Form **990-PF**

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation ► Do not enter social security numbers on this form as it may be made public.

■ Go to www.irs.gov/Form990PF for instructions and the latest information. Department of the Treasury Internal Revenue Service For calendar year 2018 or tax year beginning and ending

•	Nar	ne of	foundation			, and on any	A Employer identificatio	n number	
	,,,,,		Touridation						
	M	ER.	CHANT FAMILY FOUNDATION				45-2496984	1	
	Nun	ber a	nd street (or P O box number if mall is not delivered to street	B Telephone number					
	7	28	5 S.W. ASCOT COURT		(503) 297-	-4317			
			own, state or province, country, and ZIP or foreign p	ostal code			C If exemption application is pending, check here		
	P	OR'	TLAND, OR 97225				_		
	G C	heck	all that apply: Initial return	Initial	return of a for	mer public charity	D 1. Foreign organization	s, check here	
			Final return	Amen	ded return		2 Foreign organizations m	eeting the 85% test	
			Address change		change		2. Foreign organizations m check here and attach o	omputation	
	H C	_	type of organization: X Section 501(c)(3) ex			$\mathcal{O}_{\mathcal{U}}$	E If private foundation st		
	느			Other taxable p			under section 507(b)(1)(A), check here	
				ng method:	_A_ Cash	Accrual	F If the foundation is in a		
			Part II, col. (c), line 16) Ot Ot Ot	her (specify) _	on cach hacie	1	under section 507(b)(1)(B), check here	
		rt I					(a) Advisated not	(d) Disbursements	
	Pa	rti	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Reven expenses ((b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)	
		1	Contributions, gifts, grants, etc., received		,133.	.	N/A	(Cash Gasis Only)	
		2	Check (if the foundation is not required to attach Sch B		7 = 3 3 1			<u> </u>	
_		3	Interest on savings and temporary cash Investments	-	93.	93	•	STATEMENT 1	
3,		4	Dividends and interest from securities	3	948.	3,948		STATEMENT 2	
11		5a	Gross rents		,				
- 1			Net rental income or (loss)						
5	41	6a	Net gain or (loss) from sale of assets not on line 10						
7	evenue	b							
AUG 0 1 2019	eve	7	Capital gain net income (from Part IVPPECEIVE			0	•		
	æ	8	Net short-term capital pain			· · · · · · · · · · · · · · · · · · ·			
		9	Income modifications Gross sales less returns JUN 12 201	SO					
		10a	Gross sales less returns and allowances JUN 12 2011	اذا				<u> </u>	
			Less Cost of goods sold	<u> </u>					
Z			Gross profit or (loss) OGDEN, U						
Z			Other income Total Add lines 1 through 11	6.3	7,174.	4,041		<u> </u>	
SCANNED		13	Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc	0.	0.	4,041		0.	
(L)			Other employee salaries and wages						
			Pension plans, employee benefits				·· 	 	
	ses		Legal fees						
	ens		Accounting fees STMT 3	1	.,175.	0	•	1,175.	
	Exp	C	Other professional fees						
	ķ	17	Interest						
	rat	18	Taxes STMT 4		133.	0_	•	0.	
	nis	19	Depreciation and depletion					• 1	
	dmi	20	Occupancy						
	Ϋ́	21	Travel, conferences, and meetings	·	398.	0	•	398.	
	au		Printing and publications		1.61			1.71	
	ing		Other expenses STMT 5		161.	0	-	161.	
	erat	24	Total operating and administrative	1	067	0		1 724	
	Operating and Administrative Expen	25	expenses. Add lines 13 through 23	3 (,867.	<u> </u>	•	1,734.	
			Contributions, gifts, grants paid Total expenses and disbursements.	30	,,000.	······		30,000.	
		20	Add lines 24 and 25	3.2	2,667.	0		32,534.	
	—	27	Subtract line 26 from line 12:		,,,,,,			1 , , , ,	
			Excess of revenue over expenses and disbursements	30	,507.				
			Net investment income (if negative, enter -0-)			4,041	•		
			Adjusted net income (if negative, enter -0-)			<u> </u>	N/A		

1

Form **990-PF** (2018)

Form 9	90-PF (2018) MERCHANT FAMILY FOUNDATI			496984 Page 2
Parl	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of y	
	Cotolini should be for end-or-year announts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1		142 066	104 000	104 066
2	· · · · · · · · · · · · · · · · · · ·	143,966.	104,966.	104,966.
3	Accounts receivable >			· · · · · · · · · · · · · · · · · · ·
١.	Less: allowance for doubtful accounts			
4				
_ ا	Less: allowance for doubtful accounts			
5				
6	,,			
١,	disqualified persons			
7				
	Less; allowance for doubtful accounts			
Assets	Inventories for sale or use			
ASS 3	Prepaid expenses and deferred charges		<u> </u>	
1 10	a Investments - U.S. and state government obligations b Investments - corporate stock STMT 6	162,600.	232,107.	367,889.
		102,000.	232,107.	307,007.
	c Investments - corporate bonds			
111	Investments - land, buildings, and equipment basis			
,,	Less accumulated depreciation			
12	F			
13	<u> </u>			
14				
45	Less accumulated depreciation	-		
15	`		_	
16	,	306,566.	337,073.	472,855.
17	instructions. Also, see page 1, item I)	300,300.	337,073.	4/2,033.
	Accounts payable and accrued expenses			
18	· · · · ·			
Liabilities 15 05 17	 			
를 20				
함 21	Mortgages and other notes payable Other liabilities (describe ▶)			
22	Other habilities (describe			
23	Total liabilities (add lines 17 through 22)	0.	0.	
- - -	Foundations that follow SFAS 117, check here X			
~	and complete lines 24 through 26, and lines 30 and 31.			
% 24	· · · · · · · · · · · · · · · · · · ·	306,566.	337,073.	
<u>E</u> 25		, , , , , , , , , , , , , , , , , , ,		
E 26	i i i i i i i i i i i i i i i i i i i			
힏	Foundations that do not follow SFAS 117, check here			
로	and complete lines 27 through 31.			
ច្ចំ 27	· · ·			
햻 28				
Ÿ 29	Retained earnings, accumulated income, endowment, or other funds			
Net Assets or Fund Balances		306,566.	337,073.	
_				-
31	Total liabilities and net assets/fund balances	306,566.	337,073.	
Part	Analysis of Changes in Net Assets or Fund Ba	lances		
1 Tota	al net assets or fund balances at beginning of year - Part II, column (a), line 3	0		
•	st agree with end-of-year figure reported on prior year's return)		1	306,566.
	er amount from Part I, line 27a		2	30,507.
3 Oth	er increases not included in line 2 (itemize)		3	0.

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
•	(must agree with end-of-year figure reported on prior year's return)	1	306,566.
2	Enter amount from Part I, line 27a	2	30,507.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	337,073.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	337,073.

_		HANT 1	FAMILY FOU	NDATIO	N				4	5-249	6984	Page 3
	Part IV Capital Gain's a					Y /E \	Jan. a.	aniluad I				
	(a) List and describe the 2-story brick ward		property sold (for examenment stock, 200 sha		te,	(0) P D	- Purc - Don	cquired hase ation	(c) Date acquired (mo., day, yr.)		(d) Da (mo., d	
1:												
_	NON_	ΙE				L						
_	C				·	_						
_	<u> </u>					-						
_	<u>e </u>	(f) Donr	eciation allowed	(a) Cos	st or other basis	Щ			(h) G	aın or (loss		
_	(e) Gross sales price		allowable)		expense of sale					s (f) minus (
_	8											
_	<u>b</u>											
_	c			<u> </u>								
_	e											
_	Complete only for assets showing	gain in colui	mn (h) and owned by	the foundation	on 12/31/69.			(1) Gains (C	ol. (h) gain	minus	
(i) FMV as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col. (i) over col. (j), if any						(k), but r	not less that (from col. (n -0-) or				
	a											
_	b											
	c _									·		
_	d											
_	e <u> </u>							г				
2	Capital gain net income or (net cap	ital loss)	If gain, also enter floss), enter -0			}	2					
3	Net short-term capital gain or (loss if gain, also enter in Part I, line 8, co		n sections 1222(5) an	nd (6):		}	2					
П	If (loss), enter -0- in Part I, line 8 Part V Qualification Un	der Sect	ion 4940(e) for	Reduced	Tax on Net	Inv	estn	nent Inc	ome			
_	or optional use by domestic private f											
١,	or optional use by domestic private i	ioaniaations c	abject to the section -	1010(u) tax on	THE WAY COUNTY AND THE WAY	001110	··,					
lf	section 4940(d)(2) applies, leave this	s part blank.										
	as the foundation liable for the section				,	od?					Yes	X No
<u>"</u>	"Yes," the foundation doesn't qualify Enter the appropriate amount in ea					ntries	:					
÷	(a)	ich coldinir k	(b)	iloti detiono de	lore making any e	(c)				 -	(d)	
	Base period years Calendar year (or tax year beginning	_{0 in}) A	رن) djusted qualifying dis.	tributions	Net value of no	ncha	, rıtable:	use assets		Dıstrıb (col. (b) dıv	utión ratio ided by col.	(c))
_	2017	,,	2	0,336.				2,282		(49325
_	2016			8,207.			30	3,660	•		.0	<u>59959</u>
Τ	2015		2	0,458.			33	3,557	•			61333
	2014			7,740.				8,369				57528
_	2013		1	6,359.			32	6,265	·		.0	50140
2	Total of line 1, column (d)								2		. 2	78285
3	Average distribution ratio for the 5-	•		on line 2 by 5 (O, or by the numb	er of y	years				_	
	the foundation has been in existence	ce if less than	5 years						3	-	.0	<u>55657</u>
4	Enter the net value of noncharitable	e-use assets	or 2018 from Part X,	line 5					4		502	<u>,730.</u>
5	Multiply line 4 by line 3								5		27	<u>,980.</u>
6	Enter 1% of net investment income	e (1% of Part	I, line 27b)						6			40.
7	Add lines 5 and 6								7		28	,020.
8	Enter qualifying distributions from	Part XII, line	4						8_		32	,534.
	If line 8 is equal to or greater than I See the Part VI instructions.	ine 7, check t	he box in Part VI, line	1b, and comp	lete that part usin	g a 1	% tax ı	rate.				

	<u> </u>	
Form 990-PF (2018) MERCHANT FAMILY FOUNDA	ATTON 45-2	496984 Page 4
	(Section 4940(a), 4940(b), 4940(e), or 4948 - s	
1a Exempt operating foundations described in section 4940(d)(2), check her		Too mondonono,
	copy of letter if necessary-see instructions)	
b Domestic foundations that meet the section 4940(e) requirements in Part		40.
of Part I, line 27b	t v, check here	
c All other domestic foundations enter 2% of line 27b. Exempt foreign orga	anizations, enter 4% of Part I, line 12, col. (b).	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable fo		0.
3 Add lines 1 and 2	3	40.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable for	oundations only; others, enter -0-)	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or le		40.
6 Credits/Payments:		
a 2018 estimated tax payments and 2017 overpayment credited to 2018	6a O.	
b Exempt foreign organizations - tax withheld at source	6b 0.	
c Tax paid with application for extension of time to file (Form 8868)	6c 0.	
d Backup withholding erroneously withheld	6d 0.	
7 Total credits and payments. Add lines 6a through 6d	7	0.
8 Enter any penalty for underpayment of estimated tax. Check here if	f Form 2220 is attached 8	0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount ow	ved ▶ 9	40.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the ar	mount overpaid ▶ 10	
11 Enter the amount of line 10 to be: Credited to 2019 estimated tax	Refunded ▶ 11	
Part VII-A Statements Regarding Activities		
1a During the tax year, did the foundation attempt to influence any national,	state, or local legislation or did it participate or intervene in	Yes No
any political campaign?		1a X
b Did it spend more than \$100 during the year (either directly or indirectly)	for political purposes? See the instructions for the definition	1b X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the acti	ivities and copies of any materials published or	
distributed by the foundation in connection with the activities.		
c Did the foundation file Form 1120-POL for this year?		1c X
d Enter the amount (if any) of tax on political expenditures (section 4955) in		
(1) On the foundation. \blacktriangleright \$ 0. (2) On fou		
e Enter the reimbursement (if any) paid by the foundation during the year fo	or political expenditure tax imposed on foundation	
managers. ▶ \$		
2 Has the foundation engaged in any activities that have not previously beer	n reported to the IRS?	2 X
If "Yes," attach a detailed description of the activities.		
3 Has the foundation made any changes, not previously reported to the IRS		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of	-	3 X 4a X
4a Did the foundation have unrelated business gross income of \$1,000 or m		
b If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
5 Was there a liquidation, termination, dissolution, or substantial contractio	in 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:

8a Enter the states to which the foundation reports or with which it is registered. See instructions.

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

• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law

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

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)

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

year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV

• By language in the governing instrument, or

remain in the governing instrument?

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar 9 10

Form **990-PF** (2018)

X

8b

OR

Pa	art 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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► TOM MERCHANT Telephone no. ► (503)	297	-43	17
•	Located at ▶ 7285 S.W. ASCOT COURT, PORTLAND, OR ZIP+4 ▶97	225		
15	Section 4947(a)(1) nonexempt charitable trusts filling Form 990-PF in lieu of Form 1041 - check here			
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			1
	foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	a During the year, did the foundation (either directly or indirectly);			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			- 1
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?]
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			-
	(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			1
	termination of government service, if terminating within 90 days.)			1
t	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			H
c	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		l	
	before the first day of the tax year beginning in 2018?	1c		X
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	a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2018? Yes X No			1
	If "Yes," list the years 🛌 , , , , ,			i
t	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
0	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			- 1
	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
38				l
	during the year?			
t	b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after			1
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			- }
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2018.) N/A	3b		4
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
t	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			_ _1
	had not been removed from leopardy before the first day of the tax year beginning in 2018?	ı 4b '		A

Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be I	Required (contin	ued)		·	
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	n 4945(e))?	Ye	es 🗶 No			
(2) Influence the outcome of any specific public election (see section 4955); of						
any voter registration drive?		· · · · · · · · · · · · · · · · · · ·	es X No			[
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	es 🗶 No			<u> </u>
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section					
4945(d)(4)(A)? See instructions		Ye	es 🗶 No			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f] ,
the prevention of cruelty to children or animals?		Ye	es 🗶 No			'
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described i	in Regulations				<u> </u>
section 53.4945 or in a current notice regarding disaster assistance? See instr	uctions		N/A	5b		
Organizations relying on a current notice regarding disaster assistance, check	here		▶□□			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f						
expenditure responsibility for the grant?	N	I/A Ye	es L 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	es 🗶 No 📙			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		L	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	es X No			
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	61,000,000 in remuneration of					'
excess parachute payment(s) during the year?	······································		es X No			
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	ınagers, Highly	/			
Paid Employees, and Contractors						
1 List all officers, directors, trustees, and foundation managers and t	(b) Title, and average	(c) Compensation	(d) Contributions to	Т,	o) Eyr	ence
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	ad	count	ense , other nces
TOM MERCHANT	PRESIDENT					
7285 S.W. ASCOT COURT						
PORTLAND, OR 97225	2.00	0.	0.	.		0.
LAURA COON	DIRECTOR			1	•	
7285 S.W. ASCOT COURT						
PORTLAND, OR 97225	1.00	0.	0.	.		0.
LISA HOEFER	DIRECTOR					
7285 S.W. ASCOT COURT						
PORTLAND, OR 97225	1.00	0.	0 ,	,		-0.
	-			1	•	-
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d\a\	т .		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	a	e) Exp count allowa	ense , other nces
NONE	·		00111000011	1		
				\perp		
						-
Total number of other employees paid over \$50,000			>			0

0 • Form **990-PF** (2018)

Total. Add lines 1 through 3

All other program-related investments. See instructions.

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 418,093. a Average monthly fair market value of securities 1a 92,293. b Average of monthly cash balances 1b c Fair market value of all other assets 1c 510,386. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 2 2 510. 386. Subtract line 2 from line 1d 3 7.656. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 502,730. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 25,137. 6 Minimum investment return. Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations, check here
and do not complete this part.) 25,137. Minimum investment return from Part X, line 6 40. 2a Tax on investment income for 2018 from Part VI, line 5 2a 2b b Income tax for 2018. (This does not include the tax from Part VI.) 2c Add lines 2a and 2b 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions 25,097 5 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 32,534. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: 3 a Suitability test (prior IRS approval required) 3a **b** Cash distribution test (attach the required schedule) 3ь 32,534 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 5 32*.*494. 6 Adjusted qualifying distributions. Subtract line 5 from 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 the section 4940(e) reduction of tax in those years.

Form **990-PF** (2018)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI,	· · · · · · · · · · · · · · · · · · ·			
line 7				25,097.
2 Undistributed Income, if any, as of the end of 2018			0	
a Enter amount for 2017 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013 66.				
b From 2014 2,374.				
c From 2015 3,838.				
dFrom 2016 3,086.				
e From 2017				
f Total of lines 3a through e	9,364.			
4 Qualifying distributions for 2018 from				
Part XII, line 4: ►\$ 32,534.				
a Applied to 2017, but not more than line 2a			0.	
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	0.			25,097.
d Applied to 2018 distributable amount e Remaining amount distributed out of corpus	7,437.			23,037.
5 Excess distributions carryover applied to 2018	7,437.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))	<u> </u>			
6 Enter the net total of each column as indicated below:				
8 Corpus Add lines 3f, 4c, and 4e Subtract line 5	16,801.	-		
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of 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 2017. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract				
lines 4d and 5 from line 1. This amount must				,
be distributed in 2019				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2013				
not applied on line 5 or line 7	66.			
9 Excess distributions carryover to 2019.			·	
Subtract lines 7 and 8 from line 6a	16,735.			
IO Analysis of line 9.				
a Excess from 2014 2,374.				
b Excess from 2015 3,838.				
c Excess from 2016 3,086.				
d Excess from 2017				
e Excess from 2018 7, 437.				Form QQQ_DE (2018)

· · · · · · · · · · · · · · · · · · ·	T FAMILY FO				96984 Page 10
Part XIV Private Operating F			A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	t it is a private operating			
foundation, and the ruling is effective fo	or 2018, enter the date of	the ruling	.		
b Check box to indicate whether the foun	dation is a private operatii	ng foundation described i	n section	4942(j)(3) or49	942(j)(5 <u>)</u>
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 20·15	(e) Total
investment return from Part X for				/	· · · · · · · · · · · · · · · · · · ·
each year listed	,				
b 85% of line 2a				 / 	
				 /	<u> </u>
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				1	
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				<u> </u>	
c "Support" alternative test - enter:	}	/			
(1) Total support other than gross	/	ľ			
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)	<i></i>	-		 	
(3) Largest amount of support from	/				
an exempt organization			_		
(4) Gross investment income	/				<u></u>
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during	the year-see insti	ructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh	no have contributed more	than 2% of the total contr	ributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed r			•		•
TOM MERCHANT					
b List any managers of the foundation wh	no own 10% or more of th	e stock of a cornoration (or an equally large portu	on of the ownership of a n	artnership or
other entity) of which the foundation ha			or all equally large porti	on or the ownership or a p	artifership of
NONE		-			
					
2 Information Regarding Contribut					
Check here X if the foundation of					iests for tunds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	iber or email address of th	ne person to whom applic	ations should be addres	sed:	
				<u>. </u>	
b The form in which applications should l	be submitted and informa	tion and materials they sh	ould include:		
c Any submission deadlines;					
• Any Submission deadines.					
d Any restrictions or limitations on award	e cuch as hy geographic	al areas, charitable fields	kinds of institutions, or i	other factors	
u Any restrictions of littlications of award	s, such as by geographic	ai ai cas, ciiai ilavic iicius,	กลเนอ () สเอสเนน()(เอ, ())	onioi lactors,	

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year STUDENT SCHOLARSHIPS CLACKAMAS COMMUNITY COLLEGE Ьc FOUNDATION 19600 MOLALLA AVENUE OREGON CITY OR 97045 10,000. CYSTIC FIBROSIS FOUNDATION ÞС GENERAL SUPPORT 4550 MONTGOMERY AVENUE, SUITE 1100N 1,000. BETHESDA, MD 20814 STUDENT SCHOLARSHIPS GONZAGA UNIVERSITY - FBO KENDSY ÞС CARMICHAEL 502 E. BOONE AVENUE SPOKANE, WA 99258 1,000. MEDICAL TEAMS INTERNATIONAL ÞС DENTAL PROGRAMS P.O. BOX 10 PORTLAND, OR 97207 1,000. PROVIDENCE PORTLAND MEDICAL ÞС GENERAL SUPPORT FOUNDATION 4805 N.E. GLISAN STREET 500 PORTLAND, OR 97213 SEE CONTINUATION SHEET(S) 30,800. ▶ 3a Total **b** Approved for future payment NONE

▶ 3b

Total

Part XVI-A	Anal	ysis of	Income-Producing	Activities

	Harolatad	hucinace income	I c 1 4 12		
Enter gross amounts unless otherwise indicated.	(a) Business	business income (b) Amount	Excluded I	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	7 in our	
å	-		 		
b	-		 		
<u> </u>	-		 		
			╁╌╌┼╌╾		
e	- }		 		
T	-		<u> </u>		
g Fees and contracts from government agencies			 		
2 Membership dues and assessments		· · · · · · · · · · · · · · · · · · ·	 		
3 Interest on savings and temporary cash	1		14	93.	
investments			14	3,948.	
4 Dividends and interest from securities	<u> </u>		1 + 4	3,340.	
5 Net rental income or (loss) from real estate:			 		
a Debt-financed property	-		 		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			<u> </u>		
7 Other investment income			 		
8 Gain or (loss) from sales of assets other					
than inventory			ļļ		····
9 Net income or (loss) from special events		 	ļļ		
10 Gross profit or (loss) from sales of inventory			ļ <u>i</u>		······
11 Other revenue:			1 1		
a	_		<u> </u>		
b					
c	_				
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		4,041.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	4,041.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accor	nolishment of E	xempt P	urposes	
Tare XVI-B Treatments in profit Activities	to the Accor	inplication en es	Kompt i		
Line No. Explain below how each activity for which inc			contribute	d importantly to the accomp	olishment of
the foundation's exempt purposes (other tha	n by providing fund	s for such purposes).			
					•
	· -				
			·		
					
	·				···
	-,				
					
. L					

45-2496984 Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

				g with any other organization	on described in sect	tion 501(c)		Yes	<u>No</u>
				to political organizations?					!
	from the reporting founda	ition to a noncharital	ole exempt or	ganization of:				-	· • - !
(1) Cash							1a(1)		$\frac{x}{x}$
(2) Other							1a(2)		
b Other tran		hla avamnt araanizat					15/11	-	X
• •	of assets to a noncharital nases of assets from a noi	, •					1b(1) 1b(2)		X
	il of facilities, equipment,		ryanization				1b(3)		X
• •	bursement arrangements	or other assets					1b(4)		X
٠,	s or loan guarantees						1b(5)		X
	rmance of services or me	mbership or fundrais	ina solicitatio	ns			1b(G)		X
	f facilities, equipment, ma						1c		X
_		-		dulc. Column (b) should alv	ways show the fair i	market value of the god	ds, other asse	cts,	
	-			ed less than fair market valu					
column (d	l) the value of the goods, (
(a)Line no	(b) Amount involved	(c) Name of		exempt organization	(d) Description	n of transfers, transactions	, and sharing arra	angement	ts
			N/A			 -			
			 						
<u> </u>					-				
		· · · ·							
							· · · · · · · · · · · · · · · · · · ·		
									
						<u>-</u>			
-						· · ·			
								_	
2a Is the four	ndation directly or indirect	ly affiliated with, or r	elated to, one	or more tax-exempt organi	zations described		· - · · · · · · · · · · · · · · · · · ·	-	
	501(c) (other than section	-					Yes	X	No
b If "Yes," co	omplete the following sch	edule.							
	(a) Name of org	anızatıon		(b) Type of organization		(c) Description of relat	tionship		
	N/A								
Lucas		6b-4 1 b			atatamasta and to the	hoot of my knowledge			
ا ممط امم				g accompanying schedules and n taxpayer) is based on all inform			May the IRS d	scuss th	is
Sign Here	(2)	Monales	-	16-6-19	PRESI	D ED NT (III)	shown below?	See Inst	, I
	nature of officer or trustee	wu pm		Date	Title	DENT	L Yes		No
Joign	Print/Type preparer's na	ıme	Preparer's s		Date	Check if P	TIN		
	γ επιστήρο ριοραίοι ο πα		. τυματόι ο δι	<u> </u>		self- employed	,•		
Paid	YEE LEE MC	GEE	1	0	6/3/14	· · · · I	P01294	356	
Preparer	Firm's name ► GAR		CO. 1	LP	-/ -// /	Firm's EIN ▶			
Use Only	Tim Shamo > Citt				,				
•	Firm's address ▶ 80	8 S.W. TH	IRD AV	ENUE, SUITE	700		_		
		RTLAND, O				Phone no. (50	3) 222	-251	. 5
	·		<u> </u>				Form 990		

PartiXV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or Foundation Amount status of contribution Name and address (home or business) recipient SUNSET HIGH SCHOOL PTO ÞС AUDITORIUM FUND 13480 N.W. CORNELL ROAD 2,000. PORTLAND, OR 97229 UNIVERSITY OF ARIZONA - FBO ALAYNA ÞС STUDENT SCHOLARSHIPS THE UNIVERSITY OF ARIZONA 500. TUCSON, AZ 85721 WOMEN IN FLIGHT ANNUAL UNIVERSITY OF OREGON FOUNDATION ₽C 1720 E. 13TH AVENUE, SUITE 410 FUND 1,000. EUGENE, OR 97403 GENERAL SUPPORT VICTORY ACADEMY ÞС P.O. BOX 428 TUALATIN, OR 97062 12,300. WESTSIDE RIDERS ASSOCIATION GENERAL SUPPORT ÞС 6565 S.W. 207TH AVENUE 500. ALOHA, OR 97078 YOUNG LIFE ÞС GENERAL SUPPORT P.O. BOX 520 COLORADO SPRINGS, CO 80901 1,000. 17,300. Total from continuation sheets

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

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

2018

MERCHANT FAMILY FOUNDATION

Employer identification number

45-2496984

Organiz	ation type (check o	ne)
Filers of	:	Section:
Form 99	0 or 990-EZ	501(c)() (enter number) organization
		4947(a)(1) nonexempt charitable trust not treated as a private foundation
		527 political organization
Form 99	0-PF	X 501(c)(3) exempt private foundation
1		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
	nly a section 501(c)	s 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 Rule See instructions.
General	rule	
X	•	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special	Rules	
	sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from or, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1. Complete Parts I and II.
	year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the itions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the ty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address),
	year, contributions is checked, enter h purpose. Don't cor	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., implete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year
	-	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-FF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

MERCHANT FAMILY FOUNDATION

45-2496984

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	TOM MERCHANT 7285 S.W. ASCOT COURT PORTLAND, OR 97225	\$59,133.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Omnocash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization *

Employer identification number

MERCHANT FAMILY FOUNDATION

45-2496984

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Name of organization Employer identification number 45-2496984 MERCHANT FAMILY FOUNDATION |Part III | Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) > \$ Use duplicate copies of Part III if additional space is needed (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, and 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, and 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, and ZIP + 4

-				
D. 1	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	

(e) Transfer of gift

Relationship of transferor to transferee
· · · · · · · · · · · · · · · · · · ·

Relationship of transferor to transferee

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT 1
SOURCE	REVE			(B) VESTMENT COME	(C) ADJUSTED NET INCOME	
AMERITRADE COLUMBIA BANK				12. 81.		
TOTAL TO PART I, LI				93.		
FORM 990-PF	DIVIDEND	S AND INTER	EST FRO	M SECUR	ITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RE	(A) VENUE BOOKS	(B) NET INVES MENT INCO	
AMERITRADE	3,948		0.	3,948.	3,94	8.
TO PART I, LINE 4			0. 3,948.		3,94	8.
FORM 990-PF		ACCOUNTI	NG FEES			STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B NET IN MENT I	VEST-	(C) ADJUSTED NET INCOM	
ACCOUNTING FEES (GA & CO. LLP)	RY MCGEE	1,175.		0.		1,175.
TO FORM 990-PF, PG	1, LN 16B =	1,175.		0.		1,175.
FORM 990-PF		TAX	ES			STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS) VEST- NCOME		
IRS EXCISE TAXES	_	133.		0.		0.
TO FORM 990-PF, PG	1, LN 18	133.		0.		0.
	=		:	:		

FORM 990-PF	OTHER EXPENSES			STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM		
MISC EXPENSES ANNUAL REPORT FEE OREGON DEPARTMENT OF JUSTICE	30. 50.		0.			30. 50.
REGISTRATION FEE	81.		0.			81.
TO FORM 990-PF, PG 1, LN 23	161.		0.		1	61.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	6
DESCRIPTION			воо	K VALUE	FAIR MARKE VALUE	Т
APPLE INC FACEBOOK INC CELGENE CORP		_		101,783. 47,115. 13,702. 69,507.	220,8 65,5 6,4 75,0	45. 09.
AMAZON.COM INC				05,507.	, 5, 0	,,,