

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

Name of foundation ANDERSEN CONSTRUCTION FOUNDATION		A Employer identification number 81-2250991	
Number and street (or P.O. box number if mail is not delivered to street address) 6712 N CUTTER CIRCLE		Room/suite	B Telephone number (see instructions) (503) 283-6712
City or town, state or province, country, and ZIP or foreign postal code PORTLAND, OR 97217		C If exemption application is pending, check here ▶ ☐	
G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change		D 1. Foreign organizations, check here..... ▶ ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ... ▶ ☐	
H Check type of organization: ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ 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) ▶ \$ 71,470		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐	
J Accounting method: ☐ Cash ☒ Accrual ☐ 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)	771,168			
	2 Check ☐ if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2)		0		
	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)	84,729	0		
	12 Total. Add lines 1 through 11	855,897	0		
	13 Compensation of officers, directors, trustees, etc.	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	4,400	0		0
	c Other professional fees (attach schedule)	3,498	0		0
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	2,235	0		0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings	22,723	0		0
	22 Printing and publications				
	23 Other expenses (attach schedule)	621,216	0		426,009
	24 Total operating and administrative expenses. Add lines 13 through 23	654,072	0		426,009
	25 Contributions, gifts, grants paid	209,598			209,598
	26 Total expenses and disbursements. Add lines 24 and 25	863,670	0		635,607
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	-7,773			
	b Net investment income (if negative, enter -0-)		0		
	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	40,686	71,470	71,470
	2 Savings and temporary cash investments			
	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)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	40,686	71,470	71,470	
Liabilities	17 Accounts payable and accrued expenses	6,000	44,557	
	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)	6,000	44,557	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ ☐ and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ ☒ and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	0	0	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	34,686	26,913	
	29 Total net assets or fund balances (see instructions)	34,686	26,913	
30 Total liabilities and net assets/fund balances (see instructions) .	40,686	71,470		

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	34,686
2 Enter amount from Part I, line 27a	2	-7,773
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	26,913
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	26,913

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.)
1a			

(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			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(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	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	
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	271,700	188,589	1.440699
2017	362,703	62,417	5.810965
2016	250,683	101,289	2.474928
2015			
2014			

2 Total of line 1, column (d)	2	9.726592
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	3.242197
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	136,842
5 Multiply line 4 by line 3	5	443,669
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	0
7 Add lines 5 and 6	7	443,669
8 Enter qualifying distributions from Part XII, line 4	8	635,607

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 ☐ 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 ☒ and enter 1% of Part I, line 27b	1	0
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	0
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	0
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	0
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	0
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached.	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	0
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	Yes
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, WA _____		
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 ▶ WWW.ANDERSEN-CONST.COM/COMPANY/COMMUNITY	13	Yes	
14	The books are in care of ▶ JESSICA QUICK Telephone no. ▶ (503) 283-6712			

Located at **▶** 6712N CUTTER CIRCLE PORTLAND ORZIP+4 **▶** 97217

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ▶ ☐			
	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? ☐ Yes ☒ No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☒ Yes ☐ No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ 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)? ☐ Yes ☒ 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.) ☐ Yes ☒ 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
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? ☐ Yes ☒ 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? ☐ Yes ☒ 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)

		Yes	No
5a	During the year did the foundation pay or incur any amount to:		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No	
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No	
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No	
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	☐ Yes ☒ 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?	☐ Yes ☒ 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
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).	☐ Yes ☐ No	
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ 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.		6b No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No		
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?		7b
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?	☐ Yes ☒ 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
DAVID ANDERSEN 6712 N CUTTER CIRCLE PORTLAND, OR 97217	PRESIDENT 1.00	0	0	0
JOEL ANDERSEN 6712 N CUTTER CIRCLE PORTLAND, OR 97217	SECRETARY 1.00	0	0	0
KRISTINA EWING 6712 N CUTTER CIRCLE PORTLAND, OR 97217	TREASURER 1.00	0	0	0
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 THE FOUNDATION SUPPORTS NON-PROFIT ORGANIZATIONS THROUGH A VARIETY OF EFFORTS, INCLUDING FINANCIAL CONTRIBUTIONS AND VOLUNTEER HOURS. IT PARTNERS WITH NONPROFITS THAT ALIGN WITH OUR MISSION AND VISION.	635,607
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	0
b	Average of monthly cash balances.	1b	138,926
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	138,926
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	138,926
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	2,084
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	136,842
6	Minimum investment return. Enter 5% of line 5.	6	6,842

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	6,842
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	6,842
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	6,842
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	6,842

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	635,607
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	635,607
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	635,607

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				6,842
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.				
c From 2016.				247,062
d From 2017.				359,582
e From 2018.				262,271
f Total of lines 3a through e.	868,915			
4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ 635,607				
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.				6,842
e Remaining amount distributed out of corpus	628,765			
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	1,497,680			
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.	1,497,680			
10 Analysis of line 9:				
a Excess from 2015.				
b Excess from 2016.				247,062
c Excess from 2017.				359,582
d Excess from 2018.				262,271
e Excess from 2019.				628,765

Part XIV

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(i)(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

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

Part XV

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 Name and address (home or business)	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
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	209,598
b <i>Approved for future payment</i>				
Total			▶ 3b	0

Enter gross amounts unless otherwise indicated.

	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(See instructions.)
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. . . .					
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					
9 Net income or (loss) from special events:			01	-86,880	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a MISCELLANEOUS REVENUE _____	900099		01	458	
b _____					
c _____					
d _____					
e _____					
12 Subtotal. Add columns (b), (d), and (e). .		0		-86,422	0
13 Total. Add line 12, columns (b), (d), and (e).			13		-86,422

(See worksheet in line 13 instructions to verify calculations.)

[illegible]

Part XVII

- | | | | |
|--|--|-----|----|
| | | Yes | No |
|--|--|-----|----|

--	--	--

- | | | |
|-------|--|----|
| 1a(1) | | No |
| 1a(2) | | No |

--	--	--

- | | | |
|--------------|--|-----------|
| 1b(1) | | No |
| 1b(2) | | No |
| 1b(3) | | No |
| 1b(4) | | No |
| 1b(5) | | No |
| 1b(6) | | No |

1c		No
----	--	----

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

***** Signature of officer or trustee	2020-11-05 Date	***** Title	May the IRS discuss this return with the preparer shown below (see instr.) ☒ Yes ☐ No
---	---	---	--

Print/Type preparer's name JOSEPH W SCHNEID CPA	Preparer's Signature	Date 2020-11-04	Check if self-employed ☐	PTIN P00016218
Firm's name ▶ ALDRICH CPAS AND ADVISORS LLP				Firm's EIN ▶ 93-0623286
Firm's address ▶ 5665 SW MEADOWS RD SUITE 200 LAKE OSWEGO, OR 97035				Phone no. (503) 620-4489

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>				
A FAMILY FOR EVERY CHILD 1675 WEST 11TH AVE EUGENE, OR 97402	NONE	501(C)(3)	CHARITABLE	1,000
ACE MENTOR PROGRAM OF OREGON 7100 SE DIVISION ST PORTLAND, OR 97206	NONE	501(C)(3)	CHARITABLE	12,020
ADA COUNTY SHERIFF EMPLOYEES ASSOCIATION 6945 EMERALD ST SUITE 150 BOISE, ID 83704	NONE	501(C)(4)	CHARITABLE	1,000
Total ▶ 3a				209,598

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>				
AMERICAN HEART ASSOCIATION PO BOX 50085 PRESCOTT, AZ 863045085	NONE	501(C)(3)	CHARITABLE	6,000
APOSTOLIC FAITH CHURCH 6615 SE 52ND AVENUE PORTLAND, OR 972067660	NONE	501(C)(3)	CHARITABLE	2,500
BRIDGES COLLABORATIVE CARE CLINIC 3181 SW SAM JACKSON PARK RD PORLTAND, OR 97239	NONE	501(C)(3)	CHARITABLE	5,000
Total ▶ 3a				209,598

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>				
CENTRAL CITY CONCERN 232 NW 6TH AVE PORTLAND, OR 97209	NONE	501(C)(3)	CHARITABLE	265
CRESWELL CHURCH OF CHRIST 380 KINGS ROW CRESWELL, ID 97426	NONE	501(C)(3)	CHARITABLE	750
EOT INCPO BOX 16 OREGON CITY, OR 97045	NONE	501(C)(3)	CHARITABLE	960
Total ▶ 3a				209,598

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>				
FREEDOM HAS A FACE 905 RIVERSIDE AV SPOKANE, WA 99201	NONE	501(C)(3)	CHARITABLE	17,138
GIRLS BUILDPO BOX 11893 PORTLAND, OR 97211	NONE	501(C)(3)	CHARITABLE	40,500
IRVINGTON SCHOOL 1320 NE BRAZEE ST PORTLAND, OR 97212	NONE	GOV	CHARITABLE	5,000
Total ▶ 3a				209,598

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				
ISSAQUAH KIWANIS FOUNDATION PO BOX 1111 ISSAQUAH, WA 98027	NONE	501(C)(3)	CHARITABLE	2,500
LEGACY HEALTH FOUNDATION PO BOX 4484 PORTLAND, OR 97208	NONE	501(C)(3)	CHARITABLE	1,500
LEUKEMIA & LYMPHOMA SOCIETY 5601 6TH AVE S SUITE 182 SEATTLE, WA 98108	NONE	501(C)(3)	CHARITABLE	1,000
Total ▶ 3a				209,598

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>				
MICHELLE'S LOVEPO BOX 544 SCAPPOOSE, OR 97056	NONE	501(C)(3)	CHARITABLE	2,000
NAMOAPO BOX 871 CLINTON, WA 98236	NONE	501(C)(3)	CHARITABLE	2,500
PROVIDENCE PORTLAND MEDICAL FOUNDATION 4805 NE GLISAN STREET PORTLAND, OR 97213	NONE	501(C)(3)	CHARITABLE	35,000
Total ▶ 3a				209,598

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>				
NEIGHBORWORKS BOISE 3380 W AMERICANA TERRACE SUITE 120 BOISE, ID 97405	NONE	501(C)(3)	CHARITABLE	1,000
OREGON HEALTH AND SCIENCE UNIVERSITY FOUNDATION 1121 SW SALMON STREET SUITE 100 PORTLAND, OR 97267	NONE	501(C)(3)	CHARITABLE	3,375
OREGON HUMANE SOCIETY 1067 NE COLUMBIA BLVD PORTLAND, OR 97215	NONE	501(C)(3)	CHARITABLE	6,000
Total ▶ 3a				209,598

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>				
OREGON STATE UNIVERSITY FOUNDATION 4238 SW RESEARCH WAY CORVALLIS, OR 83706	NONE	501(C)(3)	CHARITABLE	2,500
SAM DAY FOUNDATIONPO BOX 91143 PORTLAND, OR 97291	NONE	501(C)(3)	CHARITABLE	1,770
SELF ENHANCEMENT INC 3920 NORTH KERBY AVE PORTLAND, OR 97227	NONE	501(C)(3)	CHARITABLE	5,000
Total ▶ 3a				209,598

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>				
SLEEP IN HEAVENLY PEACE INC 911 BALLARD WAY KIMBERLY, ID 83341	NONE	501(C)(3)	CHARITABLE	1,000
THE ANGELS IN THE OUTFIELD INC PO BOX 2347 OREGON CITY, OR 97045	NONE	501(C)(3)	CHARITABLE	1,000
THE FRIENDSHIP CLINIC INC 704 SOUTH LATAH STREET BOISE, ID 83705	NONE	501(C)(3)	CHARITABLE	5,000
Total ▶ 3a				209,598

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>				
MARY'S PLACE SEATTLEPO BOX 1711 SEATTLE, WA 98111	NONE	PC	CHARITABLE	46,320
Total ► 3a				209,598

TY 2019 Accounting Fees Schedule**Name:** ANDERSEN CONSTRUCTION FOUNDATION**EIN:** 81-2250991

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL & ACCOUNTING FEES	4,400	0		0

TY 2019 Other Expenses Schedule**Name:** ANDERSEN CONSTRUCTION FOUNDATION**EIN:** 81-2250991**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROJECT COSTS	426,009	0		426,009
SPECIAL EVENT EXPENSES	171,151	0		0
VOLUNTEER EXPENSES	4,522	0		0
COMMUNITY OUTREACH	19,534	0		0

TY 2019 Other Income Schedule

Name: ANDERSEN CONSTRUCTION FOUNDATION

EIN: 81-2250991

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
MISCELLANEOUS REVENUE	458		458
GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS	84,271		84,271

TY 2019 Other Professional Fees Schedule**Name:** ANDERSEN CONSTRUCTION FOUNDATION**EIN:** 81-2250991

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CARD FEES	3,498	0		0

TY 2019 Taxes Schedule**Name:** ANDERSEN CONSTRUCTION FOUNDATION**EIN:** 81-2250991

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LICENSES & TAXES	2,235	0		0

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information.	OMB No. 1545-0047
		2019
Name of the organization ANDERSEN CONSTRUCTION FOUNDATION		Employer identification number 81-2250991

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	☐ 527 political organization
Form 990-PF	☒ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
ANDERSEN CONSTRUCTION FOUNDATION

Employer identification number

81-2250991

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	See Additional Data Table	\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)

Name of organization ANDERSEN CONSTRUCTION FOUNDATION	Employer identification number 81-2250991
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given (see instructions). Use duplicate copies of Part II if additional space is needed.	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	

Name of organization ANDERSEN CONSTRUCTION FOUNDATION	Employer identification number 81-2250991
--	--

Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____ Use duplicate copies of Part III if additional space is needed.
-----------------	---

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	-		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	-		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	-		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	-		

Additional Data

Software ID:
Software Version:
EIN: 81-2250991
Name: ANDERSEN CONSTRUCTION FOUNDATION

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	ANDERSEN CONSTRUCTION CO	\$ 386,305	Person ☒
	6712 N CUTTER CIRCLE		Payroll ☐
	PORTLAND, OR 97217		Noncash ☐ (Complete Part II for noncash contribution.)
<u>2</u>	ANY WEATHER EXTERIORS	\$ 6,000	Person ☒
	PO BOX 100		Payroll ☐
	STAR, ID 83669		Noncash ☐ (Complete Part II for noncash contribution.)
<u>3</u>	ARCHER CONSTRUCTION	\$ 10,500	Person ☒
	7855 SO 206TH STREET		Payroll ☐
	KENT, WA 98032		Noncash ☐ (Complete Part II for noncash contribution.)
<u>4</u>	ARTHUR J GALLAGHER & CO	\$ 12,000	Person ☒
	PO BOX 742886		Payroll ☐
	LOS ANGELES, CA 90074		Noncash ☐ (Complete Part II for noncash contribution.)
<u>5</u>	ASI LLC	\$ 6,595	Person ☒
	6712 N CUTTER CIRCLE		Payroll ☐
	PORTLAND, OR 97217		Noncash ☐ (Complete Part II for noncash contribution.)
<u>6</u>	CALPORTLAND	\$ 8,000	Person ☒
	PO BOX 3601		Payroll ☐
	SEATTLE, WA 98124		Noncash ☐ (Complete Part II for noncash contribution.)

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>7</u>	CLUTCH GLOBAL LOGISTICS	\$ 18,409	Person ☒
	2625 BUTTERFIELD ROAD		Payroll ☐
	OAK BROOK, IL 60523		Noncash ☐ (Complete Part II for noncash contribution.)
<u>8</u>	COMFORT SYSTEMS USA	\$ 5,000	Person ☒
	18702 NORTH CREEK PARKWAY		Payroll ☐
	BOTHELL, WA 98011		Noncash ☐ (Complete Part II for noncash contribution.)
<u>9</u>	CONNELL REAL ESTATE & DEVELOPMENT	\$ 5,000	Person ☒
	200 CONNELL DRIVE		Payroll ☐
	BERKELY HEIGHTS, NJ 07922		Noncash ☐ (Complete Part II for noncash contribution.)
<u>10</u>	DAVID ANDERSEN	\$ 35,360	Person ☒
	1335 SW MYRTLE DRIVE		Payroll ☐
	PORTLAND, OR 97201		Noncash ☐ (Complete Part II for noncash contribution.)
<u>11</u>	GLEN COPKO PAINTING	\$ 5,684	Person ☒
	9500 SE DUNDEE DRIVE		Payroll ☐
	HAPPY VALLEY, OR 97086		Noncash ☐ (Complete Part II for noncash contribution.)
<u>12</u>	HARDER MECHANICAL	\$ 5,000	Person ☒
	2148 NE MLK JR BLVD		Payroll ☐
	PORTLAND, OR 97212		Noncash ☐ (Complete Part II for noncash contribution.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>13</u>	HERMANSON COMPANY	\$ 6,000	Person ☒
	1221 2ND AVE NORTH		Payroll ☐
	KENT, WA 98032		Noncash ☐ (Complete Part II for noncash contribution.)
<u>14</u>	HOBSON FABRICATING	\$ 5,000	Person ☒
	6428 S BUSINESS WAY		Payroll ☐
	BOISE, ID 83716		Noncash ☐ (Complete Part II for noncash contribution.)
<u>15</u>	MACDONALD MILLER	\$ 9,000	Person ☒
	PO BOX 509017		Payroll ☐
	SAN DIEGO, CA 92150		Noncash ☐ (Complete Part II for noncash contribution.)
<u>16</u>	MARTIN CLOE	\$ 5,000	Person ☒
	18304 SE 12TH CIRCLE		Payroll ☐
	VANCOUVER, WA 98683		Noncash ☐ (Complete Part II for noncash contribution.)
<u>17</u>	MATERIALS TESTING & INSPECTION	\$ 5,000	Person ☒
	2791 SOUTH VICTORY VIEW WAY		Payroll ☐
	BOISE, ID 83709		Noncash ☐ (Complete Part II for noncash contribution.)
<u>18</u>	MOORE EXCATION INC	\$ 5,000	Person ☒
	PO BOX 789		Payroll ☐
	FAIRVIEW, OR 97024		Noncash ☐ (Complete Part II for noncash contribution.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	NORTHSTAR	\$ 11,000	Person ☒
	8160 304TH AVENUE SE		Payroll ☐
	ISSAQUAH, WA 98024		Noncash ☐ (Complete Part II for noncash contribution.)
20	PACIFIC STAIR	\$ 5,000	Person ☒
	PO BOX 9340		Payroll ☐
	SALEM, OR 97305		Noncash ☐ (Complete Part II for noncash contribution.)
21	RALPHS CONCRETE PUMPING	\$ 7,500	Person ☒
	1529 RAINIER AVE S		Payroll ☐
	SEATTLE, WA 98144		Noncash ☐ (Complete Part II for noncash contribution.)
22	SEATAC ELECTRIC	\$ 5,000	Person ☒
	7056 S 220TH STREET		Payroll ☐
	KENT, WA 98032		Noncash ☐ (Complete Part II for noncash contribution.)
23	SESSLER	\$ 7,000	Person ☒
	4524 TACOMA AVE		Payroll ☐
	SUMNER, WA 98390		Noncash ☐ (Complete Part II for noncash contribution.)
24	STEVE ANDERSEN	\$ 7,500	Person ☒
	10110 NW ASH STREET		Payroll ☐
	PORTLAND, OR 97229		Noncash ☐ (Complete Part II for noncash contribution.)

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	UMC INC	\$ 5,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	1148 N 450 WEST		
	SPRINGVILLE, UT 84663		
26	UNIVERSAL FOREST PRODUCTS	\$ 8,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	2801 EAST BELTLINE NE		
	GRAND RAPIDS, MI 49625		
27	AMY AND MARK RADICH	\$ 5,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	827 8TH STREET		
	LAKE OSWEGO, OR 97034		