

Department of the Treasury

Internal Revenue Service

INTERNAL REVENUE SERVICE

**Return of Private Foundation** 

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

▶ Do not enter social security numbers on this form as it may be made public.

► Go to www irs.gov/Form990PFfor instructions and the latest information.

2949105302805 OMB No 1545-0052

Open to Public Inspection

For calendar year 2018 or tax year beginning

r12/01 , 2018, and ending

11/30,2019

Name of foundation

AMY HERYFORD OUSLEY AND JAMES HERYFORD OUSLEY

59-7271578

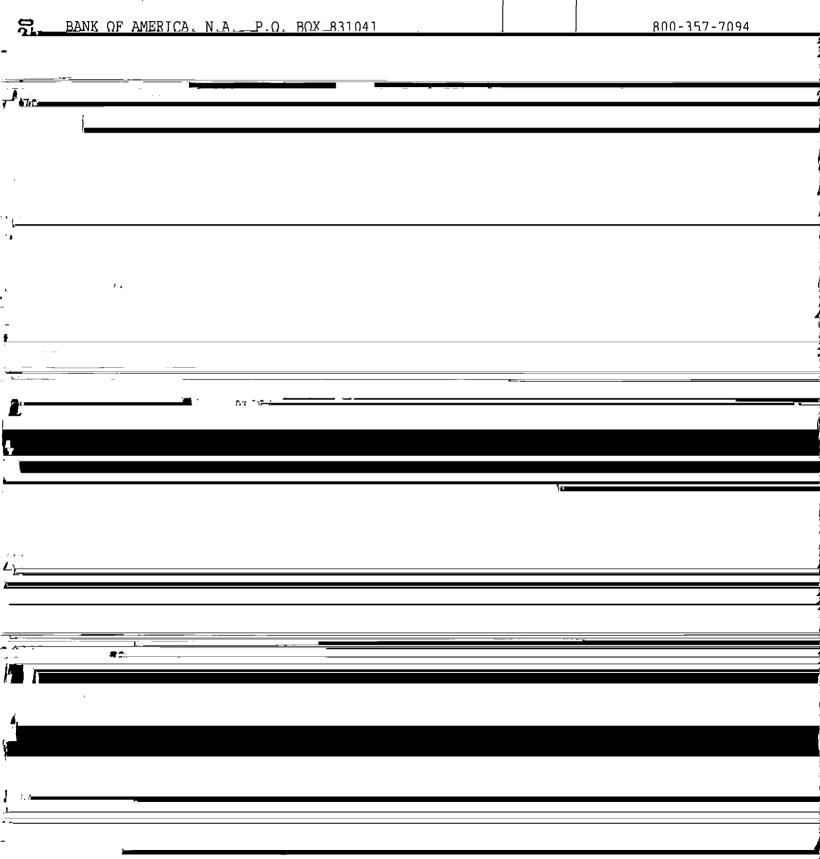
EDUCATIONAL FUND

Number and street (or P O box number if mail is not delivered to street address)

Room/suite

B Telephone number (see instructions)

A Employer identification number



Form 99	0-PF (2018)	59	<u>-7271578</u>	Page <b>2</b>
Dowl	Attached schedules and amounts in the	Beginning of year	End of	year
Part	Balance Sheets description column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
2	Savings and temporary cash investments	239,137.	258,469.	258,469
3	Accounts receivable			
ĺ	Less. allowance for doubtful accounts ▶			
4				
	Less allowance for doubtful accounts ▶			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons (attach schedule) (see instructions)			
7	Other notes and loans receivable (attach schedule)			
	Less. allowance for doubtful accounts ► NONE			
8 13				
Assets	Prepaid expenses and deferred charges			
8 10a	Investments - U S and state government obligations (attach schedule).			
	Investments - corporate stock (attach schedule) . STMT .7	8,997,488.	8,798,483.	10,196,403
C	Investments - corporate bonds (attach schedule)			
11	Investments - land, buildings, and equipment basis			,
	Less accumulated depreciation			
12	(attach schedule) Investments - mortgage loans			
13	Investments - other (attach schedule) STMT .9.	490.403.	450,889.	831,260
14	Land, buildings, and		100/0021	332/233
	equipment basis Less accumulated depreciation (attach schedule)			
15	Other assets (describe		· <del>-</del>	
16	Total assets (to be completed by all filers - see the			
	instructions Also, see page 1, item I)	9.727.028	9,507,841.	11,286,132
17		3,727,020.	2/30//011.	11,200,132
18	Grants payable			<del></del>
	Deferred revenue	-		
20				<u>-</u> -
20	Loans from officers, directors, trustees, and other disqualified persons  Mortgages and other notes payable (attach schedule)			1
<b>≌</b> I			<del></del>	<u></u>
22	Other liabilities (describe ►)			
23	Total liabilities (add lines 17 through 22)	ļ	NONE	
+	Foundations that follow SFAS 117, check here ▶			<u></u>
ر د	and complete lines 24 through 26, and lines 30 and 31.		•	
2 24				
24	Unrestricted	-		
25	Temporarily restricted			<u></u>
E  40	Foundations that do not follow SFAS 117, check here	<del></del>		<u>'</u>
리	and complete lines 27 through 31			
اة اه	•	9,727,028.	9,507,841.	
S 27	Capital stock, trust principal, or current funds	9,121,020.	9,307,041.	
Assets or Fund Balances	Paid-in or capital surplus, or land, bldg , and equipment fund			
ğ 29	Retained earnings, accumulated income, endowment, or other funds	0-717-010	0 507 041	
		· · · · · · · · · · · · · · · · · · ·		

A. ....

.....

b OTHER GAIN c d e (e) Gross sales p a 1,865, b 1,729, c d	2-story brick wareh CRADED SECURI US AND LOSSES  orice (f) 217. 251.	ouse, or common stock,  TTIES  Depreciation allowed (or allowable)	(g) Cost or other plus expense  1,846,19 1,326,000  ned by the foundation on 12/	er basis of sale 59.	(h) Gain or (l ((e) plus (f) mu	(mo , day, yr
b OTHER GAIN c d e (e) Gross sales p a 1,865, b 1,729, c d e Complete only fo	or assets showing gain	Depreciation allowed (or allowable)  n in column (h) and own	plus expense 1,846,15 1,326,05  ned by the foundation on 12/	of sale 59.		nus (g)) 19,058
c de (e) Gross sales pa 1,865, b 1,729, c de Complete only fo	orice (f) 217. 251.	Depreciation allowed (or allowable)  n in column (h) and own	plus expense 1,846,15 1,326,05  ned by the foundation on 12/	of sale 59.		nus (g)) 19,058
d e (e) Gross sales p a 1,865, b 1,729, c d e Complete only fo	217. 251.	(or allowable)  n in column (h) and own  (j) Adjusted basis	plus expense 1,846,15 1,326,05  ned by the foundation on 12/	of sale 59.		nus (g)) 19,058
(e) Gross sales p  a 1,865, b 1,729, c d e Complete only for	217. 251.	(or allowable)  n in column (h) and own  (j) Adjusted basis	plus expense 1,846,15 1,326,05  ned by the foundation on 12/	of sale 59.		nus (g)) 19,058
(e) Gross sales p  a 1,865, b 1,729, c d e Complete only fo  (i) FMV as of 12/3	217. 251.	(or allowable)  n in column (h) and own  (j) Adjusted basis	plus expense 1,846,15 1,326,05  ned by the foundation on 12/	of sale 59.		nus (g)) 19,058
b 1,729, c d e Complete only fo (i) FMV as of 12/3	251.	(j) Adjusted basis	1,326,0	10.		
c d e Complete only fo	or assets showing gai	(j) Adjusted basis	ned by the foundation on 12/			403,241
e Complete only for (i) FMV as of 12/3		(j) Adjusted basis	<u> </u>	/31/69.		
Complete only for (i) FMV as of 12/3		(j) Adjusted basis	<u> </u>	/31/69.		
Complete only for (i) FMV as of 12/3		(j) Adjusted basis	<u> </u>	/31/69.		
(i) FMV as of 12/3		(j) Adjusted basis	<u> </u>		(I) Gains (Col. (h) g	Tain minus
a b		as 01 12/31/09	over col. (j), i	col (ı)	col (k), but not less Losses (from c	than -0-) <b>or</b>
b						19,058
						403,241
<u>c</u>						
d e				<del></del>		
	1		If gain, also enter in Part	I, line 7	<u> </u>	
Capital gain ne	et income or (net ca	apital loss)	If (loss), enter -0- in Part I			422,299
		ss) as defined in section				
_			e instructions. If (loss), e	4 1	1	
			Reduced Tax on Net Ir		me	
es the foundation Yes," the foundat	on doesn't qualify	on 4942 tax on the di under section 4940(e	istributable amount of any	art.	·	Yes X N
Enter the appr	opriate amount in		year; see the instructions	s before making ai	ny entries.	
Base period year Calendar year (or tax year b		(b) sted qualifying distributions	(c) Net value of noncharita	ble-use assets	Distribution r (col (b) divided b	
2017		516 KN	2 11 (	112 609		0 01601

rar	Statements Regarding Activities (continued)		Yes	No
			165	IVO
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	11		Х
42	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions			<b>├</b> -^
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	12		Х
12	person had advisory privileges? If "Yes," attach statement. See instructions	13	X	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address  NONE		Λ	L
14	The books are in care of ► BANK OF AMERICA  Telephone no. ► (213) 861-	518	٦	
14	Located at ► 515 S FLOWER ST, FL 27, LOS ANGELES, CA ZIP+4 ► 90071-2	201		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here · · · · · · ·			T
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	•	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
	the foreign country			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			ĺĺ
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			ŀ
	disqualified person?			i
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			l
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
		}		
	(6) Agree to pay money or property to a government official? (Exception Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days )			ĺ
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		X
	Organizations relying on a current notice regarding disaster assistance, check here			1
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2018?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			ŀ
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2018?			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions )	2b		1
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
2-	Did the ferradation held more than a 20/ direct or induced interest in any hydrogen enterprise			ı
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
<b>h</b>	at any time during the year?			
b	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of		!	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2018.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		_X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			$oldsymbol{ol{ol{ol}}}}}}}}}}}}}}}}}$
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		<u>X</u>
		00	Λ_DE	(2018)

	VII-B Statements Regarding Activities	tor which form 4	1/20 May Be Req	<u>uired (continued)</u>		
5a	During the year, did the foundation pay or incur any am	ount to.				res No
	(1) Carry on propaganda, or otherwise attempt to influ	ence legislation (sectio	n 4945(e))?	. Yes X N	lo	
	(2) Influence the outcome of any specific public e	lection (see section	4955), or to carry or	ո,		
	directly or indirectly, any voter registration drive?			. Yes X N	io	
	(3) Provide a grant to an individual for travel, study, or	other similar purposes	,	. X Yes N	lo	
	(4) Provide a grant to an organization other than	a charitable, etc., org	anization described i	n		
	section 4945(d)(4)(A)? See instructions	•			lo	
	(5) Provide for any purpose other than religious,					[ [
	purposes, or for the prevention of cruelty to children				lo l	
b	If any answer is "Yes" to 5a(1)-(5), did any of th	e transactions fail to	qualify under the e	xceptions described	ın   _	
	Regulations section 53 4945 or in a current notice rega	irding disaster assistar	ice? See instructions.		. 5b	X
	Organizations relying on a current notice regarding disa	ster assistance, check	here		· 🗆 🗀	
C	If the answer is "Yes" to question 5a(4), does the	e foundation claim e	xemption from the t	ax		.
	because it maintained expenditure responsibility for the	grant?		. Yes N	lo	
	If "Yes," attach the statement required by Regulations s	ection 53 4945-5(d)				
6a	Did the foundation, during the year, receive any fu	inds, directly or indir	ectly, to pay premiur	ns		
	on a personal benefit contract?			. Yes X N	lo   _	
b	Did the foundation, during the year, pay premiums, dire			nct?	. 6b	X
	If "Yes" to 6b, file Form 8870.					
7a	At any time during the tax year, was the foundation a p	arty to a prohibited tax	shelter transaction?.	. Yes X N	lo   _	
ь	If "Yes," did the foundation receive any proceeds or have				. 7b	_
8	Is the foundation subject to the section 4960 tax on pa	yment(s) of more than	\$1,000,000 in			
	remuneration or excess parachute payment(s) during th					
Par	Information About Officers, Direct	ors, Trustees, Fou	ındation Manager	s, Highly Paid Em	ployees,	
1	and Contractors  List all officers, directors, trustees, and foundation	on managers and t	neir compensation.	See instructions.		
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expense a	
	(a) Name and address					
		devoted to position	enter -0-)	and deferred compensation	other allow	ances
BANK	OF AMERICA, N.A.	TRUSTEE	enter -0-)	and deferred compensation	other allow	/ances
	OF AMERICA, N.A. FLOWER ST, FL 27, LOS ANGELES, CA 90071-2201	TRUSTEE 1	enter -0-) 91,450.	and deferred compensation	other allow	-0-
515 S		TRUSTEE	<u></u>		other allow	-0-
515 S FRANK	FLOWER ST, FL 27, LOS ANGELES, CA 90071-2201	TRUSTEE  1 COMMITTEE MEMBER 9 1	<u></u>		other allow	-0-
515 S FRANK KLAMA DAVID	FLOWER ST, FL 27, LOS ANGELES, CA 90071-2201 HERNANDEZ, CHAIRMAN TH CO COMMITTEE, PO BOX 446, KLAMATH FALLS, OR M VANDENBERG	TRUSTEE  1 COMMITTEE MEMBER 9 1 COMMITTEE MEMBER	91,450.	-0-	other allow	-0-
515 S FRANK KLAMA DAVID	FLOWER ST, FL 27, LOS ANGELES, CA 90071-2201 HERNANDEZ, CHAIRMAN TH CO COMMITTEE, PO BOX 446, KLAMATH FALLS, OR	TRUSTEE  1 COMMITTEE MEMBER 9 1 COMMITTEE MEMBER	91,450.	-0-	other allow	-0- -0-
515 S FRANK KLAMA DAVID	FLOWER ST, FL 27, LOS ANGELES, CA 90071-2201 HERNANDEZ, CHAIRMAN TH CO COMMITTEE, PO BOX 446, KLAMATH FALLS, OR M VANDENBERG	TRUSTEE  1 COMMITTEE MEMBER 9 1 COMMITTEE MEMBER	91,450.	-0-	other allow	-0-
515 S FRANK KLAMA DAVID LAKE	FLOWER ST, FL 27, LOS ANGELES, CA 90071-2201 HERNANDEZ, CHAIRMAN TH CO COMMITTEE, PO BOX 446, KLAMATH FALLS, OR M VANDENBERG COUNTY COMMITTEE, PO BOX 351, LAKEVIEW, OR 9763	TRUSTEE  1 COMMITTEE MEMBER 9 1 COMMITTEE MEMBER 0 1	91,450. -0- -0-	-0~ -0~		-0-
515 S FRANK KLAMA DAVID LAKE	FLOWER ST, FL 27, LOS ANGELES, CA 90071-2201 HERNANDEZ, CHAIRMAN TH CO COMMITTEE, PO BOX 446, KLAMATH FALLS, OR M VANDENBERG COUNTY COMMITTEE, PO BOX 351, LAKEVIEW, OR 9763  Compensation of five highest-paid employees	TRUSTEE  1 COMMITTEE MEMBER 9 1 COMMITTEE MEMBER 0 1	91,450. -0- -0-	-0~ -0~		-0-
515 S FRANK KLAMA DAVID LAKE	FLOWER ST, FL 27, LOS ANGELES, CA 90071-2201 HERNANDEZ, CHAIRMAN TH CO COMMITTEE, PO BOX 446, KLAMATH FALLS, OR M VANDENBERG COUNTY COMMITTEE, PO BOX 351, LAKEVIEW, OR 9763	TRUSTEE  1 COMMITTEE MEMBER 9 1 COMMITTEE MEMBER 0 1 (other than those	91,450. -0- -0-	-0001 - see instructi	ions). If non	-0- -0- -0-
515 S FRANK KLAMA DAVID LAKE	FLOWER ST, FL 27, LOS ANGELES, CA 90071-2201 HERNANDEZ, CHAIRMAN TH CO COMMITTEE, PO BOX 446, KLAMATH FALLS, OR M VANDENBERG COUNTY COMMITTEE, PO BOX 351, LAKEVIEW, OR 9763  Compensation of five highest-paid employees	TRUSTEE  1 COMMITTEE MEMBER 1 COMMITTEE MEMBER 1 COMMITTEE MEMBER 1 (other than those hours per week	91,450. -0- -0-	-001 - see instructions to employee benefit plans and deferred		-0- -0- -0-
515 S FRANK KLAMA DAVID LAKE	FLOWER ST, FL 27, LOS ANGELES, CA 90071-2201 HERNANDEZ, CHAIRMAN TH CO COMMITTEE, PO BOX 446, KLAMATH FALLS, OR M VANDENBERG COUNTY COMMITTEE, PO BOX 351, LAKEVIEW, OR 9763  Compensation of five highest-paid employees "NONE."	TRUSTEE  1 COMMITTEE MEMBER 9 1 COMMITTEE MEMBER 0 1 (other than those	91,450. -0- -0- e included on line	-001- see instructi	ions). If non	-0- -0- -0-
515 S FRANK KLAMA DAVID LAKE	FLOWER ST, FL 27, LOS ANGELES, CA 90071-2201 HERNANDEZ, CHAIRMAN TH CO COMMITTEE, PO BOX 446, KLAMATH FALLS, OR M VANDENBERG COUNTY COMMITTEE, PO BOX 351, LAKEVIEW, OR 9763  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	TRUSTEE  1 COMMITTEE MEMBER 1 COMMITTEE MEMBER 1 COMMITTEE MEMBER 1 (other than those hours per week	91,45000- te included on line (c) Compensation	-001 - see instructive instructive employee benefit plans and deferred compensation	ions). If non  (e) Expense a other allow	-0- -0- -0- ee, enter
515 S FRANK KLAMA DAVID LAKE	FLOWER ST, FL 27, LOS ANGELES, CA 90071-2201 HERNANDEZ, CHAIRMAN TH CO COMMITTEE, PO BOX 446, KLAMATH FALLS, OR M VANDENBERG COUNTY COMMITTEE, PO BOX 351, LAKEVIEW, OR 9763  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	TRUSTEE  1 COMMITTEE MEMBER 1 COMMITTEE MEMBER 1 COMMITTEE MEMBER 1 (other than those hours per week	91,450. -0- -0- e included on line	-001 - see instructions to employee benefit plans and deferred	ions). If non	-0- -0- -0- ee, enter
515 S FRANK KLAMA DAVID LAKE 2	FLOWER ST, FL 27, LOS ANGELES, CA 90071-2201 HERNANDEZ, CHAIRMAN TH CO COMMITTEE, PO BOX 446, KLAMATH FALLS, OR M VANDENBERG COUNTY COMMITTEE, PO BOX 351, LAKEVIEW, OR 9763  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	TRUSTEE  1 COMMITTEE MEMBER 1 COMMITTEE MEMBER 1 COMMITTEE MEMBER 1 (other than those hours per week	91,45000- te included on line (c) Compensation	-001 - see instructive instructive employee benefit plans and deferred compensation	ions). If non  (e) Expense a other allow	-0- -0- -0- ee, enter
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515 S FRANK KLAMA DAVID LAKE 2	FLOWER ST, FL 27, LOS ANGELES, CA 90071-2201 HERNANDEZ, CHAIRMAN TH CO COMMITTEE, PO BOX 446, KLAMATH FALLS, OR M VANDENBERG COUNTY COMMITTEE, PO BOX 351, LAKEVIEW, OR 9763  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	TRUSTEE  1 COMMITTEE MEMBER 1 COMMITTEE MEMBER 1 COMMITTEE MEMBER 1 (other than those hours per week	91,45000- te included on line (c) Compensation	-001 - see instructive instructive employee benefit plans and deferred compensation	ions). If non  (e) Expense a other allow	-0- -0- -0- ee, enter
515 S FRANK KLAMA DAVID LAKE 2	FLOWER ST, FL 27, LOS ANGELES, CA 90071-2201 HERNANDEZ, CHAIRMAN TH CO COMMITTEE, PO BOX 446, KLAMATH FALLS, OR M VANDENBERG COUNTY COMMITTEE, PO BOX 351, LAKEVIEW, OR 9763  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	TRUSTEE  1 COMMITTEE MEMBER 1 COMMITTEE MEMBER 1 COMMITTEE MEMBER 1 (other than those hours per week	91,45000- te included on line (c) Compensation	-001 - see instructive instructive employee benefit plans and deferred compensation	ions). If non  (e) Expense a other allow	-0- -0- -0- ee, enter
515 S FRANK KLAMA DAVID LAKE 2	FLOWER ST, FL 27, LOS ANGELES, CA 90071-2201 HERNANDEZ, CHAIRMAN TH CO COMMITTEE, PO BOX 446, KLAMATH FALLS, OR M VANDENBERG COUNTY COMMITTEE, PO BOX 351, LAKEVIEW, OR 9763  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	TRUSTEE  1 COMMITTEE MEMBER 1 COMMITTEE MEMBER 1 COMMITTEE MEMBER 1 (other than those hours per week	91,45000- te included on line (c) Compensation	-001 - see instructive instructive employee benefit plans and deferred compensation	ions). If non  (e) Expense a other allow	-0- -0- -0- ee, enter
515 S FRANK KLAMA DAVID LAKE 2	FLOWER ST, FL 27, LOS ANGELES, CA 90071-2201 HERNANDEZ, CHAIRMAN TH CO COMMITTEE, PO BOX 446, KLAMATH FALLS, OR M VANDENBERG COUNTY COMMITTEE, PO BOX 351, LAKEVIEW, OR 9763  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	TRUSTEE  1 COMMITTEE MEMBER 1 COMMITTEE MEMBER 1 COMMITTEE MEMBER 1 (other than those hours per week	91,45000- te included on line (c) Compensation	-001 - see instructive instructive employee benefit plans and deferred compensation	ions). If non  (e) Expense a other allow	-0- -0- -0- ee, enter
515 S FRANK KLAMA DAVID LAKE	FLOWER ST, FL 27, LOS ANGELES, CA 90071-2201 HERNANDEZ, CHAIRMAN TH CO COMMITTEE, PO BOX 446, KLAMATH FALLS, OR M VANDENBERG COUNTY COMMITTEE, PO BOX 351, LAKEVIEW, OR 9763  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	TRUSTEE  1 COMMITTEE MEMBER 1 COMMITTEE MEMBER 1 COMMITTEE MEMBER 1 (other than those hours per week	91,45000- te included on line (c) Compensation	-001 - see instructive instructive employee benefit plans and deferred compensation	ions). If non  (e) Expense a other allow	-0- -0- -0- ee, enter
515 S FRANK KLAMA DAVID LAKE 2 (a)	FLOWER ST, FL 27, LOS ANGELES, CA 90071-2201 HERNANDEZ, CHAIRMAN TH CO COMMITTEE, PO BOX 446, KLAMATH FALLS, OR M VANDENBERG COUNTY COMMITTEE, PO BOX 351, LAKEVIEW, OR 9763  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	TRUSTEE  1 COMMITTEE MEMBER 1 COMMITTEE MEMBER 1 Cother than thos (b) Title, and average hours per week devoted to position	91,450.  -0-  -0-  ce included on line  (c) Compensation  NONE	-001 - see instructive instructive employee benefit plans and deferred compensation	ions). If non  (e) Expense a other allow	-0- -0- -0- e, enter

3 Five highest-paid independent contractors for professional services. Se		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	<del>-</del>	NON
WOME		NON
<u></u>		
1		
1.		
<u> </u>		
	·	

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 1a XD576 2000 46

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Page 9

Part XIII	Undistributed Income (see instr	uctions)			Page 9
rait Aiii	Ondistributed income (see mist	(a)	(b)	(c)	(d)
	able amount for 2018 from Part XI,	Corpus	Years prior to 2017	2017	2018
					535,485.
	uted income, if any, as of the end of 2018 nount for 2017 only			461,106.	4
	prior years 20,20		NONE	102/200.	-
	distributions carryover, if any, to 2018.				
	13 · · · · NONE				•
	NONE				ļ
	15 NONE			1	•
d From 20	NONE				į
e From 20	17 NONE				
f Total of	lines 3a through e	NONE			}
	ng distributions for 2018 from Part XII,				
line 4. I	<b>▶</b> \$531,588.				İ
a Applied	to 2017, but not more than line 2a			461,106.	
	to undistributed income of prior years		270275		j
(Election	required - see instructions)		NONE		i
	as distributions out of corpus (Election	NONB			! !
	- see instructions)	ANON		<del></del>	70,482.
٠.	to 2018 distributable amount	NONB			70,402.
	distributions carryover applied to 2018				•
(If an a	mount appears in column (d), the same must be shown in column (a).)	NONB		j	NONE
	the net total of each column as ed below:				į
a Corpus.	Add lines 3f, 4c, and 4e. Subtract line 5	NONE			<u> </u>
	ears', undistributed income Subtract	-	NONE		-
	rom line 2b		NONE		
	le amount of prior years' undistributed for which a notice of deficiency has				İ
	sued, or on which the section 4942(a)		NONE		)
	been previously assessed				
-	line 6c from line 6b. Taxable - see instructions	-	NONE	-	
e Undistril	buted income for 2017 Subtract line				
	m line 2a. Taxable amount - see ons	·			•
f Undictri	buted income for 2018 Subtract lines				
	5 from line 1. This amount must be			ic.	
distribut	ed in 2019				465,003.
7 Amounts	s treated as distributions out of corpus				İ
to satis	fy requirements imposed by section				!
	(F) or 4942(g)(3) (Election may be	NONTE		]	
·	- see instructions)	NONB			
	distributions carryover from 2013 not on line 5 or line 7 (see instructions)	NONB			1
• • •	distributions carryover to 2019.				
	lines 7 and 8 from line 6a	NONE			
10 Analysis					!
•	rom 2014 NONE				- i
b Excess f	rom 2015 NONE			ļ	ſ
c Excess f	rom 2016 NONE				i i
	rom 2017 NONE				1
e Excess f	rom 2018   NONE		<u></u>		Form <b>990-PF</b> (2018)

Form **990-PF** (2018)

b The form in which applications should be submitted and information and materials they should include: SEE ATTACHED STATEMENT FOR LINE 2 c Any submission deadlines: SEE ATTACHED STATEMENT FOR LINE 2 d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other SEE ATTACHED STATEMENT FOR LINE 2

Part XV	Supplementary	Information	(continued)
raitav	Supplementary	IIIIOIIIIatioii	(continueu)

3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	ig the Year or Appr	roved for	Future Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	<u> </u>
a Paid during the year				,
SEE STATEMENT 25				463,561.
	li l	ļ		
<u>.</u>				
;				
			•	
•				
	1			
T-A-I		L	<b>&gt;</b> 20	463,561.
b Approved for future payment		<del></del>	▶ 3a	403,301.
b Approved for factore payment				
•				
1				
Total			▶ 3b	

Form **990-PF** (2018)

Part XVI				T <del>E</del>		(2)
Enter gross	amounts unless otherwise indicated		ated business income	Excluded by	y section 512, 513, or 514	(e) Related or exempt
1 Program	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
а						
· -						_
	and contracts from government agencies					-
•	•					
	rship dues and assessments			1		
	on savings and temporary cash investments ds and interest from securities			14	204,522.	
	al income or (loss) from real estate.					
				<del> </del>		
	financed property			1		
	debt-financed property	· <del></del>		<del>-  </del>		
	al income or (loss) from personal property			+		<del></del>
	vestment income		·	18	422,299.	
	oss) from sales of assets other than inventory			10	442,233.	
	ome or (loss) from special events · · ·			+		
	rofit or (loss) from sales of inventory	<u> </u>		+		
	evenue a	<del></del>		<del> </del>	<del>      -   -   -   -   -   -  </del>	·
			<u> </u>	<del> </del>	<del> </del>	
				<del></del>		
d				<del></del> -		<del></del>
e				<del></del>	606 001	
	Add columns (b), (d), and (e)			<u>l</u> .	626,821.	606 001
	dd line 12, columns (b), (d), and (e)				13	626,821.
Part XVI-	Relationship of Activities		11. 1	A D		
Line No ▼	Explain below how each activit accomplishment of the foundation	-				
					<del></del>	· <u> </u>
			· · · · · · · · · · · · · · · · · · ·		<del></del>	
	· · · · · · · · · · · · · · · · · · ·				<del></del>	
			<del></del>			<del></del>
					······	<del> </del>
			<del></del>	<del></del>		
	<del></del>		<del></del>	<del></del>		<del></del>
			NOW ADDITION		<del></del>	<del></del>
			NOT APPLICABL	1 <u>F</u>		_ <del></del>
						<del></del>
	·					
	<u> </u>					
		·			<u> </u>	
					<del></del>	
					_	
	<del></del>	<del></del>	<del></del>		<del></del>	5 QQA-PE (2010

rm **990-PF** (2018)

Part XVII	Information Regarding	Transfers	to and	<b>Transactions</b>	and Relationships	With Noncharitable
_	Exempt Organizations				•	

1	Did the	e organization directl	ly or indirectly en	gage in any of the follow	ing with any	other orga	anization described		Yes	No
	in sec	tion 501(c) (other	than section 5	01(c)(3) organizations)	or in sectio	n 527, re	elating to political	1 1		
	organiz	ations?						1 1	1	
a	Transfe	ers from the reporting	g foundation to a	noncharitable exempt org	anization of.			_		ا مہ سم
										X_
	(2) Oth	ier assets						1a(2)		X
b	Other t	ransactions						<u></u>	_ [	
+	(1) Sal	es of assets to a nonc	charitable exempt	organization				1b(1)		X_
+	( <b>2</b> ) Pur	chases of assets fron	n a noncharitable	exempt organization				1b(2)		<u>X</u>
1	( <b>3</b> ) Rer	ntal of facilities, equip	oment, or other as	sets				1b(3)		<u>X</u>
	( <b>4</b> ) Rei	mbursement arrange	ements					1b(4)		<u>X</u>
										<u>X</u>
-	( <b>6</b> ) Per	formance of services	or membership o	or fundraising solicitations				1b(6)		<u>X</u>
				other assets, or paid emp						<u>X</u>
		•		complete the following			•			
				s given by the reporting						
	value i			nent, show in column (d						
_ (a) Lir	ie no	(b) Amount involved	(c) Name of non-	charitable exempt organization	(d) Desci	ription of transf	fers, transactions, and sha	iring arran	geme	nts
				<del> </del>			<del></del>			
							<del>_</del>			
		<del></del>	<u> </u>		<del></del>					
				<del></del>						
							<del>-</del>			
•	+									
		- · -	<u> </u>	<del></del>	<del></del>					
					<del>-</del>					
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	-						<del> </del>			
							<del></del>			
				<del></del>			·	-		
	$\neg$			····						
	s the	foundation directly o	or indirectly affilia	ated with, or related to,	one or more	tax-exemp	t organizations			
			•	on 501(c)(3)) or in section			_	Ye	s X	No
		complete the follow								_
		(a) Name of organization	n	(b) Type of organization			(c) Description of relation	ship		
	1			<del></del>	<u>.                                 </u>	<del></del>				
				this return, including accompanying ayer) is based on all information of wh			to the best of my knowled	ge and be	net, it	is true,
Sign		1 10%	sir	1 00 /05 /0000		7110 DID	May the IR	S discuss	this	return
Here	19	uni-j	en	02/06/2020		ING DIR		reparer sh		— I
	) ~	ature of officer or trustee	N 7	Date	Title		See instruction	ns	Yes	N∘
	BA	NK OF AMERICA		Propores's superstries		Doto		PTIN		
Paid		Print/Type preparer's nan	ne	Preparer's signature		Date	Clieck "	1 1114		
Prep	arer			<u> </u>		<del></del>	self-employed			
Use		Firm's name	<del></del>				Firm's EIN			
USE '	Unity	Firm's address					Diverse			
			*				Phone no	rm 990	.PF	20191

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES 

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
	1 1 1 1 1 1 1 1 1 1 1 1	F 2 1 1 1 1 1
USGI REPORTED AS NONOUALIFIED DIVIDENDS	14,434.	14,434.
Οĵ	42,056.	42,056.
NONDIVIDEND DISTRIBUTIONS	27.	
DOMESTIC DIVIDENDS	77,197.	77,197.
OTHER INTEREST	15,089.	15,089.
FOREIGN INTEREST	1,580.	1,580.
U.S. GOVERNMENT INTEREST (FEDERAL TAXABLE	2,980.	2,980.
NON-TAXABLE FOREIGN INCOME	-1,046.	
US GOVERNMENT INTEREST REPORTED AS QUALI	133.	133.
FOREIGN DIVIDENDS	13,646.	13,646.
NONOUALIFIED DOMESTIC DIVIDENDS	34,554.	34,554.
	3,872.	3,872.
	1 1 6 6 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
TOTAL	204,522.	205,541.

OTHER INCOME	
1	11
Н	II
PART	
990PF,	10 11 11 11 11 11 11
FORM	

NET INVESTMENT INCOME	1 1 1 1	406. -61,893.		-61,487.
REVENUE AND EXPENSES PER BOOKS	1 1 1 1 1 1		1 1 1 1 1 1 1 1 1 1	
-				TOTALS
DESCRIPTION	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	PARTNERSHIP INCOME FROM PARTNERSHIP/S-CORP		

FORM 990PF, PART I - ACCOUNTING FEES

BVL091 L775 02/06/2020 09:31:52

CHARITABLE PURPOSES	895.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	1,343. 1,343. ===================================
REVENUE AND EXPENSES PER BOOKS	2,238.
DESCRIPTION	TAX PREPARATION FEE - BOA TOTALS

_	OUSLEY
	国
	AND
	<b>JSLE</b>
	RY

		CHARITABLE PURPOSES	25,18 5,00	30,187.
59-7271578	,			
OUSLEY		REVENUE AND EXPENSES PER BOOKS	25,	30,187.
AMY HERYFORD OUSLEY AND JAMES HERYFORD	FORM 990PF, PART I - OTHER PROFESSIONAL FEES	DESCRIPTION	GRANTMAKING FEES - BOA OTHER PROFESSIONAL FEES - CHAR	TOTALS

FORM 990PF, PART I - TAXES

NET INVESTMENT INCOME	3,427. 1,435.	5,469.
REVENUE AND EXPENSES PER BOOKS	3,427. 4,300. 18,740. 1,435. 607.	28,509.
DESCRIPTION	FOREIGN TAXES EXCISE TAX - PRIOR YEAR EXCISE TAX ESTIMATES FOREIGN TAXES ON QUALIFIED FOR	TOTALS

- OTHER EXPENSES

FORM 990PF, PART I

9

CHARITABLE PURPOSES	10.	10.
NET INVESTMENT INCOME	1,118. 1,118. 7,213. 166.	9,615.
REVENUE AND EXPENSES PER BOOKS	1,118. 1,118. 10.	2,246.
DESCRIPTION	OTHER ALLOCABLE EXPENSE-PRINCI OTHER ALLOCABLE EXPENSE-INCOME STATE FILING FEE PARTNERSHIP EXPENSES FROM PARTNERSHIP/S-CORP	TOTALS

STOCK	
CORPORATE	
ī	11
H	11
PART	
990PF,	
FORM	

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV
$\Omega \boxtimes O \boxtimes G \boxtimes G \sqcup G \sqcup G \sqcup G \sqcup G \sqcup G \sqcup G \sqcup G \sqcup G$	109,222. 254,065. 214,663. 712,868. 227,400. 727,036. 501,240. 117,050.	482,637. 254,065. 235,163. 526,061. 127,228. 761,258.	505,500. 416,478. 369,644. 583,919. 151,921. 1,126,601.
262/F61 4253Q74 9260B38 9339084 0142R53	82,17 82,17 46,90 09,12 16,82	288,326.	352,919.
02671913 07543877 90994109 02993993 03995997 23991307 5399C107	22,35 22,35 11,27 91,22 94,16 90,15	987,513. 186,979. 327,618. 299,275. 186,976. 290,005. 696,630.	1,020,478. 226,573. 375,466. 318,779. 198,895. 340,907.
9246619 9250164 9263993 9263994 9263995 8468862	24,98 76,16 52,06 12,69 51,19	92,022 90,316 15,570 65,795 96,329	82,761 67,479 46,239 72,274 98,264 04,025

FORM 990PF, PART II - CORPORATE STOCK

AMY HERYFORD OUSLEY AND JAMES HERYFORD OUSLEY

DESCRIPTION		BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV -
52469H784 CLEARBRIDGE LARGE CA 77954Q403 ROWE T PRICE BLUE CH 693390882 PIMCO FOREIGN BD US\$			338,072. 357,144. 192,096.	380,755. 378,461. 199,408.
	TOTALS	8,997,488.	8,798,483.	10,196,403.

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FORM 990PF, PART II - OTHER INVESTMENTS

AMY HERYFORD OUSLEY AND JAMES HERYFORD OUSLEY

DESCRIPTION	COST/ FMV · C OR F	BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV 
AN ATANTAG GOTO, AND AND MA	ر	104,253	104.253	165,303.
	) U	171,500.	206,500.	238,200.
	י ט -	214,650.	140,136.	427,757.
	TOTALS	490,403.	450,889.	831,260.
	ii			

24,986.

==========

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

TOTAL

STATEMENT

10

FORM 990PF,	PART III -	OTHER DECREASES	IN NET WORTH	OR FUND BALANCES
				==========

DESCRIPTION		TRUOMA
		- + <del></del>
CTF ADJUSTMENT		113,619.
COST BASIS ADJUSTMENTS		79,196.
YEAR END SALES ADJ		59,473.
SECURITY ADJUSTMENT		160.
	TOTA I	252 449
	TOTAL	252,448.

۲,

I HERYFORD OUSLEY AND JAMES HERYFORD OUSLEY ule D Detail of Short-term Capital Gains and Losses

	Short-term Gain/Loss				542.00		1,494.00	2,983.00		36,621.00	-29,212.00							i													-29,212.00		•
	Cost or Other Basis	,			15,585.00	0 0	46,859.00	37,439.00		423,500.00 -	544,850.00 -																				544,850.00 -		
0/07/7/-60	Gross Sales Price			1 1	16,127.00	(	72 957 00	422		386,879.00	515,638.00																				515,638.00		
U U	Date Sold				04/30/2019	000	11/20/2019	11/30/2019		01/31/2019																							
1 2 2 3 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1	Date Acquired	-			08/31/2018	7	08/31/2018	06/30/2019		01/31/2018																							
ule D Detail of Short-term Capital Gains and Losses	Description		R GAINS AND LOSSES	613 EMERGING MARKETS STOCK COMMON	TRUST FUND	.751 EMERGING MARKETS STOCK COMMON	MIT FUND	IDEND	INVESCO DB COMMODITY IND	FUN	OTHER GAINS AND LOSSES																					001	
	me and a	,		each e	emplo	оуеє	paic	mor	e tha	n \$50			_ h	our	s pe	r we	erage ek Ition	-1	(c)	Cor	nper	isatı	on _		em plar	ploy is an	ibuti ee be d dei ensai	enefi ferre	t			nse acc llowan	_
NONE		•		_		_		_	-			-   -						_		1	1ON	ΙE		_		N	ONI	E			]	NONE	 -

## AMY HERYFORD OUSLEY AND JAMES HERYFORD OUSLEY Schedule D Detail of Long-term Capital Gains and Losses

Description	Date	Date	Gross Sales Price	Cost or Other Basis	Long-term Gain/Loss
		,			,
OTHER GAINS AND LOSSES					
1115.513 EMERGING MARKETS STOCK COMMON					
TRUST FUND	08/17/2012	06/30/2019	64,850.00	53,651.00	11,199.00
1612. INVESCO DB COMMODITY INDEX					
TRACKING FUND	03/13/2015	01/31/2019	25,189.00	27,662.00	-2,473.00
1660. INVESCO DB COMMODITY INDEX					
TRACKING FUND	10/30/2015	01/31/2019	25,939.00	25,147.00	792.00
1893. INVESCO DB COMMODITY INDEX					1
TRACKING FUN	12/22/2015	01/31/2019	29,580.00	24,930.00	4,650.00
.32 INTERNATIONAL FOCUSED E	11/22/2013	01/31/2019	82,543.00	82,037.00	506.00
8308.295 INTERNATIONAL FOCUSED EQUITY					
COMMON TRUST FUND	11/22/2013	06/30/2019	114,460.00	106,823.00	7,637.00
21181.833 STRATEGIC GROWTH COMMON	:				
TRUST FUND	05/10/2013	04/30/2019	427,570.00	398,817.00	28,753.00
3796.236 LARGE CAP CORE CTF	01/31/2018	11/30/2019	42,483.00	37,711.00	4,772.00
2417.505 MID CAP CORE CTF	01/31/2018	11/30/2019	26,181.00	24,382.00	1,799.00
TOTAL OTHER GAINS AND LOSSES			838,795.00	781,160.00	57,635.00
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Totals			838,795.00	781,160.00	57,635.00

## GAINS AND LOSSES FROM PASS-THRU ENTITIES

NET SHORT-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS AND OTHER FIDUCIARIES

COMMON TRUST FUNDS

-20,526.00

TOTAL NET SHORT-TERM GAIN OR LOSS (ROUNDED)

-20,526.00

=========

NET LONG-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS AND OTHER FIDUCIARIES

COMMON TRUST FUNDS

327,947.00

PARTNERSHIPS, TRUSTS, S CORPORATIONS

67,397.00

TOTAL NET LONG-TERM GAIN OR LOSS (ROUNDED)

395,344.00

========

RECIPIENT NAME:

FRANK X HERNANDEZ, KLAMATH CO COMMITTEE ADDRESS:

P O BOX 446

KLAMATH FALLS, OR 97601

RECIPIENT'S PHONE NUMBER: 541-892-3909

E-MAIL ADDRESS: OUSLEYEDFUND@AOL.COM

FORM, INFORMATION AND MATERIALS:

APPLICATION FROM THE KLAMATH CO HIGH SCHOOL

ONLINE @ WWW.OUSLEYEDFUND.ORG

SEE ATTACHED APPLICATION

SUBMISSION DEADLINES:

MARCH 15

RESTRICTIONS OR LIMITATIONS ON AWARDS: STUDENTS MUST HAVE ATTENDED A KLAMATH CO HIGH SCHOOL ALL FOUR YEARS AS A RESIDENT AND CURRENT RESIDENT OF KLAMATH COUNTY.

RECIPIENT NAME:

DAVID M VANDENBERG, LAKE CO COMMITTEE ADDRESS:

P O BOX 351

LAKEVIEW, OR 97630

RECIPIENT'S PHONE NUMBER: 541-947-2196

E-MAIL ADDRESS: N/A

FORM, INFORMATION AND MATERIALS:

SEE ATTACHED APPLICATION

SUBMISSION DEADLINES:

MAY 1

RESTRICTIONS OR LIMITATIONS ON AWARDS: STUDENTS MUST HAVE ATTENDED A LAKE CO HIGH SCHOOL ALL FOUR YEARS AS A RESIDENT AND CURRENT RESIDENT OF LAKE COUNTY.

15

AMY HERYFORD OUSLEY AND JAMES HERYFORD OUSLEY 59-7271578 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: SOUTHERN OREGON UNIVERSITY FBO JULIA CYR ADDRESS: 1250 SISKIYOU BLVD ASHLAND, OR 97520 RELATIONSHIP: NONE PURPOSE OF GRANT: COLLEGE SCHOLARSHIPS FOUNDATION STATUS OF RECIPIENT: Ι AMOUNT OF GRANT PAID ...... 4,500. RECIPIENT NAME: WESTERN OREGON UNIVERSITY FBO DANIELLE DUNN ADDRESS: 345 W MONMOUTH AVE MONMOUTH, OR 97361 RELATIONSHIP: NONE PURPOSE OF GRANT: COLLEGE SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Ι AMOUNT OF GRANT PAID ..... 9,000. RECIPIENT NAME: ARIZONA STATE UNIVERSITY FBO BRYCE CRUMRINE ADDRESS: P.O. BOX 2260 TEMPE, AZ 85280-2260 RELATIONSHIP: NONE PURPOSE OF GRANT: COLLEGE SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Ι

AMOUNT OF GRANT PAID .....

9,000.

AMY HERYFORD OUSLEY AND JAMES HERYFORD OUSLEY 59-7271578 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: BRIGHAM YOUNG UNIVERSITY- IDAHO FBO CLAIRE COLLINS ADDRESS: 525 S CENTER STREET REXBURG, ID 83460 RELATIONSHIP: NONE PURPOSE OF GRANT: COLLEGE SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ...... 9,000. RECIPIENT NAME: GEORGE FOX UNIVERSITY FBO ETHAN FINE ADDRESS: 414 N MERIDIAN STREET NEWBERG, OR 97132 RELATIONSHIP: NONE PURPOSE OF GRANT: COLLEGE SCHOLARSHIPS FOUNDATION STATUS OF RECIPIENT: 9,000. AMOUNT OF GRANT PAID ...... RECIPIENT NAME: LINN-BENTON COMMUNITY COLLEGE FBO MASON CROSS ADDRESS: 6500 PACIFIC BLVD SW ALBANY, OR 97321

AMOUNT OF GRANT PAID .....

STATEMENT 17

RELATIONSHIP:

PURPOSE OF GRANT:

COLLEGE SCHOLARSHIPS

FOUNDATION STATUS OF RECIPIENT:

NONE

9,000.

59-7271578 AMY HERYFORD OUSLEY AND JAMES HERYFORD OUSLEY FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_ RECIPIENT NAME: PACIFIC UNIVERSITY FBO HANNAH RAMSEY ADDRESS: 2043 COLLEGE WAY FOREST GROVE, OR 97116 **RELATIONSHIP:** NONE PURPOSE OF GRANT: COLLEGE SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: 9,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: SOUTHWESTERN OREGON COMM COLLEGE FBO GRADY DAVIDSON ADDRESS: 1988 NEWMARK AVE COOS BAY, OR 97420 **RELATIONSHIP:** NONE PURPOSE OF GRANT: COLLEGE SCHOLARSHIPS FOUNDATION STATUS OF RECIPIENT: Ι 9,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: WILLAMETTE UNIVERSITY FBO ELIZABETH HYDE ADDRESS: 900 STATE ST SALEM, OR 97301 RELATIONSHIP: NONE PURPOSE OF GRANT: COLLEGE SCHOLARSHIPS

AMOUNT OF GRANT PAID .....

9,000.

FOUNDATION STATUS OF RECIPIENT:

AMY HERYFORD OUSLEY AND JAMES HERYFORD OUSLEY 59-7271578 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: TREASURE VALLEY COMM COLLEGE FBO KEENAN STERBA ADDRESS: 650 COLLEGE BOULEVARD ONTARIO, OR 97914 RELATIONSHIP: NONE PURPOSE OF GRANT: COLLEGE SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Ι AMOUNT OF GRANT PAID ...... 9,000. RECIPIENT NAME: BUTTE COMMUNITY COLLEGE FBO ALEXANDRA ROBINSON ADDRESS: 3536 BUTTE CAMPUS DRIVE OROVILLE, CA 95965 **RELATIONSHIP:** NONE PURPOSE OF GRANT: COLLEGE SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: 9,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: \_ NORTHWEST\_CHRISTIAN UNIVERSITY\_\_\_ FBO ALAINA CLOER ADDRESS: 828 EAST 11TH AVENUE EUGENE, OR 97401 RELATIONSHIP: NONE

AMOUNT OF GRANT PAID .....

STATEMENT 19

PURPOSE OF GRANT:

COLLEGE SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

9,000.

AMY HERYFORD OUSLEY AND JAMES HERYFORD OUSLEY 59-7271578 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: UNIVERSITY OF NEVADA, RENO ADDRESS: MAILSTOP 162 RENO, NV 89557 RELATIONSHIP: N/APURPOSE OF GRANT: STUDENT SCHOLARSHIPS FOUNDATION STATUS OF RECIPIENT: 9,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: CORBAN UNIVERSITY FBO KENDRA MURPHY ADDRESS: 5000 DEER PARK DRIVE SE SALEM, OR 97317 RELATIONSHIP: NONE PURPOSE OF GRANT: COLLEGE SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: 9,000. AMOUNT OF GRANT PAID ......

AMOUNT OF GRANT PAID .....

STATEMENT 20

RECIPIENT NAME:

RELATIONSHIP:

PURPOSE OF GRANT:

ADDRESS:

NONE

UNIVERSITY OF OKLAHOMA FBO KRYSTA COLAHAN

1000 ASP AVENUE RM 205

COLLEGE SCHOLARSHIP

FOUNDATION STATUS OF RECIPIENT:

NORMAN, OK 73019

9,000.

AMY HERYFORD OUSLEY AND JAMES HERYFORD OUSLEY 59-7271578 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: NEW MEXICO STATE UNIVERSITY FBO WILLIAM TATE LIGHTLE ADDRESS: 1780 EAST UNIVERSITY AVENUE LAS CRUCES, NM 88003 RELATIONSHIP: NONE PURPOSE OF GRANT: COLLEGE SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Ι 9,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: LIBERTY UNIVERSITY FBO CAMERON BAKER ADDRESS: 1971 UNIVERSITY BLVD LYNCHBURG, VA 24515 RELATIONSHIP: NONE PURPOSE OF GRANT: COLLEGE SCHOLARSHIPS FOUNDATION STATUS OF RECIPIENT: Ι 9,000. AMOUNT OF GRANT PAID .....

RECIPIENT NAME:

WEST TEXAS A&M UNIVERSITY FBO EMILY "KATE" WARNER

ADDRESS:

1

2501 4TH AVENUE CANYON, TX 79016

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

COLLEGE SCHOLARSHIPS

FOUNDATION STATUS OF RECIPIENT:

Ι

AMOUNT OF GRANT PAID ...... 9,000.

21

AMY HERYFORD OUSLEY AND JAMES HERYFORD OUSLEY 59-7271578 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: LEWIS & CLARK COLLEGE FBO ASHLEY O'LEARY ADDRESS: 0615 SW PALATINE HILL RD PORTLAND, OR 97219 RELATIONSHIP: NONE PURPOSE OF GRANT: COLLEGE SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: 9,000. AMOUNT OF GRANT PAID ...... RECIPIENT NAME: PACIFIC NORTHWEST COLLEGE OF ART FBO KAMARYN SCHNEIDER ADDRESS: 511 NW BROADWAY PORTLAND, OR 97209 RELATIONSHIP: NONE PURPOSE OF GRANT: COLLEGE SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 9,000. RECIPIENT NAME: PHAGAN'S CENTRAL OREGON FBO HELEN ERICKSON ADDRESS: 1310 NE CUSHING DR BEND, OR 97701 **RELATIONSHIP:** NONE PURPOSE OF GRANT: COLLEGE SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Ι

AMOUNT OF GRANT PAID .....

STATEMENT 22

1

6,000.

59-7271578 AMY HERYFORD OUSLEY AND JAMES HERYFORD OUSLEY FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: OREGON INSTITUTE OF TECHNOLOGY LAKE COUNTY SCHOLARSHIP COMMITTEE ADDRESS: 3201 CAMPUS DR KLAMATH FALLS, OR 97601 RELATIONSHIP: NONE PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Т 6,283. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: OREGON INSTITUTE OF TECHNOLOGY KLAMATH COUNTY SCHOLARSHIP COMMITTEE ADDRESS: 3201 CAMPUS DR KLAMATH FALLS, OR 97601 RELATIONSHIP: PURPOSE OF GRANT: SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ...... 230,553. RECIPIENT NAME: LEWIS & CLARK COLLEGE FBO TAYLOR " JACK" HYDE ADDRESS: 0615 SW PALATINE HILL RD PORTLAND, OR 97219 RELATIONSHIP: NONE PURPOSE OF GRANT: COLLEGE SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID .....

1

9,000.

AMY HERYFORD OUSLEY AND JAMES HERYFORD OUSLEY 59-7271578 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: CITIZENS FOR SAFE SCHOOLS ADDRESS: P.O BOX 243 KLAMATH FALLS, OR 97601 RELATIONSHIP: NA PURPOSE OF GRANT: FOR DOCUMENT STORAGE FUND JAN- MARCH FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 225. RECIPIENT NAME: CARROLL COLLEGE FBO BRETTE GRAHAM ADDRESS: 1601 N BENTON AVENUE HELENA, MT 59625 RELATIONSHIP: NONE PURPOSE OF GRANT: COLLEGE SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: Ι 9,000. AMOUNT OF GRANT PAID ...... RECIPIENT NAME: WESTERN OREGON UNIVERSITY FBO MACEY HARGIS ADDRESS: 345 W MONMOUTH AVENUE MONMOUTH, OR 97361 RELATIONSHIP: NONE PURPOSE OF GRANT: COLLEGE SCHOLARSHIP

AMOUNT OF GRANT PAID .....

1

9,000.

FOUNDATION STATUS OF RECIPIENT:

59-7271578 AMY HERYFORD OUSLEY AND JAMES HERYFORD OUSLEY FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: GEORGE FOX UNIVERSITY FBO ELIZABETH RAMSEY ADDRESS: 414 N MERIDIAN STREET NEWBERG, OR 97132 RELATIONSHIP: NONE PURPOSE OF GRANT: COLLEGE SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: 9,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: WEST TEXAS A&M UNIVERSITY FBO REBECCA WARNER ADDRESS: 2501 4TH AVENUE CAYON, TX 79016 **RELATIONSHIP:** NONE PURPOSE OF GRANT: COLLEGE SCHOLARSHIP FOUNDATION STATUS OF RECIPIENT: 9,000. AMOUNT OF GRANT PAID ..... 463,561. TOTAL GRANTS PAID:

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