2949132707505

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

Form **990-PF**

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

For calendar year 2018 or tax year beginning		, and ending				
Name of foundation				A Employer identification number		
· HEDINGER FAMILY FOUNDATION	<u> </u>		93-1255431			
Number and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number			
1750 NW NAITO PARKWAY		<u>1</u> 06	503 222 00	60		
City or town, state or province, country, and ZIP or foreign PORTLAND, OR 97209	postal code		C If exemption application is pe	ending, check here		
G Check all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	s, check here		
Final return	Amended return		l Transfer or guinzations	,,		
Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test, mputation		
H Check type of organization: X Section 501(c)(3) 6		$\sqrt{\lambda}$	E If private foundation sta			
Section 4947(a)(1) nonexempt charitable trust	Other taxable private founda	tion U	under section 507(b)(1)			
I Fair market value of all assets at end of year J Accoun	ting method: X Cash	Accrual	F If the foundation is in a	60-month termination		
	Other (specify)		under section 507(b)(1)	. —		
▶\$ 12,777. (Part I, colu	mn (d) must be on cash basis	s.)				
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
1 Contributions, gifts, grants, etc., received	2,310,520.		1 1			
2 Check if the foundation is not required to attach Sch. B						
Interest on savings and temporary cash investments	100.	100.		STATEMENT 1		
4 Dividends and interest from securities						
5a Gross rents						
Net rental income or (loss)						
68 Net gain or (loss) from sale of assets not on line 10						
Gross seles price for all assets on line 6a	-	·	RECE	VED-KI		
6 Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2)		0.	KEOL			
			10 -11 11	2019 /25/		
9 Income modifications (those seles less returns) 10a and allowances			18/ NO1 a	2010		
~			181 110	N UT		
D Lace Cost of goods sold	 		OGD			
e dross profit of (loss)		·				
11 Other income 12 Total. Add lines 1 through 11	2,310,620.	100.	0.			
	0.	0.	0.	0.		
13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees			-			
15 Pension plans, employee benefits						
16a Legal fees						
al b Accounting tees	_					
c Other professional fees						
9 17 Interest						
18 Taxes			<u> </u>			
19 Depreciation and depletion						
20 Occupancy			<u> </u>			
21 Travel, conferences, and meetings			<u> </u>			
22 Printing and publications			 	 		
23 Other expenses			 	 -		
24 Total operating and administrative expenses. Add lines 13 through 23	0.	0.	0.	1		
	2,344,636.			0. 2,344,636.		
25 Contributions, gifts, grants paid 26 Total expenses and disbursements.	2,333,030.	.	 	2/344/0300		
Add lines 24 and 25	2,344,636.	0.	0.	2,344,636.		
27 Subtract line 26 from line 12:	2,322,0304		· ·	2,322,030.		
Subtract line 20 from line 12. B Excess of revenue over expenses and disbursements	-34,016.		:			
b Net investment income (if negative, enter -0-)		100.				
C Adjusted net income (if negative, enter -0-)			0.	i i		

823501 12-11-18 LHA For Paperwork Reduction Act Notice, see instructions.

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	End of year		
rai	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	T Cash - non-interest-bearing	46,794.	12,777.	12,777.	
	2 Savings and temporary cash investments				
	3 Accounts receivable ►				
	Less: allowance for doubtful accounts	13,080.	0.	0.	
1.	4 Pledges receivable ►				
1	Less: allowance for doubtful accounts				
	5 Grants receivable				
ı	6 Receivables due from officers, directors, trustees, and other				
1	disqualified persons				
1	7 Other notes and loans receivable				
	Less: allowance for doubtful accounts				
ι	8 Inventories for sale or use				
Assets	9 Prepaid expenses and deferred charges				
۲ _۱	Da Investments - U.S. and state government obligations				
	b Investments - corporate stock			<u>-</u>	
	c Investments - corporate bonds				
1	1 Investments - land, buildings, and equipment basis				
	Less accumulated depreciation				
1	2 Investments - mortgage loans				
1	3 Investments - other				
1	4 Land, buildings, and equipment basis ►				
	Less accumulated depreciation				
1	5 Other assets (describe ►)				
1	6 Total assets (to be completed by all filers - see the				
	instructions. Also, see page 1, item ()	59,874.	12,777.	12,777.	
1	7 Accounts payable and accrued expenses				
1	B Grants payable				
ر 1 اي	9 Deferred revenue				
Liabilities 5 2 2 2	Loans from officers, directors, trustees, and other disqualified persons				
<u>و</u> 2					
2 ٿ	2 Other liabilities (describe ▶)				
ı	·				
2	3 Total liabilities (add lines 17 through 22)	0.	0.		
	Foundations that follow SFAS 117, check here				
1	and complete lines 24 through 26, and lines 30 and 31.				
S 2	4 Unrestricted				
auces 2	5 Temporarily restricted				
	6 Permanently restricted				
힏	Foundations that do not follow SFAS 117, check here				
or Fund Ba	and complete lines 27 through 31.				
	7 Capital stock, trust principal, or current funds	59,874.	12,777.		
Assets 5	B Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.		
% 2	Retained earnings, accumulated income, endowment, or other funds	0.	0.		
3 Se	D Total net assets or fund balances	59,874.	12,777.		
				· <u> </u>	
3	1 Total liabilities and net assets/fund balances	59,874.	12,777.		
Pai	t III Analysis of Changes in Net Assets or Fund Ba	lances			
To	tal net assets or fund balances at beginning of year - Part II, column (a), line 3	30			
	iust agree with end-of-year figure reported on prior year's return)		1	59,874.	
	ter amount from Part I, line 27a		2	-34,016.	
	her increases not included in line 2 (itemize)		3	0.	
	d lines 1, 2, and 3		4	25,858.	
	creases not included in line 2 (itemize) REVERSAL OF PY	AJE	5	13,081.	
	tal net assets or fund balances at end of year (line 4 minus line 5) - Part II co			12,777.	

•••	roo, are roundation december quality arrest o	solion to tologi be that goth prote time part			
1	Enter the appropriate amount in each colu	mn for each year; see the instructions bef	ore making any entries.		
_	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	((d) Distribution ratio col. (b) divided by col. (c))
_	2017	1,504,603.	438,191.		3.433669
	2016	1,267,172.	74,180.		17.082394
	2015	1,310,239.	61,390.		21.342873
_	2014	1,124,328.	328,301.		3.424686
_	2013	1,553,472.	360,738.		4.306372
2	Total of line 1, column (d)			2	49.589994
3	Average distribution ratio for the 5-year ba the foundation has been in existence if less	•), or by the number of years	3	9.917999

the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5 5 Multiply line 4 by line 3

6 Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4

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

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219,756.

1.

2,179,540.

2,179,541.

2,344,636.

7 Add lines 5 and 6

6

7



	4940(a), 4940(b), 4940(e), or 49	948 - 946	5431	Page 4
t VI Excise Tax Based on Investment Income (Section Exempt operating foundations described in section 4940(d)(2), check here	and enter "N/A" on line 1.		1130100	
				ļ
Date of ruling or determination letter:				1.
Domestic foundations that meet the section 4940(e) requirements in Part V, check he	sie 📂 🔼 and enter 1%	1		
of Part I, line 27b	ntor 49/ of Dort I line 40 and (5)			
All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, er				
Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations o	only; others, enter -0-)	2		0.
Add lines 1 and 2		3		1.
Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations of		4		0.
Fax based on investment income. Subtract line 4 from line 3. If zero or less, enter -	0-	5		1.
Credits/Payments:	4 886			
2018 estimated tax payments and 2017 overpayment credited to 2018	6a 1,775.	4 1		1
Exempt foreign organizations - tax withheld at source	6b 0.	4		ì
Fax paid with application for extension of time to file (Form 8868)	6c 0.	↓		į
Backup withholding erroneously withheld	6d O.	<u> </u>		
Total credits and payments, Add lines 6a through 6d		7	1	<u>,775.</u>
Enter any penalty for underpayment of estimated tax. Check here if Form 2220) is attached	8		0.
Fax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶	9		
Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overp		10	1	,774.
Enter the amount of line 10 to be: Credited to 2019 estimated tax	1,774. Refunded ▶	11		<u> </u>
t VII-A Statements Regarding Activities				
During the tax year, did the foundation attempt to influence any national, state, or loca	al legislation or did it participate or intervene	: in		res No
any political campaign?			1a	X
Old it spend more than \$100 during the year (either directly or indirectly) for political	purposes? See the instructions for the defin	iition	1b	X
f the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and c	copies of any materials published or			
distributed by the foundation in connection with the activities.			_	
Old the foundation file Form 1120-POL for this year?			10	X
Enter the amount (if any) of tax on political expenditures (section 4955) imposed duri	ing the year:			
1) On the foundation. > \$ 0 . (2) On foundation ma	nagers. ► \$ 0.		1 1	
Enter the reimbursement (if any) paid by the foundation during the year for political e		_		1 1
managers. ► \$ 0.				
Has the foundation engaged in any activities that have not previously been reported to	o the IRS?		2	<u> </u>
f "Yes," attach a detailed description of the activities.				
las the foundation made any changes, not previously reported to the IRS, in its gove	rning instrument, articles of incorporation, o	r		
pylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	- · · · · · · · · · · · · · · · · · · ·		3	
Did the foundation have unrelated business gross income of \$1,000 or more during t			4a	X
f "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b	-
Was there a liquidation, termination, dissolution, or substantial contraction during the	e vear?	, 	5	<u> </u>
f "Yes," attach the statement required by General Instruction T	- /		-	- -
	stied either:			
are the requirements of section 508(e) (relation to sections 4941 through 4945) satis				
Are the requirements of section 508(e) (relating to sections 4941 through 4945) satis • By language in the governing instrument, or	shou dididi.			
By language in the governing instrument, or		ı law		
 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mail 		e law		_ _
 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mail emain in the governing instrument? 	indatory directions that conflict with the state	e law		X
 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mail 	indatory directions that conflict with the state	ław		X X
By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mainerain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes,"	ndatory directions that conflict with the state	a law		
 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mail emain in the governing instrument? 	ndatory directions that conflict with the state	s law		
By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no maintenant in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," Enter the states to which the foundation reports or with which it is registered. See insection of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to	indatory directions that conflict with the state "complete Part II, col. (c), and Part XV structions. OR	ław	7	X
By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no main remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," Enter the states to which the foundation reports or with which it is registered. See inset the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to of each state as required by General Instruction G? If "No," attach explanation	ndatory directions that conflict with the state " complete Part II, col. (c), and Part XV structions. OR o the Attorney General (or designate)		7	
By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no main remain in the governing instrument? Oid the foundation have at least \$5,000 in assets at any time during the year? If "Yes," Enter the states to which the foundation reports or with which it is registered. See inset the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to of each state as required by General Instruction G? If "No," attach explanation is the foundation claiming status as a private operating foundation within the meaning	indatory directions that conflict with the state "complete Part II, col. (c), and Part XV structions. OR o the Attorney General (or designate) g of section 4942(j)(3) or 4942(j)(5) for cale		7	X
By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no main remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," Enter the states to which the foundation reports or with which it is registered. See inset the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to of each state as required by General Instruction G? If "No," attach explanation	indatory directions that conflict with the state "complete Part II, col. (c), and Part XV structions. OR o the Attorney General (or designate) g of section 4942(j)(3) or 4942(j)(5) for cale		7	X

had not been removed from jeopardy before the first day of the tax year beginning in 2018?

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

Form 4720, to determine if the foundation had excess business holdings in 2018.)

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 May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

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

N/A

3b

4a

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X

during the year?

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be Re	equired _{(contin}	ued)		
5a During the year, did the foundation pay or incur any amount to:			<u> </u>	Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			as X No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire				
any voter registration drive?	•		s X No	- 1	}
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No		lì
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		ਦਿ		
4945(d)(4)(A)? See instructions			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or to		चि		ŀ
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	•	n Regulations	N/A	<u></u>	
section 53.4945 or in a current notice regarding disaster assistance? See instru				5b	_
Organizations relying on a current notice regarding disaster assistance, check h		nod			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		/A Ye	es 🗆 No		
expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d).	-1	, A 16	"S NO	İ	Ì
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	nav nremilime on				ļ
a personal benefit contract?	day promiums on	□ v _e	es X No _		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal henefit contract?	\ \ \		ib —	<u> </u>
If "Yes" to 6b, file Form 8870.	orsonal bonone contract		-		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	☐ Ye	s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu				/Ь	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$					
excess parachute payment(s) during the year?	.,,	☐ Ye	s X No		
Part VIII Information About Officers, Directors, Truste	es, Foundation Man				
Paid Employees, and Contractors					
1 List all officers, directors, trustees, and foundation managers and the	eir compensation.				
4.1 Nove and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp account,	ense
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowa	nces
	DIRECTOR				
1750 NW NAITO PKWY SUITE 106		[
PORTLAND, OR 97209	0.00	0.	0.		0.
	DIRECTOR				
1750 NW NAITO PKWY SUITE 106			_		
PORTLAND, OR 97209	0.00	0.	0.		<u>0.</u>
	DIRECTOR				
1750 NW NAITO PKWY SUITE 106		[_ [_ [_
PORTLAND, OR 97209	0.00	0.	0.		0.
- 					
2 Compensation of five highest-paid employees (other than those inc	uded on line 1) If none	ntor "NONE "			
L compensation of the ingliest-paid employees forter than those inc	(b) Title, and average	INCE NOISE.	(d) Contributions to	(e) Fyn	ense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Exp account,	other
NONE	devoted to position		compensation	allowai	ices
HONB					
			-		
					
			-		
		[
					
					
Total number of other employees paid over \$50,000			<u>▶</u> T		0
			Form	990-PF	(2018)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	223,103.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	223,103.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	223,103.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,347.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	219,756.
6	Minimum investment return. Enter 5% of line 5	6	10,988.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here ▶ □ and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	10,988.
2a	Tax on investment income for 2018 from Part VI, line 5		
Ь	Income tax for 2018. (This does not include the tax from Part VI.)		
c	Add lines 2a and 2b	2c	1.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	10,987.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	10,987.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	10,987.
P	art XII Qualifying Distributions (see instructions)	_	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	<u>2,344,636.</u>
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	2,344,636.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		-
	income. Enter 1% of Part I, line 27b	5	1.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,344,635.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies for	the section

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,				10,987.
line 7 2 Undistributed income, if any, as of the end of 2018			· - · · · · · · · · · ·	10,307.
a Enter amount for 2017 only			0.	
b Total for prior years:		-		i
g rotal for prior you.o.		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013 1,536,374.				i
b From 2014 1,108,415.	ľ			
c From 2015 1,307,169.				1
d From 2016 1, 263, 463.				
e From 2017 1,482,697.				Į
f Total of lines 3a through e	6,698,118.			
4 Qualifying distributions for 2018 from				
Part XII, line 4: ►\$ 2,344,636.				
a Applied to 2017, but not more than line 2a			0.	
b Applied to undistributed income of prior			-	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				i
(Election required - see instructions)	0.			
d Applied to 2018 distributable amount				10,987.
e Remaining amount distributed out of corpus	2,333,649.			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	9,031,767.			
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				1
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				1
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				j
may be required - see instructions)	0.			
8 Excess distributions carryover from 2013				1
not applied on line 5 or line 7	1,536,374.			
9 Excess distributions carryover to 2019.				į
Subtract lines 7 and 8 from line 6a	7,495,393.			
10 Analysis of line 9:		İ		
a Excess from 2014 1,108,415.				
b Excess from 2015 1,307,169.				
c Excess from 2016 1, 263, 463.	ļ			j
d Excess from 2017 1,482,697.				İ
e Excess from 2018 2,333,649.				Form 990-PF (2018)

	R FAMILY FO				255431 Page 10
Part XIV Private Operating F			-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for	•	•	t] 4040(1)(2) as [4]	1040(3/5)
b Check box to indicate whether the foun-		ig roungation described ii	Prior 3 years	4942(j)(3) or 4	942(_J)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
income from Part I or the minimum investment return from Part X for	(4) 2010	(8) 25 11	(0) 20 10	(4) 2010	(0) 10.21
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed		1		l .	}
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities		/	1		
e Qualifying distributions made directly			1	T	
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	1	ľ
(1) Value of all assets			<u></u>		
(2) Value of assets qualifying under section 4942(i)(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:	<u> </u>				
(1) Total support other than gross		Ì	1		
investment income (interest,					
dividends, rents, payments on securities loans/section		1			
512(a)(5)), gr royalties)					
(2) Support from general public			1		
and 5 of more exempt organizations as provided in					
section 4942(j)(3)(B)(III)			<u> </u>		
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					<u></u>
Part XV Supplementary Info			f the foundation	had \$5,000 or mo	re in assets
at any time during t		uctions.)			
1 Information Regarding Foundation					
a List any managers of the foundation wh year (but only if they have contributed in			ibutions received by the	foundation before the clos	se of any tax
	ποτε τημη φο,σου). (σου 3	0000011 307 (4)(2).)			
HOWARD H. HEDINGER	100/ or more of th	a stank of a paragration /	or an aqually lorge party	on of the ownership of a n	artaerahin ar
b List any managers of the foundation when other entity) of which the foundation has			or an equally large porti	on or the ownership of a p	ai uiersiiip Or
NONE	J. g. oatortorot				
	ion Grant Gift Loop	Scholarship etc. Pre	narame:		
2 Information Regarding Contribut Check here ► X if the foundation of				not accept unsolicited requ	usete for funde. If
the foundation makes gifts, grants, etc.	•	•	-		10313 101 101103. 11
a The name, address, and telephone num					
a the tame, address, and tolophone fluin	0. 0an addition of th	- Faraon to milam applied			
b The form in which applications should it	pe submitted and informat	tion and materials they sh	ould include:		
c Any submission deadlines:			<u> </u>	• • • • • • • • • • • • • • • • • • • •	
The second secon			_ <u>,</u>		
d Any restrictions or limitations on award	s, such as by geographica	al areas, charitable fields,	kınds of institutions, or	other factors:	

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y		Boymont		
Recipient				
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient	 	
,			,	
				•
BRAVO! CONCERTS NORTHWEST 501 MAIN ST #301		PC	MUSICAL ARTS	
VANCOUVER, WA 98660				35,000
BRIAN GRANT FOUNDATION		PC	MEDICAL	
650 NE HOLLADAY ST #1600 PORTLAND, OR 97232				40,000
ORILIND, OR FIZSE				40,000
BRIDGE MEADOWS 8502 N. WAYLAND AVE.		PC	CHILDREN'S SERVICES	
PORTLAND, OR 97203		ļ		50,996
CAMP UKANDU		PC	CHILDREN'S SERVICES	
601 SW 2ND AVENUE, SUITE 2300				20.000
PORTLAND, OR 97204				30,000
CANDLE LIGHTERS FOR CHILDREN WITH		PC	MEDICAL	
CANCER				
PO BOX 2277 PORTLAND, OR 97208-2277				15,000
	NTINUATION SHEE	T(S)	<u>▶</u> 3a	2,344,636
b Approved for future payment				
NONE				
-10-11-				
			}	
Total	<u> </u>		▶ 3b	
10001			- 00	rm 990-PF (201

3 Grant's and Contributions Paid During the Ye	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to Foundation	Purpose of grant or		
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
CASA		PC	CHILDREN'S SERVICES	
1401 NE 68TH AVENUE				
PORTLAND, OR 97213				10,00
CENTRAL CATHOLIC		PC	EDUCATIONAL	
2401 SE STARK ST.				
PORTLAND, OR 97214				16,02
CHEETAH CONSERVATION FUND		PC	ANIMAL SERVICES	
PO BOX 2496 ALEXANDRIA, VA 22301-0496				24,78
DOVE LEWIS (VELVET FUND AND WET NOSE		PC	ANIMAL SERVICES	
SOIREE) 1945 NW PETTYGROVE STREET	İ	1		
PORTLAND, OR 97209				90,00
		<u> </u>		
ELEVATE OREGON		PC	CHILDREN'S SERVICES	
4916 NE 122ND AVE		1		5,00
PORTLAND, OR 97230				
GUIDE DOGS FOR THE BLIND		PC	ADULT SERVICES	
32901 SE KELSO RD				
BORING, OR 97009	- ;		 	50,00
HARRISON BERG PRESENTS		PC	MUSICAL ARTS	
3161 SW FAIRMOUNT BLVD				
PORTLAND, OR 97239				11,50
L'ARCHE NEHALEM		PC	DISABILITY SERVICES	
435 SE 85TH AVENUE			DIDADIBITI DUNVICED	
PORTLAND, OR 97216				25,00
LEUKEMIA & LYMPHOMA SOCIETY		PC	MEDICAL	
9320 SW BARBUR BLVD				
PORTLAND, OR 97219				10,00
MANDEL HAND GOVEOU (DADES!		, pc	BEL TOTOUS	
MADELEINE SCHOOL/PARISH 3123 NE 24TH AVENUE		PC	RELIGIOUS	
PORTLAND, OR 97212		<u> </u>		1,000,00
Total from continuation sheets				2,173,64

3 Grant's and Contributions Paid During the	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	
MAURICE LUCAS FOUNDATION	1	PC	CHILDREN'S SERVICES	
PO BOX 1661				
LAKE OSWEGO, OR 97035	<u> </u>			65,00
NATE MORELAND - LIFTS, LLC		PC	AMATUER ATHLETICS	
9000 SW BEAVERTON HILLSDALE HWY				
PORTLAND, OR 97225		ļ		10,000
NORTHWEST FAMILY SERVICES		PC	CHILDREN'S SERVICES	
6200 SE KING RD				15 00
PORTLAND, OR 97222				15,000
OHSU FOUNDATION		PC	MEDICAL	
3181 SW SAM JACKSON PARK RD.				
PORTLAND, OR 97239		<u> </u>		120,000
OMSI		PC	EDUCATIONAL	
1945 SE WATER AVENUE				
PORTLAND, OR 97214	<u> </u>	<u> </u>		100,000
OCAC		PC	EDUCATIONAL	
8245 SW BARNES RD				
PORTLAND, OR 97225				230,000
OREGON BALLET THEATRE (AARON MEYER)		PC	PERFORMING ARTS	
720 SW BANCROFT ST.				
PORTLAND, OR 97239	 	<u> </u>		25,200
OREGON MUSIC HALL OF FAME (AARON		PC	PERFORMING ARTS	
MEYER)				
3158 EAST BURNSIDE				20.004
PORTLAND, OR 97214		<u> </u>		30,000
OREGON SYMPHONY		PC	PERFORMING ARTS	
923 SW WASHINGTON ST			•	
PORTLAND, OR 97205		<u> </u>		50,000
PROVIDENCE PORTLAND MEDICAL		PC	MEDICAL	
FOUNDATION				
4805 NE GLISAN ST				
PORTLAND, OR 97213	<u> </u>	L	<u> </u>	9,92
Total from continuation sheets				

Part XV Supplementary Information Grant's and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or contribution show any relationship to status of Amount any foundation manager Name and address (home or business) recipient or substantial contributor PROVIDENCE CHILD CENTER FOUNDATION PC MEDICAL 830 NE 47TH AVENUE PORTLAND, OR 97213 16,205. SET PC CHILDREN'S SERVICES 3920 NORTH KERBY AVENUE PORTLAND, OR 97227 100,000. PC SNOWMAN FOUNDATION MUSICAL ARTS 811 NW 19TH AVENUE, SUITE 102 PORTLAND, OR 97209 20,000. PC TEN GRANDS MUSICAL ARTS 8215 SW TUALATIN-SHERWOOD RD #200 TUALATIN, OR 97062 60,000. THE PONGO FUND PC ANIMAL SERVICES PO BOX 8244 PORTLAND, OR 97207 55,000. PC ANIMAL SERVICES WILD CAT RIDGE SANCTUARY PO BOX 280 25,000. SCOTT MILLS, OR 97375 Total from continuation sheets

Part XVI-A	Analy	sis of	Income	-Producing	Activities

F-1-2	Unrelated	d business income	Exclu	ded by section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.	(a) Business	(b)	(C) Exclu-	(d)	(e) Related or exempt
1 Program service revenue;	code	Amount	code	Amount	function income
a					
b					
c					
d					
е	1				
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash '					
investments			14	100.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory		<u>. </u>			<u> </u>
9 Net income or (loss) from special events			<u> </u>		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	1 1				
a		<u> </u>			
b			<u> </u>		
c					
d		<u> </u>			
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		100.	
13 Total. Add line 12, columns (b), (d), and (e)				13	100.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities t	o the Accor	nplishment of Exc	empt	Purposes	
Line No. Explain below how each activity for which inco	me is reported in	column (a) of Part VVI-A	contrib	wited importantly to the accom	nlichment of
the foundation's exempt purposes (other than			CONTINU	rated importantly to the accom	phoninent of
with the state of	by providing run				
					 -
					
					
					
		-			
					
					
	·				
		<u></u>			
					
					
					 -
					
					<u></u>
					
000001 10 11 10					Form 990-PF (2018)

823622 12-11-18

Paid

Preparer

Use Only

Date

11/11/2019

Preparer's signature

Firm's name ▶ PRICEWATERHOUSECOOPERS LLP

Firm's address ► 805 SW BROADWAY, SUITE 800 PORTLAND, OR 97205

Check _____ if self- employed

P01486440

Form 990-PF (2018)

Firm's EIN ► 13-4008324

Phone no. 971-544-4000

Print/Type preparer's name

JOSEPH D OLSON

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.
➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Name of the organization

Employer identification number

HEDINGER FAMILY FOUNDATION 93-1255431						
Organization type (ch	eck one)					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	n				
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation	3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
Note: Only a section 5 General Rule X For an organi	tition is covered by the General Rule or a Special Rule . 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule and a Special Rule and a Special Rule and a Special Rule and a Special Rule and a Special Rule and a Special Rule and a Special Rule and a Special Rule and a Special Rule and a Special Rule and a Special Rule.	totaling \$5,000 or more (in money or				
property) from	n any one contributor Complete Parts I and II See instructions for determining a cont	ributor's total contributions				
Special Rules						
sections 509(any one cont	szation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% s (a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 1 tributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the 90-EZ, line 1. Complete Parts I and II	3, 16a, or 16b, and that received from				
year, total co	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III					
year, contribu is checked, e purpose Don	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 if this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year					
but it must answer "N	cion that isn't covered by the General Rule and/or the Special Rules doesn't file Schedi o" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or neet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	•				

Employer identification number

_		
HENTNGED	FAMTI.V	FOIDDATION

93-1255431

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	AMERICAN INDUSTRIES, INC. 1750 NW NAITO PKWY SUITE 106 PORTLAND, OR 97209	\$1,310,520.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	HOWARD HEDINGER 1750 NW NAITO PKWY SUITE 106 PORTLAND, OR 97209	\$1,000,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part If 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

HEDINGER FAMILY FOUNDATION

93-1255431

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed.			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
823453 11-08-		\$	990. 990-EZ. or 990-PFI (2018)	

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Name of organization Employer identification number HEDINGER FAMILY FOUNDATION 93-1255431 Partill 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. (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (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 (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift

823454 11-08-18

Transferee's name, address, and ZIP + 4

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Relationship of transferor to transferee

FORM 990-PF	INTEREST C	ON SAVINGS	AND TEMPORARY	CASH	INVESTMENTS	STATEMENT 1
SOURCE			(A) REVENUE PER BOOKS	NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
INTEREST FRO	M CHECKING	-	100.		100.	0.
TOTAL TO PAR	T I, LINE 3	3	100.		100.	0.