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2018

OMB No 1545-0052

## **Return of Private Foundation**

Form 990-PF

Department of the Treasury

Internal Revenue Service

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

For	caler	ndar year 2018, or tax year beginning 01-01-20	)18 , ar	nd ending 12-31-	2018	
TH	IE HARC	indation DLD & ARLENE SCHNITZER CARE			entification numbe	r
FC	UNDAT:	ION		93-1159884		
		d street (or P O box number if mail is not delivered to street address) SALMON NO 500	Room/suite	<b>B</b> Telephone nu	mber (see ınstructio	ns)
				(503) 973-0275	i	
		n, state or province, country, and ZIP or foreign postal code OR 97205		<b>C</b> If exemption	application is pendin	g, check here
<b>G</b> Cł	neck al	I that apply $\Box$ Initial return $\Box$ Initial return of a	former public charity	<b>D 1.</b> Foreign or	ganızatıons, check he	ere ⊾ 🔲
		Final return Amended return			ganizations meeting k here and attach co	
		Address change Name change			indation status was t	· -
_		rpe of organization    ✓ Section 501(c)(3) exempt private			n 507(b)(1)(A), chec	
		n 4947(a)(1) nonexempt charitable trust Uother taxable  ket value of all assets at end J Accounting method	Cash Accru	E If the foundation	ation is in a 60-mont	h taumanataan
of '	year (f	from Part II, col (c),  ▶\$ 55,232,932    Continuing method   Continuing method   Other (specify)     (Part I, column (d) must			n 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and			(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	610,000			
	2	Check ► ☐ If the foundation is <b>not</b> required to attach	010,000			
	3	Sch B	5,369	5,369		
	4	Dividends and interest from securities	208,656			
	5a	Gross rents	1,636,830			
	ь	Net rental income or (loss) 493,937				
<u>e</u>	6a	Net gain or (loss) from sale of assets not on line 10	124,804			
Revenue	b	Gross sales price for all assets on line 6a				
Re	7	28,886 Capital gain net income (from Part IV, line 2)		103,730		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	11	Gross profit or (loss) (attach schedule)	1,197,620	322,375		
	12	Total. Add lines 1 through 11	3,783,279	·		
	13	Compensation of officers, directors, trustees, etc	61,581	0		61,581
	14	Other employee salaries and wages	135,001	10,929		124,072
Sè	15	Pension plans, employee benefits	21,863	2,533		19,330
Expenses	16a	Legal fees (attach schedule)				
×	ь	Accounting fees (attach schedule)				
	c	Other professional fees (attach schedule)	20,000	0		20,000
atıv	17	Interest	286,249	·		C
Str	18	Taxes (attach schedule) (see instructions)	254,059			C
E	19	Depreciation (attach schedule) and depletion	433,181	121,471		
Ac	20 21	Occupancy	20,338	375		19,963
nd E	22	Printing and publications	17,046			13,637
e bi	23	Other expenses (attach schedule)	590,926			365,469
Operating and Administrative	24	Total operating and administrative expenses.				
ber		Add lines 13 through 23	1,840,244	499,359		624,052
0	25	Contributions, gifts, grants paid	3,535,356			2,171,806
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	5,375,600	499,359		2,795,858
	27	Subtract line 26 from line 12				
	a	Excess of revenue over expenses and disbursements	-1,592,321			
	ь	Net investment income (If negative, enter -0-)	1,352,321	987,750		
	c	Adjusted net income (If negative, enter -0-)		, ===		
For	Paper	work Reduction Act Notice, see instructions.	1	Cat No 11289>	( For	m <b>990-PF</b> (2018)

	3	Accounts receivable 171,835			
		Less allowance for doubtful accounts ▶	92,758	171,835	171,83
	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			
Assets	9	Prepaid expenses and deferred charges	51,827	46,760	46,76
As	10a	Investments—U S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)			

15.030.912

29.653.676

54,756,095

219,216

12,778

3,935,000

5,756,900

1,380,521

11.304.415

43,451,680

43,451,680

54,756,095

2

3

4

5

43,509,178

-1,592,321

1,534,823

43,451,680

43,451,680 Form **990-PF** (2018)

53,603,884

123,191

12,247

2,646,500

5,864,909

10.094.706

43,509,178

43,509,178

53,603,884

1,447,859

(چ

424,089

15.507.749

29.653.676

424,089

55,232,932

## Investments—land, buildings, and equipment basis ▶ \_\_\_ Less accumulated depreciation (attach schedule) -15,090,162 Investments—other (attach schedule) . . . . . . . . 27,831,058 Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) ▶ (چە 264,839 Other assets (describe > \_

Total assets (to be completed by all filers—see the

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 ▶

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

Capital stock, trust principal, or current funds . . . . . . . . . .

Retained earnings, accumulated income, endowment, or other funds

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

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

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

**Analysis of Changes in Net Assets or Fund Balances** 

. . . . . . . . . . .

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . . .

instructions Also, see page 1, item I)

Grants payable

Unrestricted

Temporarily restricted

Permanently restricted . .

and complete lines 27 through 31.

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

Add lines 1, 2, and 3 . . . . . . Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Deferred revenue .

Other liabilities (describe -

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

28

29

31 Part III

Liabilities

Fund Balances

ŏ

Assets 27

Net 30

2

3

(a) List and describe	the kind(s) of property sold (e g , rehouse, or common stock, 200 shs	real estate,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1aSee Additional Data Table					
b					
С					
d					
e					
(e) Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain c	h) or (loss) o) minus (g)
a See Additional Data Table	2				
b					
C					
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69		[1]
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	<b>(k)</b> s of col (ı) l (j), ıf any	col (k), but not	h) gain minus less than -0-) <b>or</b> om col (h))
a See Additional Data Table	1				
b					
С					
d					
e					
· -	or (net capital loss)  ain or (loss) as defined in sections to to I, line 8, column (c) (see instructions).	. ,	ı	3	103,730
Part V Qualification U	nder Section 4940(e) for Re	educed Tax on Net	Investment In	come	
	rivate foundations subject to the sec				
If section 4940(d)(2) applies, le	-	ecion is ro(a) can on in		,	
	e section 4942 tax on the distributa t qualify under section 4940(e) Do			7	es 🗹 No
	ount in each column for each year,	see instructions before	making any entrie		
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab		<b>(d)</b> Distribution rat (col (b) divided by c	
2017	2,855,947		45,824,325		0 062324
2016	3,751,032		42,615,036		0 088021
2015	3,820,631		42,880,019		0 089100
2014	3,570,497		42,542,978		0 083927
2013	4,171,454		42,408,048	T	0 098365
2 Total of line 1, column (d	for the 5-year base period—divide		0 2 4 4 4 4		0 421737
	dation has been in existence if less		0, or by the		0 084347
	ncharitable-use assets for 2018 fron		4		44,817,413
<b>5</b> Multiply line 4 by line 3			5		3,780,214
<b>6</b> Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		9,878
			7		3,790,092
	ons from Part XII, line 4 ,		8		2,795,858
If line 8 is equal to or gre instructions	ater than line 7, check the box in Pa	art VI, line 1b, and com	nplete that part usir	ng a 1% tax rate Se	e the Part VI

Page **6** 

Pa	rt VII-B	Statements Regardin	g Activities for Which	Form 4720 May Be	Required (continue	d)			-9-
5a	_	year did the foundation pay	•					Yes	No
	(1) Carry	on propaganda, or otherwise	e attempt to influence legisl	lation (section 4945(e))?	☐ Yes	✓ No			
		nce the outcome of any spec	·	**					
	•	rectly or indirectly, any voter			· · 🗌 Yes	✓ No	<b>,</b>		
		le a grant to an individual fo	• • •		☐ Yes	✓ No	<b>,</b>		
		le a grant to an organization		· -					
		tion 4945(d)(4)(A)? See inst			· · Yes	✓ No	<b>,</b>		
		le for any purpose other than		• • • • • • • • • • • • • • • • • • • •					
h		tional purposes, or for the pi wer is "Yes" to 5a(1)–(5), di	,		Yes	✓ No	<b>&gt;</b>		
U	•	ns section 53 4945 or in a cu	•		·		5b		
	_	ons relying on a current not			uccions:	·	150		
С	•	wer is "Yes" to question 5a(4	5 5						
·		se it maintained expenditure	• •	·					
		ttach the statement required	• •		∐ Yes	□ No	<b>&gt;</b>		
6a		undation, during the year, re	· -		ımc on				
0a		I benefit contract?	, , , ,	munectly, to pay premiu					
ь		undation, during the year, pa		tirectly on a nersonal bei	refit contract?	✓ No	6 6		No
		6b, file Form 8870	ay premiums, directly or me	allectiy, on a personal bei	Tent contract.	•	05		110
7a		ne during the tax year, was t	he foundation a party to a r	prohibited tax shelter tran	saction?				
b		the foundation receive any			∟ tes	✓ No	7b		
8		ndation subject to the section	•				10		
•		rachute payment during the	. , , , ,						
	excess pa	Information About Off	•		Yes				
Pa	rt VIII	and Contractors				а Ешр	ioyees,	,	
_1_	List all of	ficers, directors, trustees,		· · · · · · · · · · · · · · · · · · ·					
	<b>(a)</b> Na	ime and address	<ul><li>(b) Title, and average hours per week devoted to position</li></ul>	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans deferred compensation	and (	e) Exper other a		
See	Additional D	ata Table							
_2	Compens	ation of five highest-paid	employees (other than t	hose included on line 1			enter "	NONE	."
(a)		address of each employee pa ore than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions t employee benefit plans and deferred compensation	(€	e) Expen other al		
KRIS	TEN ENGFO	PRS	COMMUNICARE	69,49	<u> </u>	085			1,561
PO B	OX 2708		DIRECTOR		,				·
	LAND, OR	97208	40 00						
JIM (	CHIN		CONTROLLER	56,44	4 1,	693			(
	OX 2708 TLAND, OR	97208	20 00						
						$\perp$			
Tota	I number of	f other employees paid over	\$50,000						C
						F	orm 99	0-PF	(2018

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Part VIII Information About Officers, Directors, Trustee and Contractors (continued)	es, Foundation Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional ser	 rvices (see instructions). If none, enter "NON	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services.		0
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include	relevant statistical information such as the number of	
organizations and other beneficiaries served, conferences convened, research papers pr		Expenses
1 THE "CARE TO SHARE" PROGRAM WAS ESTABLISHED IN COLLABORAT.		_
UNIVERSITY TO ASSIST LOW INCOME AND UNINSURED FAMILIES TO I COVERED THROUGH FEDERAL AND STATE PROGRAMS. THE CARE PRO		
CARE, EMERGENCY PROCEDURES AND DIABETIC SUPPLIES THE FOUN	NDATION DOES NOT EXERCISE ANY CONTROL	
OVER THE CARE PROVIDED FOR 2018 THE PROGRAM SERVED OVER 1 OF \$127,800	.30 FAMILIES AND HAD TOTAL EXPENDITURES	127,800
2 THE "COMMUNICARE" PROGRAM ALLOWS TEENS TO LEARN ABOUT TH	E NEEDS OF THEIR COMMUNITY THROUGH	127,000
GRANT MAKING AND THEREBY PROMOTES AN ETHIC OF PHILANTHROP		
BACK TO THE COMMUNITY" THE GOAL OF THE PROGRAM IS TO HELP AND ENGAGEMENT BY ENCOURAGING TEENS TO PARTICIPATE IN COM	I	
REWARDING AND EDUCATIONAL FOR 2018, THE PROGRAM SERVED A		
DIFFERENT SCHOOLS/YOUTH NONPROFIT ORGANIZATIONS AND HAD	TOTAL EXPENDITURES OF \$352,340	352,340
3		
4		
Part IX-B Summary of Program-Related Investments (se	· · · · · · · · · · · · · · · · · · ·	
Describe the two largest program-related investments made by the foundation during	ng the tax year on lines 1 and 2	Amount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		0
		Form <b>990-PF</b> (2018)

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

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

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

2

3a 3h

4

5

2.795.858

2.795.858

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2,081,434

2,081,434

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0

(d)

2018

Form 990-PF (20	018)
Part XIII	Undistributed Income (see instructions)

**b** Total for prior years

From 2013. . . . .

**b** From 2014. . . . . c From 2015. . .

d From 2016. . . . .

e From 2017. . . . .

4 Qualifying distributions for 2018 from Part XII, line 4 🕨 \$ a Applied to 2017, 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 required—see instructions). . . . . . . . . .

**d** Applied to 2018 distributable amount. . . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a) )

5 Excess distributions carryover applied to 2018

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 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 . . . . . . 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 2013 not

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

Subtract lines 7 and 8 from line 6a . . . . . .

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . .

c Excess from 2016. . . .

d Excess from 2017. . . e Excess from 2018. . .

**b** Excess from 2015. .

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

6 Enter the net total of each column as

indicated below:

1 Distributable amount for 2018 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only. . . . . . 

Excess distributions carryover, if any, to 2018

2.088.698 1,503,854 1.721.826 1.690.544

737,253 f Total of lines 3a through e. . . . . . . .

7.742.175

(a)

Corpus

(b)

Years prior to 2017

(c)

2017

714.424

8,456,599

2.088.698

6,367,901

1.503.854

1,721,826 1.690.544

737.253

714.424

For	m 990-PF (2018)					Page <b>1</b> 0
ŀ	Part XIV Private Operating Found	<b>ations</b> (see ınstı	ructions and Part \	/II-A, question 9)		
1a	If the foundation has received a ruling or det foundation, and the ruling is effective for 20			erating	_	-
b	Check box to indicate whether the organizati	on is a private opei	ratıng foundatıon des	scribed in section $lacksquare$	」 4942(j)(3) or	4942(J)(5)
2a	Enter the lesser of the adjusted net	Tax year Prior 3 yea		Prior 3 years	(e) Total	
	income from Part I or the minimum investment return from Part X for each	(a) 2018	<b>(b)</b> 2017	(c) 2016	(d) 2015	(e) iotai
	year listed					
ь	85% of line 2a					
С	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  Qualifying distributions made directly					
-	for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3					
_	of minimum investment return shown in					
	Part X, line 6 for each year listed					
C	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments					
	on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income					
	Supplementary Information	(Complete this	part only if the	foundation had	\$5,000 or more	in
Pa	assets at any time during the				. ,	
1	Information Regarding Foundation Mana					
а	List any managers of the foundation who hav before the close of any tax year (but only if					n
ь	List any managers of the foundation who own					
	ownership of a partnership or other entity) o					
2	Information Regarding Contribution, Gra					
	Check here $ ightharpoonup \square$ if the foundation only mak					
	unsolicited requests for funds. If the foundary			ials or organizations	under	
	other conditions, complete items 2a, b, c, ar	iu a See instructio	115			
a	The name, address, and telephone number of	or e-mail address of	f the person to whom	applications should	l be addressed	
	BARBARA HALL					
	1121 SW SALMON					
	PORTLAND, OR 97205 (503) 973-0286					
	BARBH@HARSCH COM					
	The form in which applications should be sub	mitted and informa	ation and materials t	hey should include		
_	APPLICATIONS ARE SUBMITTED BY INVITAT			•	R   FTTER 2) A PRO1	ECT DESCRIPTION
	3) A BRIEF HISTORY OF THE ACCOMPLISHM BACKGROUND OF THE INDIVIDUALS INVOLV PROPOSED PROJECT IF APPLICABLE, 5) A LI CONTRIBUTE TO THE OVERALL INCOME OF POSITIONS, 7) A DETAILED BUDGET OF THE	ENTS, MISSION AN /ED, 4) A CONCISE ST OF THE OFFICE THE ORGANIZATIO	ID NUMBER OF CLIEN E DESCRIPTION OF T RS AND DIRECTORS N, 6) A LIST AND DE	NTS SERVED BY THE HE METHODS USED OF THE ORGANIZAT SCRIPTION OF FULL	ORGANIZATION AN TO EVALUATE THE R TION AND A PERCEN TIME AND PART-TI	D THE RESULTS OF THE TAGE THEY ME STAFF
	DONOR REPORT, 9) A LIST OF ADDITIONAL	FUNDING SOURCE	S BEING SOUGHT FO	OR THE PROJECT, 10	) AN IRS DETERMIN	ATION LETTÉR
	VERIFYING THE TAX-EXEMPT STATUS OF TH	E OKGANIZATION				
С	Any submission deadlines					
	NONE	-1 1	1 1 2 2	6-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		
d	Any restrictions or limitations on awards, suc	th as by geographi	cai areas, charitable i	fields, kinds of instit	utions, or other	

EDUCATION, MEDICAL, SOCIAL SERVICE AND COMMUNITY ACTIVITIES APPROXIMATELY 66% OF THE CONTRIBUTIONS GRANTED IN 2018 WERE ORGANIZATIONS LOCATED IN THE STATE OF OREGON, WITH THE MAJORITY OF THOSE IN THE PORTLAND METROPOLITAN AREA THE FOUNDATION FUNDS GRANT REQUESTS FOR OPERATING EXPENSES, SPECIAL PROJECTS, AND CAPITAL CAMPAIGNS THE FOUNDATION DOES NOT PROVIDE FUNDS FOR INDIVIDUALS, NON TAX-EXEMPT ORGANIZATIONS, OTHER PRIVATE FOUNDATIONS OR POLITICAL GROUPS FOR 2018, (11) ELEVEN GRANT APPLICATIONS WERE ACCEPTED OR REVIEWED FROM ORGANIZATIONS THE FOUNDATION HAD NOT PREVIOUSLY FUNDED

THE PRINCAPAL PURPOSE OF THE HAROLD & ARLENE SCHNITZER CARE FOUNDATION IS TO ASSIST WITH JEWISH, ARTS & CULTURE, YOUTH,



1 Program service revenue  a MEDICARE/MEDICAID PMTS  b C C C C C C C C C C C C C C C C C C	a <u>MEI</u> b c d	Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		
b c c d d d d d d d d d d d d d d d d d	b c d	m service revenue					function income (See instructions )	
c d d	c	DICARE/MEDICAID PMTS					(	
c d d	c d							
d	d							
g Fees and contracts from government agencies  2 Membership dues and assessments								
g Fees and contracts from government agencies  Membership dues and assessments	_							
g Fees and contracts from government agencies  2 Membership dues and assessments	-							
2 Membership dues and assessments	f							
2 Membership dues and assessments	<b>q</b> Fees	and contracts from government agencies					(	
3 Interest on savings and temporary cash investments							(	
Investments								
4 Dividends and interest from securities					1.4	F 200		
5 Net rental income or (loss) from real estate a Debt-financed property						•		
a Debt-financed property					14	208,656		
b Not debt-financed property	5 Net re	ntal income or (loss) from real estate						
6 Net rental income or (loss) from personal property 7 Other investment income	a Debt	-financed property	531120	629,888	16	-135,951		
6 Net rental income or (loss) from personal property 7 Other investment income	<b>b</b> Not	debt-financed property	531120					
7 Other investment income								
8 Gain or (loss) from sales of assets other than inventory		. , , , , , , , , , , , , , , , , , , ,						
9 Net income or (loss) from special events 0 Gross profit or (loss) from sales of inventory 1 Other revenue aSee Additional Data Table b c d e 2 Subtotal Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations)  Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See								
9 Net income or (loss) from special events 0 Gross profit or (loss) from sales of inventory 1 Other revenue aSee Additional Data Table b c d e 2 Subtotal Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations)  Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See		· ·						
O Gross profit or (loss) from sales of inventory  1 Other revenue a See Additional Data Table b c d e 2 Subtotal Add columns (b), (d), and (e).  3 Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculations)  Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See	invent	ory	339110		18	124,804		
O Gross profit or (loss) from sales of inventory  1 Other revenue a See Additional Data Table b c d e 2 Subtotal Add columns (b), (d), and (e).  3 Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculations)  Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See	9 Net in	come or (loss) from special events						
1 Other revenue a See Additional Data Table b c d e 2 Subtotal Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). 4 (See worksheet in line 13 instructions to verify calculations)  Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See								
b c d d d d d d d d d d d d d d d d d d								
c d e								
d								
2 Subtotal Add columns (b), (d), and (e). 1,378,551 651,835 ( 3 Total. Add line 12, columns (b), (d), and (e)								
2 Subtotal Add columns (b), (d), and (e).  1,378,551  5 Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculations)  Part XVI-B  Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See	d							
3 Total. Add line 12, columns (b), (d), and (e)	е							
3 Total. Add line 12, columns (b), (d), and (e)	2 Subto	tal Add columns (b) (d) and (e)		1 270 551		651 025	,	
(See worksheet in line 13 instructions to verify calculations )  Part XVI-B  Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See								
Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See					13	·	2,030,360	
Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See					-			
instructions )	Line No.	Explain below how each activity for which	income is reported	d in column (e) of	Part XVI-A contribu			
	•	instructions )						
		+						
		1						

Forn	1 990-PF	F (2018)							Pa	ge <b>13</b>
Pa	rt XVI	Information Re Exempt Organi		ansfers To a	nd Transactio	ns and Relati	ionships With Nonchai	itable		
		organization directly or in er than section 501(c)(3)					tion described in section 50: ons?		Yes	No
a ·	Transfer	rs from the reporting foun	idation to a noi	ncharıtable exe	mpt organization	of				
	( <b>1</b> ) Cas	sh						1a(1)		No
	(2) Oth	ner assets						1a(2)		No
Ь	Other tr	ansactions								
		les of assets to a nonchar		-				1b(1)		No
		rchases of assets from a r						1b(2)		No
		ntal of facilities, equipmer	•					1b(3)		No
		ımbursement arrangemen ans or loan guarantees.						1b(4) 1b(5)		No No
		formance of services or m						1b(5)		No
		of facilities, equipment, r	·	-				1c		No
	-		-				always show the fair market			
	n any tr	ransaction or sharing arra	ngement, show		) the value of the	goods, other as				.+-
(a)	Line No	(b) Amount involved	(c) Name of no	опспаптаріе ехеп	npt organization	(a) Description	of transfers, transactions, and sl	iaring arra	ngemer	its
2-1	'a +b a fa									
(	describe	oundation directly or indire ed in section 501(c) (other complete the following s (a) Name of organization	r than section ! chedule	501(c)(3)) or in	·			✓ No		
		(a) Hame of organization		(3	, Type of organization		(c) Beschption of feld	Стоттоттр		
c:.	of wł		, it is true, cor				nying schedules and stateme er than taxpayer) is based o	n all info	rmatioi	n of
Sig He		*****			2019-11-06	*****	retu	the IRS d rn the prepa		
		Signature of officer or t	rustee		Date	Title	belo (see	w ınstr )? [	Yes	□ No
Pa		Print/Type preparer's	s name F	Preparer's Sign	ature	Date	Check if self- employed ▶ □			
	epare e Onl						Firm's	EIN ►		
<del>.</del>	C 3111	Firm's address ►								
							Phone	no		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) How acquired Date acquired Date sold P—Purchase (mo, day, yr) (mo, day, yr) D-Donation Р LIQUIDATION OF EUCLIDSR PARTNERS, LP 2004-06-30 2018-12-28 WELLPARTNER Р 2009-06-30 2018-03-20 TECHNOLOGY PARTNERS FUND VII, LP Ρ SPUR VENTURES II, LP Ρ Ρ KEYHAVEN CAPITAL PARTNERS II, LP Ρ OAKTREE VALUE OPPT'Y FEEDER FUND, LP SPUR VENTURES III, LP Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h Depreciation allowed Gain or (loss) (e) Gross sales price Cost or other basis (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 28.801 6,379 22,422 85 85 -228.309 66.694 8.310 150,991 83.537 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or Excess of col (1) (i) F M V as of 12/31/69 Adjusted basis **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 22,422 85 -228,309 66.694 8,310 150,991 83,537

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, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation ARLENE SCHNITZER CHAIRPERSON 1 00 PO BOX 2708 PORTLAND, OR 97208 JORDAN D SCHNITZER DIRECTOR/PRESIDENT 1 00 PO BOX 2708 PORTLAND, OR 97208 JEEEDEV E NUIDELMAN RENEE DOCKWEILER VICE PRESIDENT, TAX 0 1 00 PO BOX 2708

JEFFREY F NUDELMAN	SECRETARY	0	0	0
PO BOX 2708 PORTLAND, OR 97208	1 00			
BARBARA HALL	EXECUTIVE DIRECTOR	61,581	1,847	181
PO BOX 2708 PORTLAND, OR 97208	1 8 00			

DIRECTOR 1 00

PORTLAND, OR 97208 CAMERON DAVIS

PO BOX 2708 PORTLAND, OR 97208

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			
ACE MENTOR PROGRAM 7100 SE DIVISION STREET PORTLAND, OR 97206	PC	SPONSOR - 2018 LUNCHEON	1,500

101111111111111111111111111111111111111			
ALS ASSOCIATION OF OREGON & SW WASHINGTON 700 NE MULTNOMAH ST SUITE 1180 PORTLAND, OR 97232	PC	SPONSOR - DINNER & AUCTION	10,000

700 NE MULTNOMAH ST SUITE 1180 PORTLAND, OR 97232			
AMERICAN DIABETES ASSOCIATION 4380 SW MACADAM AVE 270	PC	SPONSOR - TOUR DE CURE EVENT	5,000

PORTLAND, OR 97232			
AMERICAN DIABETES ASSOCIATION 4380 SW MACADAM AVE 270 PORTLAND, OR 97239	PC	SPONSOR - TOUR DE CURE EVENT	5,000

2,171,806

AMERICAN DIABETES ASSOCIATION 4380 SW MACADAM AVE 270 PORTLAND, OR 97239	PC	SPONSOR - TOUR DE CURE EVENT	5,00

Total .

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

- · /			
AMERICAN DIABETES ASSOCIATION 4380 SW MACADAM AVE 270 PORTLAND, OR 97239	PC	SUPPORT DONOR CULTIVATION LUNCHEON	1,700
AMERICAN ONLINE GIVING	PC	MATCHING GIFTS	10,146

FOUNDATION 1521 GEORGETOWN ROAD SUITE 104 HUDSON, OH 44236	PC .	MAICHING GIFTS	10,146
ARCS FOUNDATION PORTLAND PO BOX 2063	PC	SCHOLAR AWARD - MULTI YEAR	6,000

HUDSON, OH 44236			
ARCS FOUNDATION PORTLAND PO BOX 2063	PC	SCHOLAR AWARD - MULTI YEAR	6,000
PORTLAND, OR 97208			

ARCS FOUNDATION PORTLAND PO BOX 2063 PORTLAND, OR 97208	PC	SCHOLAR AWARD - MULTI YEAR	6,000

Total .

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 ARLINGTON CLUB HERITAGE PC EXTERIOR BRICK PROJECT 25,000 **FOUNDATION** 811 SW SALMON STREET

PORTLAND, OR 97205

PALM DESERT, CA 92261

Total .

ARTIST REPERTORY THEATER 1516 SW ALDER STREET PORTLAND, OR 97205	PC	SPONSOR - 2019 GALA	10,000
ASSOCIATION OF FUNDRAISING PROFESSIONALS PO BOX 2213	PC	PHILANTHROPY AWARDS LUNCHEON	5,000

▶ 3a

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				
BLUE SKY GALLERY		PC	EXHIBITION SUPPORT	20,000

PORTLAND, OR 97209			
B'NAI B'RITH MEN'S CAMP ASSOCIATION 9400 SW BEAVERTON HILLSDALE HWY 147 PORTI AND, OR 97005	PC	MATCHING GRANT	2,000

9400 SW BEAVERTON HILLSDALE HWY 147 PORTLAND, OR 97005			
BODYVOX1300 NW NORTHRUP	PC	SUPPORT OF ANNUAL	12,500

PORTLAND, OR 97005			
BODYVOX1300 NW NORTHRUP PORTLAND, OR 97209	PC	SUPPORT OF ANNUAL FUNDRAISING EVENT	12,500

2,171,806

BODYVOX1300 NW NORTHRUP PORTLAND, OR 97209	PC	SUPPORT OF ANNUAL FUNDRAISING EVENT	12,50

Total .

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

a Paid during the year			
BOYS & GIRLS CLUB OF PORTLAND 8203 SE 7TH AVENUE SUITE 100	PC	AUCTION SUPPORT - 2018	10,000

PORTLAND, OR 97202			
BOYS & GIRLS CLUB OF PORTLAND B203 SE 7TH AVENUE SUITE 100	PC	SUPPORT LOVE BOXES PROGRAM	

BOYS & GIRLS CLUB OF PORTLAND 8203 SE 7TH AVENUE SUITE 100 PORTLAND, OR 97202	PC	SUPPORT LOVE BOXES PROGRAM	500

PORTLAND, OR 97202		TROGRAM	
CAPCO721 SE 3RD SUITE D	PC	SPONSOR "DANCING WITH	1,000

· · · · · · · · · · · · · · · · · · ·			
CAPCO721 SE 3RD SUITE D PENDLETON, OR 97801	PC	SPONSOR "DANCING WITH PENDLETON STARS"	1,000

CAPCO721 SE 3RD SUITE D PENDLETON, OR 97801	PC	SPONSOR "DANCING WITH PENDLETON STARS"	1,00
'			1

PENDLETON, OR 97801	PENDLETON STARS"	
Total	 ▶ 3a	2,171,806

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

a Paid during the year			
CASA1401 NE 68TH AVENUE PORTLAND, OR 97213		2018 CHALLENGE MATCH CAMPAIGN	10,000
CASCADE AIDS PROJECT	DC.	2019 ART ALICTION & AETER	35 500

CASCADE AIDS PROJECT 208 SW 5TH AVENUE 800 PORTLAND, OR 97204	PC	2018 ART AUCTION & AFTER PARTY	35,500
CASCADE AIDS PROJECT	PC	2019 ART AUCTION & AFTER	10,000

CASCADE AIDS PROJECT 208 SW 5TH AVENUE 800 PORTLAND, OR 97204	PC	2019 ART AUCTION & AFTER PARTY	10,000

CASCADE AIDS PROJECT 208 SW 5TH AVENUE 800 PORTLAND, OR 97204	PC	2019 ART AUCTION & AFTER PARTY	10,000
PORTLAND, OR 97204			

Total .

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

or substantial contributor

Name and address (home or business)

Total .

	or substantial continuator			
a Paid during the year				
CATLIN GABEL AUCTION 8825 SW BARNES ROAD PORTLAND, OR 97225		PC	SPONSOR AUCTION	20,000
CHABAD CENTER FOR JEWISH LIFE 2317 SW VERMONT STREET PORTLAND, OR 97219		PC	SPONSOR "HISTORIC EVENING"	2,500

recipient

PORTLAND, OR 97225			
CHABAD CENTER FOR JEWISH LIFE 2317 SW VERMONT STREET PORTLAND, OR 97219	PC	SPONSOR "HISTORIC EVENING"	2,
CHABAD CENTER FOR JEWISH LIFE	PC	SPONSOR "FIRST NIGHT IN	3,

2317 SW VERMONT STREET PORTLAND, OR 97219	,	SPONSON THISTORIC EVENING	2,300
CHABAD CENTER FOR JEWISH LIFE 2317 SW VERMONT STREET PORTLAND, OR 97219	PC	SPONSOR "FIRST NIGHT IN DIRECTOR PARK"	3,600

PORTLAND, OR 97219			
CHABAD CENTER FOR JEWISH LIFE 2317 SW VERMONT STREET PORTLAND, OR 97219		SPONSOR "FIRST NIGHT IN DIRECTOR PARK"	3,600

2317 SW VERMONT STREET PORTLAND, OR 97219		DIRECTOR PARK"	3,00
· · · · · · · · · · · · · · · · · · ·			<del> </del>

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			
THE CIRCUS PROJECT 1420 NW 17TH AVENUE 388 PORTLAND, OR 97209	PC	GENERAL OPERATING SUPPORT	25,000

PORTLAND, OR 97209			
CLASSICAL UP CLOSEPO BOX 23751 TIGARD, OR 97223	PC	SPONSOR 2018 SPRING MUSIC FESTIVAL	10,000
COLLEGE OF THE DESERT FOLINDATION	DC.	CALA SUDDORT	50,000

TIGARD, OR 97223	FC	FESTIVAL	10,000
COLLEGE OF THE DESERT FOUNDATION 43-500 MONTEREY AVENUE	PC	GALA SUPPORT	50,000

2,171,806

11GARD, OR 37223		TESTIVAL	
COLLEGE OF THE DESERT FOUNDATION 43-500 MONTEREY AVENUE PALM DESERT, CA 92260	PC	GALA SUPPORT	50,00

COLLEGE OF THE DESERT FOUNDATION	PC	GALA SUPPORT	50,000
43-500 MONTEREY AVENUE			·
PALM DESERT, CA 92260			

Total .

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 Daid during the year

Total .

a Paid during the year			
CONCORDIA COLLEGE 2811 NE HOLMAN STREET PORTLAND, OR 97211	PC	SPONSOR "LEADERSHIP IN EDUCATION"	5,000

CONFLUENCE1701 BROADWAY 144 VANCOUVER, WA 98663	PC	SUPPORT OF "LEGACY MAKER DINNER"	1,000
CONTEMPORARY ARTS CENTER	PC	UNDERWRITING OF ARTIST	85,000

77 (1000 7 <u>2</u> 1.7) 11.11 50000		2	
CONTEMPORARY ARTS CENTER 44 EAST 6TH STREET CINCINNATI, OH 45202	PC	UNDERWRITING OF ARTIST ROBERT COLESCOTT EXHIBITION CATALOGUE	85,000

Recipient Foundation Purpose of grant or If recipient is an individual, 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				
CROCKER ART MUSEUM216 O STREET		PC	SUPPORT ANNUAL	

ACRAMENTO, CA 95814		FUNDRAISING EVENT
ESERT XPO BOX 4050 ALM SPRINGS, CA 92263	PC	SUPPORT - JENNY HOLZERP PROJECT

or substantial contributor.

DESERT XPO BOX 4050 PALM SPRINGS, CA 92263	PC	SUPPORT - JENNY HOLZERP PROJECT	25,000
DRESS FOR SUCCESS 1532 NE 37TH AVENUE	PC	SPONSOR "CELEBRATE SUCCESS"	5,000

25,000

DRESS FOR SUCCESS	PC	SPONSOR "CELEBRATE	5,000
1532 NE 37TH AVENUE PORTLAND, OR 97232		SUCCESS"	

1532 NE 37TH AVENUE PORTLAND, OR 97232		SUCCESS"	5,50
Total	 	▶ 3a	2,171,806

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			
EISENHOWER MEDICAL CENTER FOUNDATION 39000 BOB HOPE DRIVE RANCHO MIRAGE, CA 92270	PC	SPONSOR "JUST IMAGINE" EVENT	50,000

RANCHO MIRAGE, CA 92270			
ENTERPRISE FOR HS STUDENTS 200 PINE STREET 600 SAN FRANCISCO, CA 94104	PC	SUPPORT OF THE SF FALL ART & ANTIQUES SHOW	10,000
FANCONI ANEMIA RESEARCH FUND	PC	SPONSOR BENEFIT CONCERT	5,000

FANCONI ANEMIA RESEARCH FUND PC SPONSOR BENEFIT CONCERT	
1801 WILLAMETTE AVENUE 200 EUGENE, OR 97401	5,000

Total .

Recipient If recipient is an individual, show any relationship to status of status of

recipient

PROGRAM

2,171,806

any foundation manager

or substantial contributor

Name and address (home or business)

049 SW PORTER STREET

PORTLAND, OR 97201

Total .

a Paid during the year			
FOUNDATIONS FOR A BETTER OREGON 221 NW 2ND AVENUE 203 PORTLAND, OR 97209	PC	CHALKBOARD PROJECT	25,000
FRIENDS OF THE CHILDREN 44 NE MORRIS STREET PORTLAND, OR 97212	PC	SUPPORT "FRIEND RAISER 2018"	25,000
THE GEEZER GALLERY	PC	NATIONAL GALLERY OF ART	5,000

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

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year				
GIRLS INC 4800 SW MACADAM AVENUE 309 PORTLAND, OR 97239		PC	SPONSOR POWER OF THE PURSE	10,000
GIRLS INC	·	DC.	SUPPORT - ANNUAL LUNCHEON	75

recipient

PORTLAND, OR 97239		10102	
GIRLS INC 4800 SW MACADAM AVENUE 309 PORTLAND, OR 97239	PC	SUPPORT - ANNUAL LUNCHEON	75
GUIDE DOGS FOR THE BLIND INC 32901 SE KELSO ROAD	PC	SPONSOR "PINOT & PUPS"	2,500

PORTLAND, OR 97239			
GUIDE DOGS FOR THE BLIND INC 32901 SE KELSO ROAD BORING, OR 97009	PC	SPONSOR "PINOT & PUPS"	2,500

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

Total .

,			
JESSIE F RICHARDSON FOUNDATION 15900 SE 82ND DRIVE CLACKAMAS, OR 97015	PC	SPONSOR "2018 AGELESS AWARD LUNCH"	5,000
JUVENILE DIABETES RESEARCH	PC	SUPPORT OF 2018 HOPE GALA	20,000

JUVENILE DIABETES RESEARCH FOUNDATION 700 SW HAMPTON STREET 101 PORTLAND, OR 97223	PC	SUPPORT OF 2018 HOPE GALA	20,000
] PAUL GETTY TRUST	PC	SUPPORT OF HOCKNEY	50.000

PORTLAND, OR 97223			
J PAUL GETTY TRUST 1200 GETTY CENTER DRIVE 400	PC	SUPPORT OF HOCKNEY EXHIBITION	50,000

J PAUL GETTY TRUST 1200 GETTY CENTER DRIVE 400 LOS ANGELES, CA 90049	PC	SUPPORT OF HOCKNEY EXHIBITION	50,000

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

Name and address (home or husiness)

3 INTERNATIONAL DRIVE 200 RYE BROOK, NY 10573

Total .

Hame and address (nome or business)	or substantial contributor			
a Paid during the year				
J PAUL GETTY TRUST 1200 GETTY CENTER DRIVE 400 LOS ANGELES, CA 90049		PC	SUPPORT OF GETTY MEDAL DINNER	50,000
KITTELSON CHARITABLE FOUNDATION 851 SW 6TH AVENUE 600 PORTI AND, OR 97204		PC	SPONSOR "DO GOOD EVERY DAY" GALA	2,500

recipient

100

1200 GETTY CENTER DRIVE 400 LOS ANGELES, CA 90049		DINNER	
KITTELSON CHARITABLE FOUNDATION 851 SW 6TH AVENUE 600 PORTLAND, OR 97204	PC	SPONSOR "DO GOOD EVERY DAY" GALA	2,
LEUKEMIA & LYMPHOMA SOCIETY	PC	GENERAL SUPPORT	

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

or substantial contributor

Name and address (home or business)

73-000 FRED WARING DRIVE PALM DESERT, CA 92260

Total .

	or substantial contributor			
a Paid during the year				
LIFEWORKS NORTHWEST 14600 NW CORNELL ROAD PORTLAND, OR 97229		PC	SUPPORT - IRON CHEF EVENT	1,500
LITERARY ARTS 925 SW WASHINGTON STREET		PC	SPONSOR TRIBUTE TO URSULA LEGUIN"	10,000

recipient

PORTLAND, OR 97229			
LITERARY ARTS 925 SW WASHINGTON STREET PORTLAND, OR 97204	PC	SPONSOR TRIBUTE TO URSULA LEGUIN"	10,000
MCCALLUM THEATRE	PC	GALA & PROGRAM SUPPORT	100,000

Foundation Recipient If recipient is an individual, 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 MEMORIAL SLOAN KETTERING CANCER PC SUPPORT FOR CYCLE FOR 250 CENTER SURVIVAL EVENT 885 SECOND AVENUE 7TH FLOOR

NEW YORK, NY 10017

Total . .

MUSEUM OF THE AFRICAN DIASPORA 685 MISSION STREET SAN FRANCISCO, CA 94105	PC	SUPPORT FUNDRAISING EVENT	5,000
NATIONAL ASSEMBLY OF STATE ARTS AGENCIES	PC	SPECIAL ADVOCACY PROJECT	10,000

SAN FRANCISCO, CA 94105			
NATIONAL ASSEMBLY OF STATE ARTS AGENCIES 1200 18TH STREET NW SUITE 1100 WASHINGTON, DC 20036	PC	SPECIAL ADVOCACY PROJECT	10,000
1			

Recipient If recipient is an individual, show any relationship to status of status of

Name and address (home or business)

PORTLAND, OR 97225

Total .

Name and address (nome or business)	or substantial contributor	'		
a Paid during the year				
NEVADA BALLET THEATRE 1651 INNER CIRCLE DRIVE LAS VEGAS, NV 89134		PC	GENERAL OPERATING SUPPORT	25,000
NORTHWEST ACADEMY 1130 SW MAIN STREET PORTLAND, OR 97205		PC	SPONSOR "CLUB CABARET"	10,000
OREGON COLLEGE OF ART & CRAFT 8245 SW BARNES ROAD		PC	PROGRAM SUPPORT	50,000

recipient

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 BALLET THEATRE 0720 SW BANCROFT PORTLAND, OR 97239	PC	ANNUAL GIFT PLEDGE	100,000
OREGON HISTORICAL SOCIETY	PC	SPONSOR OREGON HISTORY	15,000

OREGON HISTORICAL SOCIETY 1200 SW PARK AVENUE PORTLAND, OR 97205	PC	SPONSOR OREGON HISTORY MAKERS DINNER"	15,000
OREGON MUSEUM OF SCIENCE & INDUSTRY 1945 SE WATER AVENUE	PC	SUPPORT 2018 GALA	25,000

Total				2,171,806
OREGON MUSEUM OF SCIENCE & INDUSTRY 1945 SE WATER AVENUE PORTLAND, OR 97214		PC	SUPPORT 2018 GALA	25,000
PORTLAND, OR 97205				

Recipient If recipient is an individual, show any relationship to status of status of

PORTLAND, OR 97205

Total .

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
OREGON PUBLIC BROADCASTING 7140 SW MACADAM AVENUE PORTLAND, OR 97219		PC	CAPITAL CAMPAIGN	200,000
OREGON PUBLIC BROADCASTING 7140 SW MACADAM AVENUE PORTLAND, OR 97219		PC	OREGON EXPERIENCE PROGRAM - 3 YEARS FUNDING	150,000
OREGON SYMPHONY		PC	SUPPORT OF 2017 GALA	5,000

recipient

Recipient If recipient is an individual, show any relationship to status of status of

recipient

2,171,806

any foundation manager

or substantial contributor

Name and address (home or business)

511 NW BROADWAY PORTLAND, OR 97209

Total .

a Paid during the year			
OREGON SYMPHONY 912 SW WASHINGTON 200 PORTLAND, OR 97205	PC	ANNUAL OPERATING SUPPORT - MULTI-YEAR PLEDGE	100,000
OREGON SYMPHONY 912 SW WASHINGTON 200 PORTLAND, OR 97205	PC	2018 SCHNITZER WONDER AWARD	10,000
PACIFIC NW COLLEGE OF ART	PC	SUPPORT - 2018 ANNUAL GALA	50,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

or cubetantial contributor

Name and address (home or business)

Total .

	or substantial contributor			
a Paid during the year				
PALM SPRINGS ART MUSEUM 101 MUSEUM DRIVE PALM SPRINGS, CA 92262		PC	SUPPORT - 2018 GALA	34,500

PALM SPRINGS ART MUSEUM 101 MUSEUM DRIVE PALM SPRINGS, CA 92262	PC	SUPPORT WARHOL EXHIBITION CELEBRATION	
PALM SPRINGS ART MUSEUM	PC	SUPPORT GLASS EXHIBITION	

PALM SPRINGS, CA 92262		CELEBRATION	
PALM SPRINGS ART MUSEUM 101 MUSEUM DRIVE PALM SPRINGS, CA 92262	PC	SUPPORT GLASS EXHIBITION CELEBRATION	41,000

210,000

2,171,806

PALM SPRINGS ART MUSEUM 101 MUSEUM DRIVE PALM SPRINGS, CA 92262	PC	SUPPORT GLASS EXHIBITION CELEBRATION	41,000

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

a Paid during the year			
PEAR338 NW 6TH AVENUE PORTLAND, OR 97209	PC	SUPPORT 2019 EVENT	5,000

PENDLETON ROUND-UP ASSOC PO BOX 271 PENDLETON, OR 97801	PC	SPONSOR "TOUGH ENOUGH TO WEAR PINK"	10,000
PORTLAND ART MUSEUM	PC	FY19 EXHIBITION SERIES	25,000

PENDLETON, OR 97801			
PORTLAND ART MUSEUM 1219 SW PARK AVENUE PORTLAND, OR 97205	PC	FY19 EXHIBITION SERIES SPONSOR	25,000

2,171,806

PORTLAND ART MUSEUM 1219 SW PARK AVENUE PORTLAND, OR 97205	PC	FY19 EXHIBITION SERIES SPONSOR	25,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

2,171,806

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

any foundation manager

or substantial contributor

Name and address (home or business)

128 NW 11TH AVENUE PORTLAND, OR 97209

a Paid during the year			
PORTLAND CHAMBER ORCHESTRA PO BOX 9024 PORTLAND, OR 97207	PC	GENERAL SUPPORT	15,000
PORTLAND CENTER STAGE 128 NW 11TH AVENUE PORTLAND, OR 97209	PC	SPONSOR/APPEAL 2018 GALA	35,000
PORTLAND CENTER STAGE	PC	GENERAL SUPPORT	15,000

Recipient If recipient is an individual, Purpose of grant or 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			
PORTLAND OPERA211 SE CARUTHERS PORTLAND, OR 97214	PC	GALA SUPPORT/FAUST SUPPORT	50,000

PORTLAND PUBLIC SCHOOL PO BOX 3107 PORTLAND OR 97208	75,

CHOOL	PC	HAMILTON EDUCATION PROGRAM	75,000
8		11001011	

PORTLAND, OR 97208			
PROJECT ACCESS NOWPO BOX 10953	PC	SPONSOR "MIX IT UP 2018"	5,000

PORTLAND, OR 97296			5,65
Total	 	▶ 3a	2,171,806

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			
PSU FOUNDATIONPO BOX 243 PORTLAND, OR 97207	PC	"ARLENE SCHNITZER VISUAL ARTS PRIZE" - BRIDGE FUNDING	5,500

10,000

2,171,806

RANCHO MIRAGE LIBRARY 71-1000 HIGHWAY 111 RANCHO MIRAGE, CA 92270		PC	SPONSOR RANCHO MIRAGE WRITERS FESTIVAL
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David division that were

RANCHO MIRAGE, CA 92270		WRITERS FESTIVAL	
REGIONAL ARTS & CULTURE COUNCIL 411 NW PARK AVENUE 101	PC	SUPPORT RIGHT BRAIN INITIATIVE'S "SHIFT" EVENT	1,985

TO THE PIETO COL, CAL SELVE			
REGIONAL ARTS & CULTURE COUNCIL 411 NW PARK AVENUE 101 PORTLAND, OR 97209	PC	SUPPORT RIGHT BRAIN INITIATIVE'S "SHIFT" EVENT	1,985

REGIONAL ARTS & CULTURE COUNCIL 11 NW PARK AVENUE 101 ORTLAND, OR 97209	PC	SUPPORT RIGHT BRAIN INITIATIVE'S "SHIFT" EVENT	1,98
---	----	---	------

Recipient If recipient is an individual, Purpose of grant or 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

FOUNDATION 1121 SW SALMON STREET PORTLAND, OR 97205	PF	THE HALLE FORD MUSEUM SHOW	45,000
SMART101 SW MARKET STREET	PC	SPONSOR "2018 ALPHABET	25,000

45 000

2,171,806

SMART101 SW MARKET STREET PORTLAND, OR 97201	PC	SPONSOR "2018 ALPHABET BALL"	25,000
SMART101 SW MARKET STREET	PC	SPONSOR "2019 ALPHABET	15,000

,			
SMART101 SW MARKET STREET PORTLAND, OR 97201	PC	SPONSOR "2019 ALPHABET BALL"	15,000

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			
UNITED WAY OF COLUMBIA- WILLAMETTE 619 SW 11TH AVENUE PORTLAND, OR 97205	PC	SPONSOR MLK WEEKEND OF SERVICE	1,500

PORTLAND, OR 97205			
UNIVERSITY OF OREGON FOUNDATION PO BOX 3346 EUGENE, OR 97403	PC	SPONSOR "PIONEER AWARDS"	10,000

PO BOX 3346 EUGENE, OR 97403			
UNIVERSITY OF OREGON FOUNDATION PO BOX 3346 EUGENE. OR 97403	PC	SPONSOR "JSMA AT 85"	5,000

2,171,806

LOGENE, OK 97403			
UNIVERSITY OF OREGON FOUNDATION PO BOX 3346 EUGENE, OR 97403	PC	SPONSOR "JSMA AT 85"	5,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (home or business)	or substantial contributor	T C C I P T C T T C T C T C T C T C T C T C T C		
a Paid during the year				
WILLAMETTE UNIVERSITYHALLIE FORD MUSEUM OF ART		PC	MK GUTH BOOK FUND	1,000

900 STATE STREET SALEM, OR 97301			
WORLD OREGON 1207 SW BROADWAY 300 PORTI AND, OR, 97205	PC	SPONSOR INTERNATIONAL SPEAKER SERIES	6,!

1207 SW BROADWAY 300 PORTLAND, OR 97205		SPEAKER SERIES	0,300
WORLD OREGON	PC	GLOBAL CLASSROOM PROGRAM	5,000

500

PORTLAND, OR 97205		STERMEN SERIES	
WORLD OREGON 1207 SW BROADWAY 300	PC	GLOBAL CLASSROOM PROGRAM	5,00
DODTI AND OD 0730E			1

			1
WORLD OREGON	PC	GLOBAL CLASSROOM PROGRAM	5,000
1207 SW BROADWAY 300			
PORTLAND, OR 97205			

PORTLAND, OR 97205			
Total		. ▶ 3a	2.171.806

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

WSU FOUNDATION 255 E MAIN STREET 301 PULLMAN, WA 99163	PC	SPONSOR GALA & OPENING OF JSMA	30,000
YOUNG AUDIENCES 1220 SW MORRISON STREET PORTLAND, OR 97205	PC	SPONSOR 2018 GALA	5,000

Total	 	▶ 3a	2,171,806
LESS AMOUNT ALLOCATED TO FORM 990-T 128 NW 11TH AVENUE PORTLAND, OR 97209	PC	GENERAL SUPPORT/PRODUCTION SUPPORT	-75,050
PORTLAND, OR 97205			

Form 990PF Part XVI-A Line 11 - Other revenue:

Enter gross amounts unless otherwise indicated.

Unrelated business income

k bny cayman

Enter gross amounts unless otherwise indicated	Officiated L	Jusiness income	Excluded by section 512, 513, or 514		Related or
11 Other revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	c) (d) exempt	
a EUCLIDSR PTNRS 13-4107557			14	-151	
b NW CAPITAL PTNRS 91-2030583	525990	-2,381	14	1,833	
c TECHNOLOGY PTNRS 68-0452845			14	-153	
d SPUR VENTURES II 20-3791496			14	-3,927	
e KEYHAVEN CAPITAL 98-0539392			14	-10,491	
f OAKTREE VALUE 26-0510867	525990	-1,769	14	-8,529	
g SPUR VENTURES III 26-2690155	525990	-16	14	14,979	
h CABRILLO COMM CTR 43-1958462	531120	463,508	14	303,754	
i PATRICK AIRPORT 42-1538086	531120	27,496	14	70,229	
j SEATAC VILLAGE 20-1048739	531120	261,825	14	148,888	

(e)

Excluded by section 512, 513, or 514

14

-67,475

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -						DLN: 934	91310000429
ote: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.								
TY 2018 Amortization Schedule								
Name:	Name: THE HAROLD & ARLENE SCHNITZER CARE							
FOUNDATION								
<b>EIN:</b> 93-1159884								
Description of Amortized Expenses	Date Acquired,	Amount	Deduction for	Amortization Method	Current Year	Net Investment	Adjusted Net	Total Amount of
	Completed, or Expended	Amortized	Prior Years		Amortization	Income	Income	Amortization
MORTGAGE COSTS	2017-07-01	79,054	3,920	121 0000000000000	7,840	0		11,760
LEASE COSTS	2016-06-01	24,509	9,804	60 000000000000	4,902	0		14,706
LEASE COSTS	2016-06-01	24,509	9,804	60 000000000000	4,902	4,902		14,706
MORTGAGE COSTS	2017-08-01	79,054		121 0000000000000	7,840	2,582		7,840

Note: To capture the full content of this document, please select landscape mode (11" $\times$ 8.5") when printing.	
TY 2018 Depreciation Schedule	

Name: THE HAROLD & ARLENE SCHNITZER CARE

FOUNDATION

**EIN:** 93-1159884

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

	Depreci	ation Schedule							
Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
PRIOR YR ASSETS	2016-12-14	10,771,413	311,970	SL	39 000000000000	385,772	385,772		
PRIOR YR ASSETS	2016-06-30	1,180,203	47,510	SL	39 000000000000	21,537	21,537		
PRIOR YR ASSETS	2016-06-30	12,240,078	929,483	SL		433,181	0		
PRIOR YR ASSETS	2016-06-30	937,665	38,165	SL	39 000000000000	25,872	25,872		

DLN: 93491310000429

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491310000429
TY 2018 Investments - Land Sc	chedule	

Name: THE HAROLD & ARLENE SCHNITZER CARE

**FOUNDATION** 

Category/ Item	Cost/Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
LAND	3,018,796	0	3,018,796	3,018,796
BUILDINGS	12,456,064	0	12,456,064	12,456,064
EQUIPMENT	32,889	0	32,889	32,889

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# **TY 2018 Investments - Other Schedule**

Name: THE HAROLD & ARLENE SCHNITZER CARE

**FOUNDATION** 

**EIN:** 93-1159884

Catagory / Itam	Listed at Cost or	Book Value	End of Year Fair
Category/ Item	FMV	BOOK Value	Market Value
JP MORGAN SECURITIES	FMV	4,616,657	4,616,657
EVI CORPORATION	FMV	1	1
BNY CAYMAN FUND III	FMV	34,653	34,653
KEYHAVEN CAPITAL II	FMV	249,601	249,601
NORTHWEST CAPITAL PARTNERS II LP	FMV	38,017	38,017
OAKTREE VALUE OPP LP	FMV	1,874,852	1,874,852
SPUR VENTURES II LP	FMV	1,066,555	1,066,555
SPUR VENTURES III LP	FMV	732,486	732,486
TECHNOLOGY PARTNERS FUND VII LP	FMV	84,386	84,386
CABRILLO COMMERCE CENTER, LLC	FMV	10,370,567	10,370,567
PATRICK AIRPORT BUSINESS CENTER, LLC	FMV	1,666,964	1,666,964
SEATAC VILLAGE SHOPPING CENTER, LLC	FMV	8,918,937	8,918,937

# **TY 2018 Other Assets Schedule**

Name: THE HAROLD & ARLENE SCHNITZER CARE

FOUNDATION

**EIN:** 93-1159884

Other Assets Schedule					
Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value		
PROGRAM ASSETS/INVESTMENTS	175,000	175,000	175,000		
INTANGIBLES	89,839	77,097	77,097		
WORK-IN-PROCESS		5,835	5,835		
SL DEFERRED RENTS		166,157	166,157		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	N: 93491310000429		
TY 2018 Other Expenses Sche	dule	<u> </u>		·		
<del>-</del>						
Name:	: THE HAROLD & ARLENE SCHNITZER CARE					
	FOUNDATION					
EIN:	<b>1:</b> 93-1159884					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
STAFF TRAINING	3,839	0		3,839		
MEALS	3,549	220		2,231		
DUES & SUBSCRIPTION	5,884	1,136		4,748		

7,668

2,086

1,200

166

70

337,920

620

46

417

0

0

33

0

2,581

7,622

1,669

337,920

133

70

LICENSES & FEES

OFFICE SUPPLIES

MISCELLANEOUS

BANK CHARGES

POSTAGE

TELEPHONE ALLOWANCE

PROGRAM EXPENDITURES TO RECIPIENTS

Description Revenue and Net Investment **Adjusted Net** Disbursements for Charitable Expenses per Income Income Books **Purposes** 1,560 1,248 COMPUTER SUPPLIES 312 3,408 4,260 852 INSURANCE 720 162 CLEANING & MAINTENANCE

Other Expenses Schedule

GROUNDS MAINTENANCE

COMMISSIONS & FEES

MANAGEMENT FEES

INSURANCE

INSURANCE	389	87	0
MANAGEMENT FEES	3,090	694	0
LICENSES & FEES	400	90	0

3,863

14,165

173 4,394

17,200

13,341

43,005

526

Description Revenue and **Net Investment Adjusted Net** Disbursements for Charitable Expenses per Income Income Books **Purposes** LICENSES & FEES 120 40 **CLEANING & MAINTENANCE** 20,473 20,473 39 39 COMMISSIONS & FEES INSURANCE 2,881 2,881

41,834

27,351

45

5,443

10,799

13,250

41,834

27,351

45

5,443

10,799

Other Expenses Schedule

REPAIRS

UTILITIES

SECURITY

MANAGEMENT FEES

GROUNDS MAINTENANCE

LICENSES & FEES

Description Revenue and Net Investment Adjusted Net Disbursements for Expenses per Income Income Charitable Purposes

5,875

7,484

	Books
COMMON AREA MAINTENANCE	5,87

Other Expenses Schedule

AMORTIZATION

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491310000429

## TY 2018 Other Income Schedule

Name: THE HAROLD & ARLENE SCHNITZER CARE

FOUNDATION

**EIN:** 93-1159884

### Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
EUCLIDSR PTNRS 13-4107557	-151	151	-151
NW CAPITAL PTNRS 91-2030583	-548	462	-548
TECHNOLOGY PTNRS 68-0452845	-153	302	-153
SPUR VENTURES II 20-3791496	-3,927	5,414	-3,927
KEYHAVEN CAPITAL 98-0539392	-10,491	24,498	-10,491
OAKTREE VALUE 26-0510867	-10,298	67,462	-10,298
SPUR VENTURES III 26-2690155	14,963	21,498	14,963
CABRILLO COMM CTR 43-1958462	767,262	84,063	767,262
PATRICK AIRPORT 42-1538086	97,725	5,476	97,725
SEATAC VILLAGE 20-1048739	410,713	113,049	410,713
BNY CAYMAN	-67,475	0	-67,475

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491310000429		
TY 2018 Other Increases School	TY 2018 Other Increases Schedule				
Name:	THE HAROLD	& ARLENE SCHNITZER CARE			
	FOUNDATION				
EIN:	93-1159884				
D <sub>'</sub>	escription		Amount		
UNREALIZED GAIN			1,534,823		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		D	LN: 93491310000429
TY 2018 Other Liabilities Schedule				
Name:	THE HAROLD 8	& ARLENE SO	CHNITZER CARE	
	FOUNDATION			
EIN:	93-1159884			
Description	n		Beginning of Year - Book Value	End of Year - Book Value
REFUNDABLE TENANT DEPOSITS			66,065	66,065
PREPAID RENT			10,181	15,843
NOTES & ADVANCES			1,352,796	1,280,143
ACCRUED INTEREST			18,817	18,470

efile GRAPHIC print - DO NOT PROC	ESS	As Filed Data	-	DL	N: 93491310000429
TY 2018 Other Professional Fees Schedule					
Na	ame:	THE HAROLD	& ARLENE SCHN	ITZER CARE	
	FOUNDATION				
<b>EIN:</b> 93-1159884					
Category		Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

20,000

CONSULTING FEES

efile GRAPHIC print - DO NOT PRO	OCESS As Filed Data	-	DL	N: 93491310000429	
TY 2018 Taxes Schedule					
				!	
	Name: THE HAROLD	D & ARLENE SCHN	ITZER CARE	,	
1	FOUNDATIO	<i>I</i> N		•	
1	<b>EIN:</b> 93-1159884	r		!	
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable	
·	<u> </u>		<del>                                     </del>	Purposes	
PROPERTY TAX	0	1,376	<u> </u>	0	
FEDERAL	12,806	0		0	
STATE	37,313	0		0	
PROPERTY TAXES	7,386	1,659		0	
PROPERTY TAXES	133,377	43,933		0	

63,177

PROPERTY TAXES

efile GRAPHIC print - D	O NOT PROCESS As F	ıled Data -			[	DLN: 93491310000429
Schedule B		Schedule	of Contributors	s		OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service			m 990, 990-EZ, or 990-P o <u>rm990</u> for the latest inf			2018
Name of the organizati THE HAROLD & ARLENE S						entification number
FOUNDATION Organization type (che	ck one)				93-1159884	
	•					
Filers of:	Section:					
Form 990 or 990-EZ	990 or 990-EZ					
	☐ 4947(a)(1) none	exempt charitable	le trust <b>not</b> treated as a	a private founda	tion	
	☐ 527 political org	anızatıon				
Form 990-PF	<b>✓</b> 501(c)(3) exemp	ot private founda	ation			
4947(a)(1) nonexempt charitable trust treated as a private foundation						
	☐ 501(c)(3) taxabl	e private founda	ation			
	ation filing Form 990, 990-E property) from any one co					
Special Rules						
under sections 5 received from ar	ion described in section 50 09(a)(1) and 170(b)(1)(A)(v y one contributor, during the e 1h, or (ii) Form 990-EZ, l	vı), that checked ne year, total co	d Schedule A (Form 99 Intributions of the great	90 or 990-EZ), Pa	art II, line 13, 1	16a, or 16b, and that
during the year,	on described in section 50 total contributions of more the prevention of cruelty to	than \$1,000 <i>exc</i>	clusively for religious, o	charitable, scient		
during the year, If this box is che purpose Don't c	on described in section 50 contributions exclusively fooked, enter here the total complete any of the parts urble, etc., contributions total	r religious, char ontributions tha nless the <b>Gener</b>	itable, etc. purposes, t were received during al Rule applies to this	but no such con the year for an o organization be	tributions total exclusively reli cause it receiv	ed more than \$1,000 igious, charitable, etc, yed nonexclusively
990-EZ, or 990-PF), but	n that isn't covered by the it <b>must</b> answer "No" on Pa orm 990PF, Part I, line 2, to	art IV, line 2, of	ts Form 990, or check	the box on line I	H of its	
For Paperwork Reduction A for Form 990, 990-EZ, or 99	ct Notice, see the Instructions J-PF	3	Cat No 30613X	Schedu	le B (Form 990,	990-EZ, or 990-PF) (2018)

Schedule B (Form	Page 2			
Name of organiza THE HAROLD & ARL FOUNDATION	tion ENE SCHNITZER CARE	Employer identification 93-1159884	number	
Part I	Contributors (See instructions) Use duplicate copies of Part I if additional sp	ace is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	n
<u>1</u>	ARLENE SCHNITZER		Person [	<b>Y</b>
	PO BOX 2708	\$ 590,000	Noncash	
	PORTLAND, OR 97208		(Complete Part II for noncash contributions )	h
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	n
2	HAROLD J SCHNITZER 2005 FAMILY TRUST FBO ARIELLE SCHNITZER #			<b>✓</b>
	1121 SW SALMON STREET	\$ 5,000	Payroll Noncash	
	PORTLAND, OR 97205		(Complete Part II for noncash contributions )	h
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	n
<u>3</u>	HAROLD J SCHNITZER 2005 FAMILY TRUST FBO AUDRIA SCHNITZER #4		•	<b>✓</b>
	1121 SW SALMON STREET	\$ 5,000	Payroll Noncash	
	PORTLAND, OR 97205		(Complete Part II for noncash contributions )	h
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	n
<u>4</u>	ARLENE SCHNITZER 2005 FAMILY TRUST FBO ARIELLE SCHNITZER #46		•	<b>✓</b>
	1121 SW SALMON STREET	\$ 5,000	Payroll [ Noncash	
	PORTLAND, OR 97205		(Complete Part II for noncash contributions )	n
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	n
5	ARLENE SCHNITZER 2005 FAMILY TRUST FBO AUDRIA SCHNITZER #46-		_	<b>✓</b>
	1121 SW SALMON STREET	\$ 5,000	Payroll Noncash	
	PORTLAND, OR 97205		(Complete Part II for noncash contributions )	h
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	n
			Person [ Payroll [	
		\$	Noncash	
			(Complete Part II for noncash contributions )	h

Schedule B (Form 9	90, 990-EZ, or 990-PF) (2018)		Page <b>3</b>	
Name of organization		Employer identification number 93-1159884		
FOUNDATION				
Part II	Noncash Property			
(a) No. from Part I	(See instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
_		Schedule B (Form 9	990, 990-EZ, or 990-PF) (2018)	

Schedule B (Form	990, 990-EZ, or 990-PF) (2018)		Page <b>4</b>
Name of organizat THE HAROLD & ARLE FOUNDATION	ion ENE SCHNITZER CARE		Employer identification number 93-1159884
than \$1, organiz the year	000 for the year from any one contributor	r. Complete columns (a) throu of exclusively religious, chari ctions.) ► \$	d in section 501(c)(7), (8), or (10) that total more ugh <b>(e) and</b> the following line entry. For table, etc., contributions of <b>\$1,000 or less</b> for
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
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