efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491034000082

2021

OMB No. 1545-0047

Department of the Treasury

Internal Revenue Service

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

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

Open to Public ▶ Go to www.irs.gov/Form990PF for instructions and the latest information. Inspection For calendar year 2021, or tax year beginning 01-01-2021 , and ending 12-31-2021 A Employer identification number Name of foundation 83-0644737 Number and street (or P.O. box number if mail is not delivered to street address) B Telephone number (see instructions) PO Box 13071 City or town, state or province, country, and ZIP or foreign postal code Salem, OR $\,$ 97309 $\,$ $\boldsymbol{\mathsf{C}}\,$ If exemption application is pending, check here ☐ Initial return ☐ Initial return of a former public charity G Check all that apply: **D 1.** Foreign organizations, check here...... 2. Foreign organizations meeting the 85% test, check here and attach computation ... Amended return ☐ Final return Address change ☐ Name change If private foundation status was terminated ☑ Section 501(c)(3) exempt private foundation **H** Check type of organization: under section 507(b)(1)(A), check here \square Section 4947(a)(1) nonexempt charitable trust \square Other taxable private foundation I Fair market value of all assets at end J Accounting method: ☐ Cash ☑ Accrual If the foundation is in a 60-month termination of year (from Part II, col. (c), under section 507(b)(1)(B), check here ☐ Other (specify) line 16) ▶\$ 316,593 (Part I, column (d) must be on cash basis.) Part I Analysis of Revenue and Expenses (The total Disbursements Revenue and (b) Net investment (c) Adjusted net for charitable of amounts in columns (b), (c), and (d) may not necessarily expenses per books equal the amounts in column (a) (see instructions).) (cash basis only) Contributions, gifts, grants, etc., received (attach 340,559 schedule) Check \blacktriangleright \bigsqcup if the foundation is **not** required to attach 2 3 Interest on savings and temporary cash investments Dividends and interest from securities Gross rents Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications . 10a Gross sales less returns and allowances Less: Cost of goods sold Gross profit or (loss) (attach schedule) c Other income (attach schedule) 11 Total. Add lines 1 through 11 340,568 Operating and Administrative Expenses 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages Pension plans, employee benefits 15 16a Legal fees (attach schedule) . . . 225 700 Accounting fees (attach schedule) Other professional fees (attach schedule) 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 19 20 21 Travel, conferences, and meetings 22 Printing and publications . . 23 Other expenses (attach schedule) 37.660 37,660 Total operating and administrative expenses. 24 38,585 Add lines 13 through 23 38,585 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 38,585 38,585 27 Subtract line 26 from line 12: Excess of revenue over expenses and 301,983 disbursements Net investment income (if negative, enter -0-)

Adjusted net income (if negative, enter -0-) . . .

	-PF (2021)						Page Z
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 (a) Book Value	(1) Book	End o	t year (c) Fair Market Value
1	Cash—non-interest	-bearing	29	(.	5) DOO!	23,681	22,681
2	Savings and tempo	orary cash investments	15,581			5,353	5,353
3	Accounts receivable	,	,			,	,
	Less: allowance for	doubtful accounts >					
4							
'		doubtful accounts •					
5							
6		om officers, directors, trustees, and other					
		s (attach schedule) (see instructions)					
7		ans receivable (attach schedule) ▶					
1		doubtful accounts •					
8 س		e or use					
Assets		and deferred charges					
S 10a		and state government obligations (attach schedule)					
b		orate stock (attach schedule)		%]		288,559	288,559
	·	orate bonds (attach schedule)		امد		200,333	200,333
C .		, buildings, and equipment: basis					
11		depreciation (attach schedule)					
1.2		,					
12		rgage loans					
13		r (attach schedule)					
14		d equipment: basis					
		depreciation (attach schedule) ▶					
15		ribe ▶)					
16	•	e completed by all filers—see the	45.540			247 502	046 506
	instructions. Also, s	· - · ·	15,610			317,593	316,593
17	• •	and accrued expenses					
<u>ر</u> 18							
Ď 19							
Liabilities 20 21	Loans from officers	, directors, trustees, and other disqualified persons					
[21		er notes payable (attach schedule)					
_ 22		scribe >)					
23	Total liabilities(ad	dd lines 17 through 22)	0			0	
Ň	Foundations that	follow FASB ASC 958, check here ▶					
22		es 24, 25, 29 and 30.					
[24	Net assets without	donor restrictions					
മ് 25	Net assets with dor	nor restrictions					
림	Faundations that	do not follow FASB ASC 958, check here					
or Fund Balance		es 26 through 30.					
	-	principal, or current funds					
Assets 28 28 28		urplus, or land, bldg., and equipment fund					
A 28	· ·	accumulated income, endowment, or other funds	15,610			317,593	
	•	or fund balances (see instructions)	15,610			317,593	
29 30		nd net assets/fund balances (see instructions) .	15,610			317,593	
		, , ,	13,610			31/,393	
Part III	-	nanges in Net Assets or Fund Balances	20 (must 2552 with	المما			
		balances at beginning of year—Part II, column (a), line on prior year's return)	: 29 (must agree with	ena-	1		15,610
•	er amount from Part	• •		.	2		301,983
		uded in line 2 (itemize) ▶			3		,
4 Add	lines 1, 2, and 3 .			.	4		317,593

Decreases not included in line 2 (itemize) ▶ ___

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

5

6

Page **3**

		rind(s) of property sold (e.g., real ese; or common stock, 200 shs. MLC	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
1a							
			T				
	(e)	(f) Depreciation allowed		(g) other basis		h) r (loss)	
	Gross sales price	(or allowable)		ense of sale) minus (g)	
а							
b							
С							
d							
e							
	Complete only for assets show	ng gain in column (h) and owned by	y the foundation	on 12/31/69		I)	
	(i)	(j)		(k)		h) gain minus less than -0-) or	
	F.M.V. as of 12/31/69	Adjusted basis as of 12/31/69		of col. (i) . (j), if any	• (1)		
a		, ,		(37)	· .		
b							
С							
d							
e							
			n, also enter in P				
2	Capital gain net income or (ne	t capital loss) { If (los	ss), enter -0- in F	art I, line 7	2		
3	Net short-term capital gain or	(loss) as defined in sections 1222(5	5) and (6):	,	-		
		e 8, column (c) (see instructions). I	, , ,	- 1			
	in Part I, line 8			}	3		
				,			

Pa	rt V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instr	ructi	ons)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.				
	Date of ruling or determination letter:(attach copy of letter if necessary-see instructions)				
b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations enter 4% (0.04) of Part I, line 12, col. (b)					
2		2			0
3	Add lines 1 and 2	3			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0
5	—	5			0
6	Credits/Payments:				
a	2021 estimated tax payments and 2020 overpayment credited to 2021 6a				
b	Exempt foreign organizations—tax withheld at source				
c d	Tax paid with application for extension of time to file (Form 8868) 6c Backup withholding erroneously withheld 6d				
7		7			
8		8			
	Enter any penalty for underpayment of estimated tax. Check here in Form 2220 is attached.				
9	· · · · · · · · · · · · · · · · · · ·	9			
10 11		1			
	rt VI-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did			Yes	No
	it participate or intervene in any political campaign?		. 1a	+	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instruction				
	for the definition		1 b		No
	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.				
С	Did the foundation file Form 1120-POL for this year?		10		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$				
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
on foundation managers. ▶ \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	•	. 2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles				
3	of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>		. 3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	'	. 4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?		. 4b	_	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		. 5		No
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions				
_	that conflict with the state law remain in the governing instrument?	•	. 6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV.		. 7	Yes	
8a		•	· -	165	
Oa	POR				
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? If "No," attach explanation.		8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)				
	or 4942(j)(5) for calendar year 2021 or the taxable year beginning in 2021? See the instructions for Part XIII. If "Yes," complete Part XIII	_	. 9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names	s	· -		
	and addresses. 📆		. 10	Yes	
				90-PF	(2021)

	advisory privileges? If "Yes," attach statement. See instructions	12		1
L3	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ▶			
L4	The books are in care of ▶Michael W Delk Telephone no. ▶(503)		95_	
	ocated at ▶PO Box 13071 Salem OR ZIP+4 ▶97			

L 4	The books are in care of ▶Michael W Delk	Telephone no. ► <u>(503) 584-119</u>	5
	Located at ▶PO Box 13071 Salem OR	ZIP+4 ▶ <u>97309</u>	
L 5	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check hand enter the amount of tax-exempt interest received or accrued during the year	nere	•
6	At any time during calendar year 2021, did the foundation have an interest in or a signature or oth	er authority over	Vec

	The books are in care of P iniciaer where	JUT-11.		
	Located at ▶PO Box 13071 Salem OR ZIP+4 ▶973	309		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here		•	
16	At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶		·	

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here		•					
16	At any time during calendar year 2021, 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?							
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶							
Pa	Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required							
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No				
1a During the year did the foundation (either directly or indirectly):								

	and enter the amount of tax-exempt interest received or accrued during the year						
16	At any time during calendar year 2021, 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?		No				
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶						
Pa	rt VI-B Statements Regarding Activities for Which Form 4720 May Be Required						
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Yes	No				
1a During the year did the foundation (either directly or indirectly):							
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1	No				
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)						

16 At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority ove	er	Yes	No_
a bank, securities, or other financial account in a foreign country?	16		No
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the for country $ ightharpoonup$	reign		
Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required			
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a During the year did the foundation (either directly or indirectly):			
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a(1)		No
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
a disqualified person?....................................	1a(2)		No
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)		No
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)		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)?	1a(5)		Nο

	a disqualified person?....................................	1a(2)	No
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)	No
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)	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)?	1a(5)	No
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		
	if the foundation agreed to make a grant to or to employ the official for a period		
	after termination of government service, if terminating within 90 days.)	1a(6)	No
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	
c	Organizations relying on a current notice regarding disaster assistance check here		
d	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 2021?	1d	No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		
	operating foundation defined in section $4942(j)(3)$ or $4942(j)(5)$:		

2a

2b

3а

3b

4a

4b

Form 990-PF (2021)

No

No

No

No

No

a At the end of tax year 2021, did the foundation have any undistributed income (Part XII, lines 6d

Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at

b If "Yes," did it have excess business holdings in 2021 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

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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 2021?.

b Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

and 6e) for tax year(s) beginning before 2021?.

▶ 20_____, 20_____, 20______

Page **6**

Form	990-PF (2021)						P	age 6
Pa	rt VI-B Statements Regard	ding	Activities for Which	Form 4720 May Be	Required (continued)			
5a	During the year did the foundation	рау о	r incur any amount to:				Yes	No
	(1) Carry on propaganda, or other	vise a	ttempt to influence legisl	ation (section 4945(e))?		5a(1)		No
	(2) Influence the outcome of any s	pecifi	c public election (see sect	tion 4955); or to carry				
	on, directly or indirectly, any ve	oter re	egistration drive?			5a(2)		No
	(3) Provide a grant to an individua					5a(3)		No
	(4) Provide a grant to an organizat	ion ot	her than a charitable, etc	, organization described	d			
	in section 4945(d)(4)(A)? See i					5a(4)		No
	(5) Provide for any purpose other t							
_	educational purposes, or for the	•	·			5a(5)		No
b	If any answer is "Yes" to 5a(1)–(5)		•		· ·			
	Regulations section 53.4945 or in a					5b		
C	Organizations relying on a current i							
a	If the answer is "Yes" to question 5			•				
	tax because it maintained expendit					5d		
_	If "Yes," attach the statement requ			* *				
6a	Did the foundation, during the year	-						
	a personal benefit contract?					6a		No
b	Did the foundation, during the year	, pay	premiums, directly or ind	irectly, on a personal be	enerit contract?	6b		No
7a	If "Yes" to 6b, file Form 8870. At any time during the tax year, was	s tha	foundation a party to a r	robibited tay chalter tra	ncaction?	7a		No
	If "Yes", did the foundation receive					7a 7b		140
8	Is the foundation subject to the sec		•			10		
Ü	excess parachute payment during t		1 / ()			. 8		No
					anagers, Highly Paid Emp			
	and Contractors			•		, , , , , , , , , , , , , , , , , , ,		
1	List all officers, directors, truste		bundation managers ar b) Title, and average	(c) Compensation	1			
	(a) Name and address	`	hours per week	not paid, enter	employee benefit plans and	(e) Expen other al		
			devoted to position	-0-)	deferred compensation	other ar	lowanc	
See	Additional Data Table	4						
		1						
		4						
		-						
		4						
		<u> </u>						
		4						
	Comments of fine high at	<u> </u>			1		NONE	11
	Compensation of five highest-pa	ila en	npioyees (otner than ti	nose included on line :		e, enter	NONE.	•
(a)	Name and address of each employee	paid	(b) Title, and average	() ((d) Contributions to employee benefit (e) Expens	se acco	ount,
` ′	more than \$50,000	•	hours per week devoted to position	(c) Compensation	plans and deferred	other all		
	_		devoted to position		compensation			
NON	<u>E</u>							
Total	I number of other employees well as	or to	0.000					
TOTA	I number of other employees paid ov	er \$5	0,000		•			(

For	rm 990-PF (2021)	Page 7
P	Part VII Information About Officers, Directors, Trustees, Foundation Mar and Contractors (continued)	agers, Highly Paid Employees,
3	3 Five highest-paid independent contractors for professional services (see instruction	ns). If none, enter "NONE".
	(a) Name and address of each person paid more than \$50,000 (b) Type	of service (c) Compensation
NOI	ONE	
Tot	otal number of others receiving over \$50,000 for professional services	•
Pai	art VIII-A Summary of Direct Charitable Activities	·
	st the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informa ganizations and other beneficiaries served, conferences convened, research papers produced, etc.	tion such as the number of Expenses
1	1 Tuition payments to George Fox University	24,393
2	2 Tuition payments to Washington Jesuit Academy	13,000
3	3	
4	4	
Pai	art VIII-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 a	nd 2. Amount
1	1 NA	0
2	2 NA	0
,	All other program-related investments. See instructions.	
3	3	
Tot	otal. Add lines 1 through 3	· · · · · · •
		Form 990-PF (2021)

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign

2a

2b

4

5

2c

3

4

5

6

7

1a

1b

2

3a

3h

4

4,763

312,796

15,640

15.640

15.640

15.640

15.640

38,585

38.585

Form **990-PF** (2021)

Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see

. . Net value of noncharitable-use assets. Subtract line 4 from line 3.

organizations check here

and do not complete this part.)

Tax on investment income for 2021 from Part V, line 5.

Income tax for 2021. (This does not include the tax from Part V.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

Distributable amount before adjustments. Subtract line 2c from line 1.

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

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

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

4

5

6

1

2a

3

4

5

6

1

2

3

Part XI

Part X

b Total for prior years:

a From 2016. **b** From 2017. . . . c From 2018. .

d From 2019. e From 2020. Page 9

15,640

Form **990-PF** (2021)

	Part XII	U
--	----------	---

-PF (2	021)		
411	Undistributed Income (see instruc	ctions)	
			$\overline{}$

F (20	021)	
I	Undistributed Income (see instructions)	

(see instruc	ctions)			
		-	$\overline{}$	

(d) 2021	
	15,

Undistributed Income (see instruc	tions)			
	(a) Corpus	(b) Years prior to 2020	(c) 2020	(/ 20
ibutable amount for 2021 from Part X, line 7				

		Corpus	rears prior to 2020	2020	2021
1	Distributable amount for 2021 from Part X, line 7				15,640
2	Undistributed income, if any, as of the end of 2021:				

22.945

22,945

22,945

22.945

		Corp
1	Distributable amount for 2021 from Part X, line 7	
2	Hardistalkutad income if any an aftha and of 2021.	

a Enter amount for 2020 only.

3 Excess distributions carryover, if any, to 2021:

f Total of lines 3a through e

4 Qualifying distributions for 2021 from Part XI, line 4: ▶ \$ a Applied to 2020, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions). **d** Applied to 2021 distributable amount. . . .

e Remaining amount distributed out of corpus

6 Enter the net total of each column as

b Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. **d** Subtract line 6c from line 6b. Taxable amount —see instructions e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2022 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) 8 Excess distributions carryover from 2016 not applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2022.

indicated below:

10 Analysis of line 9: a Excess from 2017. **b** Excess from 2018. . c Excess from 2019. . d Excess from 2020. . e Excess from 2021. .

5 Excess distributions carryover applied to 2021. (If an amount appears in column (d), the

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5

Subtract lines 7 and 8 from line 6a

same amount must be shown in column (a).)

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

2

Form 990-PF (2021)				Page 11
Part XIV Supplementary Informa				
3 Grants and Contributions Paid D		d for Future	Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year See Additional Data Table				
Total				37,393
b Approved for future payment				
Total			▶ 3b	0 Form 990-PE (2021)

Enter gross		Activities				
	amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	1 512, 513, or 514	(e) Related or exemply function income
_	service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.
f						
2 Member	nd contracts from government agencies ship dues and assessments					
investme						
5 Net rent	ds and interest from securities					1
	inanced property					
	al income or (loss) from personal property					
7 Other in	vestment income					
	(loss) from sales of assets other than					
inventor						
	me or (loss) from special events: rofit or (loss) from sales of inventory					
	evenue: a					
b						
	-					
	Add adjument (b) (d) and (a)					1
	Add line 12, columns (b), (d), and (e)			1	3	10
(See wo	rksheet in line 13 instructions to verify calcu	lations.)				
Part XV-	Relationship of Activities to the Explain below how each activity for which				ted importantly to	
Line No. ▼	the accomplishment of the foundation's exinstructions.)					
4	Program Related Dividends					
I						

Part XVI Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501

1		e organization directly or indirectly engage in any of the following with any other organization described in section 5 ther than section 501(c)(3) organizations) or in section 527, relating to political organizations?										Yes	No
а	Transfers	from the reporting foun	dation to a n	oncha	ritable exe	empt organiza	tion	of:					
	(1) Cash									. [la(1)		No
	(2) Othe	rassets								[:	la(2)		No
b Other transactions:													
(1) Sales of assets to a noncharitable exempt organization										1	lb(1)		No
(2) Purchases of assets from a noncharitable exempt organization										3	lb(2)		No
(3) Rental of facilities, equipment, or other assets										lb(3)		No	
	(4) Reimbursement arrangements										lb(4)		No
	(5) Loans or loan guarantees.										lb(5)		No
		rmance of services or m				licitations	•				lb(6)		No
_					_					. F			
	-	f facilities, equipment, n			•					· L	1c		No
	of the goo	wer to any of the above ods, other assets, or ser nsaction or sharing arra	vices given b	y the	reporting	foundation. If	the f	oundation receive	ed less than fair ma	rket value			
(a)	Line No.	(b) Amount involved	(c) Name of	noncha	aritable exe	mpt organization	1 I	(d) Description of	transfers, transactions	s, and sharii	ng arrai	ngemen	ts
		` '				, ,		,	,	,			
							\top						
							+						
							+						
							+						
							+						
							\top						
							+						
							+						
							+						
							+						
							+						
							+						
							+						
22	Is the fou	ndation directly or indire	actly affiliated	-l with	or relate	d to one or m	ore t	av-evemnt organ	izations				
		•	•						_	res 🔽	NI.		
		in section 501(c) (other		1 201((c)(3)) or i	in section 527	٠.		Ш	res 🖭	NO		
b	If "Yes," c	complete the following so						1					
		(a) Name of organization	n		(1	b) Type of organ	ıızatıo	n	(c) Descriptio	n of relation	ship		
	T												
		ler penalties of perjury, ny knowledge and belief											
214		ch preparer has any kno		Ji lect,	, and comp	piete. Deciara	LIOIT C	n preparer (otner	tilali taxpayei) is t	Jaseu on a	11 111101	mation	1 01
	- 1	*****	wicage.			2022-01-28		\ *****		May the IRS	discuss	this retu	rn
76	: e					2022-01-28				with the pre			
		Signature of officer or t	rustee			Date		Title		See instruct	ions. L	_ Yes ☑	⊿ No
	I	1											
		Print/Type preparer's	name	Prepa	arer's Sigr	nature		Date	Check if self-	PTIN			
									employed ▶ ☑	Р	01200	696	
_		Marshall Miller CPA						2022-02-03	employed F				
	id												
	eparer	THE HAIL F	hall Miller CP	A dba	TemCom	р		•	•	Eirm's ET			
Js	e Only									Firm's EI	V -		
	_	Firm's address ► 34	14 NW Vaug	hn St									
		n _a	rtland OP 0	7210						Phone no	(503)	984-4	4689
			rtland, OR 9	7210									
		1											

Form 990PF Part VII 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, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred

			compensation	
Michael W Delk	Director	0	0	
PO Box 13071 Salem, OR 97309	2.00			

Michael W Delk	2.00	٠ ا	٠ '	ľ
PO Box 13071 Salem, OR 97309				
Mary M Delk	Director	0	0	0
PO Box 13071	1.00			

Mary M Delk	Director	0	0	0
PO Box 13071 Salem, OR 97309	1.00			
Molly L LeBlanc	Director	0	0	0

PO Box 13071 Salem, OR 97309	1.00			
Molly L LeBlanc	Director	0	0	0
PO Box 13071 Salem, OR 97309	1.00			

1.00

Director 1.00

Director 1.00

PO Box 13071 Salem, OR 97309 Melinda J Delk

PO Box 13071 Salem, OR 97309 Crystel D Dyson

PO Box 13071 Salem, OR 97309

PO Box 13071 Salem, OR 97309	1.00			
Molly L LeBlanc	Director	0	0	0
PO Box 13071 Salem, OR 97309	1.00			
Megan Barnes	Director	0	0	0

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

24,393

37,393

	or substantial contributor			
a Paid during the year				
George Fox University		NC	Tuition for recipient	

ubstantial contributor

Name and address (home or business)

Total .

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

Washington Jesuit Academy	NC	Tuition for recipient	
414 N Meridian St Newberg, OR 97132			
George Fox University	NC	luition for recipient	

Newberg, OR 97132			
Washington Jesuit Academy	NC	Tuition for recipient	13,0
900 Varnum Street NE			

Washington Jesuit Academy	NC	Tuition for recipient	13,000
900 Varnum Street NE Washington, DC 20017			

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491034000082 TY 2021 Accounting Fees Schedule					
	Name: Delk Fa EIN: 83-064	,			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	

Accounting Fees

efile GRAPHIC print - DO NOT PROCESS As Filed Data -	DLN: 93491034000082
TY 2021 Investments Corporate Stock Schedule	
Name: Delk Family Foundation	
FTN: 83-0644737	

DIN. 0240402400002

288,559

288,559

ACTION CONTROL TO MAKE PROCESS AS ELLEMBRAS

Stock Investments

EIN: 83-0644/3/		
Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491034000082
TY 2021 Legal Fees Schedule	•			
_				
	: Delk Family : 83-0644737	Foundation		
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

Legal Fees

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491034000082			
TY 2021 Other Expenses Schedule							
	: Delk Family Fou : 83-0644737	ındation					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
Bank Service Charges	197	0	0	197			
Licenses & Taxes	70	0	0	70			

37,393

37,393

Tuition Expense

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491034000082
TY 2021 Substantial Contribut Schedule	ors		
	Delk Family Fo 83-0644737	oundation	
Name			Address
Michael Mary Delk		PO Box 13071 Salem, OR 97309	
Delks Valley Oil		PO Box 12249 Salem, OR 97309	

Schedule B Schedule of Contribu		f Contributors	OMB No. 1545-0047		
(Form 990) Department of the Treasury Internal Revenue Service	n 990) ► Attach to Form 990, 990-EZ, or 990-PF. The Treasury ► Go to www.irs.gov/Form990 for the latest information.		2021		
Name of the organization Delk Family Foundation			Employer identification number 83-0644737		
Organization type (chec	k one):		_ 63-0644737		
Filers of:	Section:				
Form 990 or 990-EZ	☐ 501(c)() (enter number) organiza	ation			
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	☐ 527 political organization				
Form 990-PF	√ 501(c)(3) exempt private foundation √ 501(c)(3)	on			
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	☐ 501(c)(3) taxable private foundation				
money or other contributions.	tion filing Form 990, 990-EZ, or 990-PF that property) from any one contributor. Complet				
under sections 50 received from any 990, Part VIII, line	on described in section 501(c)(3) filing Form 19(a)(1) and 170(b)(1)(A)(vi), that checked Solving to contributor, during the year, total contributor, 1h, or (ii) Form 990-EZ, line 1. Complete Posterior 1.	chedule A (Form 990 or 990-EZ), P ibutions of the greater of (1) \$5,000 arts I and II.	Part II, line 13, 16a, or 16b, and that For (2) 2% of the amount on (i) Form		
during the year, to	on described in section 501(c)(7), (8), or (10 otal contributions of more than \$1,000 exclusione prevention of cruelty to children or anima	sively for religious, charitable, scien			
during the year, c If this box is chec purpose. Don't co	on described in section 501(c)(7), (8), or (10 ontributions exclusively for religious, charita ked, enter here the total contributions that w mplete any of the parts unless the General le, etc., contributions totaling \$5,000 or mor	ble, etc., purposes, but no such cor ere received during the year for an Rule applies to this organization be	ntributions totaled more than \$1,000. exclusively religious, charitable, etc. ecause it received nonexclusively		
990-EZ, or 990-PF), but i	that isn't covered by the General Rule and/ t must answer "No" on Part IV, line 2, of its rt I, line 2, to certify that it doesn't meet the	Form 990; or check the box on line	H of its Form 990-EZ		
For Paperwork Reduction Ac	ct Notice, see the Instructions	Cat. No. 30613X	Schedule B (Form 990) (2021)		

for Form 990, 990-EZ, or 990-PF.

Schedule B (For	m 990) (2021)	Pag	je 2
Name of organizat Delk Family Found		Employer identification 83-0644737	number
Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if ad	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Delks Valley Oil PO Box 12249 Salem, OR 97309	\$ 288,559	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Michael Mary Delk PO Box 13071 Salem, OR 97309	\$ 52,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) N o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2021)