-6272124							
	J			1			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
PROPERTY TAXES	1,925	1,925		0			

24,220

FEDERAL TAXES