

For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

Name of foundation BARBARA EMILY KNUDSON FOUNDATION		A Employer identification number 27-2245059	
Number and street (or P.O. box number if mail is not delivered to street address) PO BOX 12806		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code SALEM, OR 97309		B Telephone number (see instructions) (503) 371-9636	
G Check all that apply: <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Initial return of a former public charity</div> <div><input type="checkbox"/> Final return</div> <div><input type="checkbox"/> Amended return</div> <div><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here..... 2. Foreign organizations meeting the 85% test, check here and attach computation ...	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶\$ 5,177,008		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	
J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities . . .	122,035	122,035		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	126,299			
	b Gross sales price for all assets on line 6a 1,302,687				
	7 Capital gain net income (from Part IV, line 2) . . .		126,299		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less: Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	50	50		
	12 Total. Add lines 1 through 11	248,384	248,384		
	13 Compensation of officers, directors, trustees, etc.	39,303	0		39,303
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	9,000	4,500		4,500
	c Other professional fees (attach schedule)	36,919	36,919		0
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	3,886	1,276		598
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings	6,115	0		6,115
	22 Printing and publications				
	23 Other expenses (attach schedule)	3,816	0		3,816
	24 Total operating and administrative expenses. Add lines 13 through 23	99,039	42,695		54,332
	25 Contributions, gifts, grants paid	187,200			187,200
	26 Total expenses and disbursements. Add lines 24 and 25	286,239	42,695		241,532
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	-37,855			
	b Net investment income (if negative, enter -0-)		205,689		
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	29,175	22,272	22,272
	3 Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)	844,020	944,891	944,891
	b Investments—corporate stock (attach schedule)	2,314,952	2,797,118	2,797,118
	c Investments—corporate bonds (attach schedule)	615,298	591,791	591,791
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	679,811	820,360	820,360
	14 Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)	592	576	576	
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	4,483,848	5,177,008	5,177,008	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions	4,483,848	5,177,008	
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
	29 Total net assets or fund balances (see instructions)	4,483,848	5,177,008	
30 Total liabilities and net assets/fund balances (see instructions) .	4,483,848	5,177,008		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	4,483,848
2 Enter amount from Part I, line 27a	2	-37,855
3 Other increases not included in line 2 (itemize) ▶ _____	3	731,015
4 Add lines 1, 2, and 3	4	5,177,008
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	5,177,008

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a PUBLICLY TRADED SECURITIES			
b PUBLICLY TRADED SECURITIES			
c CAPITAL GAINS DIVIDENDS	P		
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 408,839		425,100	-16,261
b 888,616		751,288	137,328
c 5,232			5,232
d			
e			

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
a			-16,261
b			137,328
c			5,232
d			
e			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	126,299
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8 { }	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐

Yes

☒

No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	247,674	4,929,257	0.050246
2017	240,081	4,843,216	0.049571
2016	240,648	4,624,400	0.052039
2015	247,042	4,935,834	0.050051
2014	240,526	5,023,347	0.047882

2 Total of line 1, column (d)	2	0.249789
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.049958
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	4,871,238
5 Multiply line 4 by line 3	5	243,357
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	2,057
7 Add lines 5 and 6	7	245,414
8 Enter qualifying distributions from Part XII, line 4	8	241,532

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	4,114
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	4,114
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	4,114
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	4,040
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	4,040
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.	8	6
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	80
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ _____ (2) On foundation managers. ▶ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	No
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ OR _____		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation .</i>	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	10	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>HTTP://WWW.GOSW.ORG/SITES/KNUDSONFOUNDATION/</u>	13	Yes	
14	The books are in care of ► <u>THE FOUNDATION</u> Telephone no. ► <u>(503) 371-9636</u>			

Located at ► PO BOX 12806 SALEM ORZIP+4 ► 97309

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ► <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year ► 15			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►			

Part 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	(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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	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	No
	Organizations relying on a current notice regarding disaster assistance check here. ► <input type="checkbox"/>		
c	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 2019?	1c	No
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)):		
a	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20____, 20____, 20____, 20____		
b	Are there any years listed in 2a for which the foundation is not 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	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019.)	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	No

Part VII-B **Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

5a During the year did the foundation pay or incur any amount to:			Yes	No
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		5b	
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d).	<input type="checkbox"/> Yes <input type="checkbox"/> No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7b	
b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?			
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Part VIII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000. ▶ 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. ►		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities.	1a	4,916,914
b	Average of monthly cash balances.	1b	28,505
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	4,945,419
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	4,945,419
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	74,181
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,871,238
6	Minimum investment return. Enter 5% of line 5.	6	243,562

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	243,562
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	4,114
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	4,114
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	239,448
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	239,448
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	239,448

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	241,532
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	241,532
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	241,532

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				239,448
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			0	
b Total for prior years: 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2019:				
a From 2014.				
b From 2015.				7,316
c From 2016.				11,130
d From 2017.				3,957
e From 2018.				5,223
f Total of lines 3a through e.	27,626			
4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ 241,532				
a Applied to 2018, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2019 distributable amount.				239,448
e Remaining amount distributed out of corpus	2,084			
5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	29,710			
b Prior years' undistributed income. Subtract line 4b from line 2b.		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b. Taxable amount—see instructions.		0		
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions.			0	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a.	29,710			
10 Analysis of line 9:				
a Excess from 2015.				7,316
b Excess from 2016.				11,130
c Excess from 2017.				3,957
d Excess from 2018.				5,223
e Excess from 2019.				2,084

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test—enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c "Support" alternative test—enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	187,200
b <i>Approved for future payment</i>				
Total			3b	0

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments. . . .					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities. . . .			14	122,035	
5 Net rental income or (loss) from real estate:					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory			18	126,299	
9 Net income or (loss) from special events:					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a <u>OTHER INCOME</u> _____			01	50	
b _____					
c _____					
d _____					
e _____					
12 Subtotal. Add columns (b), (d), and (e). .		0		248,384	

[illegible]

Part XVII

	Yes	No
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1a(1)		No
1a(2)		No

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1b(1)	No
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1b(2)		No
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1b(3)		No
--------------	--	-----------

1b(4)		No
--------------	--	-----------

1b(5)		No
--------------	--	-----------

1b(6)		No
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1c		No
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value
ue

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations

described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Title

May the IRS discuss this return with the preparer shown below

(see instr.) ☒ Yes ☐ No

**Paid
Preparer
Use Only**

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P00178437
	JOHN D HAWKINS JD CPA				
	Firm's name ▶ GROVE MUELLER & SWANK PC				Firm's EIN ▶ 93-0874157
	Firm's address ▶ 475 COTTAGE STREET NE SUITE 200 SALEM, OR 97301				Phone no. (503) 581-7788

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
EMILEE PROVOST 694 HIGH STREET NE SALEM, OR 97301	DIRECTOR 2.00	10,063	0	0
RICHARD MCGINTY 694 HIGH STREET NE SALEM, OR 97301				
PATRICK MELIUS 694 HIGH STREET NE SALEM, OR 97301	PRESIDENT 2.00	6,737	0	0
SHARON SMITH 694 HIGH STREET NE SALEM, OR 97301				
STEPHEN BLOWERS 694 HIGH STREET NE SALEM, OR 97301	DIRECTOR 2.00	3,836	0	0

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ABC HOUSEPO BOX 68 ALBANY, OR 97321	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
ADELANTE MUJERES 2030 MAIN ST STE A FOREST GROVE, OR 97116	NONE	PUBLIC CHARITY	GENERAL SUPPORT	10,000
BELLONI RANCH 320 CENTRAL AVE STE 406 COOS BAY, OR 97420	NONE	PUBLIC CHARITY	GENERAL SUPPORT	10,000
Total ▶ 3a				187,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BETHLEHEM INNPO BOX 8540 BEND, OR 97708	NONE	PUBLIC CHARITY	GENERAL SUPPORT	7,000
CANYON CRISIS & RESOURCE CENTER 825 NW SANTIAM BLVD MILL CITY, OR 97360	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
CENTER FOR HOPE AND SAFETY 605 CENTER ST NE SALEM, OR 97301	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
Total ▶ 3a				187,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CLATSOP COMMUNITY COLLEGE 1651 LEXINGTON AVE ASTORIA, OR 97103	NONE	PUBLIC CHARITY	STUDENT EMERGENCY FUND	7,000
COCC FOUNDATION 2800 NW COLLEGE WAY BEND, OR 97701	NONE	PUBLIC CHARITY	STUDENT EMERGENCY FUND	7,000
COLUMBIA GORGE COMMUNITY COLLEGE 400 E SCENIC DR THE DALLES, OR 97058	NONE	PUBLIC CHARITY	STUDENT EMERGENCY FUND	7,000
Total ▶ 3a				187,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
EUGENE MISSION 1542 WEST FIRST AVE EUGENE, OR 97440	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
FAMILY KITCHEN231 NW IDAHO AVE BEND, OR 97703	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
FOSTERCLUB INC620 S HOLLADAY DR 1 SEASIDE, OR 97138	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
Total ▶ 3a				187,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FRIENDS OF SALEM SENIOR CENTER 2615 PORTLAND RD NE SALEM, OR 97301	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
GRANT COUNTY SENIOR CITIZENS 142 NE DAYTON ST JOHN DAY, OR 97845	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
HOME LIFE INC2068 NW FILLMORE AVE CORVALLIS, OR 97330	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,000
Total ▶ 3a				187,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HUMANE SOCIETY OF CENTRAL OREGON 61170 SE 27TH STREET BEND, OR 97702	NONE	PUBLIC CHARITY	GENERAL SUPPORT	20,000
HUNAH CANINE RESCUEPO BOX 7950 BEND, OR 97708	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
LANE COMMUNITY COLLEGE FOUNDATION 4000 EAST 30TH AVENUE EUGENE, OR 97405	NONE	PUBLIC CHARITY	STUDENT EMERGENCY FUND	7,000
Total ▶ 3a				187,200

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LAPINE COMMUNITY KITCHEN PO BOX 813 LA PINE, OR 97739	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,500
LIBERTY HOUSE2685 4TH ST NE SALEM, OR 97301	NONE	PUBLIC CHARITY	GENERAL SUPPORT	10,000
LINN BENTON COMMUNITY COLLEGE 6500 PACIFIC BLVD SW ALBANY, OR 97321	NONE	PUBLIC CHARITY	STUDENT EMERGENCY FUND	7,000
Total ▶ 3a				187,200

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MARION-POLK FOOD SHARE 1660 SALEM INDUSTRIAL DRIVE NE SALEM, OR 97301	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
NEW AVENUES FOR YOUTH 1220 SW COLUMBIA ST PORTLAND, OR 97201	NONE	PUBLIC CHARITY	GENERAL SUPPORT	10,000
SALEM POLICE FOUNDATION PO BOX 2631 SALEM, OR 97308	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
Total ▶ 3a				187,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SHANGRI LA SALEM 4080 REED RD SE 150 SALEM, OR 97302	NONE	PUBLIC CHARITY	GENERAL SUPPORT	10,000
SISTERS OF THE ROAD 133 NW SIXTH AVE PORTLAND, OR 97209	NONE	PUBLIC CHARITY	GENERAL SUPPORT	10,000
SOUTHSIDE YOUTH OUTREACH 2065 SE DEBORD ST CORVALLIS, OR 97333	NONE	PUBLIC CHARITY	GENERAL SUPPORT	7,000
Total ▶ 3a				187,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SOUTHWEST OREGON CC FOUNDATION 1988 NEWMARK AVENUE COOS BAY, OR 97420	NONE	PUBLIC CHARITY	STUDENT EMERGENCY FUND	7,000
STRENGTHENING RURAL FAMILIES PO BOX 1528 PHILOMATH, OR 97370	NONE	PUBLIC CHARITY	GENERAL SUPPORT	7,000
CENTRAL OREGON DISABILITY SUPPORT NETWORK 2525 NE TWIN KNOLLS DR 7 BEND, OR 97701	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,700
Total ▶ 3a				187,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
FAMILY ACCESS NETWORK 2125 NE DAGGETT LANE BEND, OR 97701	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
FAMILY RESOURCE CENTER 1130 NW HARRIMAN ST B BEND, OR 97701	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,000
HEALING REINS THERAPEUTIC RIDING CENTER 60575 BILLADEAU RD BEND, OR 97702	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
Total ▶ 3a				187,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HEART OF OREGON CORPS 1291 NE 5TH ST BEND, OR 97701	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,500
JEFFERSON COUNTY FAITH BASED NETWORK PO BOX 416 MADRAS, OR 977410052	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,500
JEFFERSON COUNTY LIBRARY DISTRICT 241 SE 7TH ST MADRAS, OR 97741	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,500
Total ▶ 3a				187,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JEFFERSON COUNTY PUBIC HEALTH 715 SW 4TH ST MADRAS, OR 97741	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,000
JEFFERSON COUNTY KIDS CLUB 410 SW 4TH ST MADRAS, OR 97741	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,000
LINC MADRAS278 SE 8TH ST MADRAS, OR 97741	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
Total ▶ 3a				187,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FREE METHODIST CHRURCH - MADRAS 976 S ADAMS DR MADRAS, OR 97741	NONE	PUBLIC CHARITY	GENERAL SUPPORT	2,000
BUFF ELEMENTARY SCHOOL 375 SE BUFF ST MADRAS, OR 97741	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
SUCCESSFUL CHOICES612R N KERBY PORTLAND, OR 97217	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
Total ▶ 3a				187,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
UMPQUA COMMUNITY COLLEGE 1140 UMPQUA COLLEGE RD ROSEBURG, OR 97470	NONE	PUBLIC CHARITY	STUDENT EMERGENCY FUND	7,000
VETERANS OF FOREIGN WARS 630 HOOD ST NE SALEM, OR 97301	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
VIRGINIA WOOF DOG DAYCARE 1520 W BURNSIDE ST PORTLAND, OR 97209	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
Total ▶ 3a				187,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
YOUTH FOR CHRIST3818 SE 174TH AVE PORTLAND, OR 97236	NONE	PUBLIC CHARITY	GENERAL SUPPORT	500
NOT OK5715 NE 27TH AVE PORTLAND, OR 97211	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000
Total ▶ 3a				187,200

TY 2019 Accounting Fees Schedule**Name:** BARBARA EMILY KNUDSON FOUNDATION**EIN:** 27-2245059

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	9,000	4,500		4,500

TY 2019 Investments Corporate Bonds Schedule

Name: BARBARA EMILY KNUDSON FOUNDATION

EIN: 27-2245059

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
BONDS	591,791	591,791

TY 2019 Investments Corporate Stock Schedule**Name:** BARBARA EMILY KNUDSON FOUNDATION**EIN:** 27-2245059**Investments Corporation Stock Schedule**

Name of Stock	End of Year Book Value	End of Year Fair Market Value
STOCKS	2,797,118	2,797,118

TY 2019 Investments Government Obligations Schedule**Name:** BARBARA EMILY KNUDSON FOUNDATION**EIN:** 27-2245059**US Government Securities - End
of Year Book Value:**

944,891

**US Government Securities - End
of Year Fair Market Value:**

944,891

**State & Local Government
Securities - End of Year Book
Value:**

0

**State & Local Government
Securities - End of Year Fair
Market Value:**

0

TY 2019 Investments - Other Schedule

Name: BARBARA EMILY KNUDSON FOUNDATION

EIN: 27-2245059

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MUTUAL FUNDS AND OTHER	FMV	820,360	820,360

TY 2019 Other Assets Schedule

Name: BARBARA EMILY KNUDSON FOUNDATION

EIN: 27-2245059

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
ACCRUED INTEREST PURCHASED	592	576	576

TY 2019 Other Expenses Schedule**Name:** BARBARA EMILY KNUDSON FOUNDATION**EIN:** 27-2245059**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE EXPENSE	289	0		289
LICENSES	50	0		50
BANK FEES	13	0		13
INSURANCE	3,464	0		3,464

TY 2019 Other Income Schedule

Name: BARBARA EMILY KNUDSON FOUNDATION

EIN: 27-2245059

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
OTHER INCOME	50	50	50

TY 2019 Other Increases Schedule

Name: BARBARA EMILY KNUDSON FOUNDATION

EIN: 27-2245059

Description	Amount
UNREALIZED GAINS	731,015

TY 2019 Other Professional Fees Schedule**Name:** BARBARA EMILY KNUDSON FOUNDATION**EIN:** 27-2245059

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT	36,919	36,919		0

TY 2019 Taxes Schedule**Name:** BARBARA EMILY KNUDSON FOUNDATION**EIN:** 27-2245059

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	1,276	1,276		0
STATE CT-12 FEE	598	0		598
FEDERAL TAXES	2,012	0		0