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Return of Private Foundation

OMB No. 1545-0052

DLN: 93491040004151

2019

Open to Public Inspection

Form 990-PF

Department of the Treasury

Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

For	caler	ndar year 2019, or tax year beginning 10-01-20)19 , ar	nd ending 09-30-	2020		
		undation CHARITABLE TRUST		A Employer id	A Employer identification number		
51	3 (E) 17 (1 C	CINA NOLE INSO	93-6272124	93-6272124			
	ber and D BOX 2	d street (or P.O. box number if mail is not delivered to street address) 25442	Room/suite	B Telephone nu	mber (see instructio	ns)	
				(503) 286-0685	5		
		n, state or province, country, and ZIP or foreign postal code OR 972980442		C If exemption	application is pendin	g, check here	
G Cł	neck al	ll that apply:	former public charity	D 1. Foreign or	ganizations, check he	ere	
		Final return Amended return			ganizations meeting k here and attach co		
		Address change Name change		<u> </u>	undation status was t	· -	
_	,	/pe of organization: \checkmark Section 501(c)(3) exempt private \checkmark			n 507(b)(1)(A), chec		
			e private foundation				
of	year (f	ket value of all assets at end from Part II, col. (c), ▶\$ 19,586,263 J Accounting method: □ Other (specify) (Part I, column (d) must	☑ Cash ☐ Accru		ation is in a 60-mont n 507(b)(1)(B), chec		
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and			(d) Disbursements	
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc., received (attach schedule)					
	2	Check ► ✓ if the foundation is not required to attach					
	3	Sch. B Interest on savings and temporary cash investments	712	712			
	4	Dividends and interest from securities	505,087	505,087			
	5a	Gross rents					
	ь	Net rental income or (loss)					
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	408,195				
	b	Gross sales price for all assets on line 6a 3,834,770					
	7	Capital gain net income (from Part IV, line 2)		408,195			
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	913,994	913,994			
	13	Compensation of officers, directors, trustees, etc.	150,000	, , , , , , , , , , , , , , , , , , ,		150,000	
	14	Other employee salaries and wages					
es	15	Pension plans, employee benefits					
sue	16a	Legal fees (attach schedule)					
Expenses	b	Accounting fees (attach schedule)	4,700			4,700	
∕e E	С	Other professional fees (attach schedule)	40,919	40,919		0	
'ati∖	17	Interest	66-1 40.055	4 30.4			
and Administrative	18 19	Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion	18,050	1,704		0	
Ē	20	Occupancy					
Ad	21	Travel, conferences, and meetings					
pue	22	Printing and publications					
ξį	23	Other expenses (attach schedule)	79,299	76,740		2,559	
Operating	24	Total operating and administrative expenses.					
) Def		Add lines 13 through 23	292,968	119,363		157,259	
J	25	Contributions, gifts, grants paid	751,651			751,651	
	26	Total expenses and disbursements. Add lines 24 and 25	1,044,619	119,363		908,910	
	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements	-130,625				
	b	Net investment income (if negative, enter -0-)		794,631			
	С	Adjusted net income (if negative, enter -0-)					
For	Paper	work Reduction Act Notice, see instructions.		Cat. No. 11289)	(For	m 990-PF (2019)	

11,837,009

6,162,253

105,000

78,779

18,757,378

25,444,431

-6,687,053

18,757,378

18,757,378

18,908,003

18,777,378

18,757,378 Form **990-PF** (2019)

20,000

-130,625

1

2

3

4

5

6

18,908,003

25,444,431

-6,536,428

18,908,003

18.908.003

12,431,229

6,309,769

112,880

158,048

19,586,263

10a Investments—U.S. and state government obligations (attach schedule) 12,153,225 b 6,347,612 C 11 105,000 Less: accumulated depreciation (attach schedule) ▶ 12 144,964 13 Investments—other (attach schedule) 14 Land, buildings, and equipment: basis ▶ _ Less: accumulated depreciation (attach schedule) ▶ _____

Receivables due from officers, directors, trustees, and other

Less: allowance for doubtful accounts ▶

Other assets (describe > .

Other liabilities (describe -_

Grants payable

instructions. Also, see page 1, item I)

and complete lines 24, 25, 29 and 30. Net assets without donor restrictions . .

Net assets with donor restrictions . . .

and complete lines 26 through 30.

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

Decreases not included in line 2 (itemize) .

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Prepaid expenses and deferred charges

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

Accounts payable and accrued expenses

Foundations that follow FASB ASC 958, check here

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow FASB ASC 958, check here 🕨 🗹

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

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

disqualified persons (attach schedule) (see instructions)

Other notes and loans receivable (attach schedule) ▶

6

7

8

15

16

17

18

19

20

21

22 23

24 25

28

30

Part III

2

3

Liabilities

Fund Balances

ō 26

Assets 27

Net 29

Assets 9

Page **3**

• /	pe the kind(s) of property sold (e.g., arehouse; or common stock, 200 shs	·	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a PUBLICLY TRADED SECU	RITIES				
b CAPITAL GAINS DIVIDE	NDS		Р		
c					
d					
e					
()	(f)		(g)	(h)
(e) Gross sales price	Depreciation allowed		other basis	Gain o	r (loss)
· .	(or allowable)	plus expe	ense of sale	(e) plus (f) minus (g)
a 3,72	23,823		3,426,575		297,248
b 11	10,947				110,947
c					
d					
e					
Complete only for assets	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69	(1)
(i)	(j)		(k)		h) gain minus
(i) F.M.V. as of 12/31/69	Adjusted basis		of col. (i)		less than -0-) or
	as of 12/31/69	over col	. (j), if any	Losses (Tr	om col.(h))
a					297,248
b					110,947
С					
d					
e					
•	gain or (loss) as defined in sections :	ons). If (loss), enter -0	,	3	408,195
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net	Investment Inc	come	
For optional use by domestic properties, left section 4940(d)(2) applies, left was the foundation liable for the	private foundations subject to the sec	ction 4940(a) tax on ne	it investment incom	e.)	es 🗸 No
1 Enter the appropriate ar	nount in each column for each year;	see instructions before	making any entries	5.	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rat (col. (b) divided by c	
2018	964,845		18,924,183	·	0.050985
2017	865,795		20,097,640		0.043079
2016	970,953		19,947,556		0.048675
2015	992,574		18,744,252		0.052954
2014	1,107,324		20,324,518		0.054482
2 Total of line 1, column (d)		2		0.250175
number of years the four	o for the 5-year base period—divide indation has been in existence if less	than 5 years	3		0.050035
	oncharitable-use assets for 2019 fron	*	4		18,933,423
5 Multiply line 4 by line 3			5		947,334
	ent income (1% of Part I, line 27b)				7,946
7 Add lines 5 and 6			7		955,280
. , -	ions from Part XII, line 4 ,				908,910
If line 8 is equal to or grainstructions.	eater than line 7, check the box in Pa	art VI, line 1b, and com	plete that part usin	g a 1% tax rate. Se	e the Part VI

	990-F1 (2019)		- 4-20.14	— • • • • • • • • • • • • • • • • • • •	,		P	age (
श्च		ing Activities for Which	Form 4720 May Be	Required (continued)	<i>)</i>			
ā	During the year did the foundation p	·					Yes	No
	(1) Carry on propaganda, or otherw	ise attempt to influence legisl	ation (section 4945(e))?	☐ Yes ि	✓ No			
	(2) Influence the outcome of any sp	ecific public election (see sect	tion 4955); or to carry					
	on, directly or indirectly, any vot	er registration drive?		· · 🗌 Yes 🛭	✓ No			
	(3) Provide a grant to an individual	for travel, study, or other sim	ilar purposes?	☐ Yes ☐	▼ No			
	(4) Provide a grant to an organization	on other than a charitable, etc	, organization described		<u> </u>			
	in section 4945(d)(4)(A)? See in	structions		· · □ v [✓ No			
	(5) Provide for any purpose other th	an religious, charitable, scien	tific, literary, or	· · L Yes	⊻ No			
	educational purposes, or for the	prevention of cruelty to childr	en or animals?					
b	If any answer is "Yes" to $5a(1)-(5)$,	•		Ceptions described in	⊻ No			
	Regulations section 53.4945 or in a	•		•		5b		
	Organizations relying on a current no			_	t			
_	If the answer is "Yes" to question 5a				ШΙ			
	tax because it maintained expenditu	• • •	•		_			
	If "Yes," attach the statement requir			' '	_ No			
	•	· -						
ìа	Did the foundation, during the year,	, , ,						
	a personal benefit contract?			⊔ Yes L	✓ No			
b	Did the foundation, during the year,	pay premiums, directly or ind	lirectly, on a personal be	nefit contract?		6b		No
	If "Yes" to 6b, file Form 8870.							
'a	At any time during the tax year, was	the foundation a party to a p	prohibited tax shelter tra	nsaction? Yes	✓ No			
b	If "Yes", did the foundation receive a	any proceeds or have any net	income attributable to the			7b		
3	Is the foundation subject to the sect	ion 4960 tax on payment(s) o	of more than \$1,000,000	in remuneration or				
	excess parachute payment during th	e year?		· · 🗌 Yes	√ N° [
	Information About O	fficers, Directors, Trust	tees. Foundation Ma			ees.		
Pai	t VIII and Contractors	, 2, 11	,		,	,,		
1	List all officers, directors, trustee	s. foundation managers ar	nd their compensation	See instructions				
	List an officers, an ectors, trustee	(b) Title, and average	(c) Compensation (If	(d) Contributions to	1,,	_		
	(a) Name and address	hours per week	not paid, enter	employee benefit plans a			ise acci	
		devoted to position	-0-)	deferred compensation	י ו	iller ai	lowanic	.63
ee A	Additional Data Table							
2	Compensation of five highest-pai	d employees (other than t	l hose included on line :	l—see instructions). If ⊢	none, er	ter "l	NONE.	71
	, , ,			(d) Contributions to	1			
a)	Name and address of each employee [paid (b) Title, and average hours per week	(c) Compensation	employee benefit			se acco	
	more than \$50,000	devoted to position	(c) compensation	plans and deferred	otl	ner all	owance	es
				compensation				
ONI	<u> </u>							
					\perp			
nt2	I number of other employees paid ove	r \$50 000.						
Jid	Hamber of other employees paid over				Farr	~ QQ(0-PF (2010
					LOL	□ プラし	5-PF (Z019

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional servic	es (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		• 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele organizations and other beneficiaries served, conferences convened, research papers produ		r of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see i	nstructions)	
Describe the two largest program-related investments made by the foundation during the	·	Amount
1	,	
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		• o
Total Add Mico Landagn 5		Form 990-PF (2019)

_			
С	Add lines 2a and 2b	2c	15,893
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	930,778
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	930,778
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	930,778
Part	Qualifying Distributions (see instructions)		

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

908,910

908.910

908.910

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1a

1b

2

За 3h

4

5

Amounts set aside for specific charitable projects that satisfy the:

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

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

1

2

3

4

5

b

P	art XIII Undistributed Income (see instruct	ions)			
	·	(a)	(b)	(c)	(d)
	L	Corpus	Years prior to 2018	2018	2019
1	Distributable amount for 2019 from Part XI, line 7				930,778
2	Undistributed income, if any, as of the end of 2019:				
а	Enter amount for 2018 only			918,497	
b	Total for prior years: 20		0		
3	Excess distributions carryover, if any, to 2019:				
а					
b	From 2015				
_	From 2016				
d	From 2017				
_	From 2018				
		· ·			
*	Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ 908,910				
,	Applied to 2018, but not more than line 2a			908,910	
	Applied to undistributed income of prior years		0	300,310	
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election	0			
	required—see instructions)				
d	Applied to 2019 distributable amount				0
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2019.	0			0
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		
С	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		
е	Undistributed income for 2018. Subtract line				
	4a from line 2a. Taxable amount—see			9,587	
f	instructions			9,307	
l '	lines 4d and 5 from line 1. This amount must				
	be distributed in 2020				930,778
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			

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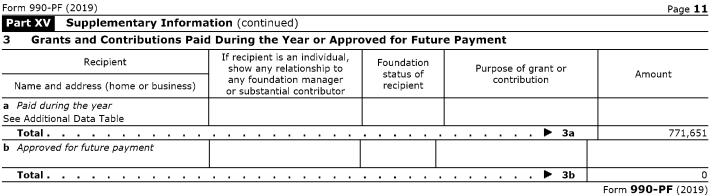
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b Excess from 2016. c Excess from 2017. . d Excess from 2018. . e Excess from 2019.

9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a . . .

10 Analysis of line 9: a Excess from 2015.

Forn	n 990-PF (2019)					Page 10
P	art XIV Private Operating Found	ations (see instr	uctions and Part \	/II-A, question 9)		
1a	If the foundation has received a ruling or defoundation, and the ruling is effective for 20			erating		
b	Check box to indicate whether the organization	on is a private oper	ating foundation des	scribed in section L	J 4942(j)(3) or □	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(c) rotal
	year listed					
b	85% of line 2a					
С	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					
е	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:					
а	"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					
С	Part X, line 6 for each year listed "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					
	Supplementary Information	(Complete this	nart only if the	foundation had	\$5,000 or more i	n
Pa	assets at any time during th			iodildation nad	\$5,000 or inore i	"
1	Information Regarding Foundation Man					-
а	List any managers of the foundation who have before the close of any tax year (but only if					1
ь	List any managers of the foundation who own	n 10% or more of th	e stock of a corpora	ation (or an equally I		
2	ownership of a partnership or other entity) of Information Regarding Contribution, Gr.					
_			•	_		
	Check here ► ☐ if the foundation only mak					
	unsolicited requests for funds. If the founda other conditions, complete items 2a, b, c, a			iais or organizations	under	
а	The name, address, and telephone number of	or e-mail address of	the person to whom	n applications should	be addressed:	
	TRUST MANAGEMENT SERVICES					
	PO BOX 1990 WALDPORT, OR 97394					
	(541) 563-7279					
	INFO@TRUSTMANAGEMENTSERVICES.NET					
b	The form in which applications should be sul	omitted and informa	tion and materials t	hey should include:		
	APPLICATION MUST BE IN WRITING; SUBMI INTEGRATED TYPE III SUPPORTING ORGAN: CONSTITUTION; COPY OF CURRENT FINANCEFFORTS; AND OTHER INFORMATION TAX E COMPLETE APPLICATION REQUIREMENTS.	IZATION AS REPORT	TED ON FORM 990, S STATEMENT OF SPE	SCHEDULE A, LINE 1 CIFIC ENDEAVOR; R	2; COPY OF BY-LAWS	S AND SULTS OF SIMILAR
С	Any submission deadlines:					
_	SUBMISSION DEADLINES VARY; SEE TRUST	MANAGEMENTSERV	ICES.NET FOR ALL I	DEADLINES.		
d	Any restrictions or limitations on awards, su factors:				utions, or other	
	GRANTS LIMITED TO TAX-EXEMPT ORGANIZ INDIVIDUALS.	ZATIONS WITHIN OF	REGON. GENERALLY	THE MAXIMUM GRA	NT IS \$10,000. NO G	RANTS TO



nter gross amounts unless	s otherwise indicated.	Unrelated b	usiness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt
1 Program service revenu	e:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
a						
b						
c d						
e						
f						
_	om government agencies					
Membership dues and a Interest on savings and investments						
4 Dividends and interest	from securities			14 14	712 505,087	
 Net rental income or (logonome a Debt-financed property) 	•					
b Not debt-financed pro	•					
·	oss) from personal property					
Other investment incom						
Gain or (loss) from sale inventory	es of assets other than			1.0	400 105	
Net income or (loss) from				18	408,195	
Gross profit or (loss) fr	om sales of inventory					
1 Other revenue: a						
b						
e						
e2 Subtotal. Add columns	(b), (d), and (e)		0		913,994	
e	(b), (d), and (e) umns (b), (d), and (e)		0		913,994 3	
e	(b), (d), and (e) umns (b), (d), and (e) 13 instructions to verify calcu	lations.)		1	<u> </u>	
2 Subtotal. Add columns 3 Total. Add line 12, columns (See worksheet in line: Part XVI-B Relation Explain below the accomplise	(b), (d), and (e)	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3ited importantly to	913,994
2 Subtotal. Add columns 3 Total. Add line 12, columns (See worksheet in line 2) Part XVI-B Relatio Line No. Expensive the accomplision.	(b), (d), and (e)	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3ited importantly to	913,994
2 Subtotal. Add columns 3 Total. Add line 12, columns (See worksheet in line 12) Part XVI-B Relation Line No. Explain below the accomplise	(b), (d), and (e)	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3ited importantly to	913,994
2 Subtotal. Add columns 3 Total. Add line 12, columns (See worksheet in line 12) art XVI-B Relation Explain below the accomplise	(b), (d), and (e)	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3ited importantly to	913,994
2 Subtotal. Add columns 3 Total. Add line 12, columns (See worksheet in line 12) art XVI-B Relation ine No. Explain below the accomplise	(b), (d), and (e)	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3ited importantly to	913,994
Subtotal. Add columns Total. Add line 12, columns Total. Add line 12, columns (See worksheet in line 12) Total. Add line 12, columns Explain below the accomplise	(b), (d), and (e)	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3ited importantly to	913,994
2 Subtotal. Add columns 3 Total. Add line 12, columns (See worksheet in line 12) art XVI-B Relation ine No. Explain below the accomplise	(b), (d), and (e)	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3ited importantly to	913,994
2 Subtotal. Add columns 3 Total. Add line 12, columns (See worksheet in line 12) art XVI-B Relation ine No. Explain below the accomplise	(b), (d), and (e)	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3ited importantly to	913,994
Subtotal. Add columns Total. Add line 12, columns (See worksheet in line 12) Tart XVI-B Relatio The No. Explain below the accomplisions.	(b), (d), and (e)	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3ited importantly to	913,994
Subtotal. Add columns Total. Add line 12, columns Total. Add line 12, columns (See worksheet in line 12) Total. Add line 12, columns Explain below the accomplise	(b), (d), and (e)	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3ited importantly to	913,994
Subtotal. Add columns Total. Add line 12, columns Total. Add line 12, columns (See worksheet in line 12) Total. Add line 12, columns Explain below the accomplise	(b), (d), and (e)	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3ited importantly to	913,994
2 Subtotal. Add columns 3 Total. Add line 12, columns (See worksheet in line 12) art XVI-B Relation ine No. Explain below the accomplise	(b), (d), and (e)	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3ited importantly to	913,994
2 Subtotal. Add columns 3 Total. Add line 12, columns (See worksheet in line 12) art XVI-B Relation ine No. Explain below the accomplise	(b), (d), and (e)	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3ited importantly to	913,994
2 Subtotal. Add columns 3 Total. Add line 12, columns (See worksheet in line 12) art XVI-B Relation ine No. Explain below the accomplise	(b), (d), and (e)	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3ited importantly to	913,994
Subtotal. Add columns Total. Add line 12, columns Total. Add line 12, columns (See worksheet in line 12) Total. Add line 12, columns Explain below the accomplise	(b), (d), and (e)	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3ited importantly to	913,994
2 Subtotal. Add columns 3 Total. Add line 12, columns (See worksheet in line 12) art XVI-B Relation ine No. Explain below the accomplise	(b), (d), and (e)	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3ited importantly to	913,994
2 Subtotal. Add columns 3 Total. Add line 12, columns (See worksheet in line 12) art XVI-B Relation ine No. Explain below the accomplise	(b), (d), and (e)	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3ited importantly to	913,994
Subtotal. Add columns Total. Add line 12, columns Total. Add line 12, columns (See worksheet in line 12) Total. Add line 12, columns Explain below the accomplise	(b), (d), and (e)	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3ited importantly to	913,994
2 Subtotal. Add columns 3 Total. Add line 12, columns (See worksheet in line 12) art XVI-B Relation ine No. Explain below the accomplise	(b), (d), and (e)	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3ited importantly to	913,994
2 Subtotal. Add columns 3 Total. Add line 12, columns (See worksheet in line 12) art XVI-B Relation ine No. Explain below the accomplise	(b), (d), and (e)	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3ited importantly to	913,994
2 Subtotal. Add columns 3 Total. Add line 12, columns (See worksheet in line 12) Part XVI-B Relation Line No. Explain below the accomplise	(b), (d), and (e)	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	ot Purposes Part XVI-A contribu	3ited importantly to	913,994

orm 9	990-PF (Pa	ge 13
Par	t XVII	Information Re Exempt Organi		ransi	fers To a	nd Transact	ions ar	nd Relatio	nships With None	charitable		
		ganization directly or in than section 501(c)(3)								n 501	Yes	No
a Tra	ansfers 1	from the reporting foun	dation to a n	oncha	ritable exe	mpt organizatio	on of:					
(1) Cash.									1a(1)		No
(2) Other	assets								. 1a(2)		No
b Ot	her tran	sactions:										
(1) Sales	of assets to a nonchari	table exempt	t orga	nization.					. 1b(1)		No
(2) Purch	ases of assets from a n	oncharitable	exem	pt organiz	ation				. 1b(2)		No
(3) Renta	al of facilities, equipmer	nt, or other as	ssets.						. 1b(3)		No
•	-	bursement arrangemen								1b(4)		No
-	•	s or loan guarantees.								. 1b(5)		No
-	•	mance of services or m			_					1b(6)		No
	-	facilities, equipment, n ver to any of the above								. <u>1c</u>		No
of	the good any trar	ds, other assets, or sernsaction or sharing arra (b) Amount involved	vices given b ngement, sho	y the ow in	reporting f column (d	oundation. If th	ne founda he goods	ation receive s, other asse	ed less than fair marke	et value ed.	ngomon	nte.
(a) LII	le No.	(B) Amount involved	(C) Name of	noncha	aritable exell	npt organization	(a)	Description of	transfers, transactions, a	and Sharing arra	ngemen	ILS
2a Is	the four	ndation directly or indire	ectly affiliated	d with	, or related	to, one or mor	re tax-ex	empt organ	izations			
de	scribed	in section 501(c) (other	than section	501((c)(3)) or i	n section 527? .			🗆 Yes	s 🔽 No		
b If	"Yes," co	omplete the following so				.		ı	() 5	6 1 1 1 1 1 1		
		(a) Name of organization	n		(В) Type of organiza	ation		(c) Description o	of relationship		
	of m whic	er penalties of perjury, ly knowledge and belief h preparer has any kno	, it is true, co			,	_		-	,		
Sigr Her		*****				2021-02-08		*****		May the IRS di return with the prepa		
	│ 	Signature of officer or t	rustee			Date		Title		below (see instr.)	_	
		Print/Type preparer's	name	Prepa	arer's Sign	ature	Date	1		TIN		
									Check if self- employed ▶ □	P00853	3258	
Paic		MARGARET WALLIS	5 CPA				20	021-02-08				
	oarer Only		∖P LLP				•		Fi	rm's EIN ▶93	-04187	710
			85 MEADOW	S ROA	AD NO 200							
	LAKE OSWEGO, OR 97035						Ph	Phone no. (503) 697-4118				

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

			compensation	
МАКТНА В СОХ	TRUSTEE	0	0	0
PO BOX 25442 PORTLAND, OR 97298	2.00			
MELANIE ANN DAWSON	TRUSTEE	0	0	0

MELANIE ANN DAWSON	TRUSTEE	0	0	0
PO BOX 25442 PORTLAND, OR 97298	1.00			
KEN DAWSON	TRUSTEE	0	0	0
PO BOX 25442	1.00			

PO BOX 25442 PORTLAND, OR 97298				
KEN DAWSON	TRUSTEE	0	0	0
PO BOX 25442 PORTLAND, OR 97298	1.00			
GREG SNYDER	TRUSTEE	0	0	0

KEN DAWSON	TRUSTEE	0	0	0
PO BOX 25442 PORTLAND, OR 97298	1.00			
GREG SNYDER	TRUSTEE	0	0	0
PO BOX 25442 PORTLAND, OR 97298	1.00			

PORTLAND, OR 97298				
GREG SNYDER	TRUSTEE	0	0	0
PO BOX 25442 PORTLAND, OR 97298	1.00			
				1

	11100122	ľ	•	_
PO BOX 25442 PORTLAND, OR 97298	1.00			
MARY C BIRD	GRANT	150,000	0	0

MARY C BIRD	GRANT	150,000	0	
PO BOX 1990 WALDPORT, OR 97394	ADMINISTRATOR 5.00			

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

recipient

771,651

any foundation manager

Name and address (home or business)

Traine and dadress (nome or basiness)	or substantial contributor			
a Paid during the year				
AAUW OF OREGON SPECIAL PROJECTS FUND 22143 RICKARD ROAD BEND, OR 97702		PC	TO SUPPORT THE 2021 TECH TREK RESIDENTIAL SUMMER STEM CAMP FOR GIRLS	9,000
ABC HOUSE228 SW 5TH AVENUE ALBANY, OR 97321		PC	TO SUPPORT THE EXPANSION OF THE COMMUNITY EDUCATION	7,550

22143 RICKARD ROAD BEND, OR 97702		STEM CAMP FOR GIRLS	
ABC HOUSE228 SW 5TH AVENUE ALBANY, OR 97321	PC	TO SUPPORT THE EXPANSION OF THE COMMUNITY EDUCATION	7,.

DEND, OK 37702			
ABC HOUSE228 SW 5TH AVENUE ALBANY, OR 97321	PC	TO SUPPORT THE EXPANSION OF THE COMMUNITY EDUCATION PROGRAMS FOR YOUTH	7,!

ABC HOUSE228 SW 5TH AVENUE ALBANY, OR 97321	PC	TO SUPPORT THE EXPANSION OF THE COMMUNITY EDUCATION PROGRAMS FOR YOUTH	7,550
ACCESS3630 AVIATION WAY	PC	TO EXPAND THE MEDFORD	2,700

ALBANY, OR 97321		OF THE COMMUNITY EDUCATION PROGRAMS FOR YOUTH	
ACCESS3630 AVIATION WAY MEDFORD, OR 97501	PC	TO EXPAND THE MEDFORD	2,700

ACCESS3630 AVIATION WAY MEDFORD, OR 97501	PC	TO EXPAND THE MEDFORD FOOD SHARE GARDEN	

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

ALBERTINA KERR CENTERS FOUNDATION INC 4735 APPALOOSA COURT SE SALEM, OR 97301	SO I	TO PROVIDE FUNDING FOR A PORTABLE PATIENT LIFT	5,900
ASSISTANCE LEAGUE OF BEND	PC	TO SUPPORT OPERATION	10,000

SALEM, OR 9/301			
ASSISTANCE LEAGUE OF BEND PO BOX 115 BEND, OR 97709	PC	TO SUPPORT OPERATION SCHOOL BELL: CLOTHING MATTERS	10,000
ASSISTANCE LEAGUE OF SALEM- KEIZER 1095 SAGINAW STREET S	PC	TO SUPPORT OPERATION SCHOOL BELL: CLOTHING MATTERS	10,000

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PO BOX 115 BEND, OR 97709		SCHOOL BELL: CLOTHING MATTERS	10,00
ASSISTANCE LEAGUE OF SALEM- KEIZER 1095 SAGINAW STREET S SALEM. OR 97302	PC	TO SUPPORT OPERATION SCHOOL BELL: CLOTHING MATTERS	10,00

BEND, OR 97709		MATTERS	
ASSISTANCE LEAGUE OF SALEM- KEIZER 1095 SAGINAW STREET S SALEM, OR 97302	PC	TO SUPPORT OPERATION SCHOOL BELL: CLOTHING MATTERS	10,00

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 status of contribution

Recipient

Recipient

Amount

Show any relationship to status of contribution

any foundation manager

Name and address (home or husiness)

BIT BY BIT38578 HWY 99W

CORVALLIS, OR 97330

Total .

mame and dadress (nome or business)	or substantial contributor			
a Paid during the year				
BANDON HISTORICAL SOCIETY MUSEUM 270 FILLMORE AVE SE BANDON, OR 97411		PC	TO PROVIDE MATERIALS TO BEGIN REPLACING THE MUSEUM'S FLOORING	9,450
BEND FILM 1000 NW WALL STREET SUITE 240 BEND, OR 97703		PC	TO SUPPORT BENDFILM'S VIRTUAL FILM FESTIVAL	10,000

PC

TO PROVIDE FUNDING FOR

HIPPOTHERAPY CERTIFICATION

5,000

771,651

recipient

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year BOYS AND GIRLS CLUB OF ALBANY PC TO PROVIDE FUNDING FOR 10,000

CHARACTER AND LEADERSHIP

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CLUB PROGRAMS

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

1215 HILL STREET SE

ALBANY, OR 97322

,			
BOYS AND GIRLS CLUB OF EMERALD VALLEY	PC	SUPPORT OF THEIR EDUCATIONAL INITIATIVE,	10,000
1545 WEST 22ND AVENUE		THINK B.I.G.	
EUGENE, OR 97405			

EUGENE, OR 97405		THINK B.I.G.	
BOYS AND GIRLS CLUB OF SALEM MARION AND POLK COUNTIES INC 1395 SUMMER STREET NE SALEM OR 97301	PC	TO SUPPORT THE TRIPLE PLAY PROGRAM	10,000

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

BOYS AND GIRLS CLUB OF SOUTHWESTERN OR 3333 WALNUT AVENUE COOS BAY, OR 97420	PC	TO PURCHASE ART TABLES FOR THE ART CENTER	7,348
BOYS AND GIRLS CLUB OF THE	PC	TO SUPPORT THE REPLACEMENT	10,000

BOYS AND GIRLS CLUB OF THE UMPQUA VALLEY 1144 NE CEDAR STREET ROSEBURG, OR 97470	PC	TO SUPPORT THE REPLACEMENT OF 21 COMPUTER SYSTEMS	10,000
BRIDGEWAY HOUSESSS E 15TH AVENUE	PC	TO SUPPORT A THEATER	7 000

1144 NE CEDAR STREET ROSEBURG, OR 97470			
BRIDGEWAY HOUSE555 E 15TH AVENUE EUGENE, OR 97402	PC	TO SUPPORT A THEATER PRODUCTION FOR AUTISTIC	7,

Total .

ROSEBURG, OR 97470			
BRIDGEWAY HOUSE555 E 15TH AVENUE EUGENE, OR 97402	PC	TO SUPPORT A THEATER PRODUCTION FOR AUTISTIC CHILDREN	7,00

За

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

		1	
CALDERA31500 BLUE LAKE DRIVE SISTERS, OR 97759	PC	TO SUPPORT THE CENTRAL OREGON YOUTH PROGRAM ARTS-BASED MENTORSHIPS	10,000
CAMP FIRE CENTRAL OREGON	PC	TO PROVIDE FREE OR LOW	10,000

CAMP FIRE CENTRAL OREGON 1001 SW EMKAY DRIVE BEND, OR 97702	PC	TO PROVIDE FREE OR LOW COST STEAM PROGRAMMING IN DESCHUTES COUNTY	10,
CASA FOR CHILDREN OF KLAMATH COUNTY	PC	TO PROVIDE ESSENTIAL TECHNOLOGY FOR REMOTE	10,

BEND, OR 97702		DESCHUTES COUNTY	
CASA FOR CHILDREN OF KLAMATH COUNTY 731 MAIN STREET 202 KLAMATH FALLS, OR 97601		TO PROVIDE ESSENTIAL TECHNOLOGY FOR REMOTE SERVICE CONTINUITY	10,0

Total .

BEND, OR 97702		DESCHUTES COUNTY	
CASA FOR CHILDREN OF KLAMATH COUNTY 731 MAIN STREET 202 KLAMATH FALLS OR 97601		TO PROVIDE ESSENTIAL TECHNOLOGY FOR REMOTE SERVICE CONTINUITY	10,000

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

a Paid during the year			
CASA OF DOUGLAS COUNTY 545 W UMPQUA ST SUITE 2 ROSEBURG, OR 97471	PC	TO RECRUIT, TRAIN, AND SUPPORT CASA ADVOCATES	10,000
CASA OF JACKSON & JOSEPHINE	PC	TO RECRUIT, TRAIN, AND	10,000

CASA OF JACKSON & JOSEPHINE COUNTIES 409 N FRONT STREET MEDFORD, OR 97501	PC	TO RECRUIT, TRAIN, AND SUPPORT CASA ADVOCATES	10,0
CASA OF LANE COUNTY	DC.	TO CURRORT ONE VEAR OF	10.0

PC	TO SUPPORT ONE YEAR OF VOLUNTEER RECRUITMENT	10,00
	PC	

MEDFORD, OR 97301			
CASA OF LANE COUNTY 174 DEADMOND FERRY ROAD SPRINGFIELD, OR 97477	PC	TO SUPPORT ONE YEAR OF VOLUNTEER RECRUITMENT EFFORTS	10,

Total .

CASA OF LANE COUNTY 174 DEADMOND FERRY ROAD SPRINGFIELD, OR 97477	PC	TO SUPPORT ONE YEAR OF VOLUNTEER RECRUITMENT EFFORTS	10,000

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CASA OF MARION COUNTY INC PC TO SUPPORT SALARY & WAGES 10,000

FOR INITIALLY HIRING STAFF

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

3530 RIVER ROAD N

KEIZER, OR 97303		FOR A NEW JUVENILE DEPENDENCY PROGRAM	
CASCADE SCHOOL OF MUSIC 510 NE 3RD STREET BEND, OR 97701	PC	TO SUPPORT THE KINDERMUSIK AND MUSICAL EXPLORERS OUTREACH PROGRAMS	5,

CASCADE SCHOOL OF MUSIC 510 NE 3RD STREET BEND, OR 97701	PC	TO SUPPORT THE KINDERMUSIK AND MUSICAL EXPLORERS OUTREACH PROGRAMS	5,000
CENTRAL POINT SCHOOL DISTRICT #6 (1) 300 ASH STREET	GOV	TO PROVIDE FUNDING FOR THE ANATOMY IN CLAY LEARNING SYSTEM	7,000

BEND, OR 97701		OUTREACH PROGRAMS	
CENTRAL POINT SCHOOL DISTRICT #6 (1) 300 ASH STREET CENTRAL POINT, OR 97502	GOV	TO PROVIDE FUNDING FOR THE ANATOMY IN CLAY LEARNING SYSTEM	7,0

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

CENTRAL POINT SCHOOL DISTRICT #6 (2) 300 ASH STREET CENTRAL POINT, OR 97502	GC		TO PROVIDE MATERIALS AND EQUIPMENT FOR TECHNOLOGICAL UPDATES AT SCENIC MS LIBRARY	7,959
COLUMBIA CENTER FOR THE ARTS	PC	С	TO SUPPORT THE EDUCATION	10,000

COLUMBIA CENTER FOR THE ARTS 215 CASCADE AVENUE HOOD RIVER, OR 97031	PC	TO SUPPORT THE EDUCATION AND OUTREACH ACTIVITIES AS THEY MOVE TO AN ONLINE PRESENCE	10,000
CONFERENCE OF ST VINCENT DE PAUL SOCIETY OF MYRTLE CREEK	PC	TO PROVIDE FOOD RESOURCES TO SUPPORT UNDERSERVED	5,000

215 CASCADE AVENUE HOOD RIVER, OR 97031		AND OUTREACH ACTIVITIES AS THEY MOVE TO AN ONLINE PRESENCE	
CONFERENCE OF ST VINCENT DE PAUL SOCIETY OF MYRTLE CREEK 116 N MAIN STREET MYRTLE CREEK, OR 97457	PC	TO PROVIDE FOOD RESOURCES TO SUPPORT UNDERSERVED CHILDREN AND FAMILIES	5,000

771,651

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CHRISTIAN COMMUNITY PLACEMENT PC TO SUPPORT THE UPGRADE OF 10,000 CENTER DBA CONNECTIONS 365 CASE MANAGEMENT SOFTWARE AND TRAINING FOR STAFF TO 4890 32ND AVENUE SE

SALEM, OR 97317		USE IT	
COOS BAY ZONTA SERVICE FOUNDATION PO BOX 245 NORTH BEND, OR 97459	PC	TO SUPPLY BASIC SCHOOL SUPPLIES TO NEEDY STUDENTS	5,00

COOS BAY ZONTA SERVICE FOUNDATION PO BOX 245 NORTH BEND, OR 97459	PC	TO SUPPLY BASIC SCHOOL SUPPLIES TO NEEDY STUDENTS	5,000
COOS HISTORY MUSEUM	PC	TO CONTINUE SUPPORTING	9,425

FOUNDATION PO BOX 245 NORTH BEND, OR 97459		SUPPLIES TO NEEDY STUDENTS	
COOS HISTORY MUSEUM	PC	TO CONTINUE SUPPORTING	9,4

PO BOX 245 NORTH BEND, OR 97459			
COOS HISTORY MUSEUM 1210 N FRONT STREET	PC	TO CONTINUE SUPPORTING HISTORIC PRESERVATION	9,42

COOS HISTORY MUSEUM	PC	TO CONTINUE SUPPORTING	9,425
1210 N FRONT STREET		HISTORIC PRESERVATION	
COOS BAY, OR 97420		GOALS OF THE MUSEUM	

771,651

COOS RISTORT MOSEUM	l PC	TO CONTINUE SUPPORTING	9,4
1210 N FRONT STREET		HISTORIC PRESERVATION	
COOS BAY, OR 97420		GOALS OF THE MUSEUM	

COOS BAY, OR 97420		GOALS OF THE MUSEUM	
1210 N FRONT STREET		HISTORIC PRESERVATION	

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

COOS WATERSHED ASSOCIATION 300 CENTRAL COOS BAY, OR 97420	PC	MAYFLY FESTIVAL SUPPORT	10,000
CROOK COUNTY KIDS CLUBPO BOX 854	PC	TO SUPPORT THE EXPANSION OF	10,000

CROOK COUNTY KIDS CLUBPO BOX 854 PRINEVILLE, OR 97754		TO SUPPORT THE EXPANSION OF THEIR AFTERSCHOOL/OUT-OF- SCHOOL ACTIVITY PROGRAM
CROSSING BRIDGES THERAPEUTIC RIDING CENTER	PC	TO BUILD AN ADA ACCESSIBLE RESTROOM/UTILITY BUILDING

a Paid during the year

Total .

		SCHOOL ACTIVITY PROGRAM	
CROSSING BRIDGES THERAPEUTIC RIDING CENTER 6377 MONUMENT DRIVE GRANTS PASS, OR 97526	PC	TO BUILD AN ADA ACCESSIBLE RESTROOM/UTILITY BUILDING TO COMPLETE THE ARENA PROJECT	10,000

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Recipient

Name and address (home or business)

Recipient

If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Recipient

Foundation status of recipient

recipient

Purpose of grant or contribution

recipient

a Paid during the year

FAMILY ACCESS NETWORK FOUNDATION 2125 NE DAGGETT LANE BEND, OR 97701	PC	PROVIDE ADVOCATES W/AN EMERGENCY CLIENT'S FUND TO SUPPORT CHILDREN/FAMILIES IN NEED	10,000
FAMILY BUILDING BLOCKS INC	PC	TO SUPPORT THE EXPANSION OF	10,000

FAMILY BUILDING BLOCKS INC 2425 LANCASTER DRIVE NE SALEM, OR 97305	PC	TO SUPPORT THE EXPANSION OF THE WOODBURN THERAPEUTIC CLASSROOM PROGRAM	10,000
FAMILY TREE RELIEF NURSERY 1305 HILL STREET SE ALBANY, OR 97322	PC	TO SUPPORT THE EXPANSION OF THE THERAPEUTIC CLASSROOM PROGRAM	10,000

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year 5,000

FERN RIDGE LIBRARY FOUNDATION 88026 TERRITORIAL RD VENETA, OR 97487	PC	IMPROVEMENTS TO THE KONNIE ROOM AT THE LIBRARY, INCL CHAIRS, TABLES & AV EQUIP	
FRIENDS OF THE CASCADE LOCKS HISTORICAL MUSEUM	PC	TO SUPPORT THE BUILD OUT OF NEW EXHIBITS AND	

FRIENDS OF THE CASCADE LOCKS HISTORICAL MUSEUM 417 SW PORTAGE ROAD CASCADE LOCKS, OR 97014		TO SUPPORT THE BUILD OUT OF NEW EXHIBITS AND COLLECTION STORAGE IN A NEW FACILITY	10,000
GRACE CENTER FOR ADULT DAY	PC	TO SUPPORT THE PURCHASE OF	10,000

Total .

CASCADE LOCKS, OR 97014		NEW FACILITY	
GRACE CENTER FOR ADULT DAY SERVICES 980 NW SPRUCE AVENUE CORVALLIS, OR 97330	PC	TO SUPPORT THE PURCHASE OF A 15 PASSENGER HANDICAPPED ACCESSIBLE VAN	10,00

CASCADE LOCKS, OR 97014		NEW FACILITY	
GRACE CENTER FOR ADULT DAY SERVICES 980 NW SPRUCE AVENUE CORVALLIS, OR 97330		TO SUPPORT THE PURCHASE OF A 15 PASSENGER HANDICAPPED ACCESSIBLE VAN	10,000

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

a Paid during the year

Total .

a raid during the year			
HABITAT FOR HUMANITY 56835 VENTURE LANE SUITE 101-102 SUNRIVER, OR 97707	PC	TO SUPPORT THE CRITICAL HOME REPAIR PROGRAM	10,000
HEARTISAN FOUNDATION	PC	TO SUPPORT THE IN-SCHOOL	10,000

HEARTISAN FOUNDATION 694 LIBERTY ST ASHLAND, OR 97520	PC	TO SUPPORT THE IN-SCHOOL COMMUNITY PARTNERSHIP WITH ASHLAND HS ALTERNATIVE EDUCATION DEPT	10,000
HIGH DESERT MUSEUM59800 S HWY 97	PC	TO SUPPORT THE STEAM	10,000

		ALTERNATIVE EDUCATION DEPT	
HIGH DESERT MUSEUM59800 S HWY 97 BEND, OR 97702		TO SUPPORT THE STEAM EDUCATIONAL INITIATIVE AT THE MUSEUM	10,00

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

a Paid during the year			
HOME LIFE INC 2068 NW FILLMORE AVENUE CORVALLIS, OR 97330	PC	TO PROVIDE FUNDING FOR STAFF TO ACCOMPANY CLIENTS AS PART OF THE ACTIVITIES PROGRAM	10,000

		PROGRAM	
HOPE EQUESTRIAN CENTER 716 RILEY ROAD		TO SUPPORT EDUCATIONAL HORSE CAMPS FOR SPECIAL	
EAGLE POINT, OR 97524		NEEDS & AT-RISK KIDS	

716 RILEY ROAD EAGLE POINT, OR 97524		HORSE CAMPS FOR SPECIAL NEEDS & AT-RISK KIDS	
HOSEA YOUTH SERVICES 160 E BROADWAY AVENUE STE A	PC	STAFFING EXPENSE FOR THE RESOURCE CENTER	10,000

EAGLE POINT, OR 97524		NEEDS & AT-RISK KIDS	
HOSEA YOUTH SERVICES 160 E BROADWAY AVENUE STE A EUGENE. OR 97401	PC	STAFFING EXPENSE FOR THE RESOURCE CENTER	10,0

EAGLE POINT, OR 97524		NEEDS & AT-RISK KIDS	
HOSEA YOUTH SERVICES 160 E BROADWAY AVENUE STE A EUGENE, OR 97401	PC	STAFFING EXPENSE FOR THE RESOURCE CENTER	10,00

EUGENE, OR 97401		
Total	 ▶ 3a	771,651

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year JACKSON COUNTY SART PC TO SUPPORT THE K-12 SEXUAL 10,000 320 E MAIN STREET VIOLENCE PREVENTION ASHLAND, OR 97520 PROGRAM IN CENTRAL POINT

		SCHOOLS	
JACKSON STREET YOUTH SHELTER INC 555 NW JACKSON AVENUE CORVALLIS, OR 97330	PC	TO SUPPORT THE SOCIAL FITNESS CLUB PROGRAM PARTNERSHIP WITH OSU	8,050
JOINT FORCES DANCE CO DBA DANCEABILITY INT'L 576 OLIVE ST 208	PC	TO SUPPORT THEIR COLLABORATION WITH LCC	10,000

TOURING CONCERT

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771,651

EUGENE, OR 97401

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

·	or substantial contributor			
a Paid during the year				
KIDS CENTER 1375 NW KINGSTON AVENUE		PC	TO SUPPORT THE ADDITION OF NEW CHILD ABUSE PREVENTION	6,000

BEND, OR 97703		EDUCATIONAL TOOLS	
LANE ARTS COUNCIL 1590 WILLAMETTE ST SUITE 200 EUGENE, OR 97401	PC	BRINGING RESIDENT ARTISTS INTO SCHOOLS	

LANE ARTS COUNCIL 1590 WILLAMETTE ST SUITE 200 EUGENE, OR 97401	PC	BRINGING RESIDENT ARTISTS INTO SCHOOLS	7,000
LEBANON PUBLIC LIBRARY 55 ACADEMY STREET LEBANON OR 97355	GOV	TO PROVIDE FUNDING FOR NEW BOOKS, MANIPULATIVES, STEM	9,964

EUGENE, OR 9/401			
LEBANON PUBLIC LIBRARY 55 ACADEMY STREET LEBANON, OR 97355	GOV	TO PROVIDE FUNDING FOR NEW BOOKS, MANIPULATIVES, STEM KITS, FURNITURE, AND AUDIOBOOKS	9,96

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			l
LEBANON PUBLIC LIBRARY 55 ACADEMY STREET LEBANON, OR 97355	GOV	TO PROVIDE FUNDING FOR NEW BOOKS, MANIPULATIVES, STEM KITS, FURNITURE, AND AUDIOBOOKS	9,9

Recipient If recipient is an individual, show any relationship to status of contribution status of recontribution status of contribution

recipient

EDUCATION INTERNSHIP

▶ 3a

771,651

PROGRAM

any foundation manager

or substantial contributor

Name and address (home or business)

1660 SALEM INDUSTRIAL DRIVE NE

SALEM, OR 97301

	or substantial contributor			
a Paid during the year				
LIBERTY HOUSE2685 4TH STREET NE SALEM, OR 97301		PC	TO PROVIDE FUNDING FOR NEW FURNITURE	7,200
LOOKING GLASS COMMUNITY SERVICES 1790 W 11TH AVENUE SUITE 200 EUGENE, OR 97402		PC	TO SUPPORT THE CLASSROOM TECHNOLOGY IMPROVEMENT PROJECT @ CENTER POINT SCHOOL	10,000
MARION POLK FOOD SHARE INC		PC	TO SUPPORT THE SUMMER	10,000

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

a Paid during the year			
MARY'S RIVER WATERSHED COUNCIL 101 SW WESTERN BOULEVARD CORVALLIS OR 97330	PC	TO EXPAND THE COMPANEROS EN LA NATURALEZA PROGRAM INTO LOCAL HIGH SCHOOLS	10,000

CORVALLIS, OR 97330		INTO LOCAL HIGH SCHOOLS	
MEDICAL TEAMS INTERNATIONAL 14150 SW MILTON COURT TIGARD, OR 97224	PC	TO SUPPORT MOBILE DENTAL CLINICS IN BENTON, LINN, AND MARION COUNTIES	10,000
MOUNTAINSTAR FAMILY RELIEF	PC	TO SUPPORT CONTINUING	10,000

MOUNTAINSTAR FAMILY RELIEF NURSERY 2125 NE DAGGETT LANE BEND, OR 97701 PC TO SUPPORT CONTINUING EDUCATION FOR STAFF 10,000	TIGARD, OR 97224		MARION COUNTIES	
	NURSERY 2125 NE DAGGETT LANE	PC		10,000

			l
MOUNTAINSTAR FAMILY RELIEF NURSERY 2125 NE DAGGETT LANE BEND, OR 97701	PC	TO SUPPORT CONTINUING EDUCATION FOR STAFF	10,000
Total	 	▶ 3a	771,651

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

a Paid during the year

Total .

a raid daring the year			
OLD MILL CENTER FOR CHILDREN & FAMILIES INC 1650 SW 45TH PLACE CORVALLIS, OR 97333	PC	TO SUPPORT PERSONNEL AND TRANSPORTATION FOR THERAPEUTIC CLASSROOMS	10,000

· ·			
OPHELIA'S PLACE 1577 PEARL ST SUITE 100 EUGENE, OR 97401	PC	TO PROVIDE A TRAUMA INTERVENTION & BEHAVIORAL HEALTH EMPOWERMENT PROGRAM	10,000
OREGON CASCADES WEST SENIOR SERVICES FOUNDATION	SO III NFI	TO PROVIDE FUNDING FOR MEALS ON WHEELS FOR BENTON	20,000

▶ 3a

EUGENE, OR 9/401		PROGRAM	
OREGON CASCADES WEST SENIOR SERVICES FOUNDATION 1400 QUEEN AVENUE SE SUITE 206 ALBANY, OR 97322	SO III NFI	TO PROVIDE FUNDING FOR MEALS ON WHEELS FOR BENTON AND LINN COUNTIES	20,0

·		PROGRAM	
OREGON CASCADES WEST SENIOR SERVICES FOUNDATION 1400 QUEEN AVENUE SE SUITE 206 ALBANY, OR 97322		TO PROVIDE FUNDING FOR MEALS ON WHEELS FOR BENTON AND LINN COUNTIES	20,00

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

PC

TO SUPPORT MATHCOUNTS

За

4,800

9,955

771,651

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

OREGON MATHCOUNTS FOUNDATION

70 SW CENTURY DRIVE SUITE 100 PMB 353 BEND, OR 97702		EXTRACURRICULAR MATH PROGRAMS STATEWIDE	
OSU EXTENSION SERVICE CURRY COUNTY 4-H	PC	TO HELP YOUTH IN CURRY COUNTY TO BECOME	

COUNTY 4-H 4238 SW RESEARCH WAY CORVALLIS, OR 97333		COUNTY TO BECOME KNOWLEDGEABLE & SKILLED IN DISASTER PREPAREDNESS	
PARENTING NOW86 CENTENNIAL LOOP EUGENE, OR 97401	PC	TO SUPPORT THE CHILDREN'S PROGRAM AS PART OF	10,0

4238 SW RESEARCH WAY CORVALLIS, OR 97333		KNOWLEDGEABLE & SKILLED IN DISASTER PREPAREDNESS	
PARENTING NOW86 CENTENNIAL LOOP EUGENE, OR 97401	PC	TO SUPPORT THE CHILDREN'S PROGRAM AS PART OF PARENTING: THE FIRST 3 YEARS	10,000

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

PC

TO PURCHASE MATERIALS FOR

5,542

771,651

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

PARTNERSHIP FOR THE UMPQUA

RIVERS (PUR) 3012 WEST HARVARD AVENUE ROSEBURG, OR 97471		THE FISH EGGS TO FRY PROJECT	
PEARL BUCK CENTER 3690 W 1ST AVENUE	PC	TO SUPPORT THE HEALTHY MEALS PROJECT	10,000

3690 W 1ST AVENUE EUGENE, OR 97402	PC	MEALS PROJECT	10,
PORT ORFORD PUBLIC LIBRARY FOUNDATION 1421 OREGON ST	PC	TO EXPAND CURRENT PROGRAMS & CREATE NEW ONES USING VIRTUAL REALITY	6,

EUGENE, OR 97402		MEALS PROJECT	
PORT ORFORD PUBLIC LIBRARY FOUNDATION 1421 OREGON ST PORT ORFORD, OR 97465	PC	TO EXPAND CURRENT PROGRAMS & CREATE NEW ONES USING VIRTUAL REALITY & DISTANCE LEARNING	6,125

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ROSS RAGLAND THEATER AND PC TO SUPPORT THE YOUTH 10,000 CULTURAL CENTER STARTS OUTREACH TO TEN

KLAMATH FALLS, OR 97601		DISTRICT	
SALEM ART ASSOCIATION 600 MISSION STREET SE SALEM, OR 97302	PC	TO SUPPORT ART & HISTORY IMMERSION PROGRAM FOR 4TH GRADERS	10,0
SALEM LEADERSHIP FOUNDATION	PC	TO CONTRIBUTE TO THE	10,0

SALEM ART ASSOCIATION 600 MISSION STREET SE SALEM, OR 97302	PC	TO SUPPORT ART & HISTORY IMMERSION PROGRAM FOR 4TH GRADERS	10,000
SALEM LEADERSHIP FOUNDATION 1300 BROADWAY STREET NE SUITE 409 SALEM, OR 97303	PC	TO CONTRIBUTE TO THE SUPPORT OF PROGRAMMATIC ELEMENTS OF CAN CENTERS	10,000

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771,651

SALEM, OR 97302		GRADERS	
SALEM LEADERSHIP FOUNDATION 1300 BROADWAY STREET NE SUITE 409 SALEM, OR 97303	PC	TO CONTRIBUTE TO THE SUPPORT OF PROGRAMMATIC ELEMENTS OF CAN CENTERS AND CPT'S	10,0

Total .

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

a Paid during the year

Total .

SALEM ORCHESTRA 441 STATE STREET APT 202 SALEM, OR 97301	PC	TO SUPPORT THE COACHING PROGRAM FOR SALEM YOUTH ORCHESTRA	10,000
SAVING GRACE 1004 NW MILWAUKEE AVENUE SUITE 100	PC	TO SUPPORT THE ADDITION OF A NEW CHILDREN'S ADVOCATE TO THE STAFF	10,000

1004 NW MILWAUKEE AVENUE SUITE 100 BEND, OR 97703		A NEW CHILDREN'S ADVOCATE TO THE STAFF	
SCIO PUBLIC LIBRARY 38957 NW 1ST AVENUE SCIO OR 97374	GOV	TO PROVIDE FUNDING FOR THE PURCHASE OF NEW SHELVING UNITS AND SIGNAGE	

SCIO PUBLIC LIBRARY 38957 NW 1ST AVENUE SCIO, OR 97374 GOV TO PROVIDE FUNDING FOR PURCHASE OF NEW SHELVI UNITS AND SIGNAGE	, ,

771,651

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

Total .

a Paid during the year			
SIUSLAW WATERSHED COUNCIL 10868 E MAPLETON RD MAPLETON, OR 97453	PC	TO FUND AN OUTREACH AND EDUCATION COORDINATOR POSITION	9,955

10,000

771,651

SKYLAKES MEDICAL CENTER FOUNDATION 2421 WASHBURN WAY SUITE H KLAMATH FALLS, OR 97603		TO SUPPORT DIRECT SERVICES TO AT RISK MINORS NOT FUNDED BY INSURANCE REIMBURSEMENTS	

KLAMATH FALLS, OR 97603		REIMBURSEMENTS	
ST FRANCIS SHELTER 1820 BERRY STREET SE SALEM OR 97302	PC	TO PROVIDE FUNDING FOR THE CASE MANAGEMENT DUTIES OF THE EXECUTIVE DIRECTOR	10,000

2421 WASHBURN WAY SUITE H KLAMATH FALLS, OR 97603		FUNDED BY INSURANCE REIMBURSEMENTS	
ST FRANCIS SHELTER 1820 BERRY STREET SE	PC	TO PROVIDE FUNDING FOR THE CASE MANAGEMENT DUTIES OF	10,0

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

recipient

▶ 3a

771,651

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year			
SWEET HOME PUBLIC LIBRARY 1101-13TH AVENUE SWEET HOME, OR 97386		TO PROVIDE FUNDING FOR NEW FURNITURE, SHELVING, AND STORAGE	9,743
THE ARC LANE COUNTY4181 E STREET SPRINGFIELD, OR 97478		TO HELP TRANSITION STUDENTS AGES 14-18 LEARN	10,000

THE ARC LANE COUNTY4181 E STREET SPRINGFIELD, OR 97478	PC	TO HELP TRANSITION STUDENTS AGES 14-18 LEARN SKILLS IN THE STEAM FIELD.	10
THE CHILD CENTER 3995 MARCOLA ROAD	PC	TO SUPPORT THE PURCHASE OF A CRISIS TRANSPORT VEHICLE	10

SPRINGFIELD, OR 97478		STUDENTS AGES 14-18 LEARN SKILLS IN THE STEAM FIELD.	10,000
THE CHILD CENTER 3995 MARCOLA ROAD SPRINGFIELD, OR 97477		TO SUPPORT THE PURCHASE OF A CRISIS TRANSPORT VEHICLE	10,000

Recipient

Name and address (home or business)

Recipient

If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Purpose of grant or contribution

recipient

a Paid during the year

THE NEXT DOOR1113 KELLY AVENUE THE DALLES, OR 97058		TO SUPPORT THE KELLY AVENUE SCHOOL SUMMER PROGRAM	10,000
THE NORTHWEST HUB 1230 BROADWAY STREET NE SALEM, OR 97301		TO SUPPORT THE JOB TRAINING PROGRAM FOR YOUNG ADULTS WITH EMPLOYMENT BARRIERS	5,000

771,651

■ 3a

SALEM, OR 97301		WITH EMPLOYMENT BARRIERS	
TREEHOUSE THERAPIES ASSOCIATES 60575 BILLADEAU ROAD BEND, OR 97702		TO PROVIDE TECHNOLOGICAL UPGRADES TO SUPPORT THE TELEHEALTH PROGRAM	5,000

Total .

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

a Paid during the year

TRILLIUM FAMILY SERVICES 3415 SE POWELL BOULEVARD PORTLAND, OR 97202	PC	TO SUPPORT THE EQUINE THERAPY PROGRAM	10,000
WELLSPRINGS FRIENDS SCHOOL 3590 WEST 18 AVENUE	PC	TO PURCHASE NEW BOOKS FOR SCHOOL LIBRARY	2,500

WELLSPRINGS FRIENDS SCHOOL 3590 WEST 18 AVENUE EUGENE, OR 97402	PC	TO PURCHASE NEW BOOKS FOR SCHOOL LIBRARY	2,500
WOMEN'S CRISIS SUPPORT TEAM 560 NE F STREET SUITE A430 GRANTS PASS, OR 97526	PC	TO FUND THE FAMILY ADVOCATE POSITION & SUPPORT THE TALSUNNE SAFE SHELTER CHILDREN'S PROGRAM	10,000

3590 WEST 18 AVENUE EUGENE, OR 97402		SCHOOL LIBRARY	
WOMEN'S CRISIS SUPPORT TEAM 560 NE F STREET SUITE A430 GRANTS PASS, OR 97526	PC	TO FUND THE FAMILY ADVOCATE POSITION & SUPPORT THE TALSUNNE SAFE SHELTER CHILDREN'S PROGRAM	10,000
Total	 	▶ 3a	771,651

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Amount contribution recipient status of recipient recipient or substantial contributor

a Paid during the year

WORDCRAFTERS IN EUGENE 425 LINCOLN EUGENE, OR 97401	PC	TO SUPPORT THE WRITERS IN THE SCHOOLS/WRITERS RESIDENCY SERIES	10,000
YOUTH SYMPHONY OF SOUTHERN	PC	TO SUPPORT THE EDUCATION	6,500

YOUTH SYMPHONY OF SOUTHERN OREGON 925 WEST 8 STREET MEDFORD, OR 97501	PC	TO SUPPORT THE EDUCATION AND OUTREACH INITIATIVES & SPECIAL PROGRAMMING	6,5
Total	 	▶ 3a	771.651

efile GRAPHIC print - DO NOT P	ROCESS	As Filed Data - DLN: 93491040004151					
TY 2019 Accounting Fees Schedule							
Name: BRAEMAR CHARITABLE TRUST							
	EIN:	93-6272	124				
		33 02,2			 	1	
Category	Amo	ount		Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
TAX RETURN PREPARATION FEES		4,700		0		4,700	

DLN: 93491040004151

Name: BRAEMAR CHARITABLE TRUST

EIN: 93-6272124

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

General Explanation Attachment

ldentifier	Return Reference	Explanation	
1	STATEMENT ON UNDSTIRBUTED INCOME	PART VII-B QUESTION 2B	WE WERE UNAWARE WHEN MAKING THE GRANT THAT THE RECIPIENT WAS A TY PE III FOUNDATION AND DID NOT MEET THE REQUIREMENT TO BE CONSIDERED A DEDUCTIBLE GRANT FOR PAGE 1, LINE 25. WE HAVE MADE A CORRECTIVE DISTRIBUTION NOW. WE ALSO AMENDED OUR GRANT APPLICATION FORMS TO ENSURE RECIPIENTS MEET THE CRITERIA TO BE DEDUCTIBLE GRANT RECIPIENTS FOR ALL FUTURE GRANTS. WE HAVE NOT PREPARED OR CALCULATED PENALTIES ON FORM 4720.

TY	2019	Investments	Corporate	Bonds	Schedule	

Name: BRAEMAR CHARITABLE TRUST

EIN: 93-6272124

VANGUARD TOTAL BOND FUND

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Investments Corporate Bonds Schedule						
Name of Bond	Er	nd of Year Book Value	End of Year Fair Market Value			
BLACKROCK MULTIASSET		975,000	986,932			
DOUBLELINE CORE FIXED		1,876,674	1,942,123			
PIMCO ALL ASSET		954,436	910,393			
VANGUARD ST INF-PROT SEC. INDEX FUND		548,730	563,337			

DLN: 93491040004151

1,906,984

1,807,413

eille GKAPHIC	print -	DO NOT PROCE	33 A	is riiei	ı Dala -		DLIN: 934	+21040
		_						

TY 2019 Investments Corporate Stock Schedule

Name: BRAEMAR CHARITABLE TRUST

EIN: 93-6272124

Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
CHAMPLAIN SMALL COMPANY FUND	695,052	662,229
DFA GLOBAL REAL ESTATE	980,333	896,044
DFA INTERNATIONAL SMALL COMPANY	500,000	469,265
DODGE & COX INTL STOCK FUND	1,360,000	1,091,921
GMO BENCHMARK	950,000	907,617
GQG PARTNERS EMERGING MARKETS	480,000	486,863
JOHCM INTL FUND	518,752	1,175,333
SCHWAB FUNDAMENTAL US LARGE COMPANY IDX	1,188,896	1,140,472
SCHWAB S&P 500 INDEX FUND	3,051,669	3,538,026
VANGUARD TTL INTL VTIAX	2,112,307	2,063,459

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TY 2019 Investments - Land So	chedule	

DDAEMAD CHADITADLE TOUCT

Name:	BRAEMAR CHARLIABLE I RUST
EIN:	93-6272124

LAND

	EIN: 93-62/2124						
Category/ Item	Cost/Other Basis	Accumulated Depreciation	Book Value	Ī			

105,000

End of Year Fair

105,000

Market Value

112,880

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491040004151
TY 2019 Investments - Other	Schedule	
Name:	BRAEMAR CHARITABLE TRUST	
EIN:	93-6272124	

DIN. 024040400044E4

78,779

158,048

Investments Other Schedule 2								
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value					

AT COST

LIFE INSURANCE POLICIES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491040004151
TY 2019 Other Decreases Scho	edule	
Name:	BRAEMAR CHARITABLE TRU	ST
EIN:	93-6272124	
De	escription	Amount
GRANT TO: SO III NFI		20,000

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	: 93491040004151		
TY 2019 Other Expenses Schedule						
Name:	BRAEMAR CHAR	≀ITABLE TRUST				
EIN:	93-6272124					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
OR DEPT OF JUSTICE FEE	2,291	0		2,291		
INSURANCE PREMIUMS	72,017	72,017		0		
RENT, P.O. BOX	168	0		168		

100

4,723

4,723

100

BANK CHARGES

PROPERTY MAINTENANCE

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491040004151				
TY 2019 Other Professional Fees Schedule								
Name	Name: BRAEMAR CHARITABLE TRUST							
EIN: 93-6272124								
				1				
Category	Amount	Net Investment	Adjusted Net	Disbursements				

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

40,919

40,919

PORTFOLIO MANAGEMENT FEES

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491040004151								
TY 2019 Taxes Schedule								
Name: BRAEMAR CHARITABLE TRUST EIN: 93-6272124								
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				
PROPERTY TAXES	1,704	1,704		0				

16,346

FEDERAL TAXES