efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93491045005279 OMB No 1545-0052 **Return of Private Foundation** 2018 Department of the Treasury or Section 4947(a)(1) Trust Treated as Private Foundation Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public. Open to Public ▶ Go to www.irs.gov/Form990PF for instructions and the latest information. Inspection For calendar year 2018, or tax year beginning 01-01-2018 , and ending 12-31-2018 Name of foundation A Employer identification number O'Callaghan Family Foundation 93-1285835 Number and street (or P O box number if mail is not delivered to street address) B Telephone number (see instructions) 207 NE 6th St (541) 265-3695 City or town, state or province, country, and ZIP or foreign postal code Newport, OR 97365 C If exemption application is pending, check here ☐ Initial return G Check all that apply ☐ Initial return of a former public charity D 1. Foreign organizations, check here ☐ Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change ☐ Name change E If private foundation status was terminated ☑ Section 501(c)(3) exempt private foundation H Check type of organization under section 507(b)(1)(A), check here ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation I Fair market value of all assets at end J Accounting method ☑ Cash ☐ Accrual If the foundation is in a 60-month termination under section 507(b)(1)(B), check here of year (from Part II, col (c), ☐ Other (specify) line 16) ▶\$ 675,225 (Part I, column (d) must be on cash basis ) Part I Analysis of Revenue and Expenses (The total (d) Disbursements for charitable Revenue and (b) Net investment (c) Adjusted net of amounts in columns (b), (c), and (d) may not necessarily expenses per books purposes equal the amounts in column (a) (see instructions) ) (cash basis only) Contributions, gifts, grants, etc , received (attach schedule) Check ► ✓ If the foundation is **not** required to attach 2

	3	interest on savings and temporary cash investments	668	668	
	4	Dividends and interest from securities	9,831	9,831	
	5a	Gross rents			
	ь	Net rental income or (loss)			
иlе	6a	Net gain or (loss) from sale of assets not on line 10	57,583		
Revenue	ь	Gross sales price for all assets on line 6a 97,106			
Re	7	Capital gain net income (from Part IV, line 2)		57,583	
	8	Net short-term capital gain			
	9	Income modifications			
	10a	Gross sales less returns and allowances			
	ь	Less Cost of goods sold			
	С	Gross profit or (loss) (attach schedule)			
	11	Other income (attach schedule)			
	12	Total. Add lines 1 through 11	68,082	68,082	
	13	Compensation of officers, directors, trustees, etc	10,000	2,500	
	14	Other employee salaries and wages			
Se	15	Pension plans, employee benefits			
enses	16a	Legal fees (attach schedule)			
Φ	l .		<b>76.1</b>	222	

	10a	Gross sales less returns and allowances			
	b	Less Cost of goods sold			
	С	Gross profit or (loss) (attach schedule)			
	11	Other income (attach schedule)			
	12	Total. Add lines 1 through 11	68,082	68,082	
	13	Compensation of officers, directors, trustees, etc	10,000	2,500	7,500
	14	Other employee salaries and wages			
Sé	15	Pension plans, employee benefits			
ารเ	16a	Legal fees (attach schedule)			
Expenses	ь	Accounting fees (attach schedule)	1,200	300	900
	C	Other professional fees (attach schedule)	<b>9</b> 50	13	37
Administrative	17	Interest			
stra	18	Taxes (attach schedule) (see instructions)			
ııı	19	Depreciation (attach schedule) and depletion			
ф	20	Occupancy			
ΑF	21	Travel, conferences, and meetings			
and	22	Printing and publications			
	23	Other expenses (attach schedule)			
atı	24	Total operating and administrative expenses.			
Operating		Add lines 13 through 23	11,250	2,813	8,437
0	25	Contributions, gifts, grants paid	31,191		31,191
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	42,441	2,813	39,628
	27	Subtract line 26 from line 12			
	а	Excess of revenue over expenses and disbursements	25,641		
	ь	Net investment income (If negative, enter -0-)		65,269	
	c	Adjusted net income (If negative, enter -0-)			

504,045

584,489

584,489

584,489

584,489

521.458

608,510

608,510

608,510 608,510

2

3

4

5

588,173

675,225

Investments—corporate bonds (attach schedule) . . . . . . .

Investments—land, buildings, and equipment basis ▶ \_

Less accumulated depreciation (attach schedule) ▶ \_\_\_\_

Less accumulated depreciation (attach schedule) ▶ \_\_\_

Accounts payable and accrued expenses . . . . .

Foundations that follow SFAS 117, check here ▶  $\Box$ and complete lines 24 through 26 and lines 30 and 31.

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

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

Foundations that do not follow SFAS 117, check here 🕨 🗹

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

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 end of year (line 4 minus line 5)—Part II, column (b), line 30

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

Analysis of Changes in Net Assets or Fund Balances

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

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > \_

Other liabilities (describe -\_

Temporarily restricted

Permanently restricted . . . .

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) .

Enter amount from Part I, line 27a . . . . . . .

Other increases not included in line 2 (itemize) -

Grants payable

## L1 12

C

	C
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	17
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səı	19
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	23
ets or Fund Balances	24 25 26
155	28
et þ	29
ž	30
	31
Pa	rt I
1	T
2	oi Ei
3	0
4	A
5	D

3111

584,489

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Page **3** 

Capital Gains	and Losses for rax on invest	ment income		•	
	e the kınd(s) of property sold (e g , rehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1 a 61 290 shares Dodge & 0	Cox Stock Fund		Р		
<b>b</b> 118 495 shares Dodge &					
c 401 284 shares Oakmark	: Equity & Income Fund		Р		
d 591 296 shares Royce Sp	<u> </u>		P		
e Capital Gains Dividends	recial Equity 1 and		P		
e capital dallis Dividends	(f)			+ ,	L\
(e) Gross sales price	Depreciation allowed (or allowable)	Cost or	<b>(g)</b> other basıs ense of sale	Gain d	<b>h)</b> or (loss) <sup>:</sup> ) minus (g)
a 1	2,500		7,99	3	4,502
b 1	2,500		9,65	7	2,843
	2,500		12,31	5	185
	2,500		9,55		2,947
			9,55.	1	47,106
	7,106				47,106
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69		<b>(1)</b>
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	<b>(k)</b> of col(ı) (յ), ıf any	col (k), but not	h) gain minus less than -0-) <b>or</b> om col (h))
a					4,502
b					2,843
С					185
d					2,947
<u>е</u>					47,106
	or (net capital loss)		Part İ, line 7	2	57,583
	Under Section 4940(e) for Re				
For optional use by domestic p	rivate foundations subject to the sec	ction 4940(a) tax on ne	et investment incor	ne)	
f section 4940(d)(2) applies, le	•				
f "Yes," the foundation does no	e section 4942 tax on the distributal of qualify under section 4940(e) Do	not complete this part			es 🗹 No
· · · · · · · · · · · · · · · · · · ·	nount 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	le-use assets	<b>(d)</b> Distribution rat (col (b) divided by o	
2017	31,459		741,027		0 042453
2016	29,132		656,343		0 044385
2015	31,364		651,364		0 048151
2014	30,914		682,352		0 045305
2013	34,414		611,031		0 056321
2 Total of line 1, column (c			· · ·		0 236615
,	for the 5-year base period—divide		· · · · · <del> </del>		0 230013
number of years the foun	dation has been in existence if less ncharitable-use assets for 2018 fron	than 5 years			0 047323 700,449
<b>5</b> Multiply line 4 by line 3		•	5		33,147
			6	+	653
	ent income (1% of Part I, line 27b)		· · · · · · · · · · · · · · · · · · ·	-	
				-	33,800
If line 8 is equal to or gre	ons from Part XII, line 4    ,		<u>8</u> oplete that part us	 ng a 1% tax rate Se	39,628 e the Part VI
instructions					000 DE (2010)

Page **6** 

1.	Statements Regard	iiiig	ACTIVITIES IOI WITHCIT	FOITH 4720 May Be	Kequirea (continuea	)			
5a	During the year did the foundation p	oay o	r incur any amount to					Yes	No
	(1) Carry on propaganda, or otherw	vise a	ittempt to influence legisl	ation (section 4945(e))?	☐ Yes	✓ No	,		
	(2) Influence the outcome of any sp	pecifi	c public election (see sect	tion 4955), or to carry					
	on, directly or indirectly, any vo		-		· · · 🔲 Yes	✓ No	,		
	(3) Provide a grant to an individual	for t	ravel, study, or other sım	ılar purposes?		✓ No			
	(4) Provide a grant to an organization section 4945(d)(4)(A)? See in		•	, -	d				
	(5) Provide for any purpose other t	han r	eligious, charitable, scien	tific, literary, or	⊔ Yes	<b>⊻</b> No	<b>'</b>		
	educational purposes, or for the		· ·		∟ Yes	✓ No	,		
b	If any answer is "Yes" to $5a(1)-(5)$ ,	did a	any of the transactions fa	nd to qualify under the ex	ceptions described in				
	Regulations section 53 4945 or in a	curre	ent notice regarding disas	ter assistance? See instr	ructions		5b		
	Organizations relying on a current n	otice	regarding disaster assist	ance check here		П			
C	If the answer is "Yes" to question 5a	a(4),	does the foundation clain	n exemption from the		_			
	tax because it maintained expenditu	ire re	sponsibility for the grant?	<sup>7</sup>	· · 🔲 Yes	□ No	,		
	If "Yes," attach the statement requi	red b	y Regulations section 53	4945-5(d)			<b>´</b>		
<b>6</b> a	Did the foundation, during the year,	rece	ive any funds, directly or	indirectly, to pay premi	ums on				
	a personal benefit contract?				· 🔲 Yes	<b>.</b>	_		
b	Did the foundation, during the year,				res :	NC	°   6ь		No
	If "Yes" to 6b, file Form 8870								
7a	At any time during the tax year, wa	s the	foundation a party to a p	prohibited tax shelter tra	nsaction? Yes				
b	If yes, did the foundation receive ar				∟ res i	<b>⊻</b> No	7b		
8	Is the foundation subject to the sec		•						
_	excess parachute payment during th		, , ,						
					∟ Yes	✓ No			l
Pai	and Contractors	JIIIC	ers, Directors, Trust	ices, roundation ma	anagers, Highly Paid	Emp	ioyees,		
1	List all officers, directors, truste	es. fo	oundation managers ar	nd their compensation	. See instructions				
			<b>b)</b> Title, and average	(c) Compensation (If		Τ,	- \		
	(a) Name and address		hours per week	not paid, enter	employee benefit plans a	and   1	e) Expen other al		
		ļ	devoted to position	-0-)	deferred compensation	n			
See /	Additional Data Table	1							
		1							
		1							
2	Compensation of five highest-pa	id en	nployees (other than t	hose included on line	1-see instructions). If	none,	enter "	NONE.	."
			(b) Title, and average		(d) Contributions to				
(a)	Name and address of each employee	paid	hours per week	(c) Compensation	employee benefit	(€	Expens		
	more than \$50,000		devoted to position		plans and deferred compensation		other all	owanc	es
NON	===============================				Compensation				
	_								
			-						
Tota	I number of other employees paid ov	er \$5	0,000						
						F	orm <b>99</b> 0	0-PF	(2018

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Part VIII Information About Officers, Directors, Trustees, F and Contractors (continued)	Foundation Managers, Highly Pa	id Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter	"NONE".
(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 relev organizations and other beneficiaries served, conferences convened, research papers produc		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see in	astructions)	
Describe the two largest program-related investments made by the foundation during the	<u>'</u>	Amount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		<b>P</b> 0
		Form <b>990-PF</b> (2018)

1b

2

3a 3h

4

5

39.628

38,975

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653

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

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

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

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

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

Page 9

34,369

30.794

0

3,575

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Part XIII	Und

istributed Income (see instructions)

(a)

Corpus

0

0

(b)

Years prior to 2017

(c)

2017

8.834

8,834

- 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
- **b** Total for prior years a From 2013. . . . .

- **b** From 2014. . . . c From 2015. . . d From 2016. . . . . e From 2017. . . . . f Total of lines 3a through e. . . . . . . .

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). . . . . . . . . .

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 . . . . .

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

6 Enter the net total of each column as

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

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . . **b** Excess from 2015. . c Excess from 2016. . . . d Excess from 2017. . . e Excess from 2018. . .

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

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

indicated below:

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

same amount must be shown in column (a) )

factors



Enter gross amounts unless otherwise indicated  1 Program service revenue		Unrelated bu	ısıness ıncome	Excluded by section	(e) Related or exempt	
		(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	( <b>d)</b> Amount	function income (See instructions )
	and contracts from government agencies					
_	ership dues and assessments					
	st on savings and temporary cash ments			14	668	
4 Divide	nds and interest from securities			14	9,831	
	ntal income or (loss) from real estate				,	
	-financed property					
	debt-financed property					
<b>6</b> Net re	ntal income or (loss) from personal property					
	investment income					
	r (loss) from sales of assets other than					
ınvent	,			18	57,583	
	come or (loss) from special events					
	profit or (loss) from sales of inventory					
	revenue a	+				
u						
е			0		68.082	(
<b>e</b> <b>2</b> Subto	tal Add columns (b), (d), and (e).		0		68,082 <b>3</b>	
e 2 Subto 3 Total (See w	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu	ılatıons )		13	68,082 <b>3</b>	
e 2 Subto 3 Total	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu  1-B Relationship of Activities to the	llations ) ne Accomplish	ment of Exem	pt Purposes	3	
e 2 Subto 3 Total. (See w	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Forksheet in line 13 instructions to verify calculated and the columns of activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the columns.	llations ) ne Accomplish income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
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e 2 Subto 3 Total (See w Part XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Forksheet in line 13 instructions to verify calculated and the columns of activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the columns.	llations ) ne Accomplish income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
e 2 Subto 3 Total (See w Part XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Forksheet in line 13 instructions to verify calculated and the columns of activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the columns.	llations ) ne Accomplish income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
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e 2 Subto 3 Total (See w Part XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Forksheet in line 13 instructions to verify calculated and the columns of activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the columns.	llations ) ne Accomplish income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
e 2 Subto 3 Total (See w Part XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Forksheet in line 13 instructions to verify calculated and the columns of activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the columns.	llations ) ne Accomplish income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
e 2 Subto 3 Total (See w Part XV	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Forksheet in line 13 instructions to verify calculated and the columns of activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the columns.	llations ) ne Accomplish income is report	ment of Exempled in column (e) of	pt Purposes	ted importantly to	
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	Information Regarding Transfers To and Transactions and Relationships With Noncharitable
Ш	Exempt Organizations

Part	XVI.	Exempt 0	Organiza	tions						•				
<ol> <li>Did</li> </ol>	the o	rganızatıon dırec	tly or indir	ectly enga					other organization	on described in sect	ion 501		Yes	No
<b>a</b> Tra	nsfers	from the reporti	ing founda	tion to a n	oncha	rıtable exe	empt organizat	on -	of		F			
(1) Cash										1a(1)		No		
(2) Other assets								[	1a(2)		No			
<b>b</b> Other transactions														
(1) Sales of assets to a noncharitable exempt organization								[	1b(1)		No			
(2) Purchases of assets from a noncharitable exempt organization									[	1b(2)		No		
											[	1b(3)		No
(4)	Reın	nbursement arra	ngements.								.	1b(4)		No
		_									-	1b(5)		No
(6)	Perfo	rmance of servic	es or men	nbership or	fundi	aising sol	icitations	•			.	1b(6)		No
	-		-	-		-						1c		No
										ways show the fair				
										ed less than fair mai ets, or services rece				
	٠.			,		•			,	,				
(a) Line	No	(b) Amount invo	olved (	c) Name of	noncha	ırıtable exer	mpt organization		(d) Description of	transfers, transactions	s, and shari	ng arra	ngemen	its
-														
<b>2a</b> Is t	ne fou	indation directly	or indirect	lv affiliated	with	or related	d to, one or mo	ore t	ax-exempt organ	ızatıons				
		,		•			•				'es 🗸	No		
		complete the follo			. 501(	د (رع) را	11 30001011 327	•				110		
<b>D</b> 11	163,	(a) Name of o	-	saule		(b	) Type of organi	zatio	n	(c) Description	n of relation	ship		
		. ,				`	, ,,			, , ,				
										ing schedules and s than taxpayer) is b				
	ı	ch preparer has	•	,	лгесс,	and comp	Diete Deciarati	OH C	n preparer (other	than taxpayer) is b	aseu on a	111101	mation	1 01
Sign			,	3-			1				May the	IRS di	scuss th	าเร
Here		*****					2019-02-03		<b>\</b> ******		return with the	nrona	ror chou	un I
	🗗						_		— <b>)</b> —		below	е ргера	iei silov	VII
		Signature of offi	icer or trus	stee			Date		' Title		(see ins	str )? [	<b>⊘</b> Yes !	□ <sub>No</sub>
	1	T			_					Ţ				
		Print/Type pr	eparer's na	ame	Prepa	arer's Sign	nature		Date	Check if self-	PTIN			
										employed ▶ □	F	00377	245	
Paid		Robert J Rı	ley						2019-02-03	' '-=-				
Prep	are	r												
Use		I II III D Hairie F	► Isler No	orthwest Ll	LC						Fırm's EI	N <b>►</b> 20	-48234	170
J36 '	J.111	Firm's address	s <b>&gt;</b> 1300	SW 5th A	ve 29	00								
		1									Phone no	(503	ا-224 (	5321
			Portl	and, OR 9	/2015	692						,500	,	

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

			compensation	
Peggy O'Callaghan	Treasurer	2,000	0	
207 NE 6th St	0 71			

207 NE 6th St Newport, OR 97365	0 71	2,000	0	U
Lanı O'Callaghan	Director	2,000	0	0

Lanı O'Callaghan	Director	2,000	0	<u> </u>
212 Kimeron SE Salem, OR 97306	0 71	2,000	v	·
Colleen O'Callaghan	Secretary	2,000	0	0

	Director	2,000	·	•
212 Kimeron SE Salem, OR 97306	0 71			
Colleen O'Callaghan	Secretary	2,000	0	0
1429 Spruce St	0 69			

Colleen O'Callaghan	Secretary	2,000	0	0
1429 Spruce St Lake Oswego, OR 97034	0 69			
Molly J Gorger	President	2,000	0	0
PO Box 230725	0 31			

Lake Oswego, OR 97034				1
Molly J Gorger	President	2,000	0	0
PO Box 230725 Tigard, OR 97281	0 31			

2,000

0

Director

0 31

Janet O'Callaghan

Kealakekua, HI 96750

PO Box 396

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

a Paid during the year				
Oregon Coast Council of the Arts 777 W Olive St	None	PC	General Support	1,000
Newport OR 97365				

Newport, OR 97365				
Paws of Hermiston1844 NW Geer Road Hermiston, OR 97838	None	PC	General Support	1,000

Paws of Hermiston1844 NW Geer Road Hermiston, OR 97838	None	PC	General Support	1,000
Bright Horizons1925 E Logsden Rd	None	PC	General Support	1,000

Hermiston, OR 97838				
Bright Horizons1925 E Logsden Rd Siletz, OR 97380	None	PC	General Support	1,000

Total .

31,191

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

My Sisters Place934 SW 8th St Newport, OR 97365	None	PC	General Support	1,000
Friends of Newport Senior Activity Center 20 SE 2nd St	None	PC	General Support	1,000

Friends of Newport Senior Activity Center 20 SE 2nd St Newport, OR 97365	None	PC	General Support	1,000

20 SE 2nd St Newport, OR 97365				
Lincoln County Food Share535 NE 1st St	None	PC	General Support	1,000

Newport, OR 97365				
Lincoln County Food Share535 NE 1st St Newport, OR 97365	None	PC	General Support	1,000

31,191

Lincoln County Food Share535 NE 1st St	None	PC	General Support	1,000
Newport, OR 97365				

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 contribution status of any foundation manager. recipient

Surfrider Foundation	None	PC	General Support	1,000
a Paid during the year				
Name and address (home or business)	or substantial contributor	redipient		

Surfrider Foundation 942 Calle Negocio Suite 350 San Clemente, CA 92673	None	PC	General Support	1,000
Newport Symphony Orchestra	None	PC	General Support	500

942 Calle Negocio Suite 350 San Clemente, CA 92673				
Newport Symphony Orchestra PO Box 1617 Newport, OR 97365	None	PC	General Support	500
Oregon Council for the Humanities	None	DC	General Support	500

PO Box 1617 Newport, OR 97365	None	PC	General Support	500
Oregon Council for the Humanities 921 SW Washington St 150 Portland, OR 97205	None	PC	General Support	500

31,191

Newport, OR 97365				
Oregon Council for the Humanities 921 SW Washington St 150 Portland, OR 97205	None	PC	General Support	500

Total .

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

or substantial contributor

None

Name and address (home or business)

Oregon Environmental Council Inc

222 NW Davis St 309 Portland, OR 97209

Total .

a Paid during the year				
Pixie Project Inc 510 NE Martin Luther King Jr Blvd Portland, OR 97232	None	PC	General Support	500
Environmental Law Alliance Worldwide 1412 Pearl St Eugene, OR 97401	None	PC	General Support	1,000

PC

General Support

5,000

31,191

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

	or substantial contributor			
a Paid during the year				
Looking Glass Community Services 1790 W 11th Ave 200	None	PC	General Support	500

1790 W 11th Ave 200 Eugene, OR 97402				
Lifeworks NW14600 NW Cornell Road Portland, OR 97229	None	PC	General Support	450

Lifeworks NW14600 NW Cornell Road Portland, OR 97229	None	PC	General Support	4
\(\text{\tin\text{\tin}\\ \ti}\\\ \tittt{\text{\text{\ticr{\text{\text{\ti}\tint{\text{\text{\text{\text{\text{\text{\texi}\tinz}\text{\text{\ti}\titt{\text{\ti}\tinttitt{\text{\ti}\tittt{\text{\ti}\text{\ti		DC	6 16 1	

Total .

Portland, OR 97229				
YMCA9500 SW Barbur Blvd Ste 200	None	PC	General Support	1,400

YMCA9500 SW Barbur Blvd Ste 200 Non Portland, OR 97219	pne	PC	General Support	1,400

31,191

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year Family Building Blocks Inc None PC General Support 1.000

2425 Lancaster Dr NE

Salem, OR 97305				
Oregonians for Alternatives to the Death Penalty	None	PC	General Support	700
PO Box 2765 Salem, OR 97308				

Penalty PO Box 2765 Salem, OR 97308	Notice		- General Эцррогс	700
Marion-Polk Food Share 1660 Salem Industrial Dr NE Salem. OR 97301	None	PC	General Support	500

Salem, OR 97301			<b>▶</b> 3a	31,191
Marion-Polk Food Share 1660 Salem Industrial Dr NE	None	PC	General Support	500
Salem, OR 97308				

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

Museum Street Barks Conservancy	Neme	DC.	Camanal Command	1 000
Southern Poverty Law Center Inc 400 Washington Ave Montgomery, AL 36104	None	PC	General Support	500
a Paid during the year				

Montgomery, AL 36104				
Mission Street Parks Conservancy 600 Mission St SE Salem, OR 97302	None	PC	General Support	1,000
1				

600 Mission St SE Salem, OR 97302				_,
Salem for Refugees555 Gaines St NE	None	PC	General Support	500

Salem, OR 9/302				
Salem for Refugees555 Gaines St NE Salem, OR 97301	None	PC	General Support	500

31,191

▶ 3a

Salem for Refugees555 Gaines St NE	None	PC	General Support	
Salem, OR 97301				

Total .

a Paid during the year				
Isaac's Room299 Cottage St NE Salem, OR 97301	None	PC	General Support	1,000
Ducks Unlimited IncOne Waterfowl Way Memphis, TN 38120	None	PC	General Support	450
The International Snow Leonard Trust	None	PC	General Support	200

Ducks Unlimited IncOne Waterfowl Way Memphis, TN 38120	None	PC	General Support	450
The International Snow Leopard Trust 4649 Sunnyside Avenue North Suite 325 Seattle, WA 98103	None	PC	General Support	200
Total				31.191

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 contribution status of

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
Best Friends Animal Society 5001 Angel Canyon Road	None	PC	General Support	200

Kanab, UT 84741				
Sisters Of The Road133 NW 6th Avenue Portland, OR 97209	None	рс	General Support	791
Refugee & Immigrant Center For	None	PC	General Support	200

Portland, OR 97209	None	pc	General Support	/91
Refugee & Immigrant Center For Education & Legal Services 1305 N Flores Street San Antonio, TX 78212	None	PC	General Support	200

	Portland, OR 97209	None	PC	General Support	, , , ,
	Refugee & Immigrant Center For Education & Legal Services 1305 N Flores Street San Antonio, TX 78212	None	PC	General Support	200
Total					31.191

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

any foundation manager

Name and address (home or husiness)

Tacoma, WA 98406

Total .

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
American Civil Liberties Union 506 SW 6th Ave 700 Portland, OR 97204	None	PC	General Support	200
Planned Parenthood 3727 NE Martin Luther King Jr Blvd	None	PC	General Support	1,000

recipient

31,191

L				
Planned Parenthood 3727 NE Martin Luther King Jr Blvd Portland, OR 97212	None	PC	General Support	1,000
Our Sisters House Empowerment 2714 N 21st St 3	None	PC	General Support	500

Planned Parenthood 3727 NE Martin Luther King Jr Blvd Portland, OR 97212	None	PC	General Support	1,
Our Sisters House Empowerment 2714 N 21st St 3	None	PC	General Support	

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

a Paid during the year				
Horses of Hope2895 Cloverdale Dr SE Turner, OR 97392	None	PC	General Support	500

Namı Multnomah524 NE 52nd Ave Portland, OR 97213	None	PC	General Support	1,100
Medical Teams InternationalPO Box 10	None	PC	General Support	2,000

Portland, OR 97213				
Medical Teams InternationalPO Box 10	None	PC	General Support	2,000
Portland, OR 97207				

31,191

Total .

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

recipient

31,191

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

Good Neighbor Center	None	PC	General Support	2,000
a Paid during the year				
Name and address (nome or business)	or substantial contributor	,		

od Neighbor Center	None	PC	General Support
.30 SW Greenburg Rd			1
ard, OR 97223			1

Good Neighbor Center	None	PC PC	General Support	2,0
11130 SW Greenburg Rd				
Tigard, OR 97223				
		l		

efile GRAPHIC print - DO NOT F	ROCESS As Filed	Data - DLN: 93491045005279			
TY 2018 Accounting Fe	ees Schedule				
_					
Name: O'Callaghan Family Foundation EIN: 93-1285835					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
Accounting	1,200	300		900	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491045005279				
TY 2018 Investments - Other Schedule						

Name: O'Callaghan Family Foundation

Maille.	O Callagrian Family Foundation
ETN.	03_1285835

EIN. 95-1263633				
Investments Other Schedule 2				
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value	
Dodge & Cox Stock Fund	AT COST	152,391	197,486	
Dodge & Cox Balanced Fund	AT COST	143,523	162,780	
Oakmark Equity & Income Fund	AT COST	93,604	82,705	
Royce Special Equity Fund	AT COST	131.940	145,202	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491045005279
TY 2018 Other Decreases Scho	edule	
Name:	O'Callaghan Family Foundatio	n
EIN:	93-1285835	
De	escription	Amount
Tax and related		1,620

efile GRAPHIC print - DO NOT PROC	ESS As Filed Data	-	DL	N: 93491045005279	
TY 2018 Other Professional Fees Schedule					
Name: O'Callaghan Family Foundation					
<b>EIN:</b> 93-1285835					
Category	Amount	Net Investment	Adjusted Net	Disbursements	
Category	Amount	Net Investment	Aujusteu Net	Dispuisements	

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

50

Management fees