00	ହୁଁ ମୁଣ୍ଡ ଓ ପ୍ରଥମ Return of Organization Exempt From Income Tax	U 0 3 7 0 4
JU		2018
	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)	

Dep	artment of t	the Treasury le Service	► Go to www.irs.gov/Form990 for instructions and the latest			10 <i>k</i>	) Open	to P pecti	
A			ndar year, or tax year beginning 07/01 , 2018, and endin		06/30		, 20 19		
В	Check if a		C Name of organization CORVALLIS PUBLIC SCHOOLS FOUNDATION			mploy	er identificat	ion nu	mber
	Address		Doing business as				93-12086	08	
$\overline{\sqcap}$	Name cha		Number and street (or P O box if mail is not delivered to street address)  Room/su	ite	ΕT	elepho	ne number		
$\vec{\sqcap}$	Initial retu		1555 SW 35th Street				541-757-58	357	
$\overline{\Box}$		n/terminated	City or town, state or province, country, and ZIP or foreign postal code						
$\exists$	Amended		Corvallis, OR, 97333		G	iross r	eceipts \$		769,537
$\Box$		•	F Name and address of principal officer Liv Gifford			subordinates?			
_	Applicatio	n pending	1555 SW 35th Street, Corvallis, OR 97333				s included?	_	
_	Tax-exem	nt status	✓ 501(c)(3) □ 501(c) ( ) ◀ (insert no ) □ 4947(a)(1) or □ 527	<del>-</del>			ee instruction:		
<u></u> -	Website		v cpsfoundation org	H(c)	aroun exe	motion	number ►		
ĸ			✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of format			<del></del>	of legal domi	cile	OR
Р	art I	Summ			7,75				<u> </u>
	_			tivate th	e practio	e of e	charitable g	IVIDA	<u>to</u>
ė	1		ucation causes in Corvallis, Oregon, and to build support for public educat						
au	1 -		l learning opportunities and materials, and to develop and honor outstandii						
ē			s box ▶ ☐ if the organization discontinued its operations or disposed of		* - <b>- * * *</b> •	% of	its net asse	ets	
õ			of voting members of the governing body (Part VI, line 1a)		. 1	3			14
۰ŏ			of independent voting members of the governing body (Part VI, line 1b)			4			14
ies	I		nber of individuals employed in calendar year 2018 (Part V, line 2a)			5			0
Activities & Governance	1		ber of volunteers (estimate if necessary)		RE	) DI	VED		40
Ä	7a ~	Total unre	elated business revenue from Part VIII, column (C), line 12	1 –	- 1,72,0	- <del>7</del> a-	VEU	$\Box$	0
	1 d	Net unrela	ated business taxable income from Form 990-T, line 38	121		7b_		3	
				O Pri	ior Vear	6	2020 curl	ert Ye:	
a	8 (	Contribut	ons and grants (Part VIII, line 1h)		70	7,016		2	682,300
Revenue	9 F	orogram :	service revenue (Part VIII, line 2g)			GDEN LIT			0
ě	10 I	nvestmer	nt income (Part VIII, column (A), lines 3, 4, and 7d)	L		372			81,193
<b>—</b>	11 (	Other rev	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			9,610			-14,485
	12	Total reve	nue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		749	7,778			749,008
			d similar amounts paid (Part IX, column (A), lines 1-3)		41	,211			457,848
	14	Benefits p	oald to or for members (Part IX, column (A), line 4)			0			0
es			ther compensation, employee benefits (Part IX, column (A), lines 5–10)			0			0
Expenses	16a F	Profession	nal fundraising fees (Part IX, column (A), Iine 11e)			0			0
ă	1		Iraising expenses (Part IX, column (D), line 25) ▶ 32,854						
ш	17 (	Other exp	enses (Part IX, column (A), lines 11a–11d, 11f–24e)		138	3,774			140,194
	1		enses Add lines 13-17 (must equal Part IX, column (A), line 25)		549	,985			598,042
		Revenue	ess expenses Subtract line 18 from line 12 .			7,793			150,966
s or				Beginning	of Current	Year	End o	of Yea	r
Net Assets Fund Balanc	20 7		ets (Part X, line 16)		1,523	,402	-	1,0	675,012
뒱	21 7		lities (Part X, line 26)			0			0
			s or fund balances Subtract line 21 from line 20		1,523	,402		1,6	675,012
	art II		ure Block						
Un	der penalti e. correct.	es of perjury and comple	y, I declare that I have examined this return, including accompanying schedules and staten te. Declaration of preparer (other than officer) is based on all information of which preparer	nents, and	d to the be	est of r	ny knowledge	and t	belief, it is
		A COMPIC	2012 - 1011 - 10	ilas aliy k	Towleage	7			
Sig	ın	Signa	Kire of officer		<u></u>	115	12020		
oiy He		,	· ·		Date				
	.		Gifford, Executive Director or print name and title				<del></del>		
		· · · · · · · · · · · · · · · · · · ·		10 .	<del></del> 1		DTIE		
Pa		Diama M		. / /		heck [			
	eparer			12/2		lf-emp		1358	
Us	e Only	Firm's na	me Diane H McInally CPA LLC		Firm's El	N Þ	81-15	3910!	5

For Paperwork Reduction Act Notice, see the separate instructions.

May the IRS discuss this return with the preparer shown above? (see instructions)

541-207-4740

V Yes No

Form 990 (2018) Cat No 11282

Part	Statement of Program Service Accomplishments  Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission
'	,
	To cultivate the practice of charitable giving to public education causes in Corvallis, Oregon, and to build support for public education in order to provide students with expanded learning opportunities and materials, and to develop and honor outstanding
	teachers
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
_	services <sup>?</sup>
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
•	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code ) (Expenses \$ 274,250 including grants of \$ 274,250 ) (Revenue \$ 0)
	School Programs Support We managed more than 220 designated accounts for service learning projects, homeless education
	program, bike education, special education, outdoor school, literacy mentors, high school career convention, graduation party, and
	many other programs relating to art, drama, extracurricular, foreign language, library, math, music, physical education, science,
	sports, technology, and robotics for the school district's 13 elementary, middle, and high schools that enrolled 6,733 students and
	employed 1,037 individuals, including 967 teachers and support staff, and an additional 70 coaches
4b	(Code ) (Expenses \$ 155,669 including grants of \$ 155,669 ) (Revenue \$ 0)
	Student Success Programs We supported an enriching education for all students, even those who were economically
	disadvantaged Through our Student Opportunity for Success program (which was created to eliminate barriers to full participation
	in school for low-income students), we provided \$18,013 for financially needy students (benefitting 2,200 students) with art
	supplies, graphing calculators, take-home books for elementary school students, and non-standard school items such as
	backpacks and clothing, emergency health and hygiene supplies, food, snacks, field trip fees, music/athletic fees, extracurricular
	activity fees, and sleeping bags. We also provided rent money and transportation, in addition to the types of items mentioned
	above, for 210 homeless students, for a total of \$37,106. We also provided \$96,300 of grants through our intervention programs
	(benefitting 500 students) that provided summer and school-year academic support to students who are at risk of not graduating
	from high school. The summer programs served 464 students (over half were students in poverty and a significant number were
	students of color and/or second language learners) at the elementary, middle and high school levels, who attended enhancement
	courses in math, reading, writing, and study skills, and some students had the opportunity to visit colleges. The Kinder Academy
	(Continued on Schedule O, Statement 2)
4c	(Code ) (Expenses \$ 66,737 including grants of \$ 65,009 ) (Revenue \$ 0)
	Teacher Support Programs We awarded 20 learning enrichment grants to schools (benefitting 5,004 students) which provided \$40,
	481 for teachers' projects that enriched and enhanced the educational experience for students in the areas of animal husbandry,
	art, bilingual theater, community service, construction mathematics, cooking and nutrition, engineering, fitness, horticulture, music,
	science, technology, 3-D printing, yoga and mindfulness. We also awarded \$3,795 of grants for professional development training
	for 12 teachers, counselors and advisers. We provided \$5,000 for a school librarian to purchase books at the Guadalajara
	International Book Fair to build the Spanish library collections for the dual-language immersion programs at four schools. Through
	a new program called Sources of Strength, we provided \$12,673 for 20 teachers and staff to receive training in suicide prevention
	designed to harness the power of peer social networks to change unhealthy norms and culture. And through our Golden Apple
	Awards program, we awarded 4 stipends totaling \$3,060 to honor outstanding teachers and staff in the school district
	011
4d	Other program services (Describe in Schedule O.)
4e	(Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0 )  Total program service expenses \$ 466.656

Part IV	Checklist of Required	Schedules

1 is the organization desorbed in section 501(c)(s) or 4947(a)(1) (other than a private foundation? If "Yes," complete Schedule A.  2 is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?  3				162	140
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?  Did the organization engage in direct or indirect political campaging activities on behalf of or inopposition to candidates for public office? If "Yes," complete Schedule C, Part II  Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) electron in effect during the tax year? If "Yes," complete Schedule C, Part II  Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19° If "Yes," complete Schedule C, Part II  Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II  Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  Did the organization services? If "Yes," complete Schedule D, Part III  Did the organization services? If "Yes," complete Schedule D, Part IV  The proportion of the part X, inc. 12 for service organization, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  Did the organization, directly or through a related organization, hold assets in temporally restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part IVI  Did the organization services? If "Yes," complete Schedule D, Part IVI  If the organization services? If "Yes," complete Schedule D, Part IVI  Did the organization shall be proported in Part X, line 161 If "Yes," complete Schedule D, Part X III  Did the organization shall be proported in Part X, line 162 If "Yes," complete Schedule D,	1		1	v	
3	2		2	~	
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year // If ves, "complete Schedule D, Part // If the organization is section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revierue Procedure 98-19? If "Yes," complete Schedule C, Part // If Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part // If Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic lend areas, or historic structures? If "Yes," complete Schedule D, Part II If Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III If Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts on listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part VI If If the organization, directly or through a related organization, hold assets in temporarily restricted endowments, or quasi-endowments? If "Yes," complete Schedule D, Part VI If If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI If If the organization report an amount for lowestments—other securities in Part X, line 10 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI If If Ves Under organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets the organization report an amount for other liabilities in Part X, line 16 that year? If "Yes," c		Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	3		~
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III  6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II  7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III  8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  9 Did the organization export an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 20, Part IV  10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part VIII, III, IX, IX, or X as applicable  10 Did the organization report an amount for linvestments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part XIII  11 If the organization report an amount for investments—other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XIII  12 Did the organization report an amount for other assets in Part X, line 16? If "Yes," complete Schedule D, Part XIII  13 Did the organiza	4		4		,
the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Yes," complete Schedule D, Part II  Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debti management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part VV  If If the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI  Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  Did the organization service of an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  Did the organization service of an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XIII  Did the organization service of an amount for other labilities in	5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	5		~
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II  Did the organization maintain collections of works of art, historical treasures, or other smillar assets? If "Yes," complete Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.  Did the organization decity or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V, VII, VIII, X, or X as applicable  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  Did the organization report an amount for investments—other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XII  Did the organization obtain separate, independent audited financial statements for that ayear? If "Yes," complete Schedule D, Part XIII  Did the organization obtain separate, independent audited financial statements for that ayear? If "Yes," complete Schedule D, Parts XI and XIII soptional is the organization included in consolidated, independent audited financial statements for that ayear? If "Yes," complete Schedule D, Parts XI and XIII soptional is the organization asked of the United States, or aggregate foreign investments valued at \$10,000 or more	6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	6		,
10 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III   9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V I. 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasis-endowments? If "Yes," complete Schedule D, Part V III. III. III. III. III. III. III. I	7		7		,
Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V I Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V II If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V II, VIII, VIII, X, or X as applicable  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of it stotal assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  Did the organization report an amount for other labilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  Did the organization's separate or consolidated financial statements for the tax year If "Yes," complete Schedule D, Part X IIII  Did the organization balant separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X IIII  W  112a Did the organization assets exported "No" to line 12a, then completing Schedule D, Part X III VIIII VIIIII VIIII VIIII VIIII VIIII VIIII VIIII VIIII VII	8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	8		,
endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V II If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII  b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  d Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  d Did the organization report an amount for other labilities in Part X, line 25? If "Yes," complete Schedule D, Part X III  d Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III  b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XIII soptional is the organization aschool described in section 170(b)(1)(A)(II) If "Yes," complete Schedule E  b Did the organization aschool described in section 170(b)(1)(A)(II) If "Yes," complete Schedule E  b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," com	9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or	9		,
Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11a	10		10	,	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  d Did the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X VIII.  d Did the organization separate, independent assets in Part X, line 15? If "Yes," complete Schedule D, Part X VIII.  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X VIII.  b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional is the organization maintain an office, employees, or agents outside of the United States?  b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate for eny foreign organization? If "Yes," complete Schedule F, Parts II and IV  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV  16 Did the organization report a total of more than \$15,000 of expenses for professional fundraisi	11				
of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII .  d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X ind by the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X ind XII is plitted by the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII is optional is the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII is optional is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional is the organization maintain an office, employees, or agents outside the United States?  b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts II and IV  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  16 Did the organization report more than \$15,000 total of fundraising event gross	а		11a		,
of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX  e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X  f Did the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII is optional is the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule D, Parts XI and XII is optional is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts II and IV  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part XI, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part II (see instructions)  17 Use Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  19 Did the organization	b		11b		~
reported in Part X, line 16? If "Yes," complete Schedule D, Part IX  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X In Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Ind XII visualization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X Ind XII visualization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization asswered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization asswered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part I (see instructions)  Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 of gross income from gaming activities on Part VII	С		11c		,
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 122 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII when the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional is the organization associated in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b V 15b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garnts or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 15b Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part II 16b Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 16b Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 16b Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 16c Did the organization report more than \$15,000 of grants or other assistance to any domestic organization organization organization report more than \$5,000 of grants or other assistance to any domestic organ	d		11d		٧
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 1212 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Is Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV Is Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Is Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part II (see instructions) If Yes," complete Schedule G, Part III Is Put It It Is Put	е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		~
Schedule D, Parts XI and XII  b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 1s the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  13	f		11f		/
"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)  In the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 and 82° If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 92° If "Yes," complete Schedule G, Part III  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	12a		12a		٧
Did the organization maintain an office, employees, or agents outside of the United States?  b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts III and IV  16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)  17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III  19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  19 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<b>&gt;</b>
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV  16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)  18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  19 If "Yes," complete Schedule G, Part III  20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  20 b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  20 c Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			$\vdash$		<u> </u>
fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV  16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)  18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  19 If "Yes," complete Schedule G, Part III  20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  20 b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  20 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	14a		14a		_
for any foreign organization? If "Yes," complete Schedule F, Parts II and IV  16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)  18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III  20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  20 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	b	fundraising, business, investment, and program service activities outside the United States, or aggregate	14b		V
assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)  18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III  20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  20b  21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	15		15		/
Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)  Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	16		16		<b>/</b>
Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	17		17		~
If "Yes," complete Schedule G, Part III	18		18	~	
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  20b  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	19		19		v
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20 a		20a		~
de			20b		
	21		21	,	

Part	Checklist of Required Schedules (continued)			,
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	~	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		~
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		,
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		~
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		v
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		,
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		~
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		~
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		~
2 <del>9</del> 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		v
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		,
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	,	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		~
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		~
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	~	
Part				_
	Check if Schedule O contains a response or note to any line in this Part V	• •		
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		Yes	No
b	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			
-	reportable gaming (gambling) winnings to prize winners?	10	<b>/</b>	

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			٠¢.
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0		<u> </u>	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		<u></u>	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			١.
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		V
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		ļ
7	Organizations that may receive deductible contributions under section 170(c).			-
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	<u> </u>		
	and services provided to the payor?	7a		-
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		├
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	ļ <b>,</b> .		
	required to file Form 8282?	7с		· ,
d	If "Yes," indicate the number of Forms 8282 filed during the year			لمربا
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		V
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<del></del>		-
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		<del>                                     </del>
8		<del>  '''  </del>		
0	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<del></del>
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 . 10a			1 1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter	.		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			ł [
	against amounts due or received from them)			L .
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year .		Ì	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O		,	
b	Enter the amount of reserves the organization is required to maintain by the states in which		i	ı
	the organization is licensed to issue qualified health plans . 13b	, ,		
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	I	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or		T	
	excess parachute payment(s) during the year?	15		~
	If "Yes," see instructions and file Form 4720, Schedule N			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
	If "Yes," complete Form 4720, Schedule O	- 1	1	- 1

•		1100			"No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sch				ions.
Captio	Check if Schedule O contains a response or note to any line in this Part VI	· · · ·		•	. <u>v</u>
Secuo	on A. Governing Body and Management			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	14		1.03	1
	If there are material differences in voting rights among members of the governing body, or		1	: .	<u>;</u>
	if the governing body delegated broad authority to an executive committee or similar			١,	[]
	committee, explain in Schedule O				' '
b	Enter the number of voting members included in line 1a, above, who are independent . 1b	14	'	[	
	Did any officer, director, trustee, or key employee have a family relationship or a business relation	ship with	<u> </u>		
	any other officer, director, trustee, or key employee?	فموسالم مطار	2		·
	Did the organization delegate control over management duties customarily performed by or under to supervision of officers, directors, or trustees, or key employees to a management company or other person		3		~
	Did the organization make any significant changes to its governing documents since the prior Form 990 was		4		~
	Did the organization become aware during the year of a significant diversion of the organization's ass		5		~
6	Did the organization have members or stockholders?	•	6		~
	Did the organization have members, stockholders, or other persons who had the power to elect o one or more members of the governing body?	appoint .	7a		_
	Are any governance decisions of the organization reserved to (or subject to approval by) n	nembers,			
	stockholders, or persons other than the governing body?		7b		~
	Did the organization contemporaneously document the meetings held or written actions undertake the year by the following	n during			
	The governing body?		8a	~	
	Each committee with authority to act on behalf of the governing body?		8b	~	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	ached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		<u> </u>
Sectio	on B. Policies (This Section B requests information about policies not required by the Inter-	nai Reven	ue C		
100	Did the expensation have local chapters, branches, or effiliates?		10a	Yes	No
	Did the organization have local chapters, branches, or affiliates?	hantara	IUa		
	If "Yes," did the organization have written policies and procedures governing the activities of such affiliates, and branches to ensure their operations are consistent with the organization's exempt purp		10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing		11a	~	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990				
	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	~	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to		12b	~	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? describe in Schedule O how this was done	If "Yes,"	12c	_	
	Did the organization have a written whistleblower policy?		13	~	
	Did the organization have a written document retention and destruction policy?		14	~	
	Did the process for determining compensation of the following persons include a review and app	oroval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and contemporaneous substantiation and contemporaneous subst				
а	The organization's CEO, Executive Director, or top management official .		15a	1	
	Other officers or key employees of the organization .	•	15b		~
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)				
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arra with a taxable entity during the year?	ngement	16a		<u> </u>
	If "Yes," did the organization follow a written policy or procedure requiring the organization to eva-		l		4 -
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeg	uard the	466		
	organization's exempt status with respect to such arrangements? .		16b		<u> </u>
	List the states with which a copy of this Form 990 is required to be filed ▶ OR				
	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990,	and 900-1	r (Sec	tion 5	 (01/c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  Own website  Another's website  Upon request  Other (explain in Schedule)		(OEC	11011 3	,u r(c)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, coi	•	erest i	policy	, and
	financial statements available to the public during the tax year			_	
	State the name, address, and telephone number of the person who possesses the organization's boo				

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and
	Independent Contractors
	Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization no	r any relate	d org	anız	atic	n c	ompe	nsa	ited any curren	t officer, directo	r, or trustee
				(0	C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average					e than		Reportable	Reportable	Estimated
	hours per	office				or/trus		compensation	compensation from	amount of
	week (list any hours for	Individual trustee or director	sul	랓	Ke	em Hig	Fo	from the	related organizations	other compensation
	related	direc	t t	Officer	Key employee	ploy	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted	호투	ona		Pi di	8 5	`	(W-2/1099-MISC)		organization and related
	line)	rust	Į į		yee	npe				organizations
		ee	Institutional trustee	Ī		Highest compensated employee				
	1					<u>&amp;</u>	<del> </del>			
Mike Sheets	3 00									
Chair	0 00	~		~				0	0	0
Bronwyn Evans	2 00									
Secretary	0 00	<b>&gt;</b>		~				0	0	0
Todd Yee	2 00									
Treasurer	0 00	>		~				0	0	0
Ashlee Chavez	1 00									
Trustee	0 00	>				<u> </u>		0	0	0
Becca Gose	1 00					ľ			·	
Trustee	0 00	~						0	0	0
Bechir Hamdaoui	1 00									
Trustee	0 00	~						0	0	0
Mındy Hamlın	1 00									
Trustee	0 00	~				<u></u>		0	0	0
Angela Hibbard	1 00						l			
Trustee	0 00	~						0	0	0
Steve Kunke	1 00					1				_
Trustee	0 00	•						o	0	0
Gretchen Morris	1 00									
Trustee	0 00	~						0	0	0
Ken Pastega	1 00									
Trustee	0 00	~					<u>_</u> .	0	0	0
Scott Spiegelberg	1 00									
Trustee	0 00	<b>V</b>						0	0	0
Kyle Tegner	1 00		1							
Trustee	0 00	~						0	. 0	0
Sunita Vasdev	1 00									
Trustee	0 00	~			[			0	o	0

Par	Section A. Officers, Directors, Trust	tees, Key E	mplo	yees			lighe	st C	ompensated E	mployees (conti	nued)		
•	(A)				•	C) ition				(5)		<b>(5</b> )	
	(B) Average	Position (do not check more than						(D) Reportable	( <b>E</b> ) Reportable	Es	(F) stimated	ſ	
	Name and title	hours per	box, unless person is be officer and a director/tru						compensation	compensation from	1	nount of	
		week (list any hours for	or ind	Inst	Officer	Ke)	en H	Former	from the	related organizations	com	other pensatio	on
		related organizations	direc	itutio	Ē	em	hest ploye	mer	organization (W-2/1099-MISC)	(W-2/1099-MISC)	1	om the anization	n
		below dotted	for fa	onal		Key employee	e com		(17 27 1000 111100)		an	d related	d
		line)	Individual trustee or director	Institutional trustee		ě	Highest compensated employee		İ		orga	anızatıon	ıs
				8			ated						
Liv G	ıfford	40 00											
Execu	utive Director	0 00			~			<u> </u>	0	0			0
						-			<del> </del>				
			<u> </u>		<u> </u>						ļ		
		ļ											
			Ì										
		•											
1b	Sub-total							<b>•</b>	0	0		-	0
С	Total from continuation sheets to Part	VII, Sectio	n A					▶					
d	Total (add lines 1b and 1c)			<u>.</u>	<del></del>			<u>`</u>	0	0			0
2	Total number of individuals (including but reportable compensation from the organi		to th	ose	list	ed a	above	e) w	no received m	ore than \$100,00	JO of		
												Yes	No
3	Did the organization list any former of							emp	oloyee, or high	est compensate			
	employee on line 1a? If "Yes," complete \$										3	-	~
4	For any individual listed on line 1a, is the organization and related organizations												
	individual	greater tri			000	. "	76.	۵,	· · ·	edule 3 loi suc	4	-	~
5	Did any person listed on line 1a receive o									ation or individu	1		
Section	for services rendered to the organization? on B. Independent Contractors	of "Yes," c	omple	ete .	Sch	edu	ile J f	or s	such person	· · ·	5		<b>'</b>
1	Complete this table for your five highest of	romoensati	ed inc	lene	ende	ent i	contr	acto	ors that receive	d more than \$10	20,000,0		
	compensation from the organization Rep												ax
	(A) Name and business addi	2297							(B) Description of s	anucas	(C) Compen		
None									2000	-	Compen		
										·			
							-						
2	Total number of independent contractor	rs (includin	a bu	t no	ot li	mite	ed to	th	ose listed abo	ove) who			
-	received more than \$100,000 of compensa								0	,			

Par	VIII	Statement of Reve					D4 \/!!!		_
	h neganin	Check if Schedule C	Contains	a res	i i i i i i i i i i i i i i i i i i i	Total revenue	Part VIII  IBI  Related or exempt function	(U) Unrelated business revenue	Revenue excluded from tax under sections
<u> </u>				, <u></u>			revenue	Trvende	512-514
nts nts	1a	Federated campaigns	S	1a	0				
Gra	b	Membership dues		1b	0				
ts, An	С	Fundraising events		1c	82,853	1			·
턃	d	Related organizations		1d	65,000				
Contributions, Gifts, Grants and Other Similar Amounts	e	Government grants (cor	-	1e	0				
	f	All other contributions, g and similar amounts not inc							
ē £				1f	534,447	ļ			
in d	9	Noncash contributions includ		-11 🌣	556 ▶	400,000			
	h	Total. Add lines 1a-1	Ι.	•	Business Code	682,300	<del> </del>		<del></del>
ňua	2a				Business Code				
ě	b								
-8	c								<b></b>
Ē	d								
E	e								
Program Service Revenue	f	All other program ser							
P	g	Total. Add lines 2a-2			<b>•</b>	0			
	3	Investment income	(including	dıvıd	ends, interest,				
		and other similar amo	ounts)		<b>•</b>	80,976	0	0	80,976
	4	Income from investmen	it of tax-exer	npt bo	ond proceeds ►	0	0	0	0
	5	Royalties			<b>•</b>	0	0	0	0
			(ı) Real		(II) Personal				
	6a	Gross rents							
	b	Less rental expenses				,			
	С	Rental income or (loss)	(1)	0	0				
	_d	Net rental income or	(IOSS) (i) Securiti	<u> </u>	(ii) Other				
	7a	Gross amount from sales of							
		assets other than inventory	<u> </u>	6,261	0				!
	b	Less cost or other basis and sales expenses		6,044	o				
	С	Gain or (loss)		217	0	]			
	d	Net gain or (loss)		217	<b>•</b>	217	0	0	217
	_	(1000)				217			217
venue	8a	Gross income from fu	ındraising						
		events (not including \$	82,85	3					
Other Re		of contributions reporte	ed on line 10	5)					
Jer		See Part IV, line 18 .	•	а	0				·
Ott		Less direct expenses		b	14,485				
		Net income or (loss) f			events <b>&gt;</b>	-14,485		0	-14,485
	9a	Gross income from ga See Part IV, line 19	-		Ì				
	L		•	· a					
		Less. direct expenses  Net income or (loss) fi		b	Lutino <b>b</b>				
		Gross sales of in		g acti ess	vities <b>&gt;</b>				
	104	returns and allowance		ess a	}		ĺ		
	h	Less cost of goods s		. b					
		Net income or (loss) fi			entory . ►				
		Miscellaneous R			Business Code				
Ì	11a					·			
	b								· · · · · · · · · · · · · · · · · · ·
ł	С							-	
İ	d	All other revenue							
	е	Total. Add lines 11a-	-		<b>&gt;</b>	0	-		
_	12	Total revenue. See in	structions		<b>▶</b>	749,008	0	0	66,708

# Part IX Statement of Functional Expenses

	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns Ai	l other organization	s must complete colu	ımn (A).
	Check if Schedule O contains a respons				
	ot include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	395,419	395,419	,	· .
2	Grants and other assistance to domestic individuals See Part IV, line 22	62,429	62,429		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0	0	`	,
4 5	Benefits paid to or for members Compensation of current officers, directors,	0	0		
6	trustees, and key employees  Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	· •	0	0	0	0
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0	0	0	0
9	Other employee benefits .	0	0	0	0
10	Payroll taxes .	0	0	0	0
11	Fees for services (non-employees)				
а	Management	0	0	0	0
b	Legal	0	0	0	0
С	Accounting	15,387	0	15,387	0
d	Lobbying	0	0	0	0
e	Professional fundraising services See Part IV, line 17	0			0
f	Investment management fees Other (If line 11g amount exceeds 10% of line 25, column	0	0	0	0
g	(A) amount, list line 11g expenses on Schedule O)	04 (37	21 417	24 / 25	20.424
12	Advertising and promotion	94,677 3,280	31,416	34,635	28,626 3,280
13	Office expenses	2,087	218	1,869	0
14	Information technology .	7,062	1,000	5,114	948
15	Royalties	0	0	0	0
16	Occupancy	12,092	4,892	7,200	0
17	Travel	984	947	37	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	335	335	0	0
20	Interest .	0	0	0	0
21	Payments to affiliates .	0	0	0	0
22	Depreciation, depletion, and amortization .	0	0	0	0
23	Insurance .	1,103	0	1,103	0
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Bank / Credit Card Fees	2,038	0	2,038	0
b	Dues and Fees	1,149	0	1,149	0
C					
d					
e	All other expenses				
25 26	Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and	598,042	496,656	68,532	32,854
	fundraising solicitation Check here following SOP 98-2 (ASC 958-720)				_

P	art X	Balance Sneet			
		Check if Schedule O contains a response or note to any line in this Pa	rt X		<u>·</u>
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	207,721	1	229,339
	2	Savings and temporary cash investments	5,677	2	14,512
	3	Pledges and grants receivable, net .		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees Complete Part II of Schedule L .			
ts	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	·	6	
Assets	7	Notes and loans receivable, net .		7	
AS	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
	b	Less accumulated depreciation 10b	<del></del>	10c	
1	11	Investments – publicly traded securities .	1,310,004	11	1 421 141
	12	Investments—publicly traded securities  Investments—other securities See Part IV, line 11	1,310,004	12	1,431,161
l	13	Investments—other securities See Fart IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV. line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,523,402	16	1,675,012
	17	Accounts payable and accrued expenses	1,323,402	17	1,073,012
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	<del></del>
- 1	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ဖွ	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and			
ا ۾		disqualified persons Complete Part II of Schedule L		22	······································
<u>ا</u> ڌ	23	Secured mortgages and notes payable to unrelated third parties		23	
Ì	24	Unsecured notes and loans payable to unrelated third parties	,	24	
ŀ	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
ses		Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34.			
a l	27	Unrestricted net assets	306,971	27	375,416
Bal	28	Temporarily restricted net assets	567,210	28	556,475
ᅙ	29	Permanently restricted net assets .	649,221	29	743,121
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.	•		
ţ2	30	Capital stock or trust principal, or current funds		30	
ss	31	Paid-in or capital surplus, or land, building, or equipment fund	·	31	
۲	32	Retained earnings, endowment, accumulated income, or other funds .	·-·-	32	· · ·
Ne l	33	Total net assets or fund balances .	1,523,402	33	1,675,012
	34	Total liabilities and net assets/fund balances .	1,523,402	34	1,675,012
			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Form <b>990</b> (201

_	-	
Page		_

	30 (20.0)				
Par	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			749,008
2	Total expenses (must equal Part IX, column (A), line 25)	2			598,042
3	Revenue less expenses Subtract line 2 from line 1	3			150,966
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,	523,402
5	Net unrealized gains (losses) on investments	5			-14,056
6	Donated services and use of facilities	6			14,700
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		1,	675,012
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII	· · ·	<del></del>	• • •	<del></del>
			_	Ye	s No
1	Accounting method used to prepare the Form 990 🗹 Cash 🗌 Accrual 🔲 Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain	ın i		
_	Schedule O		_		_
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2:	a	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled	or		
	reviewed on a separate basis, consolidated basis, or both			-	
	Separate basis Consolidated basis Both consolidated and separate basis				_
Ð	Were the organization's financial statements audited by an independent accountant?		21	3	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on	a		
	separate basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separate basis				1.
	<u> </u>				_
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o of the audit, review, or compilation of its financial statements and selection of an independent accounts.				
	If the organization changed either its oversight process or selection process during the tax year, ex		<u> </u>	-	+
	Schedule O	piairi	"		
32	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	<u>.</u> –	-	-  <b>-</b>
Ja	the Single Audit Act and OMB Circular A-133?	iorui	"' 3	,	1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rao th		_	+
~	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		່   3k	,	
				<u> </u>	(2018)
			•		- ()

# SCHEDULE A (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

2018

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury Internal Revenue Service

-----

Employer identification number

	RVALLIS PUBLIC SCHOOLS FOUND			_			08608
	art I Reason for Public Ch						ons
The	organization is not a private found		· ·		-		~ 1
1	A church, convention of chur						(C)
2			·				
3	☐ A hospital or a cooperative h	•	-			·	(:::\ Catautha
4	A medical research organization hospital's name, city, and statements.	·	onjunction with a nos	pitai desc	cribed in s	section 170(b)(1)(A)	(III). Enter the
5		r the benefit of a	college or university	owned (	or operate	ed by a government	tal unit described in
•	section 170(b)(1)(A)(iv). (Cor		conege or university	OWINCE	operati	ca by a government	tar arm acsembed in
6			mental unit described	ın secti	on 170(b	)(1)(A)(v).	
7							n the general public
	described in section 170(b)(				<b>3</b>		. J
8	A community trust described	in section 170(b	)(1)(A)(vi). (Complete	Part II)			
9	An agricultural research orga	-		•	erated in	conjunction with a	land-grant college
	or university or a non-land-gi university						
10							
	receipts from activities relate support from gross investme	nt income and ur	inctions—subject to c irelated business taxa	ertain ex ble incon	ceptions, ne (less s	and (2) no more tha ection 511 tax) from	In 33'/3% of its businesses
	acquired by the organization	after June 30, 19	75. See <b>section 509(</b>	a)(2). (Co	mplete P	art III.)	
11			•	_			
12		•	-				
	of one or more publicly support of the control of t	-		-			
_	_	_			•	•	_
а	Type I. A supporting orgation the supported organization						
	supporting organization					and directors or trast	ices of the
b						supported organizati	ion(s), by having
	control or management o						
	organization(s) You mus	t complete Part	IV, Sections A and C				
С	Type III functionally inte its supported organization						ally integrated with,
đ	d 🔲 Type III non-functionally	<b>integrated.</b> A su	upporting organization	operate	d in conn	ection with its suppo	orted organization(s)
	that is not functionally into						nd an attentiveness
	requirement (see instructi	*	•		-		
е		inization received	a written determination	on from t	he IRS th	at it is a Type I, Type	e II, Type III
	functionally integrated, or		ctionally integrated sur	pporting	organizat	ion	
f	5		onted organization(s)		•		
<u>g</u>	(i) Name of supported organization		(III) Type of organization		arganization.	(v) Amount of monotony	Aut Amount of
	(i) Marile of Supported Organization	(ii) Eii4	(described on lines 1–10	listed in yo	ur governing	support (see	(vi) Amount of other support (see
			above (see instructions))	docu	ment?	instructions)	instructions)
				Yes	No		
(A)							
(B)				-			
			-				
(C)							
(D)							
(E)					-		
 Total		<del> </del>					

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Secti	ion A. Public Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	573,594	668,216	716,298	707,016	682,300	3,347,424
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	7,200	7,350	7,200	7,200	7,200	36,150
4	Total. Add lines 1 through 3	580,794	675,566	723,498	714,216	689,500	3,383,574
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0
6	Public support. Subtract line 5 from line 4						3,383,574
Secti	on B. Total Support						
Calen	ıdar year (or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	580,794	675,566	723,498	714,216	689,500	3,383,574
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	31,386	38,008	38,493	49,871	80,976	238,734
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)	0	0	0	0	0	0
11	Total support. Add lines 7 through 10	i					3,622,308
12	Gross receipts from related activities, etc.	•	•			12	
13	First five years. If the Form 990 is for th	_	i's first, secon	d, third, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3)
C 4	organization, check this box and stop her				• •		<u> </u>
	on C. Computation of Public Suppor			d l (0)	-		
14 15	Public support percentage for 2018 (line 6 Public support percentage from 2017 Sch		•	i, column (f))		14 15	93 41 %
16a				 on line 13 an	.   14 Ine 14 is 33		93 43 %
	box and <b>stop here.</b> The organization qual				14 15 00		► [
b	331/3% support test—2017. If the organiz				a, and line 15	ıs 33½% or m	
	this box and stop here. The organization						▶ □
17a							
b	10%-facts-and-circumstances test – 20 15 is 10% or more, and if the organiza Explain in Part VI how the organization or supported organization	tion meets the	e "facts-and-c	ircumstances"	test, check t	this box and s	top here.
18	Private foundation. If the organization did	d not check a t	oox on line 13,	16a, 16b, 17a	, or 17b, check	k this box and :	
	instructions .			•			▶ □

Schedule A (Form 990 or 990-EZ) 2018

Part	Support Schedule for Organiz	ations Descr	ibed in Sect	ion 509(a)(2)			
	(Complete only if you checked t						nder Part II.
	If the organization failदे to qualify	under the te	sts listed belo	ow, please co	omplete Part	II.)	
	on A. Public Support		r		T		
	dar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees					/	
2	received (Do not include any "unusual grants") Gross receipts from admissions, merchandise			-	<u> </u>		
~	sold or services performed, or facilities				]		
	furnished in any activity that is related to the	1					
3	organization's tax-exempt purpose Gross receipts from activities that are not an	<u> </u>					
3	unrelated trade or business under section 513						
4	Tax revenues levied for the				/	ſ	
	organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5		\		/		
7a	Amounts included on lines 1, 2, and 3			/	-		
	received from disqualified persons						
b	Amounts included on lines 2 and 3		\				
	received from other than disqualified		\				
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year		\				
	•		<del></del>	<i>j</i>			
C	Add lines 7a and 7b	<del></del>	<del> </del>	<u>/</u>			
8	Public support. (Subtract line 7c from line 6)						
Secti	on B. Total Support	<u> </u>		<u> </u>			
	dar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	(4) 20	(2,23.3	\	(4) 20 17	(0, 20.0	(1) 1014
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,	İ		\ \			
	royalties, and income from similar sources.						
b	Unrelated business taxable income (less			\			
	section 511 taxes) from businesses						
	acquired after June 30, 1975 .						
С	Add lines 10a and 10b	<u> </u>			<u> </u>		
11	Net income from unrelated business				\		
	activities not included in line 10b, whether or not the business is regularly carried on	<b>/</b>					
10	Other income Do not include gain or				<del>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ </del>		
12	loss from the sale of capital assets						
	(Explain in Part VI)				\ \ \		
13	Total support. (Add lines 9, 10c, 11,						
	and 12)				Ì		
14	First five years. If the Form 990 is for the	ne organization	n's first, secon	d, third, fourth	, or fifth tax ye	ar as a sectio	n 501(c)(3)
	organization, check this box and stop he	re				. <b>.</b> .	▶ □
Secti	on C. Computation of Public Support					1	
15	Public support percentage for 2018 (line			13, column (f))		15	%
16	Public support percentage from 2017 Sci	hedule A, Part	III, line 15		·	16	%
	on D. Computation of Investment In			<del></del>			
17	Investment income percentage for 2018 (				mn (f))	17	%
18	Investment income percentage from 2013					18	%
19a	331/3% support tests – 2018. If the organ 17 is not prore than 331/3%, check this box						\
b	331/3% support tests – 2017. If the organiz						
U	line 18 is not more than 331/3%, check this						
20	Private foundation If the organization de		<del>-</del>	· ·	•		

# Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

ect	ion A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by		res	NO
	class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		_
4a		4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes			
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document)	4c 5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	-6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 79 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9a 9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b 9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.			
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	10a 10b		

Part I	Supporting Organizations (continued)			
,			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			ı
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Section	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			·
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			نـــــا
_		1		
2	Did the organization operate for the benefit of any supported organization other than the supported			1
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part</b> VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	<u> </u>		
Cooti		2	<u> </u>	
Secu	on C. Type II Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	140
•	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control			
	or management of the supporting organization was vested in the same persons that controlled or managed		1	
	the supported organization(s)	1	_	
Section	on D. All Type III Supporting Organizations			ı
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			i
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (II) a copy of the Form 990 that was most recently filed as of the date of notification, and (III) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	<del></del>	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			li
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
	supported organizations played in this regard.	3	<u> </u>	<u> </u>
	on E. Type III Functionally Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ction	s)
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below. ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity.	'000 ID	otru ot	lonel
с 2	Activities Test <i>Answer (a) and (b) below.</i>	366 III	Yes	
			163	140
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			ı
-	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	;		
	activities but for the organization's involvement.	2b		<del></del>
3	Parent of Supported Organizations Answer (a) and (b) below.			- 1
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			I
	of its supported organizations? If "Yes " describe in Part VI the role played by the organization in this regard	3h		

Type III Non-Functionally integrated 509(a)(3) Supporting Org			
1 Check here if the organization satisfied the Integral Part Test as a qualifying	g tru	st on Nov. 20, 1970 (exp	lain in Part VI) See
instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Sect	
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8	• • •	
Section C—Distributable Amount		-	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionall instructions)	y in	tegrated Type III supporti	ng organization (see

Part	Type III Non-Functionally Integrated 509(a)(3	s) Supporting Organi	zations (continued)	· · · · · · · · · · · · · · · · · · ·
Sect	on D—Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	erted	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)	· _ · _ · · · · · · · · · · · · · · · ·		
6	Other distributions (describe in Part VI) See instructions			_
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to whic (provide details in <b>Part VI</b> ) See instructions	h the organization is res	ponsive	
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(II) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in <b>Part VI</b> ) See instructions			
3	Excess distributions carryover, if any, to 2018			i
а	From 2013			
b	From 2014			
С	From 2015	-		
d	From 2016			
е				
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2018 from			
	Section D, line 7 \$			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
<u> </u>	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI.</b> See instructions			
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI. See instructions			
7	Excess distributions carryover to 2019. Add lines 3j and 4c			0.1
8	Breakdown of line 7			-
а	Excess from 2014			
b	Excess from 2015			
С	Excess from 2016			
d	Excess from 2017		· · · · · · · · · · · · · · · · · · ·	
ее	Excess from 2018			

٠.

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
••••••	
	······
<del></del>	
••••••	
· · · · · · · · · · · · · · · · · · ·	

# SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

	ALLIC DUDI IS COUSSI C FOUNDATION		02 1209409
	t I Organizations Maintaining Donor Adv	vised Funds or Other Similar Fun	93-1208608
Fal	Organizations Maintaining Donor Advanced Complete if the organization answered		
	Complete if the organization answered	(a) Donor advised funds	(b) Funds and other accounts
		(a) Donor advised futius	(b) I dries and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor	r advisors in writing that the assets h	neld in donor advised
	funds are the organization's property, subject to the	ne organization's exclusive legal contr	ol? Yes 🗌 No
6	Did the organization inform all grantees, donors, a	and donor advisors in writing that gra	nt funds can be used
	only for charitable purposes and not for the bene	fit of the donor or donor advisor, or f	or any other purpose
	conferring impermissible private benefit? .		· 🗌 Yes 🗌 No
Par	Conservation Easements.		
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the		
	☐ Preservation of land for public use (e.g., recrea	- · · · · · · · · · · · · · · · · · · ·	f a historically important land area
	Protection of natural habitat		f a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization hi	eld a qualified conservation contribution	on in the form of a conservation
_	easement on the last day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
	Total acreage restricted by conservation easement	 to	2b
b			
C	Number of conservation easements on a certified	. ,	. 2c
d	Number of conservation easements included in historic structure listed in the National Register	(c) acquired after 7/25/06, and not	l l
2	Number of conservation easements modified, tran	eformed released evidence inches	2d
3	tax year ►	sterred, released, extilliguished, or terr	filliated by the organization during the
4		rustion assembnt is located	
4 5	Number of states where property subject to conse		anadian banding of
3	Does the organization have a written policy re violations, and enforcement of the conservation ea		·
6			
6	Staff and volunteer hours devoted to monitoring, inspe	cting, nandling of violations, and enforcing	g conservation easements during the year
-	<b>-</b>		
7	Amount of expenses incurred in monitoring, inspectin  \$ \\$	ng, nandling of violations, and enforcing	conservation easements during the year
		0(4) 4	5 470/EV/AV/DV/
8	Does each conservation easement reported on line	2(d) above satisfy the requirements of	·
	and section 170(h)(4)(B)(ii)?	• • •	☐ Yes ☐ No
9	In Part XIII, describe how the organization reports		
	balance sheet, and include, if applicable, the text of		ancial statements that describes the
	organization's accounting for conservation easeme		
Part			
	Complete if the organization answered		· · · · · · · · · · · · · · · · · · ·
1a	If the organization elected, as permitted under SF		
	works of art, historical treasures, or other similar		
	public service, provide, in Part XIII, the text of the f		
b	If the organization elected, as permitted under S	FAS 116 (ASC 958), to report in its	revenue statement and balance sheet
	works of art, historical treasures, or other similar		lucation, or research in furtherance of
	public service, provide the following amounts relati	ing to these items	
	(i) Revenue included on Form 990, Part VIII, line 1		. ▶ \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art,	, historical treasures, or other similar	assets for financial gain, provide the
	following amounts required to be reported under S		
а	Revenue included on Form 990, Part VIII, line 1	•	▶ \$
b	Assets included in Form 990, Part X .		

Par						
` 3	Using the organization's acquisition, collection items (check all that apply)		her records, chec	k any of the follo	wing that are a sig	nificant use of its
а	☐ Public exhibition		d 🗌 Loan	or exchange prog	rams	
b	Scholarly research		e 🗌 Othe	r		
С	Preservation for future generation	s				
4	Provide a description of the organiza XIII		and explain how t	hey further the org	ganization's exem	pt purpose in Part
5	During the year, did the organization					,
	assets to be sold to raise funds rather	r than to be mainta	ined as part of the	e organization's co	ollection?	☐ Yes ☐ No
Par						
	Complete if the organization	n answered "Yes	" on Form 990, f	Part IV, line 9, or	reported an ame	ount on Form
	990, Part X, line 21.	<del></del>				
1a	Is the organization an agent, trustee	, custodian or oth	er intermediary fo	or contributions of	r other assets not	
	included on Form 990, Part X?				•	
b	If "Yes," explain the arrangement in P	art XIII and comple	ete the following to	apie.		nount
_	Decimale balance			1		- Curit
C	Beginning balance Additions during the year		•	10		<del> </del>
d		•		. 10	_	
e f	Distributions during the year Ending balance	•		16	_	
2a	Did the organization include an amou	nt on Form 990. Pr	art Y line 21 for e			□ Ves □ Ne
	If "Yes," explain the arrangement in P					
	t V Endowment Funds.	art XIII Oneck Here	e ii tile explanatio	ir nas been provid	ed Offi art XIII	
	Complete if the organization	answered "Yes"	" on Form 990. F	Part IV. line 10.		
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	829,234	782,751	594,563	495,818	490,111
b	Contributions .	67,055	44,862	157,878	106,264	27,738
С	Net investment earnings, gains, and		,	,		
	losses	61,510	46,200	42,911	15,525	-7,073
d	Grants or scholarships	8,489	38,160	12,601	19,799	14,958
е	Other expenditures for facilities and	,			·	
	programs	ol	0	0	o	0
f	Administrative expenses	6,646	6,419	0	3,245	0
g	End of year balance .	942,664	829,234	782,751	594,563	495,818
2	Provide the estimated percentage of t	he current year en	d balance (line 1g	, column (a)) held	as	
а	Board designated or quasi-endowment		<u>.</u> %			
b	Permanent endowment ▶	77 %				
С	Temporarily restricted endowment					
	The percentages on lines 2a, 2b, and	zc snould equal 10				
3a	Are there endowment funds not in the	e possession of th	e organization tha	at are held and ad	ministered for the	
	organization by					Yes No
	(i) unrelated organizations	•				3a(i) 🗸
_	(ii) related organizations				•	3a(ii) ✓
b	If "Yes" on line 3a(ii), are the related o					3b
4	Describe in Part XIII the intended uses		n's endowment tu	inas		
Part			, an Earm 000 E	20ml IV   1:00 440	C F 000 F	Sand V. June 40
	Complete if the organization					
	Description of property	(a) Cost or oth	1 ' '		Accumulated epreciation	(d) Book value
1a	Land					
b	Buildings			<del></del>		
c	Leasehold improvements		·		+	
d	Equipment			-		
e	Other					
Total.	Add lines 1a through 1e (Column (d) n	nust equal Form 99	00, Part X, column	(B), line 10c)	<b>•</b>	

	Complete if the organization answered "Yes" on Form 990, Part	IV, line 11b. See F	orm 990, Part X, line 1
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market v
(1) Financial	derivatives		-
	neld equity interests	· · · · · · · · · · · · · · · · · · ·	
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)	,		
Total. (Column (b	b) must equal Form 990, Part X, col. (B) line 12.) ▶		
Part VIII	Investments - Program Related.		
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 11c. See F	Form 990, Part X, line 1
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market v
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	b) must equal Form 990, Part X, col. (B) line 13.) ▶	<u></u>	
Part IX	Other Assets.		
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 11d. See F	
	(a) Description		(b) Book value
(1)	**************************************		
(2)		<del></del>	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)		*	
(9)	mn (b) must equal Form 990, Part X, col. (B) line 15.)		. ▶
Part X	Other Liabilities.		
raitA	Complete if the organization answered "Yes" on Form 990, Part line 25.	IV, line 11e or 11f	. See Form 990, Part X
1.	(a) Description of liability		(b) Book value
(1) Federal in			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			-
	o) must equal Form 990, Part X, col. (B) line 25 ) ▶		<del></del>
	uncertain tax positions. In Part XIII, provide the text of the footnote to the orga	inization's financial sta	itements that reports the
organization's	s liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the t	ext of the footnote has	s been provided in Part XIII

	Reconciliation of Revenue per Audited Financial States Complete if the organization answered "Yes" on Form 990	Dort IV line 12a		
	· · · · · · · · · · · · · · · · · · ·			
1	Total revenue, gains, and other support per audited financial statement	S	. 1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	. 2a		
b	Donated services and use of facilities .	. 2b		
Ç	Recoveries of prior year grants	. 2c		
d	Other (Describe in Part XIII )	. 2d		
е	Add lines 2a through 2d		<u>2e</u>	
3	Subtract line 2e from line 1		. 3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a		
b	Other (Describe in Part XIII )	. <u>  4b  </u>		
_	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, Iir		5	
Part				
	Complete if the organization answered "Yes" on Form 990	), Part IV, line 12a		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 - 1		
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
C	Other losses	. 2c		
d	Other (Describe in Part XIII )	. 2d		
_	Add lines 2a through 2d		. 2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIII )	4b		
	Add lines 4a and 4b		4c	
5 Part	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, I Supplemental Information.	ine 18)	5	
Sched	XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this paule D, Part V, Line 4 - The intended uses of permanent and term endowment purposes that provide a positive impact on learning in the school district	s are specified by th	e donors in written agreements fo	<u></u>

# SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

▶ Go to www.irs gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Name o	of the organization					Employer identific	cation number
COR	ALLIS PUBLIC SCHOOLS FOUNDA			_			1208608
Par	Fundraising Activities. Form 990-EZ filers are n				vered "Yes" on Fo	orm 990, Part IV,	line 17.
1	Indicate whether the organizatio	n raised funds t	through any	of the follo	owing activities Ch	eck all that apply.	
а			e [	Solicitati	on of non-governm	ent grants	
b	☐ Internet and email solicitation	ns	f	Solicitati	on of government	grants	
С	☐ Phone solicitations		g [	] Special f	fundraising events		
d	☐ In-person solicitations						
2a	Did the organization have a writ or key employees listed in Form						
b	If "Yes," list the 10 highest paid compensated at least \$5,000 by			draisers) pu	ursuant to agreeme	nts under which th	e fundraiser is to be
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have or control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8	- Lineary - Str						
9							
10				<u></u>			
otal		<u>L.</u>	1	<u> </u>			
3	List all states in which the organ registration or licensing	nization is regis	tered or lic	ensed to s	olicit contributions	or has been notifie	ed it is exempt from
				•			

Şchedule G (	Form 990 or 990-EZ) 2018	Page 2
Part II	<b>Fundraising Events.</b> Complete if the organization answered "Yes" on Form 990, Part IV than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines gross receipts greater than \$5,000.	

		g. 200 (000)p.c g. 50.c.	40,000			
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through
			Hands Across Corvallis (event type)	(event type)	(total number)	col (c))
ω			(0.00.00)	(0.00)	(10.00.11.00.1)	
Revenue	١,	Gross receipts	82,853			82,853
ě	'	Cioss receipts	62,633			02,033
ц.	2	Less Contributions	82,853			82,853
	3	Gross income (line 1 minus	02,033			02,000
	"	line 2)	0			o
			<del></del>			
	4	Cash prizes	0			o
		·				
	5	Noncash prizes	0			0
<b>,</b>						
Šė	6	Rent/facility costs .	0			0
)en						
Ä	7	Food and beverages	6,013		0	6,013
Direct Expenses						
٥	8	Entertainment	0		0	0
	9	Other direct expenses	8,472			8,472
					_	
	10	Direct expense summary Ad	•	, ,		14,485
D.	11	Net income summary Subtr			P	-14,485
ΞĒ	rt III	Gaming. Complete if th \$15,000 on Form 990-E		ered "Yes" on Form	990, Part IV, line 19,	or reported more than
—		Ψ13,000 0H1 0HH 930-E	Z, iii e oa.		ī	
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c)
Уe				3-1-3		(-,,
æ	1	Gross revenue				
_	•	aross revenue				
Ś	2	Cash prizes				
Direct Expenses		, p				
be	3	Noncash prizes				
Û		·				
e C	4	Rent/facility costs				
۵						
	5	Other direct expenses				<u> </u>
			☐ Yes%	☐ Yes%	☐ Yes%	
	6	Volunteer labor	☐ No	☐ No	☐ No	
	7	Direct expense summary Ad	dd lines 2 through 5 in c	olumn (d)	. ▶	
	_	N	011 11 51			
	8	Net gaming income summar	y. Subtract line / from li	ne 1, column (a)	•	
_	<b>-</b>					
9	Er - Ia	nter the state(s) in which the or the organization licensed to c	ganization conducts ga	ming activities		
	a IS	the organization licensed to c	onduct gaming activities	s in each of these states	s'	. LYES NO
	b If	"No," explain				
10	a 1/1/	ere any of the organization's g	amına licenses revoked	suspended or termin	ated during the tay year	7
	- "	"Yes," explain:				

11	ule G (Form 990 or 990-EZ) 2018  Does the organization conduct gaming activities with nonmembers?	☐ Yes	□No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity		_
12	formed to administer charitable gaming?	☐ Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:		•
a	The organization's facility		<u>%</u>
b	An outside facility	-	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name ▶		
	Address►		
	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	☐ Yes	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the		
	amount of gaming revenue retained by the third party ▶ \$		
С	If "Yes," enter name and address of the third party		
	Name ▶		
	Address▶		
16	Gaming manager information		
	Name ▶		
	Gaming manager compensation ▶ \$		
	Description of services provided ▶		
	□ Director/officer □ Employee □ Independent contractor		
17	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
-	retain the state gaming license?	☐ Yes	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$		
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any addition See instructions.	(III) and Inal Infor	(v); and mation
•			

# SCHEDULEI (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990. ► Go to www.irs.gov/Form990 for the latest information.

$\infty$
_
<b>W</b>
1

OMB No 1545-0047 -

Open to Public Inspection

Department of the Treasury Internal Revenue Service			▼ Go to w	<ul><li>Attach to Form 990.</li><li>Go to www.irs.gov/Form990 for the latest information.</li></ul>	) Form 990. 30 for the latest info	ormation.		Isul   Sul	Open to Public Inspection
Name of the organization							<u> </u>	Employer identification number	mber
CORVALLIS PUBLIC SCHOOLS FOUNDATION	SCHOOLS FOUN	IDATION						93-1208608	•
Part   General	I Information	General Information on Grants and Assistance	Assistance						
1 Does the organ the selection c 2 Describe in Pa	inization mainta criteria used to a	Does the organization maintain records to substantiate the an the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitorii	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantee the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	nt of the grants or he use of grant fur	assistance, the g	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	or the grants or assi	istance, and	o U
Part II Grants a Part IV, I	and Other As line 21, for any	ssistance to Do y recipient that r	mestic Organizate conveded more than the convers	ations and Dom an \$5,000 Part I	nestic Governm Il can be duplica	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed.	the organization that the constant that the cons	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed.	า Form 990,
1 (a) Name and address of organization or government	s of organization ent	(a)	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant e or assistance	e of grant stance
(1) Sch I, Stmt 1									
(2)									
(3)									
(4)									
(5)									
(9)									
(2)									
(8)									
(6)									
(10)									
(11)									
(12)									
2 Enter total nun	mber of section	Enter total number of section 501(c)(3) and governmer	ernment organiza	nt organizations listed in the line 1 table	ine 1 table			<b>A</b> . 4	
Pag	tion Act Notice,	erwork Reduction Act Notice, see the Instructions for Fo	s for Form 990.			Cat No 50055P		Schedule I (	Schedule I (Form 990) (2018)

Schedule I (F	schedule I (Form 990) (2018)
Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
	Part III can be duplicated if additional space is needed.

i at ill call be duplicated il additional space is fleeded	space is needer	J.		!	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 See Schedule I, Part IV, Statement 2					
2					
3					
4					
2					
9					
	7	-	= -		
Schedule I. Part I. Line 2 - The Foundation and Corvallis School District 509J use an expenditure system and purchase order system that require approval by supervisors to ensure the	School District 509	equired in Part I, Ilr Juse an expenditure s	of 2, Part III, columning stem and purchase or	i (b), and any other additider system that require appr	ional information. oval by supervisors to ensure the
proper spending of grant funds. Individual grant balances are tracked and monitored by the Foundation	es are tracked and r	nonitored by the Foun	dation		
-					
					Schedule I (Form 990) (2018)

# SCHÈDÙLE O '(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

93-1208608 CORVALLIS PUBLIC SCHOOLS FOUNDATION Form 990, Part VI, Section B, Line 11b - Prior to filing Form 990 with the Internal Revenue Service, the executive director and finance committee of the Board of Trustees review the return, make suggestions about any changes needed to make the return more accurate, and then make a recommendation to the full Board about approving the return as prepared or with recommended revisions. The Board of Trustees then reviews and approves Form 990 for filing Form 990, Part VI, Section B, Line 12c - The Board of Trustees provides all trustees with the conflict of interest policy and disclosure statements. The policy is discussed, and individual trustees are required to disclose all interests on the annual disclosure statements. Trustees are required to disclose any conflicts that arise on issues that are brought before the Board and then abstain from participating in the discussion or voting on such issues Form 990, Part VI, Section B, Line 15 - Before the executive director is hired for the Foundation, the Board of Trustees conducts a review of the compensation and benefits for the position, including a review of comparability data for similar positions, and substantiates its review of the compensation to be received by the executive director. After the executive director is hired, the Board performs this review every several years. This process was last undertaken in 2015 when a new executive director was hired Form 990, Part VI, Section C, Line 19 - The latest filed Form 990, IRS determination letter, corporate bylaws, financial statements and conflict of interest policy are provided upon request Form 990, Part IX, Line 11g - Other Fees for Services totaling \$94,677 include. Compensation paid to lease employees by an employee leasing agency for the executive director \$66,347 and accounting associate \$12,854, Catering \$3,565, Consultants \$3,682, Mailing service \$179, Photographer \$300, Videographer \$4,000, and Senior graduate party entertainers and artists \$3,750

# SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization CORVALLIS PUBLIC SCHOOLS FOUNDATION

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

OMB No 1545-0047	2018	Open to Public
_	20	Open to

INSPECTION
Employer identification number

93-1208608

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

(g) Section 512(b)(13) controlled Schedule R (Form 990) 2018 (f) Direct controlling entity ž 7 Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. entity? Yes (f)
Direct controlling
entity (e) End-of-year assets ٨ (e)
Public charity status
(if section 501(c)(3)) Identification of Disregarded Entities. Complete If the organization answered "Yes" on Form 990, Part IV, Ine 33. (d) Total income ٨ (d) Exempt Code section IRC Section 115 (c) Legal domicile (state or foreign country) Cat No 50135Y (c) Legal domicile (state or foreign country) (b) Primary activity 98 Grades K-12 Public Education (b)
Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. (a) Name, address, and EIN (if applicable) of disregarded entity (a)Name, address, and EIN of related organization (1) Corvallis School District 509J (93-6000205) 1555 SW 35th Street, Corvallis, OR 97333 (2) Partl Part II 9 3 Ξ 8 ල 3 € ₹ 3 9 6

Schedule R (Form 990) 2018

(i) Section 512(b)(13) controlled entity? Schedule R (Form 990) 2018 (k) Percentage ownership ž Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, Ilne 34, because it had one or more related organizations treated as a corporation or trust during the tax year. Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Yes (I) General or managing partner? Yes No (h) Percentage ownership amount in box 20 of Schedule K-1 (Form 1065) (i) Code V—UBI (g) Share of end-of-year assets (h) Disproportionate ŝ (f) Share of total Income allocations? Yes (g) Share of end-ofyear assets (e)
Type of entity
(C corp. S corp, or trust) (f) Share of total (d)
Direct controlling entity (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512—514) (c)
Legal domicile
(state or foreign country) (d) Direct controlling entity Primary activity (c) Legal domicile (state or foreign (b) Primary activity (a)
Name, address, and EIN of related organization (1) Name, address, and EIN of related organization Part III Part IV 8 8 9 € 2 9 Ξ 8 9 € 9 9 E

	itions. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.
	With Related Organizations. Complete if the organization ar
(Form 990) 2018	Transactions \
Schedule R (	Part V

Schedule R (Form 990) 2018	Schedule R (F			
				(9)
				(5)
				(4)
				(3)
				(2)
	:			(1)
nount involved	(d) Method of determining amount involved	(c) Amount involved	(b) Transaction type (a – s)	(a) Name of related organization
thresholds	inships and transaction	luding covered relation	omplete this line, inc	2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds
	<del>                                    </del>			<ul> <li>Cother transfer of cash or property to related organization(s)</li> <li>Other transfer of cash or property from related organization(s)</li> </ul>
2 2				<ul> <li>p Heimbursement paid to related organization(s) for expenses</li> <li>q Reimbursement paid by related organization(s) for expenses</li> </ul>
>			•	
, <i>y</i>		•	•	<ul> <li>renormance of services of membership of fortunashing sofficiations by related organization(s).</li> <li>n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s).</li> </ul>
_	= ;		•	
X	\ <del>\</del>	٠		k Lease of facilities, equipment, or other assets from related organization(s)
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<u>-</u>			j Lease of facilities, equipment, or other assets to related organization(s)
<i>&gt;</i>	<u></u>			i Exchange of assets with related organization(s)
$\dashv$	1g			g Sale of assets to related organization(s)
7	-			f Dividends from related organization(s)
\$	1e			e Loans or loan guarantees by related organization(s)
<b>'</b>				d Loans or loan guarantees to or for related organization(s)
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1c	•		c Gift, grant, or capital contribution from related organization(s)
7	<del>1</del>			<b>b</b> Giff, grant, or capital contribution to related organization(s)
7	1a		•	a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
	ts II–IV?	nizations listed in Par	or more related orga	1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
Yes No				Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

# Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) (b) (c) (d) (d) (d) (d) (d)	(a)	(3)	(B)	(9)	_	<b>S</b>	(b)	3	9	3	(£
Name, address, and EIN of entity	Primary activity	ncile	Predominant	Are all partners	tners	Share of		Disproportionate	Code V – UBI		Perc
			unrelated, excluded from tax under	501(c)(3) organizations?	(3) ions?	וסופן אורסטוופ	assets	aliocalions	of Schedule K-1 (Form 1065)	partner?	
			sections 512-514)	Yes No	ę 2			Yes No		Yes No	
(1)	-1										
(2)	1										
(3)											
(4)											
(5)											
(9)											
( <i>u</i> )											
(8)						·-					
(6)							į				
(10)											
(11)											
(12)											
(13)											
(114)											
(15)											
(16)											
									Sche	dule R (F	Schedule R (Form 990) 2018

schedule H (F	rorm 990) 2018	rage
Part VII	Supplemental Information.  Provide additional information for responses to questions on Schedule R. See instructions.	
<del>-</del>		
••••		
		•••••
••••		····

Schedule O, Statement 1

CORVALLIS PUBLIC SCHOOLS FOUNDATION

'Form Form 990 (2018)

FORT FORT 950 (2016

EIN 93-1208608 Header Section

## Reasonable Cause Explanations

Explanation

Page 1

We respectfully request the abatement of the late filing penalty due to reasonable cause. We have relied on our CPA to prepare and ensure that all required returns are timely filed for federal and state authorities, but she inadvertently forgot this one time to file an application for extension by the November 15, 2019 due date for the 2018 return. We generally extend the filing of Form 990 for 6 months until the next May 15 so there is sufficient time to prepare a complete and accurate return. Our CPA was personally experiencing an unusual amount of stress in her personal life during the time she would have normally filed Form 8868 to extend the filing deadline. In addition to providing accounting services for her nonprofit clients, she was in the process of selling a house and buying another house, and then her husband was laid off work on November 15. She ordinarily is diligent about meeting deadlines for her clients and regrets this oversight. She said this is the first time she has missed a filing or extension deadline during her 33-year public accounting career. On January 3, 2020, when it was discovered that Form 8868 was not filed by November 15, the executive director and finance committee took the immediate step of requesting that preparation and filing of the 2018 Form 990 be a priority. To our knowledge, the Foundation has filed all previous returns on time. To prevent this type of oversight in the future, we have put procedures in place so that multiple individuals will have reminders on their calendars about due dates for all federal and state returns.