COVID-19 & FEMA-4562-DR 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. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

	Donge	tmaki	of the Treasury			Do no	ot enter :	social s	ecurity number	s on	this form as	it may be ma	ide public.		40	IJ
	Interna	Rev	enue Service			► Go t	o www.i	rs.gov/	orm990PF for	instr	uctions and	the latest info	ormation.	<u> </u>	Open to Public	Inspection
	For c	alen	dar year 2019	or tax year	r begin <u>ni</u>	ing					, and ei	nding				
	Nan	ne of	foundation			-		_					A Employe	er identificatio	n number	
	C	ΔRI	RICO FA	MTT.Y	FOII	יי אכוע	TON						46-	1237162	2	
	_		nd street (or PO					address)				Room/suite	B Telepho			
S	_	_	DOT 44											-779-7(5.4.1	
Ö	_ <u></u>		BOX 44			d 7ID as 4										<u> </u>
吴	Ulty	טו וני	BOX 44 own, state or proposed for the pr		unny, an 7501	u ZIP OI I	oreign p	ustai co	ue				l if exempte	on application is	pending, check here	
Ź	_ MI	ותם	FORD, O	K 3	1										1. 1. 5	
Ш	GC	neck	all that apply:] Initial re			<u> </u>	Initial return of		rmer public o	harity	D 1. Foreig	n organization	is, check here	
O				<u> </u>	J Final re			<u> </u>	Amended retu	rn			2. Foreigi	n organizations m	eeting the 85% test	. \square
						s change			Name change				check	here and attach o	eeting the 85% test, computation	
>	H_C	-	type of organiz					kempt pi	ivate foundation	n	\mathcal{N}	\	E If private	foundation st	atus was terminate	d
,		Se	ction 4947(a)(1) nonexen	npt charit	table trus	t	Other ta	xable private fo		tion C	1	under se	ction 507(b)(1)(A), check here	
,	Fa	ır ma	rket value of all	assets at	end of ye	ar J	<u>Accounti</u>	ng meth	od: 🗶 Ca	sh	Accr	ual	F If the for	andation is in a	60-month termina	ation
•	(fre	om P	art II, col. (c), l					ther (spe					under se	ection 507(b)(1)(B), check here	
Š	▶	\$	6	1,458	8,50	4 . (Par	t I, colun	nn (d), r	nust be on cash	basi	s.)					
-	Pa	rt Ī	Analysis of R	evenue ar	nd Expen	ses	_	(a	Revenue and		(b) Net in	vestment	(c) Ac	ljusted net	(d) Disburse	ments
			(The total of amonecessarily equi	ounts in colu al the amour	ımns (b), (c nts ın colur	c), and (d) n mn (a))	nay not	exp	enses per book	s	inco		ir	icome	for charitable p (cash basis	
		1	Contributions,							0.			N	/A		
		2	Check ► X				Sch B			1			T			
	ļ	3	Interest on saving	s and temp						_					 	
)		4	Dividends and		om secui	rities			496,69	<u>n .</u>	49	6,690.			Statemer	nt 1
7	- 1	•	Gross rents	iiitoi oot ii t	0111 30001	ilics		1	,644,43			4,438.		-	Statemen	
(\	ال		Net rental income	(1)	1 1	89,7	17		,011,13	~ 	1,04	4,430.			Statemen	
Y	1	_		· · · -				 	-96,96	1					Scacemer	<u>.1C J</u>
•	e	Od L	Net gain or (loss) Gross sales price assets on line 6a	from sale of for all		52,3			-30,30.	"			 		+	
	Revenue	, D					40.	-		 }		0.	 		-	
	æ	1	Capital gain net i	-	-	1e 2)				\dashv		<u> </u>	- +	- P.T.C	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	\dashv
		8	Net short-term		un								- 10		- 1	
		9	Income modifi Gross sales less		ı			<u> </u>		\dashv			16	<u> </u>	7	
		10a	and allowances											3 FE3	Q 4 7 21 T	
			Less Cost of goo		L			<u> </u>					3	<u> </u>		20
		C	Gross profit or	(loss)									112	_OC:	J. v. UT	
		11	Other income													
	\dashv	12	Total. Add line	s 1 throug	gh 11			2	,044,16		2,14	<u>1,128.</u>				
		13	Compensation of	officers, dır	ectors, tru	stees, etc			84,00	<u>0 .</u>		0.				0.
		14	Other employe	e salaries :	and wage	es							ļ	<u> </u>		
		15	Pension plans	employee				<u> </u>					L		1	
	šě	16a	Legal fees		1	Stmt	4		2,66			0.				<u> </u>
	질	Ь	Accounting fee	!S		Stmt	5		30,44	5.		0.				<u> </u>
	滋	C	Other professi	onal fees		Stmt	6		138,77	4.	13	6,500.				0.
	and Administrative Expenses	17	Interest													
	aţ	18	Taxes			Stmt	7		188,53	6.	18	1,766.		·- <u>-</u> -		0.
	ള	19	Depreciation a	nd depletio					454,69			4,691.				
	듩	20	Occupancy		-					9.		49.				0.
	Add	21	Travel, confere	nces, and	meeting	s				5.		75.				0.
	ğ	22	Printing and p		_	•									<u> </u>	
			Other expense			Stmt	R		454,24	Ř	9	9,620.				0.
	Operating		Total operation				J	\vdash	_ 131,21	*		<u> </u>				
	era	24	expenses. Ad	-				1	,353,48	ا م	97	2,701.				0.
	g	05	•		-	23			,584,18			<u> </u>	 		1,584	
		1	Contributions,	-					, , 04 , 10	* • 			 		1,304	, 101.
		26	Total expense		purseme	nts.		1	027 66	,	07	2 701	}		1 504	101
			Add lines 24 a		46			4	<u>,937,66</u>	1 •	87	<u>2,701.</u>	 		1,584	<u>, 181.</u>
			Subtract line 2						000 40	ا ہ						
			Excess of revenu	•				<u> </u>	<u>-893,49</u>	0.	4 0-	0 407			 	
			Net investme)	<u> </u>		_	1,26	8,427.	 			
		C	Adjusted net i	ncome (if i	negative, e	nter -0-)							N	/A		

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions.

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29		<u></u>
(must agree with end-of-year figure reported on prior year's return)	1	30,147,186.
2 Enter amount from Part I, line 27a	2	-893,496.
3 Other increases not included in line 2 (itemize) ► <u>UNREALIZED GAIN/LOSS</u>	3	2,391,481.
4 Add lines 1, 2, and 3	4	31,645,171.
5 Decreases not included in line 2 (itemize) ► IRS TAX PENALTY	5	539.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	31,644,632.

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Enter 1% of net investment income (1% of Part I, line 27b) 12,684. 6 2<u>,71</u>7,452. Add lines 5 and 6 7 8 Enter qualifying distributions from Part XII, line 4 8 1,584,181.

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

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Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	<u>nstru</u>	ctio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%	2	5,3	<u>69.</u>	
	of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.	
3	Add lines 1 and 2	2	<u>5,3</u>	<u>69.</u>	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	2	<u>5,3</u>	<u>69.</u>	
6	Credits/Payments:				
a	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 25,560.				
	Exempt foreign organizations - tax withheld at source 6b 0.				
	Tax paid with application for extension of time to file (Form 8868) 6c 0.				
d	Backup withholding erroneously withheld 6d 0.				
	Total credits and payments. Add lines 6a through 6d	<u> 2</u>	<u>5,5</u>	<u>60.</u>	
	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached 8			0.	
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1	<u>91.</u>	
	Enter the amount of line 10 to be: Credited to 2020 estimated tax			0.	
	rt VII-A Statements Regarding Activities		V	NIa	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	<u> </u>	Yes		
	any political campaign?	1a	-	<u>X</u>	
D	Did it spend more than \$100 during the year (either directly) for political purposes? See the instructions for the definition	1b		<u>X</u> _	
	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.	_		v	
	Did the foundation file Form 1120-POL for this year?	1c		<u>X</u> _	
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
_	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.				
Э	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
•	managers. > \$0 . Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X_	
2	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		<u>'</u>		
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	'	X _	
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X	
	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b			
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	_	x	
-	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		x	
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 XV	7	X		
					
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.				
	OR				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
~	of each state as required by General Instruction G? If "No," attach explanation	8b	X		,
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				1
	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV	9	_	x 0	*
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		\mathbf{x}^{-}	
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Pa	rt VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
•	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► _ N/A			
14	The books are in care of ► MAGNA CARRICO LOWMAN Telephone no. ► 541-77	19-7	641	
	Located at ►839 ALDER CREEK DR, MEDFORD, OR ZIP+4 ►97	<u> </u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		>	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A_	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	ļ	_X_
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
_	foreign country		Ĺ	
Ра	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		<u> </u>	 -
	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]]	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
		1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (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)?			
	(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.)	İ		
Ь	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 N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2019?	10		X
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)):	}		
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years \blacktriangleright ,,,	1		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	1		
	statement - see instructions.) N/A	2b		
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1		
За				
	during the year? Yes X No			
0	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,			
	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3ь		
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	70	\vdash	 -
_	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		\mathbf{x}_{-}
		rm 99 0	0-PF	

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Part VII-B Statements Regarding Activities for Which F	Form 4720 May Be F	Required (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s 🗓 No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire			1	1
any voter registration drive?			es X No		Ī
(3) Provide a grant to an individual for travel, study, or other similar purposes	7	Ye	es 🔀 No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			- 1	ļ
4945(d)(4)(A)? See instructions		Ye	es 🗓 No		1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				ļ
the prevention of cruelty to children or animals?		Ye	s X No	ĺ	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	fer the exceptions described i	n Regulations			
section 53.4945 or in a current notice regarding disaster assistance? See instri	uctions		N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check t	nere				1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it maintai	ned		j	1
expenditure responsibility for the grant?	N	'/A 🔲 Ye	es 🔲 No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			-	1
a personal benefit contract?		Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.					ĺ
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es 🔀 No 📙		<u> </u>
b If "Yes," did the foundation receive any proceeds or have any net income attribu	itable to the transaction?		N/A L	7b	<u> </u>
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration or				
excess parachute payment(s) during the year?			s X No		<u> </u>
Part VIII Information About Officers, Directors, Trustore Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	y		
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.				
		(c) Compensation	(d) Contributions to	(e) Exp	ense
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp account allowa	, other
MAGNA CARRICO LOWMAN	DIRECTOR/PRES		Compensation	anowa	11003
839 ALDER CREEK DR	i Director, i red	IDBIVI			
MEDFORD, OR 97504	5.00	0.	0.		0.
	DIRECTOR/SECR				
839 ALDER CREEK DR					
MEDFORD, OR 97504	5.00	0.	0.		0.
	DIRECTOR				
839 ALDER CREEK DR	DINECTOR				
MEDFORD, OR 97504	1.00	0.	0.		0.
HEDIORD, OR 31304	1.00				
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
			(d) Contributions to	(e) Exp	ense
(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) Exp account allowa	, other nces
NONE					
110312					
				ĺ	
				-	
		<u> </u>			
		-			
					
Total number of other employees paid over \$50,000			▶	L	0
Total Anna and Anna Anna Anna Anna Anna Anna			Form	990-PF	

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Р	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	, see instructions)
1.	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	15,847,408.
b	Average of monthly cash balances	1b	464,237.
C	Fair market value of all other assets	1c	55,736,810.
d	Total (add lines 1a, b, and c)	1d	72,048,455.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	10,319,346.
3	Subtract line 2 from line 1d	3	61,729,109.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	925,937.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	60,803,172.
6	Minimum investment return. Enter 5% of line 5	6	3,040,159.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	d certain	
	foreign organizations, check here 🕨 🔛 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	3,040,159.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	<u>25,369.</u>
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,014,790.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	3,014,790.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	3,014,790.
P	art XII Qualifying Distributions (see instructions)	_	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,584,181.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	1,584,181.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,584,181.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years.	qualifies fo	or the section

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Part XIII Undistributed Income (see instructions)

			- 1	
	(a) , Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,		10013 \$1107 10 20 10	2010	
line 7				3,014,790.
2 Undistributed income, if any, as of the end of 2019				3,022,130.
a Enter amount for 2018 only			1,008,615.	
b Total for prior years:			1,000,013.	
b Total for prior yours.		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014		Ì		
b From 2015				
c From 2016				
d From 2017				
e From 2018				
f Total of lines 3a through e	0.		-	
4 Qualifying distributions for 2019 from				
Part XII, line 4: ►\$ 1,584,181.				
a Applied to 2018, but not more than line 2a		i	1,008,615.	
b Applied to undistributed income of prior			1,000,013.	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2019 distributable amount	- 0.			575,566.
e Remaining amount distributed out of corpus	0.			37373001
5 Excess distributions carryover applied to 2019				
(If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed		0.		<u>.</u>
d Subtract line 6c from line 6b. Taxable				
amount - see instructions ,		0.		
e Undistributed income for 2018. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				2,439,224.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2014	_			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017]		
d Excess from 2018				
e Excess from 2019				

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Form 990-PF (2019) CARRICO Part XIV Private Operating F	FAMILY FOU	INDATION	(II-A guestion 9)	M/A	237162 Page 10
1 a If the foundation has received a ruling of				N/A	
foundation, and the ruling is effective fo					
b Check box to indicate whether the foun			Lin section	4942(J)(3) or 49	942())(5)
2 a Enter the lesser of the adjusted net	Tax year	Tournation described	Prior 3 years	1 4342())(3) (1 4.	T
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for	(-,	(-,	(0)	(-)	1
each year listed			 	 	 _
b 85% of line 2a				 	
c Qualifying distributions from Part XII,					
line 4, for each year listed			 	 	
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities	\		 		-
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the			 	 -	
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets				 	
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter			 \		
2/3 of minimum investment return					
shown in Part X, line 6, for each year					
listed c "Support" alternative test - enter:		 	 	 	
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties) (2) Support from general public		 	 	 	
and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization (4) Gross investment income			 		
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or m	ore in assets
at any time during			ii tiic iodiidation	1 11aa 40,000 01 111	ore in assets
1 Information Regarding Foundation					
a List any managers of the foundation wi	_	than 2% of the total cor	ntributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed					oo or any tan
None					
b List any managers of the foundation w	ho own 10% or more of th	ne stock of a corporation	(or an equally large portion	on of the ownership of a p	artnership or
other entity) of which the foundation ha	as a 10% or greater intere	st.			
None					
2 Information Regarding Contribute					
Check here 🕨 📖 if the foundation					uests for funds. If
the foundation makes gifts, grants, etc.	, to individuals or organiz	ations under other cond	itions, complete items 2a,	b, c, and d.	
a The name, address, and telephone num			ications should be addres	sed:	
MAGNA CARRICO LOWMAN					
839 ALDER CREEK DR,					
b The form in which applications should		=			
FOUNDATION APPLICAT	ION MUST BE	SUBMITTED	BY APPLICANT	rs	
c Any submission deadlines:					
NONE				all and and	
d Any restrictions or limitations on award	is, such as by geographic	ai areas, charitable field	s, kinds of institutions, or	otner factors:	
NONE					
022801 12 17 10		· · · · · · · · · · · · · · · · · · ·			Form 990-PF (2010)

46-1237162 Page 11 Form 990-PF (2019) CARRICO FAMILY FOUNDATION Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year ACCESS FOOD SHARE NON PROFIT GENERAL FUND P O BOX 4666 MEDFORD OR 97501 7,500. AMERICAN CANCER SOCIETY NON PROFIT GENERAL FUND 0330 SW CURRY STREET PORTLAND, OR 97239 7,500. ALS ASSOC OF OR AND SW WA NON PROFIT GENERAL FUND 700 NE MULTNOMAH ST 7,000. PORTLAND, OR 97232 BOYS & GIRLS CLUB OF THE RV NON PROFIT GENERAL FUND 203 SE 9TH STREET 5,000. GRANTS PASS, OR 97526 CONSUMER CREDIT COUNSELING SVC OF NON PROFIT GENERAL FUND SOUTHERN OR 820 CRATER LAKE AVE MEDFORD OR 97504 3 500 See continuation sheet(s) **▶** 3a 1 584 181 Total b Approved for future payment None

▶ 3b

Tota!

3 Grants and Contributions Paid During the Y				
Recipient Name and address (home or business)	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	00.11.150.10.11	
•				
ASHLAND YMCA 540 YMCA WAY		NON PROFIT	GENERAL FUND	ļ
ASHLAND OR 97520		<u> </u>		10,00
BIOLA UNIVERSITY 13800 BIOLA AVE		NON PROFIT	GENERAL FUND	
LA MIRANDA CA 90639		į		5,50
BRITT FESTIVALS PO BOX 1124	,	NON PROFIT	GENERAL FUND	
MEDFORD, OR 97501		_		10_00
DOGS FOR BETTER LIVES 10175 WHEELER RD		NON PROFIT	GENERAL FUND	
CENTRAL POINT OR 97502				6,00
CASA OF JACKSON COUNTY 409 N FRONT ST		NON PROFIT	GENERAL FUND	
MEDFORD OR 97501				20,00
CHILDRENS ADVOCACY CENTER OF JACKSON		NON PROFIT	GENERAL FUND	
COUNTY				
816 w 10TH ST MEDFORD, OR 97501				20,00
COLLEGE DREAMS		NON PROFIT	GENERAL FUND	
PO BOX 1407 GRANTS PASS OR 97528				10,00
			<u> </u>	
COMMUNITY WORKS		NON PROFIT	GENERAL FUND	
2594 E BARNETT RD SUITE C MEDFORD OR 97504				10.00
•				
CRATERIAN PERFORMANCES	,	NON PROFIT	GENERAL FUND	1
23 S CENTRAL AVE MEDFORD OR 97501				10,00
MIDEOLD, OK 37301	 	 		10,00
FAITH HOUSE		NON PROFIT	GENERAL FUND	
220 NW A STREET		1		12.00
GRANTS PASS OR 97526 Total from continuation sheets	<u></u>			12,00 1,553,68

CARRICO FAMILY FOUNDATION

3 Grants and Contributions Paid During th				
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	
GUANACASTE DRY FOREST CONSERVATION		NON PROFIT	GENERAL FUND	ĺ
FUND 4780 MAIN ROAD				}
HUNTINGTON, VT 05462	-			30.00
, v2 00 102				30,00
WINNERS WATER A MARGANAN				
HEARTS WITH A MISSION 711 MEDFORD CENTER #334		NON PROFIT	GENERAL FUND	
MEDFORD OR 97504		Ì		25,00
HOPE EQUESTIAN		NON PROFIT	GENERAL FUND	
PO BOX 396		NON PROPER	SENERAD FOND	
EAGLE POINT OR 97524				20.00
GIRL SCOUTS OF OR & SW WA		NON PROFIT	GENERAL FUND	
9620 S BARBUR BLVD				
PORTLAND OR 97219				5.00
		}		
JPR FOUNDATION		NON PROFIT	GENERAL FUND	
1250 SISKIYOU BLVD				1
ASHLAND, OR 97520			 	10,00
GOSPEL RESCUE MISSION		NON PROFIT	GENERAL FUND	
125 w Jackson st		İ.		ļ
MEDFORD, OR 97501		<u> </u>	 	10,00
		l		
KID TIME		NON PROFIT	GENERAL FUND	
106 N CENTRAL AVE	,			
MEDFORD, OR 97501	- 	 		250,00
	,			
KIDS UNLIMITED		NON PROFIT	GENERAL FUND	
821 N RIVERSIDE AVE				
MEDFORD, OR 97501		 		200,00
GRANDMAS 2 GO		NON PROFIT	GENERAL FUND	
140 S HOLLY ST, STE 1291 MEDFORD, OR 97501				10,00
MIDIONO, ON FISOL		 	 	10,00
HOPE RANCH YOUTH MINISTRIES PO BOX 595		NON PROFIT	GENERAL FUND	
SPRINGFIELD OR 97477				25,00
Total from continuation sheets				

Part XV Supplementary Information 3 Grants and Contributions Paid During the		<u> </u>		
Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	,	
LIVING OPPORTUNITIES		NON PROFIT	GENERAL FUND	
PO BOX 1105	•			
MEDFORD, OR 97501				7,000
MAKE A WISH FOUNDATION		NON PROFIT	GENERAL FUND	
2000 SW 1ST AVE #410				
PORTLAND, OR 97201				7,500
MASLOW PROJECT		NON PROFIT	GENERAL FUND	
PO BOX 999				
MEDFORD, OR 97501				10,000
MEDICAL TEAMS INTERNATIONAL		NON PROFIT	GENERAL FUND	
14150 SW MILTON COURT				
TIGARD OR 97224		 		7,000
MT ASHLAND ASSOCIATION		NON PROFIT	GENERAL FUND	
PO BOX 220 ASHLAND, OR 97520				15,000
OPTIONS FOR HELPING RESIDENTS OF		NON PROFIT	GENERAL FUND	
ASHLAND PO BOX 1133				
ASHLAND OR 97520				1,000
OREGON SHAKESPEARE FESTIVAL		NON PROFIT	GENERAL FUND	
15 S PIONEER ST ASHLAND, OR 97520				10,000
PATHWAY ENTERPRISES		NON PROFIT	GENERAL FUND	
1600 SKY PARK DRIVE #101				15 000
MEDFORD, OR 97504			,	15,000
PLANNED PARENTHOOD		NON PROFIT	GENERAL FUND	
125 S CENTRAL AVE #210				}
MEDFORD OR 97501		 	+	4,000
PROVIDENCE COMMUNITY HEALTH		NON PROFIT	GENERAL FUND	
FOUNDATION				
940 ROYAL AVE, SUITE 410 MEDFORD, OR 97504				25,000
Total from continuation sheets				25,000

3 Grants and Contributions Paid During the Y				
Recipient Name and address (home or husiness)	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	`	
REDEMPTION RIDGE		NON PROFIT	GENERAL FUND	
711 MEDFORD CENTER #264 MEDFORD OR 97504				10,00
ROC FOOD PANTRY		NON PROFIT	GENERAL FUND	
564 SW FOUNDRY'ST				
GRANTS PASS OR 97526				5,00
DOCUE COLOGISTIMY UPAT MU		NON DROETE	CONCLAI SIND	
ROGUE COMMUNITY HEALTH		NON PROFIT	GENERAL FUND	
MEDFORD OR 97504		<u> </u>	-	5,00
ROGUE GALLERY & ART CENTER		NON PROFIT	GENERAL FUND	
40 S BARTLETT ST MEDFORD OR 97501				2,00
ROGUE RETREAT		NON PROFIT	GENERAL FUND	
711 E MAIN ST SUITE 25				
MEDFORD, OR 97504		<u> </u>	-	25,00
ROGUE VALLEY ADVENTIST ACADEMY		NON PROFIT	GENERAL FUND	
3675 SOUTH STAGE RD				
MEDFORD OR 97501				15,00
ROGUE VALLEY FARM TO SCHOOL PO BOX 898		NON PROFIT	GENERAL FUND	
ASHLAND, OR 97520				5,00
ROGUE VALLEY YMCA	Ì	NON PROFIT	GENERAL FUND	
522 W 6TH ST MEDFORD, OR 97501				5_00
ROGUE WORLD MUSIC		NON PROFIT	GENERAL FUND	
2305-C ASHLAND ST #421				
ASHLAND OR 97520			 	2,50
ROOTS AND WINGS COMMUNITY PRESCHOOL		NON PROFIT	GENERAL FUND	
3703 INTERNATIONAL WAY STE B		HON FROFIT	SENERAL FUND	
MEDFORD, OR 97504	<u></u>	1		7,50

CARRICO FAMILY FOUNDATION

3 Grants and Contributions Paid During the Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	Of Substantial Contributor	recipient	 	
VACKSONVILLE COMMUNITY CENTER		NON PROFIT	GENERAL FUND	
160 E MAIN ST		NON PROPII	GENERAL FOND	
JACKSONVILLE, OR 97530				3,00
SACRED HEART CATHOLIC SCHOOL		NON PROFIT	GENERAL FUND	
431 S IVY STREET				
MEDFORD, OR 97501			 	5,00
MID ROGUE FOUNDATION		NON PROFIT	GENERAL FUND	ļ
777 NE 7TH ST				
GRANTS PASS, OR 97526				10,00
	,			
ROC RECOVERY CENTER 213 SOUTH FIR ST		NON PROFIT	GENERAL FUND	
MEDFORD OR 97501				5.00
ROGUE ROWING		NON PROFIT	GENERAL FUND	
175 EMIGRANT LAKE RD				
ASHLAND, OR 97520		ļ		15,50
			`_	
SET FREE CHRISTIAN FELLOWSHIP		NON PROFIT	GENERAL FUND	
1032 W MAIN STREET				
MEDFORD, OR 97501	-		 	10,00
ROGUE VALLEY SYMPHONY		NON PROFIT	GENERAL FUND	
1875 HWY 99 N, STE 7 ASHLAND, OR 97520				10,00
SMART READING PROGRAM		NON PROFIT	GENERAL FUND	
670 SUPERIOR CT STE 108				(
MEDFORD OR 97504	_		<u> </u>	10.00
SOUTHERN OREGON FRIENDS OF HOSPICE		NON PROFIT	GENERAL FUND	
217 S MODOC AVE		1		
MEDFORD, OR 97504	 	 		141,83
ST JOHN THE BAPTIST SCHOOL 10956 SE 25TH AVE		NON PROFIT	GENERAL FUND	
PORTLAND OR 97222				25,00
Total from continuation sheets		<u> </u>		1

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amoust
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
,				
ST ANNE CATHOLIC SCHOOL		NON PROFIT	GENERAL FUND	
131 NE 10TH STREET				
GRANTS PASS, OR 97526				20,00
T MARY'S FUND		NON PROFIT	GENERAL FUND	
316 BLACK OAK DRIVE				
EDFORD OR 97504		 		200,00
ST MARK'S EPISCOPAL CHURCH		NON PROFIT	GENERAL FUND	
L40 N OAKDALE AVE				
MEDFORD OR 97501				7,00
ST VINCENT DE PAUL MEDFORD		NON PROFIT	GENERAL FUND	
PO BOX 1663				
MEDFORD OR 97501		 		10,00
SALVATION ARMY		NON PROFIT	GENERAL FUND	
304 BEATTY ST				
MEDFORD OR 97501	-	 	 	15.00
TREASURE VALLEY CHILDREN'S RELIEF		NON PROFIT	GENERAL FUND	
NURSERY				
780 SE 6TH ST ONTARIO OR 97914				9.00
YOUTH 71FIVE MINISTRIES		NON PROFIT	GENERAL FUND	
529 EDWARDS ST				
MEDFORD, OR 97501				100,00
UNITED WAY OF JACKSON COUNTY				
50 HAWTHORNE WAY		NON PROFIT	GENERAL FUND	
MEDFORD, OR 97501				25,00
WALKING TALL SOUTHERN OREGON		NON PROFIT	GENERAL FUND	
PO BOX 3789 CENTRAL POINT OR 97502				15,35
WILDERNESS TRAILS INC		NON PROFIT	GENERAL FUND	
PO BOX 4655		1		
MEDFORD OR 97501 Total from continuation sheets		<u> </u>		10_00

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Ye				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
	- "			
•		ļ		
WOMEN'S CRISIS SUPPORT TEAM 560 NE F ST, STE A430		NON PROFIT	GENERAL FUND	
GRANTS PASS, OR 97526				15,000.
YOUTH SYMPHONY OF SOUTHERN OREGON		NON PROFIT	GENERAL FUND	
PO BOX 4291 MEDFORD OR 97501				10,000.
MEDIFORD, OR 37301				10,000.
		 -	 	
		1		
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	1			
			ļ	
 	-	ļ	· ·	
	· · · · · · · · · · · · · · · · · · ·			
	<u> </u>			
		[
Total from continuation sheets				

Part XVI-A Analysis of Income-Producing Activ

Enter gross amounts unless otherwise indicated.	Unrelati	ed business income		ded by section 512, 513, or 514	(e)
, •	(a)	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
		 	1000	 	
<u></u>	-		ł		
b	-		├		
C	-		 		<u> </u>
d	-		<u> </u>		
e			<u> </u>		
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments	•				
4 Dividends and interest from securities			14	496,690.	
			1 4	430,030.	
5 Net rental income or (loss) from real estate:	F31130	1 100 747	<u> </u>		
a Debt-financed property	531120	1,189,747.	<u> </u>		
b Not debt-financed property			<u> </u>		
6 Net rental income or (loss) from personal					
property			<u> </u>		
7 Other investment income					<u> </u>
8 Gain or (loss) from sales of assets other					
than inventory	ļ		18	-96,963.	
9 Net income or (loss) from special events			1		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	<u> </u>		 		
, <u>a</u>			 		
b	1		├		
c	1		 		
d	-		ļ		
e		4 4 5 5 5 5 5	<u> </u>		
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>	1,189,747.	<u> </u>	399,727.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	1,589,474.
(See worksheet in line 13 instructions to verify calculations.)	<u></u>				
Part XVI-B Relationship of Activities	to the Ace	omplishment of Ex	omn.	t Dumonos	
rait AVI-b Relationship of Activities	to the Acc	ompusiment of Ex	emp	t Purposes	
Line No Explain below how each activity for which inc	ome is reported	in column (e) of Part XVI-A	contrit	outed importantly to the accom	notishment of
the foundation's exempt purposes (other tha				rated importantly to the about	ipilotition of
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
					
					
					
					
					
		·			
					
					

Form **990-PF** (2019)

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Form 99			CO FAMILY			·_ ·	46-12			age 13
Part .	XVII			nsfers to a	and Transactions a	ınd Relationshi	ps With Nonch	aritable	•	
		Exempt Organ		of the following			- F04(a)		Yes	No
-					ng with any other organizati g to political organizations?		1 50 1(0)	-	163	140
-		from the reporting found			-					
	Cash	from the reporting round	addit to a nononana	abio exempt of	gamzation or.			1a(1)		х
٠,	Other	assets						1a(2)		X
		sactions;						15157		
(1)	Sales	of assets to a noncharita	able exempt organiza	ation				16(1)		X
(2)	Purch	ases of assets from a no	ncharitable exempt	organization				1b(2)		X
(3)	Renta	l of facilities, equipment,	or other assets					1b(3)		X
(4)) Reimi	oursement arrangements	;					1b(4)		X
	•	or loan guarantees						1b(5)		X
		rmance of services or me						1b(6)		X
	-	facilities, equipment, ma					-14	<u> 1c</u>		X
					edule. Column (b) should al red less than fair market vali				seis,	
) the value of the goods,				be in any transaction o	Sharing arrangement	i, 3110W III		
(a) Line n		(b) Amount involved			e exempt organization	(d) Description of	f transfers, transactions, ar	nd sharing ar	rangeme	ents
				N/A						
	_]									
			Ļ <u> </u>			<u> </u>				
			 							
	+		 				 			
			 			 				
							·			
	_									
			<u> </u>	_						
						 				
0. 10.4	<u> </u>									
		501(c) (other than section			or more tax-exempt organ	izations described		Yes	v	7 No.
		mplete the following sch		ection 527.					<u> </u>	7 140
	100, 00	(a) Name of org			(b) Type of organization	(c)	Description of relation	nship		
		N/A								
				_						
	Linder	nenalties of nersun. I declare	that I have examined th	us return include	ng accompanying schedules and	statements and to the he	est of my knowledge —			
Sign					in taxpayer) is based on all inform			May the IRS return with the shown below	discuss f e prepar	this er
Here		Mar Car	11.60	-	. 1/15/21	PRESIDE		hown below		str No
	Sign	ature of officer or trustee	<u> </u>		[Date_]	Title	<u>***</u> L	LAL Tes		
	,	Print/Type preparer's n		Preparer's s			heck if PTII	V		
	•			11/1	and.	1/14/21 5	elf- employed			
Paid		MONTE WILL		11/1	wi vive			<u>00033</u>		
Prep		Firm's name ► ISI	ER MEDFOR	RD, LLC			Firm's EIN 🕨 20 –	47493	63	
Use (Unly	Franks and the Company								
		Fırm's address ▶ 83	39 ALDER (CREEK D	OR•					

MEDFORD, OR 97504

Phone no. (541)779-7641 Form **990-PF** (2019)

Form 990-PF	Dividends	and Inter	est from Se	curities	Statement 1
Source	Gross Amount	Capital Gains Dividend	Revenue		
VARIOUS	496,690.		0. 496,6	496,69	90.
To Part I, line 4	496,690.		496,6	496,69	90.
Form 990-PF		Rental In	come		Statement 2
Kind and Location o	f Property			Activity Number	Gross Rental Income
VARIOUS				1	1,644,438.
Total to Form 990-P	F, Part I,	line 5a			1,644,438.
	·				
Form 990-PF		Rental Exp	enses		Statement 3
Description			ctivity Number	Amount	Total
Depreciation	- Sul	btotal -	1	454,691.	454,691.
Total rental expens	es				454,691.
Net rental Income t	o Form 990-1	PF, Part I	, line 5b		1,189,747.
Form 990-PF		Legal	Fees		Statement 4
Description		(a) Expenses Per Books	(b) Net Investment Income		
LEGAL		2,662.).	0.
To Fm 990-PF, Pg 1,	ln 16a	2,662.			0.
	==				

Form 990-PF	Accounti	ng Fees	Statement 5		
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
ACCOUNTING	30,445.	0.		0.	
To Form 990-PF, Pg 1, ln 16b	30,445.	0.		0.	
Form 990-PF (Other Profes	sional Fees	S	tatement 6	
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
FINANCIAL SERVICES OUTSIDE CONTRACTORS	136,500. 2,274.	136,500.		0.	
To Form 990-PF, Pg 1, ln 16c	138,774.	136,500.		0.	
Form 990-PF	Tax	es	S	tatement 7	
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
PROPERTY EXCISE PAYROLL	178,551. 3,215. 6,770.	178,551. 3,215. 0.		0. 0. 0.	
To Form 990-PF, Pg 1, ln 18	188,536.	181,766.		0.	

Form 990-PF	Other E	xpenses	_		Statement	8
	(a) Expenses Per Books	(b) Net Inve		(c) Adjusted Net Incom		
POSTAGE BANK FEES INSURANCE RENTAL EXPENSES OTHER COSTS	106. 42. 83,201. 271,279. 99,620.	99,	0. 0. 0. 620.			0. 0. 0.
To Form 990-PF, Pg 1, ln 23	454,248.	99,	620.			0.
Form 990-PF	Corporat	e Stock	-		Statement	9
Description			Вос	ok Value	Fair Marke Value	t
			16	5,524,506.	16,524,5	06.
Total to Form 990-PF, Part II,	line 10b		16	5,524,506.	16,524,5	06.
Form 990-PF	Other Inv	estments			Statement	10
Description		luation ethod	Вос	ok Value	Fair Marke Value	t
		COST COST		3,642,095. 1,103,397.	43,336,5	
Total to Form 990-PF, Part II,	line 13		14	1,745,492.	44,439,9	91.
Form 990-PF	Other	Assets			Statement	11
Description	_	ning of k Value		of Year ok Value	Fair Marke Value	t
ESCROW DEPOSIT VEHICLES		65,000. 45,877.		65,000. 45,877.	65,0 45,8	
To Form 990-PF, Part II, line	15	110,877.		110,877.	110,8	77.
						