

For calendar year 2020, or tax year beginning 01-01-2020, and ending 12-31-2020

Name of foundation KOHNSTAMM FAMILY FOUNDATION C/O MOSS ADAMS LLP		A Employer identification number 93-1160719	
Number and street (or P.O. box number if mail is not delivered to street address) 805 SW BROADWAY NO 1200		Room/suite	B Telephone number (see instructions)  (503) 242-1447
City or town, state or province, country, and ZIP or foreign postal code PORTLAND, OR 97205		C If exemption application is pending, check here ▶ <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here..... ▶ <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... ▶ <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ..... ▶ <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 2,152,686		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ..... ▶ <input type="checkbox"/>	
J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</small>		(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)	148,458			
	2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch. B . . . . .				
	3 Interest on savings and temporary cash investments	4	4		
	4 Dividends and interest from securities . . .	66,375	66,375		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	105,342			
	b Gross sales price for all assets on line 6a _____ 129,516				
	7 Capital gain net income (from Part IV, line 2) . . .		105,342		
	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) . . . . .				
	12 <b>Total.</b> Add lines 1 through 11 . . . . .	320,179	171,721		
	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) . . . . .	3,000	1,500		1,500
	c Other professional fees (attach schedule) . . . . .	220	220		0
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . .	901	541		185
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	240	190		64
	24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	4,361	2,451		1,749
	25 Contributions, gifts, grants paid . . . . .	145,814			145,814
	26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	150,175	2,451		147,563
	27 Subtract line 26 from line 12:				
	a <b>Excess of revenue over expenses and disbursements</b>	170,004			
	b <b>Net investment income</b> (if negative, enter -0-)		169,270		
c <b>Adjusted net income</b> (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	<b>1</b> Cash—non-interest-bearing . . . . .	5,898	15,546	15,546
	<b>2</b> Savings and temporary cash investments . . . . .	4,424	100,926	100,926
	<b>3</b> Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>4</b> Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .			
	<b>10a</b> Investments—U.S. and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	939,433	993,343	2,036,214
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b> Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .			
	<b>14</b> Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
<b>15</b> Other assets (describe ▶ _____)				
<b>16</b> <b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)	949,755	1,109,815	2,152,686	
Liabilities	<b>17</b> Accounts payable and accrued expenses . . . . .			
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)			
	<b>23</b> <b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
Net Assets or Fund Balances	<b>Foundations that follow FASB ASC 958, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24, 25, 29 and 30.</b>			
	<b>24</b> Net assets without donor restrictions . . . . .			
	<b>25</b> Net assets with donor restrictions . . . . .			
	<b>Foundations that do not follow FASB ASC 958, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 26 through 30.</b>			
	<b>26</b> Capital stock, trust principal, or current funds . . . . .	8,288	8,288	
	<b>27</b> Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	<b>28</b> Retained earnings, accumulated income, endowment, or other funds	941,467	1,101,527	
<b>29</b> <b>Total net assets or fund balances</b> (see instructions) . . . . .	949,755	1,109,815		
<b>30</b> <b>Total liabilities and net assets/fund balances</b> (see instructions) .	949,755	1,109,815		

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b> 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) . . . . .	<b>1</b>	949,755
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	170,004
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	0
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	1,119,759
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	9,944
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	<b>6</b>	1,109,815

**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.)
<b>1 a</b> MICROSOFT CORP		P	2012-08-15	2020-06-11
<b>b</b> MICROSOFT CORP		P	2013-04-11	2020-06-11
<b>c</b> ADOBE INC		P	2016-06-24	2020-12-29
<b>d</b> COLUMBIA SELIGMAN COMM		P	1996-01-31	2020-12-29
<b>e</b>				
(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)	
<b>a</b> 45,843		7,235	38,608	
<b>b</b> 8,405		1,265	7,140	
<b>c</b> 25,268		4,706	20,562	
<b>d</b> 50,000		10,968	39,032	
<b>e</b>				

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	
<b>a</b>			38,608
<b>b</b>			7,140
<b>c</b>			20,562
<b>d</b>			39,032
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)		{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	<b>2</b>	105,342
<b>3</b> 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 . . . . .			<b>3</b>	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income****SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE**

<b>1</b> Reserved				
(a) Reserved	(b) Reserved	(c) Reserved	(d) Reserved	
<b>2</b> Reserved . . . . .			<b>2</b>	
<b>3</b> Reserved . . . . .			<b>3</b>	
<b>4</b> Reserved . . . . .			<b>4</b>	
<b>5</b> Reserved . . . . .			<b>5</b>	
<b>6</b> Reserved . . . . .			<b>6</b>	
<b>7</b> Reserved . . . . .			<b>7</b>	
<b>8</b> Reserved , . . . .			<b>8</b>	

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

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Reserved.	<b>1</b>	2,353
<b>c</b>	All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2.	<b>3</b>	2,353
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-.	<b>5</b>	2,353
<b>6</b>	Credits/Payments:		
<b>a</b>	2020 estimated tax payments and 2019 overpayment credited to 2020	<b>6a</b>	0
<b>b</b>	Exempt foreign organizations—tax withheld at source	<b>6b</b>	0
<b>c</b>	Tax paid with application for extension of time to file (Form 8868)	<b>6c</b>	2,000
<b>d</b>	Backup withholding erroneously withheld	<b>6d</b>	0
<b>7</b>	Total credits and payments. Add lines 6a through 6d.	<b>7</b>	2,000
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached.	<b>8</b>	22
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> .	<b>9</b>	375
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> .	<b>10</b>	
<b>11</b>	Enter the amount of line 10 to be: <b>Credited to 2021 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> 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?	<b>1a</b>	No
<b>b</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>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year?	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: <b>(1)</b> On the foundation. <input type="text"/> \$ <u>0</u> <b>(2)</b> On foundation managers. <input type="text"/> \$ <u>0</u>		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="text"/> \$ <u>0</u>		
<b>2</b> 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>	<b>2</b>	No
<b>3</b> 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>	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>	<b>5</b>	No
<b>6</b> 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?	<b>6</b>	Yes
<b>7</b> 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>	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="text"/> <b>OR</b> <input type="text"/>		
<b>b</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>	<b>8b</b>	Yes
<b>9</b> 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 2020 or the taxable year beginning in 2020? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	<b>10</b>	Yes

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	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. . . . .	<b>11</b>		<b>No</b>
<b>12</b>	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 . . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ► <u>MOSS ADAMS LLP</u> Telephone no. ► <u>(503) 242-1447</u>			

Located at ► 805 SW BROADWAY SUITE 1200 PORTLAND ORZIP+4 ► 97205

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here . . . . .	<input type="checkbox"/>		
	and enter the amount of tax-exempt interest received or accrued during the year . . . . .	► <b>15</b>		
<b>16</b>	At any time during calendar year 2020, 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? . . . . .	<b>16</b>	<b>Yes</b>	<b>No</b>
	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.**

		<b>Yes</b>	<b>No</b>
<b>1a</b>	During the year did the foundation (either directly or indirectly):		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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 . . . . .	<b>1b</b>	
	Organizations relying on a current notice regarding disaster assistance check here. . . . . ► <input type="checkbox"/>		
<b>c</b>	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 2020? . . . . .	<b>1c</b>	<b>No</b>
<b>2</b>	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)):		
<b>a</b>	At the end of tax year 2020, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2020? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	If "Yes," list the years ► 20____, 20____, 20____, 20____		
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions.) . . . . .	<b>2b</b>	
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ► 20____, 20____, 20____, 20____		
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If "Yes," did it have excess business holdings in 2020 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 2020.) . . . . .	<b>3b</b>	
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>	<b>No</b>
<b>b</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 2020?	<b>4b</b>	<b>No</b>

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

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

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

<b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(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				
<b>Total number of other employees paid over \$50,000.</b> . . . . . 				<b>0</b>

**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		
<b>Total</b> 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
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**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
<b>1</b> NONE	0
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . . ►	0

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	1,684,180
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	44,685
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	1,728,865
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	1,728,865
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	25,933
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	1,702,932
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	85,147

**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.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	85,147
<b>2a</b>	Tax on investment income for 2020 from Part VI, line 5. . . . .	<b>2a</b>	2,353
<b>b</b>	Income tax for 2020. (This does not include the tax from Part VI.). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	2,353
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1. . . . .	<b>3</b>	82,794
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	0
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	82,794
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . .	<b>7</b>	82,794

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . .	<b>1a</b>	147,563
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	147,563
<b>5</b>	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. . . . .	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	147,563

**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 2019	(c) 2019	(d) 2020
<b>1</b> Distributable amount for 2020 from Part XI, line 7				82,794
<b>2</b> Undistributed income, if any, as of the end of 2020:				
<b>a</b> Enter amount for 2019 only. . . . .			32,179	
<b>b</b> Total for prior years: 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2020:				
<b>a</b> From 2015. . . . .				
<b>b</b> From 2016. . . . .				
<b>c</b> From 2017. . . . .				
<b>d</b> From 2018. . . . .				
<b>e</b> From 2019. . . . .				
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	0			
<b>4</b> Qualifying distributions for 2020 from Part XII, line 4: ► \$ <u>147,563</u>				
<b>a</b> Applied to 2019, but not more than line 2a			32,179	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2020 distributable amount. . . . .				82,794
<b>e</b> Remaining amount distributed out of corpus	32,590			
<b>5</b> Excess distributions carryover applied to 2020. (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
<b>6 Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	32,590			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b. . . . .		0		
<b>c</b> 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		
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions. . . . .		0		
<b>e</b> Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions. . . . .			0	
<b>f</b> Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020. . . . .				0
<b>7</b> 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			
<b>8</b> Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions). . . . .	0			
<b>9 Excess distributions carryover to 2021.</b> Subtract lines 7 and 8 from line 6a. . . . .	32,590			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2016. . . . .				
<b>b</b> Excess from 2017. . . . .				
<b>c</b> Excess from 2018. . . . .				
<b>d</b> Excess from 2019. . . . .				
<b>e</b> Excess from 2020. . . . .	32,590			

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

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2020, enter the date of the ruling. . . . . ▶

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

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

	Tax year	Prior 3 years			(e) Total
	(a) 2020	(b) 2019	(c) 2018	(d) 2017	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon:					
<b>a</b> "Assets" alternative test—enter:					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter:					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

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

**1 Information Regarding Foundation Managers:**

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

MOLLY D KOHNSTAMM

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

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

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

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

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

**c** Any submission deadlines:

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

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			▶ <b>3a</b>	145,814
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			▶ <b>3b</b>	0

**Part XVI-A Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.

	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) (See instructions.)
<b>1</b> Program service revenue:					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> _____					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .			14	4	
<b>4</b> Dividends and interest from securities. . . . .			14	66,375	
<b>5</b> Net rental income or (loss) from real estate:					
<b>a</b> Debt-financed property. . . . .					
<b>b</b> Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .			18	105,342	
<b>9</b> Net income or (loss) from special events:					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue: <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>12</b> Subtotal. Add columns (b), (d), and (e). . . . .		0		171,721	0
<b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . . (See worksheet in line 13 instructions to verify calculations.)			<b>13</b>	<b>171,721</b>	<b>171,721</b>

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

**Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

<b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		<b>Yes</b>	<b>No</b>
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of:			
<b>(1)</b> Cash.		<b>1a(1)</b>	<b>No</b>
<b>(2)</b> Other assets.		<b>1a(2)</b>	<b>No</b>
<b>b</b> Other transactions:			
<b>(1)</b> Sales of assets to a noncharitable exempt organization.		<b>1b(1)</b>	<b>No</b>
<b>(2)</b> Purchases of assets from a noncharitable exempt organization.		<b>1b(2)</b>	<b>No</b>
<b>(3)</b> Rental of facilities, equipment, or other assets.		<b>1b(3)</b>	<b>No</b>
<b>(4)</b> Reimbursement arrangements.		<b>1b(4)</b>	<b>No</b>
<b>(5)</b> Loans or loan guarantees.		<b>1b(5)</b>	<b>No</b>
<b>(6)</b> Performance of services or membership or fundraising solicitations.		<b>1b(6)</b>	<b>No</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees.		<b>1c</b>	<b>No</b>
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received.			

[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

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	*****	2021-10-25	*****
	_____ Signature of officer or trustee	_____ Date	_____ Title

May the IRS discuss this return with the preparer shown below  
 (see instr.) ☒ **Yes** ☐ **No**

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	WENDY CAMPOS		2021-10-21		P00448102
	Firm's name ▶ MOSS ADAMS LLP				Firm's EIN ▶ 91-0189318
	Firm's address ▶ 805 SW BROADWAY STE 1200 PORTLAND, OR 97205				Phone no. (503) 242-1447

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

<b>(a)</b> Name and address	Title, and average hours per week <b>(b)</b> devoted to position	<b>(c)</b> Compensation (If not paid, enter -0-)	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	Expense account, <b>(e)</b> other allowances
MOLLY D KOHNSTAMM	DIRECTOR/PRESIDENT 0.50	0	0	0
805 SW BROADWAY SUITE 1200 PORTLAND, OR 97205				
KEVIN R KOHNSTAMM	DIRECTOR/SEC-TREASURER 0.50	0	0	0
805 SW BROADWAY SUITE 1200 PORTLAND, OR 97205				
JOHN KOHNSTAMM	DIRECTOR/VICE-PRESIDENT 0.50	0	0	0
805 SW BROADWAY SUITE 1200 PORTLAND, OR 97205				
DAVID KOHNSTAMM	DIRECTOR/VICE-PRESIDENT 0.50	0	0	0
805 SW BROADWAY SUITE 1200 PORTLAND, OR 97205				
JEFF KOHNSTAMM	DIRECTOR/VICE-PRESIDENT 0.50	0	0	0
805 SW BROADWAY SUITE 1200 PORTLAND, OR 97205				

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)				
<b>a</b> <i>Paid during the year</i>				
AMERICAN HEART ASSOCIATION 7272 GREENVILLE AVE DALLAS, TX 75231		PC	HEART DISEASE RESEARCH	100
AMERICAN INDIAN COLLEGE FUND 8333 GREENWOOD BLVD DENVER, CO 80221		PC	INVEST IN NATIVE STUDENTS AND TRIBAL COLLEGE EDUCATION TO TRANSFORM LIVES AND COMMUNITIES.	250
AMERICAN LUNG ASSOCIATION 16037 SW UPPER BOONES FERRY RD SUITE 165 TIGARD, OR 97224		PC	BUILD A WORLD FREE OF LUNG DISEASE	100
<b>Total . . . . . ▶ 3a</b>				145,814

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)				
<b>a</b> <i>Paid during the year</i>				
AMNESTY INTERNATIONAL 5 PENN PLAZA NEW YORK, NY 10001		PC	HUMAN RIGHTS ACTIVIST ORGANIZATION	100
BLACK RESILIENCE FUNDPO BOX 6807 PORTLAND, OR 97228		PC	TO PROVIDE IMMEDIATE RESOURCES TO BLACK PORTLANDERS	500
BUSTIN BARRIERS 5901 SW MACADAM SUITE 100 PORTLAND, OR 97239		PC	TO PROVIDE SAFE PHYSICAL ACTIVITIES AND MEANINGFUL SOCIALIZATION EXPERIENCES FOR INDIVIDUALS EXPERIENCING DISABILITY	250
<b>Total . . . . . ▶ 3a</b>				145,814



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)				
<b>a</b> <i>Paid during the year</i>				
CASA FOR CHILDREN1401 NE 68TH AVE PORTLAND, OR 97213		PC	TO QUICKLY AND EFFECTIBELY SECURE A SAFE AND PERMANENT HOME FOR FOSTER CHILDREN	250
CHILDRENS CANCER ASSOCIATION 1200 NW NAITO PKWY SUITE 140 PORTLAND, OR 97209		PC	TO CREATE TRANSFORMATIVE MOMENTS OF JOY FOR FAMILIES FACING CANCER AND OTHER SERIOUS ILLNESSES.	250
COALITION FOR RAINFOREST NATIONS 52 VANDERBILT AVE SUITE 1401 NEW YORK, NY 10017		PC	TO ASSIST TROPICAL GOVERNMENTS, COMMUNITIES AND PEOPLES RESPONSIBLY MANAGE THEIR RAINFORESTS.	250
<b>Total . . . . . ▶ 3a</b>				145,814

**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)				
<b>a</b> <i>Paid during the year</i>				
COLUMBIA LAND TRUST 1351 OFFICERS ROW VANCOUVER, WA 98661		PC	CONSERVATION OF NATURAL RESOURCES OF THE COLUMBIA RIVER REGION	250
DESCHUTES LAND TRUST 210 NW IRVING AVE SUITE 102 BEND, OR 97703		PC	CONSERVE AND CARE FOR THE LANDS AND WATERS THAT SUSTAIN CENTRAL OREGON	250
DOCTORS WITHOUT BORDERS 333 SEVENTH AVE 2ND FLOOR NEW YORK, NY 10001		PC	EMERGENCY MEDICAL ASSISTANCE	100
<b>Total . . . . . ▶ 3a</b>				145,814

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)				
<b>a</b> Paid during the year				
ENVIRONMENTAL DEFENSE FUND 257 PARK AVE S NEW YORK, NY 10010		PC	PROTECT ENVIRONMENTAL RIGHTS	250
EQUAL JUSTICE INITIATIVE 122 COMMERCE ST MONTGOMERY, AL 36104		PC	TO END MASS INCARCERATION AND EXCESSIVE PUNISHMENT IN THE US	500
FIRST NATIONS DEVELOPMENT INSTITUTE 2432 MAIN STREET 2ND FLOOR LONGMONT, CO 80501		PC	TO STRENGTHEN AND REVITALIZE NATIVE AMERICAN ECONOMIES AND COMMUNITIES	250
<b>Total . . . . . ▶ 3a</b>				145,814

**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)				
<b>a</b> <i>Paid during the year</i>				
FOREST PARK CONSERVANCY 210 NW 17TH AVENUE PORTLAND, OR 97209		PC	TO PROTECT AND FOSTER THE HEALTH OF FOREST PARK	250
FRANCONI ANEMIA 5738 SW RIVERPOINT LANE PORTLAND, OR 97239		PC	TO FIND LIFE-EXTENDING THERAPIES FOR INDIVIDUALS AFFECTED BY FANCONI ANEMIA.	250
FRIENDS OF THE CHILDREN 44 NE MORRIS ST PORTLAND, OR 97212		PC	TO IMPROVE LIVES OF AT-RISK YOUTH	250
<b>Total . . . . . ▶ 3a</b>				145,814

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)				
<b>a</b> <i>Paid during the year</i>				
FRIENDS OF THE COLUMBIA GORGE 522 SW 5TH AVE SUITE 720 PORTLAND, OR 97204		PC	MAINTENANCE/EDUCATION OF THE COLUMBIA GORGE	1,000
FRIENDS OF THE SMITHSONIAN PO BOX 37012 WASHINGTON, DC 20013		PC	TO PROVIDE PHILANTHROPIC SUPPORT TO THE ENTIRE INSTITUTION	250
FRIENDS OF TREES 3117 NE MARTIN LUTHER KING JR BLVD PORTLAND, OR 97212		PC	TO PLANT TREES AND GROW HEALTHY COMMUNITY	100
<b>Total . . . . . ▶ 3a</b>				145,814

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)				
<b>a</b> <i>Paid during the year</i>				
FRIENDS OF TRYON CREEK STATE PARK 11321 SW TERWILLIGER BLVD PORTLAND, OR 97219		PC	CONSERVE AND ENHANCE THE NATURAL RESOURCES	250
GREATER THAN 2916 NE ALBERTA ST SUITE D PORTLAND, OR 97211		PC	COMMITTED TO REDUCING POVERTY-RELATED BARRIERS IN EDUCATION WITH THE SUPPORT OF COMMUNITY PARTNERS.	250
HABITAT FOR HUMANITY 1478 NE KILLINGSWORTH ST PORTLAND, OR 97211		PC	HOUSING FOR THE COMMUNITY	250
<b>Total . . . . . ▶ 3a</b>				145,814

**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)				
<b>a</b> <i>Paid during the year</i>				
HARBOR OF HOPE1616 NW 13TH AVE PORTLAND, OR 97209		PC	TO ADDRESS THE DIVERSE NEEDS OF THE HOMELESS POPULATION IN PORTAND AND SURROUNDING COMMUNITIES.	1,000
HIGH DESERT MUSEUM59800 US-97 BEND, OR 97702		PC	DISCOVER THE NATURAL WORLD AND CULTURAL HISTORY OF THE HIGH DESERT	250
HOYT ARBORETUM 4000 SW FAIRVIEW BLVD PORTLAND, OR 97221		PC	SUPPORTING CONSERVATION, EDUCATION, AND RECREATION PROGRAMS AT HOYT ARBORETUM	250
<b>Total . . . . . ▶ 3a</b>				145,814

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)				
<b>a</b> <i>Paid during the year</i>				
HUMAN RIGHTS CAMPAIGN 1640 RHODE ISLAND AVE NW WASHINGTON, DC 20036		PC	TO END DISCRIMINATION AGAINST LGBTQ PEOPLE AND REALIZE A WORLD THAT ACHIEVES FUNDAMENTAL FAIRNESS AND EQUALITY	100
IMPACT NWPO BOX 33530 PORTLAND, OR 97292		PC	PREVENT HOMELESSNESS IN THE LOCAL COMMUNITY	250
INTERNATIONAL RESCUE COMMITTEE INC 122 EAST 42ND ST NEW YORK, NY 10168		PC	TO HELP INDIVIDUALS WHOSE LIVES ARE SHATTERED BY CONFLICT AND DISASTER TO SURVIVE, RECOVER AND GAIN CONTROL OF THEIR FUTURE	500
<b>Total . . . . .</b> ► <b>3a</b>				145,814



**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)				
<b>a</b> <i>Paid during the year</i>				
IPPF-WHR125 MAIDEN LN NEW YORK, NY 10038		PC	TO BUILD STRONG INSTITUTIONS AND HEALTHY COMMUNITIES THROUGHOUT THE REGION	250
JANUS YOUTH PROGRAMS 707 NE COUCH ST PORTLAND, OR 97232		PC	TO CHANGE LIVES AND BUILD FUTURES FOR CHILDREN, YOUTH, AND FAMILIES	250
KENYA KEYS5314 TUALATA COURT LAKE OSWEGO, OR 97035		PC	EDUCATIONAL OPPORTUNITIES TO THOSE WHO HAVE NONE	1,000
<b>Total . . . . . ▶ 3a</b>				145,814

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)				
<b>a</b> <i>Paid during the year</i>				
LEAGUE OF WOMEN VOTERS OF PORTLAND 618 NW GLISAN STREET SUITE 303 PORTLAND, OR 97209		PC	TO FIGHT FOR FREE, FAIR AND ACCESSIBLE ELECTIONS	600
LEARNING ALLY20 ROSZEL ROAD PRINCETON, NJ 08540		PC	PROVIDE AUDIO BOOKS	100
LIFT URBAN PORTLAND 2701 NW VAUGHN ST SUITE 102 PORTLAND, OR 97210		PC	ENUSRE FOOD SECURITY FOR THOSE WITH LOW INCIME	500
<b>Total . . . . . ▶ 3a</b>				145,814

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)				
<b>a</b> <i>Paid during the year</i>				
LITERARY ARTS 925 SW WASHINGTON ST PORTLAND, OR 97205		PC	TO ENGAGE READERS, SUPPORT WRITERS, AND INSPIRE THE NEXT GENERATION WITH GREAT LITERATURE.	250
MEALS ON WHEELS PEOPLE INC 7710 SW 31ST AVE PORTLAND, OR 97219		PC	TO ENSURE NO SENIOR WILL GO HUNGRY	250
MENTAL HEALTH AMERICA 500 MONTGOMERY ST SUITE 820 ALEXANDRIA, VA 22314		PC	TO PROMOTE MENTAL HEALTH AS A CRITICAL PART OF OVERALL WELLNESS	500
<b>Total . . . . . ▶ 3a</b>				145,814

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)				
<b>a</b> <i>Paid during the year</i>				
MERCY CORPS3015 SW 1ST AVE PORTLAND, OR 97201		PC	PROVIDE HUMANITARIAN RELIEF	500
METROPOLITAN FAMILY SERVICE 1808 SE BELMONT ST PORTLAND, OR 97214		PC	HELP PEOPLE MOVE BEYOND THE LIMITATIONS OF POVERTY, INEQUITY, AND SOCIAL ISOLATION	5,000
MISCELLANEOUS CONTRIBUTIONS MISCELLANEOUS PORTLAND, OR 97209		PC	MISCELLANEOUS	3,300
<b>Total . . . . . ▶ 3a</b>				145,814

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)				
<b>a</b> <i>Paid during the year</i>				
MORRISON CHILD & FAMILY SERVICE 1500 NE IRVING ST SUITE 250 PORTLAND, OR 97232		PC	CHILD AND FAMILY MENTAL HEALTH	258
NARAL PRO-CHOICE OREGON FOUNDATION PO BOX 40472 PORTLAND, OR 97240		PC	ACCESS TO ALL REPRODUCTIVE HEALTH CARE	250
NATIONAL MULTIPLE SCLEROSIS SOCIETY 5331 SW MACADAM AVE PORTLAND, OR 97239		PC	UNITED IN COLLECTIVE POWER TO END MS	100
<b>Total . . . . . ▶ 3a</b>				145,814

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)				
<b>a</b> <i>Paid during the year</i>				
NATIONAL WILDLIFE FEDERATION 11100 WILDLIFE CENTER DR RESTON, VA 20190		PC	CONSERVATION OF WILDLIFE	250
NATIVE AMERICAN RIGHTS FUND 1506 BROADWAY BOULDER, CO 80302		PC	TO PROVIDE SPECIALIZED LEGAL ASSISTANCE TO NATIVE AMERICAN TRIBES, ORGANIZATIONS, AND INDIVIDUALS NATIONWIDE	100
NATIVE FISH SOCIETY 813 7TH STREET SUITE 200A OREGON CITY, OR 97045		PC	TO ADVOCATE FOR HISTORIBALLY ABUNDANT WILD, NATIVE FISH AND PROMOTE THE STEWARDSHIP OF THE HABITATS THAT SUSTAIN THEM	10,000
<b>Total . . . . . ▶ 3a</b>				145,814

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)				
<b>a</b> <i>Paid during the year</i>				
NEW THOUGHT CSL 5319 SW WESTGATE DR SUITE 149 PORTLAND, OR 97221		PC	SPREADING PEACE AND SPIRITUAL UNITY BRIDGING DIVERSITY AND UNIFYING ALL CREATION THROUGH GOD	100,000
OASSIS 5409 EGLINTON AVE W SUITE 208 ETOBICOKE, ONTARIO CA		PC	COMMITTED TO PROVIDING ACCESS TO AFFORDABLE, COMPREHENSIVE EMPLOYEE BENEFITS FOR COMMUNITED-BASED ORGANIZATIONS	100
OHSU FOUNDATION 1121 SW SALMON ST SUITE 100 PORTLAND, OR 97205		PC	TO SECURE PRIVATE PHILANTHROPIC SUPPORT TO ADVANCE OHSU'S VITAL MISSIONS	500
<b>Total . . . . .</b> ► <b>3a</b>				145,814

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)				
<b>a</b> <i>Paid during the year</i>				
OMSI1945 SE WATER AVE PORTLAND, OR 97214		PC	TO DELIVER INTERACTIVE, HANDS-ON, FUN, AND EDUCATIONAL SCIENCE PROGRAMMING TO OUR COMMUNITY.	250
OPB CORNERSTONE SOCIETY 7140 SW MACADAM AVE PORTLAND, OR 97219		PC	ENABLES OPB TO BRING RADIO, TELEVISION, AND ONLINE INFORMATION TO MORE THAN 1.5 MILLION PEOPLE EACH WEEK.	1,500
OREGON FOOD BANK7900 NE 33RD DR PORTLAND, OR 97211		PC	PROVIDES NUTRITIOUS MEALS TO INDIVIDUALS, CHILDREN, AND FAMILIES ACROSS OREGON	500
<b>Total . . . . . ▶ 3a</b>				145,814



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)				
<b>a</b> <i>Paid during the year</i>				
OREGON WILD5825 N GREELEY AVENUE PORTLAND, OR 97217		PC	PROTECTING OREGON'S WILD LANDS, WILDLIFE, AND WATER	500
OREGON ZOO FOUNDATION 4001 SW CANYON ROAD PORTLAND, OR 97221		PC	TO FOSTER COMMUNITY PRIDE AND INVOLVEMENT IN THE OREGON ZOO AND TO SECURE FINANCIAL SUPPORT FOR THE ZOOS CONSERVATION, EDUCATION AND ANIMAL WELFARE PROGRAMS	500
PARTNERS IN HEALTH 800 BOYLSTON ST SUITE 300 BOSTON, MA 02199		PC	TO PROVIDE A PREFERENTIAL OPTION FOR THE POOR IN HEALTH CARE	250
<b>Total . . . . . ▶ 3a</b>				145,814

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

<div>Recipient</div> <div>Name and address (home or business)</div>	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
<b>a</b> <i>Paid during the year</i>				
PLAY WRITEPO BOX 13420 PORTLAND, OR 97213		PC	USING THE POWER OF PERFORMANCE IN ART TO TRANSFORM THE LIVES OF YOUTH AT THE EDGE.	250
POPULATION CONNECTION PO BOX 97129 WASHINGTON, DC 20090		PC	TO ENSURE THAT EVERYONE AROUND THE WORLD WHO WANTS TO DELAY OR END CHILDBEARING HAS ACCESS TO THE HEALTH SERVICES AND CONTRACEPTIVE SUPPLIES THEY NEED IN ORDER TO DO SO	250
PORTLAND ART MUSEUM 1219 SW PARK AVE PORTLAND, OR 97205		PC	TO PROVIDE PUBLIC ACCESS TO ART OF LASTING CULTURAL VALUE FOR THE EDUCATION AND ENRICHMENT OF OUR COMMUNITY.	250
<b>Total . . . . . ► 3a</b>				145,814

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)				
<b>a</b> <i>Paid during the year</i>				
PORTLAND ASSISTANCE LEAGUE 4000 SW 117TH AVE BEAVERTON, OR 97005		PC	TO DEVELOP PHILANTHROPIC PROGRAMS TO MEET THE NEEDS IN THE LOCAL COMMUNITY	1,000
PORTLAND AUDUBON 5151 NW CORNELL RD PORTLAND, OR 97210		PC	TO HELP PROTECT NATIVE BIRDS, OTHER WILDLIFE AND THEIR HABITATS ACROSS THE OREGON LANDSCAPE	250
PORTLAND CENTER STAGE 128 NW 11TH AVE PORTLAND, OR 97209		PC	PROMOTES THEATRICAL ARTS	250
<b>Total . . . . . ▶ 3a</b>				145,814

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)				
<b>a</b> <i>Paid during the year</i>				
PORTLAND RESCUE MISSION 111 W BURNSIDE ST PORTLAND, OR 97209		PC	TO BREAK THE CYCLE OF HOMELESSNESS, ADDICTION, AND DESPAIR IN THE LIVES OF HURTING PEOPLE IN NEED	250
PORTLAND SYMPHONIC CHOIR 1907 NE 45TH AVE SUITE 9 PORTLAND, OR 97213		PC	TO BRING OUR VOICES AND MUSIC TO OUR COMMUNITY	250
PROJECT LEMONADE 1008 LLOYD CENTER PORTLAND, OR 97232		PC	TO INSPIRE SELF-ESTEEM IN FOSTER YOUTH	250
<b>Total . . . . . ▶ 3a</b>				145,814

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)				
<b>a</b> <i>Paid during the year</i>				
RAPHAEL HOUSE2057 NW OVERTON PORTLAND, OR 97209		PC	PROVIDES FOOD/CLOTHING TO THE NEEDY	250
RIVERDALE SCHOOL FOUNDATION PO BOX 69015 PORTLAND, OR 97239		PC	TO CULTIVATE AND ENSURE EDUCATIONAL EXCELLENCE BY SUPPORTING THE RIVERDALE SCHOOL DISTRICT	250
SAVE THE CHILDREN 501 KINGS HIGHWAY E SUITE 400 FAIRFIELD, CT 06825		PC	TO IMPROVE THE LIVES OF CHILDREN THROUGH BETTER EDUCATION, HEALTH CARE, AND ECONOMIC OPPORTUNITIES	256
<b>Total . . . . . ▶ 3a</b>				145,814

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)				
<b>a</b> <i>Paid during the year</i>				
SIERRA CLUB1821 SE ANKENY ST PORTLAND, OR 97214		PC	TO PROTECT OUR WILDLANDS AND WILDLIFE, KEEPING OUR AIR AND WATER FREE FROM POLLUTION, AND PROMOTING A CLEAN ENERGY FUTURE	100
SISTERS OF THE ROAD 133 NW SIXTH AVE PORTLAND, OR 97209		PC	TO HELP BUILD RELATIONSHIPS	250
SMILE TRAINPO BOX 96231 WASHINGTON, DC 20090		PC	PROVIDE A CHILD BORN WITH A CLEFT THE SAME OPPORTUNITIES IN LIFE AS A CHILD BORN WITHOUT.	250
<b>Total . . . . .</b> ▶ <b>3a</b>				145,814

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)				
<b>a</b> <i>Paid during the year</i>				
SOLVE2000 SW 1ST AVE SUITE 400 PORTLAND, OR 97201		PC	ENVIRONMENTAL CONSERVATION	250
SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVE MONTGOMERY, AL 36104		PC	TO COMBAT DISCRIMINATION THROUGH EDUCATION	250
SPECIAL OLYMPICS OREGON 1133 19TH ST NW WASHINGTON, DC 20036		PC	SPORTS TRAINING/COMPETITION TO THE DISABLED	250
<b>Total . . . . . ▶ 3a</b>				145,814

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)				
<b>a</b> <i>Paid during the year</i>				
THE ALS ASSOCIATION 1300 WILSON BLVD SUITE 600 ARLINGTON, VA 22209		PC	TO FUND GLOBAL ALS RESEARCH, PROVIDES CARE SERVICES AND PROGRAMS TO PEOPLE AFFECTED BY ALS	250
THE CARTER CENTER ONE COPENHILL 453 FREEDOM PKWY NE ATLANTA, GA 30307		PC	PROVIDE PEOPLE THE SKILLS, KNOWLEDGE, AND ACCESS TO RESOURCES NEEDED TO IMPROVE THEIR OWN LIVES.	250
THE DOUGY CENTER3909 SE 52ND AVE PORTLAND, OR 97206		PC	TO PROVIDE SUPPORT IN A SAFE PLACE WHERE CHILDREN, TEENS, YOUNG ADULTS, AND FAMILIES WHO ARE GRIEVING CAN SHARE THEIR EXPERIENCES BEFORE AND AFTER A DEATH	250
<b>Total . . . . . ▶ 3a</b>				145,814



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)				
<b>a</b> <i>Paid during the year</i>				
THE FUND FOR PUBLIC SCHOOLS 501 NORTH DIXON ST PORTLAND, OR 97227		PC	TO CREATE, COORDINATE, AND FACILITATE PUBLIC, PRIVATE, AND PHILANTHROPIC PARTNERSHIPS THAT FOSTER EQUITABLE OPPORTUNITIES AND BENEFITS FOR PPS STUDENTS	250
THE LIBRARY FOUNDATION 620 SW 5TH AVE SUITE 1025 PORTLAND, OR 97204		PC	FOR A LIFETIME OF LEARNING	100
THE NATIONAL FOREST FOUNDATION 805 SW BROADWAY SUITE 2100 PORTLAND, OR 97205		PC	HELPS CARE FOR LANDSCAPES	100
<b>Total . . . . . ▶ 3a</b>				145,814

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)				
<b>a</b> <i>Paid during the year</i>				
THE NATURE CONSERVANCY 821 SE 14TH AVE PORTLAND, OR 97214		PC	PROTECTS EARTH'S NATURAL RESOURCES AND BEAUTY	250
THE WILDERNESS SOCIETY 1615 M ST NW SUITE 200 WASHINGTON, DC 20036		PC	PROTECTING NATURAL AREAS AND FEDERAL PUBLIC LANDS	250
TRANSITIONS PROJECTS 665 NW HOYT STREET PORTLAND, OR 97209		PC	HELPS PEOPLE MOVE FROM HOMELESSNESS TO HOUSING	250
<b>Total . . . . . ▶ 3a</b>				145,814

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)				
<b>a</b> <i>Paid during the year</i>				
TRUST WOMENPO BOX 3222 WICHITA, KS 67201		PC	TO OPEN CLINICS THAT PROVIDE ABORTION CARE IN UNDERSERVED COMMUNITIES	100
UNHCR1310 L ST NW SUITE 450 WASHINGTON, DC 20005		PC	TO AID AND PROTECT REFUGEES, FORCIBLY DISPLACED COMMUNITIES, AND STATELESS PEOPLE	500
UNITED WAY JACKSON CO 60 HAWTHORNE ST MEDFORD, OR 97504		PC	TO LEARN, ENGAGE AND CREATE CHANGE ON THE ISSUES FACING OUR COMMUNITY	250
<b>Total . . . . . ▶ 3a</b>				145,814

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)				
<b>a</b> <i>Paid during the year</i>				
WATERORG40 WORTH ST SUITE 330 NEW YORK, NY 10013		PC	TO FUND WATER PROJECTS	250
WESTERN RIVERS CONSERVANCY 71 SW OAK ST PORTLAND, OR 97204		PC	PROTECT RIVERLANDS ON STREAMS ACROSS THE WEST	250
WILD RIVERS LAND TRUSTPO BOS 1158 PORT ORFORD, OR 97465		PC	ENVIRONMENTAL CONSERVATION	250
<b>Total . . . . . ▶ 3a</b>				145,814

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)				
<b>a</b> <i>Paid during the year</i>				
WILD SALMON CENTER 721 NW 9TH AVE SUITE 300 PORTLAND, OR 97209		PC	TO CONSERVE WILD SALMON AND STEELHEAD STRONGHOLDS ACROSS THE PACIFIC RIM	250
WORLD VISION INTERNATIONAL PO BOX 9716 FEDERAL WAY, WA 98063		PC	SPONSORING CHILDREN	250
YOUTH MUSIC PROJECT2015 8TH AVE WEST LINN, OR 97068		PC	TO PROVIDE OUTSTANDING MUSIC EDUCATION FOR YOUTH	250
<b>Total . . . . . ▶ 3a</b>				145,814

**TY 2020 Accounting Fees Schedule****Name:** KOHNSTAMM FAMILY FOUNDATION

C/O MOSS ADAMS LLP

**EIN:** 93-1160719

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	3,000	1,500		1,500

**TY 2020 Investments Corporate Stock Schedule**

**Name:** KOHNSTAMM FAMILY FOUNDATION  
C/O MOSS ADAMS LLP  
**EIN:** 93-1160719

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ADOBE INC	8,674	47,011
ADOBE INC	4,872	25,006
ADOBE INC	6,239	32,508
AGILENT TECHNOLOGIES INC	3,383	11,849
ALPHABET INC	30,982	101,609
APPLE INC	5,151	29,192
APPLE INC	14,863	45,115
APPLE INC	1,214	3,981
CARRIER GLOBAL CORP REG	3,807	7,544
LUMEN TECHNOLOGIES INC	14,436	3,900
LUMEN TECHNOLOGIES INC	3,608	975
LUMEN TECHNOLOGIES INC	18,041	4,875
COSTCO WHOLESALE CRP DEL	437	3,768
COSTCO WHOLESALE CRP DEL	2,962	18,839
COSTCO WHOLESALE CRP DEL	2,891	9,420
CISCO SYSTEMS INC COM	8,749	22,375
CISCO SYSTEMS INC COM	540	1,119
CISCO SYSTEMS INC COM	8,295	15,663
CISCO SYSTEMS INC COM	9,416	17,900
DISNEY (WALT) CO COM STK	16,469	59,789
DISNEY (WALT) CO COM STK	6,503	22,648
EXXON MOBIL CORP COM	13,397	13,397
EXXON MOBIL CORP COM	37,574	16,076
FEDEX CORP DELAWARE COM	4,036	11,683
FEDEX CORP DELAWARE COM	3,085	9,087
GENERAL ELECTRIC	37,479	16,200
INTL BUSINESS MACHINES CORP IBM	33,084	25,176
JOHNSON AND JOHNSON COM	10,487	74,756
MICROSOFT CORP	9,804	75,845
MICROSOFT CORP	2,117	11,121

## Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
MICROSOFT CORP	9,994	44,484
NVIDIA	17,372	57,442
OTIS WORLDWIDE CORP REG	5,708	6,755
ORACLE CORP \$0.01 DEL	42,374	64,690
ORACLE CORP \$0.01 DEL	8,186	32,345
PEPSICO INC	21,237	74,150
PFIZER INC	14,264	16,565
PFIZER INC	25,813	27,608
PROCTOR & GAMBLE CO	18,188	82,093
PROGRESSIVE CRP OHIO	29,070	91,464
ROCHE HLDG LTD SPN ADR	20,124	61,376
STARBUCKS CORP	895	5,349
STARBUCKS CORP	4,335	23,536
STARBUCKS CORP	10,833	48,141
3M COMPANY	21,122	27,966
THERMO FISHER SCIENTIFIC INC	13,576	41,920
RAYTHEON TECHNOLOGIES CORP	12,699	14,302
VIATRIS INC	774	1,030
VIATRIS INC	1,424	1,744
WELLS FARGO & CO NEW DEL	39,656	22,635
WABTEC	624	586
ISHARES MSCI EAFE	15,566	14,957
BLACKROCK GLOBAL ALLOCATION FD INC A	44,459	49,987
CALAMOS GROWTH AND INCOME FD CL A	118,479	169,934
PIMCO TOTAL RETURN FD CL A	42,848	41,212
COLUMBIA SELIGMAN COMMUNICATIONS & INFO A	131,128	242,843
HESS CORP	0	32,466
CLEARBRIDGE LARGE CAP GROWTH FUND	0	207



**TY 2020 Other Decreases Schedule****Name:** KOHNSTAMM FAMILY FOUNDATION

C/O MOSS ADAMS LLP

**EIN:** 93-1160719

Description	Amount
PRIOR PERIOD ADJUSTMENT	9,944

**TY 2020 Other Expenses Schedule**

**Name:** KOHNSTAMM FAMILY FOUNDATION  
C/O MOSS ADAMS LLP

**EIN:** 93-1160719

**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK CHARGES	14	14		14
MISCELLANEOUS	176	176		0
STATE LICENSE FEES	50	0		50

**TY 2020 Other Professional Fees Schedule**

**Name:** KOHNSTAMM FAMILY FOUNDATION  
C/O MOSS ADAMS LLP

**EIN:** 93-1160719

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MERRILL LYNCH INVESTMENT FEE	220	220		0

**TY 2020 Substantial Contributors  
Schedule**

**Name:** KOHNSTAMM FAMILY FOUNDATION  
C/O MOSS ADAMS LLP

**EIN:** 93-1160719

Name	Address
MOLLY D KOHNSTAMM	5738 SOUTH RIVERPOINT LANE PORTLAND, OR 97239

**TY 2020 Taxes Schedule**

**Name:** KOHNSTAMM FAMILY FOUNDATION  
C/O MOSS ADAMS LLP

**EIN:** 93-1160719

**Taxes Schedule**

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
FOREIGN TAXES	541	541		0
FEDERAL TAXES	175	0		0
STATE TAXES	185	0		185

<b>Schedule B</b> (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	<b>Schedule of Contributors</b>  ▶ <b>Attach to Form 990, 990-EZ, or 990-PF.</b> ▶ Go to <u><a href="http://www.irs.gov/Form990">www.irs.gov/Form990</a></u> for the latest information.	OMB No. 1545-0047
		<b>2020</b>
Name of the organization KOHNSTAMM FAMILY FOUNDATION C/O MOSS ADAMS LLP		<b>Employer identification number</b> 93-1160719

**Organization type** (check one):

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 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 33<sup>1</sup>/<sub>3</sub>% 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  
KOHNSTAMM FAMILY FOUNDATION  
C/O MOSS ADAMS LLP

**Employer identification number**  
93-1160719

**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
1	MOLLY D KOHNSTAMM 5738 SOUTH RIVERPOINT LANE PORTLAND, OR 97239	\$ 148,458	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization KOHNSTAMM FAMILY FOUNDATION C/O MOSS ADAMS LLP	Employer identification number 93-1160719
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	PUBLICLY TRADED SECURITIES	\$ 148,458	2020-12-29
(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
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	



Name of organization KOHNSTAMM FAMILY FOUNDATION C/O MOSS ADAMS LLP	Employer identification number 93-1160719
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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
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	