DLN: 93493303021709 OMB No 1545-0047 **Return of Organization Exempt From Income Tax** Form **990** 2018 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Department of the

 $\blacktriangleright$  Go to  $\underline{www.irs.gov/Form990}$  for instructions and the latest information.

Open to Public

nterna	l Reven	nue Service							- IIIopostioii
A Fo	or the	<b>2019</b> c	alendar year, or tax year begini	ning 01-01-2018 , and endi	ng 12-31-	2018	•		
		plicable	C Name of organization OCF Joseph E Weston Public Foundati	ion			D Employer	ıdentıfı	ication number
		hange	Z Tractan i done i candado				93-10463	399	
	me cha tial reti	-	Doing business as						
		ui ii i/terminated							
		return	Number and street (or P O box if ma	all is not delivered to street address)	Room/suite	;	E Telephone	number	
□ Арі	plicatio	n pending	1221 SW Yamhıll Street 100		<u> </u>		(503) 227	7-6846	
			City or town, state or province, count Portland, OR 972052108	try, and ZIP or foreign postal code					
			i ordana, OK 9/2032106				<b>G</b> Gross rece	npts \$ 50	0,686,098
			F Name and address of principal	officer		H(a) Is this	a group retu	ırn for	
			Joseph E Weston 1221 SW Yamhıll Street 100				dınates?		□Yes ☑No
			Portland, OR 972052108			H(b) Are al	l subordinates	5	☐ Yes ☐No
[ Tax	k-exem	npt status	<b>☑</b> 501(c)(3) □ 501(c)( ) <b>◄</b> (1	nsert no )	] 527		," attach a lis	t (see	instructions)
J W	ebsite	e:▶ N/A				H(c) Group	exemption n	umber	<b>•</b>
<b>K</b> Forn	n of or	ganızatıon	✓ Corporation ☐ Trust ☐ Assoc	ciation 🔲 Other 🕨		Year of forma	ation 1991	<b>4</b> State (	of legal domicile OR
Pa	irt I		mary						
			scribe the organization's mission or loseph E Weston Public Foundation		na organiza	ation of The (	Oregon Comm	ıunıtv F	oundation (OCF)
9			lation makes grants that further th						
Ĕ	-								
Ē	=								
Š	,	Check thi	ıs box ▶ 🔲 ıf the organization disc	continued its operations or dispo	nsed of mo	re than 25%	of its net ass	sets	
<u>ح</u>			of voting members of the governing				. 01 110 1101 451	" јз	9
Activities & Governance	4	Number o	of independent voting members of	the governing body (Part VI, lin	e 1b) .			4	5
Age	5	Total nun	mber of individuals employed in cale	endar year 2018 (Part V, line 2a	a)			5	0
<b>(</b>	6	Total nun	mber of volunteers (estimate if nece	essary)				6	10
Ř	7a -	Total unr	elated business revenue from Part	VIII, column (C), line 12				7a	3,074,333
	l		lated business taxable income from	* **				7b	0
				·		Pri	or Year	$\top$	Current Year
_	8	Contribut	tions and grants (Part VIII, line 1h)				63,188,97	,1	40,085,722
Rəvenue			service revenue (Part VIII, line 2g)					+	0
ōΛċ		_	ent income (Part VIII, column (A), lii				-371,72	20	211,907
Œ			venue (Part VIII, column (A), lines 5				4,737,53		5,398,469
			enue—add lines 8 through 11 (mus		ne 12)		67,554,78		45,696,098
			nd sımılar amounts paid (Part IX, co				7,757,33		10,329,846
			paid to or for members (Part IX, co	, ,,			.,,	+-	0
٠,			other compensation, employee ber	, ,,				+-	0
S.			onal fundraising fees (Part IX, colum	, , , , , , , , , , , , , , , , , , , ,	•			+-	0
Expenses	l .		raising expenses (Part IX, column (D), li	, ,,	•			+-	
Ŧ			penses (Part IX, column (A), lines 1	· -			2,827,37	,,	2,458,373
			penses Add lines 13–17 (must equa	•	•		10,584,70		12,788,219
			less expenses Subtract line 18 fro				56,970,07	_	32,907,879
ي	19	Revenue	less expenses Subtract line 10 110		•	Reginning	of Current Yea		End of Year
Net Assets or Fund Balances									0 001
SS 6 3afa	20	Total ass	ets (Part X, line 16)				374,790,04	17	438,421,859
Z Z	21	Total liab	ollities (Part X, line 26)				606,96	57	514,156
ŽΞ	22	Net asset	ts or fund balances Subtract line 2	1 from line 20			374,183,08	30	437,907,703
Pa	rt II	Sign	ature Block						
Jnder	pena	lties of p	erjury, I declare that I have exami	ned this return, including accom	panying s	chedules and	statements,	and to	the best of my
	eage nowle		ef, it is true, correct, and complete	Declaration of preparer (other	than office	r) is based o	n all informat	ION OF W	vnich preparer nas
,		l k							
		Signati	* ure of officer			201 Date	9-10-30		
Sign		Josephan	are or officer			Date	e .		
Here	:		eth A Carey Assistant Secretary Treasure	r					
		17	or print name and title				<u> </u>		
	_	P	Print/Type preparer's name	Preparer's signature	Dat	ce Che		T <b>N</b> 10756195	5
Paic		F	Grm's name CROWELLB	1			-employed		
-	oare	:	Firm's name			Firm	n's EIN ► 35-09	,Z100U	
Use	Onl	iy ြ	Firm's address ▶ 225 West Wacker Drive	Suite 2600		Pho	ne no (312) 89	9-7000	
			Chicago, IL 606061224	<u> </u>					
Mav t	he IR	S discuss	this return with the preparer show	n above? (see instructions)				✓ v	es 🗆 No
•			duction Act Notice, see the sepa		- • '	Cat No 1	1282Y		Form <b>990</b> (2018)
_				-			•		

Form	990 (2018)						Page 2
Pa	rt III Statemer	nt of Program Servi	ce Accomplis	hments			
	Check if Sci	hedule O contains a resp	onse or note to	any line in this Part III .			
1		e organization's mission					
					n of The Oregon Community Found Oregonians through the power of pl		
2	Did the organization	on undertake any significa	ant program ser	vices during the year wh	nich were not listed on		
	the prior Form 990	or 990-EZ?				□Yes ☑N	10
	If "Yes," describe t	these new services on Sc	hedule O				
3	Did the organization	on cease conducting, or n	nake significant	changes in how it condu	icts, any program		
		these changes on Schedu				☐ Yes 🗹	No
4	Describe the organ Section 501(c)(3)	nızatıon's program service	e accomplishmei ons are required	to report the amount o	largest program services, as measu f grants and allocations to others, ti		
4a	(Code	) (Expenses \$	10.442.536	including grants of \$	10,329,846 ) (Revenue \$	6,500 )	
	See Additional Data	, (	,,		,,, (	-,,	
4b	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)	
4c	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)	
4d	Other program ser (Expenses \$	rvices (Describe in Sched inc	ule O ) luding grants of	\$	) (Revenue \$	)	
4e	Total program se	ervice expenses >	10.442.5	36			

Form 990 (2018) Page 3 **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Yes 1 2 Yes Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🛸 . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates No 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 4 No Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? No 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Nο 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II . . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets? No 8 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation Nο 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 Yes permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 . . . . . . . . If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? Yes 11a Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total Nο assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII . . . . . . . . . . . . 11b Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its Nο 11c Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported Yes 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Nο Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f Nο the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 12a Did the organization obtain separate, independent audited financial statements for the tax year? 12a Nο b Was the organization included in consolidated, independent audited financial statements for the tax year? 12b Yes If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏 Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E 13 Nο 14a Did the organization maintain an office, employees, or agents outside of the United States? . . . . 14a No **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments 14b Nο Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions) . . . .

lines 1c and 8a? If "Yes," complete Schedule G, Part II

**20a** Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H* . . .

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . . . . . . . . . . . . . .

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . . .

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

Nο

No

Nο

No

Nο

Nο

15

16

17

18

19

20a

20b

21

22

Yes

Yes

Form	990 (2018)			Page 4
Par	Checklist of Required Schedules (continued)			
			Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.  Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🐒	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Check if Schedule O contains a response or note to any line in this Part V  $\,$  .

Statements Regarding Other IRS Filings and Tax Compliance

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

No

No

37

38

2

0

1a

Yes

Yes

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37

38

Part V

Note. See the instructions for additional information the organization must report on Schedule O 13a Enter the amount of reserves the organization is required to maintain by the states in 13b which the organization is licensed to issue qualified health plans . . . . 13c

14a Did the organization receive any payments for indoor tanning services during the tax year? . . . . .

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization 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? If "Yes," see instructions and file Form 4720, Schedule N . . . . . .

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

No

14a

14b

15

orm 9	990 (2018)			Page <b>6</b>
Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions  Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to	lınes 🗹
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year  1a  9			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	•		
b	Enter the number of voting members included in line 1a, above, who are independent  1b  5			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
	Did the organization delegate control over management duties customarily performed by or under the direct supervisior of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? •	5		No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenu	<u>e Code</u>		B1 -
	Did the erganization have legal chanters branches or affiliates?	10a	Yes	No
	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10a		No
	and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the	10Ь		
	form?	11a	Yes	
	· · · · · · · · · · · · · · · · · · ·	12-	Vaa	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
	Did the organization have a written whistleblower policy?	13		No
	Did the organization have a written document retention and destruction policy?	14		No
	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a		No
	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	ction C. Disclosure			
L7	List the States with which a copy of this Form 990 is required to be filed▶  CA , OR			
	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			

/E

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, Part VII

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII . Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax

- year List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount
- of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid • List all of the organization's current key employees, if any See instructions for definition of "key employee"

who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the

• List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)

(D)

- organization and any related organizations • List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations • List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
- organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest

compensated employees, and former such persons Light Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related		ne bo	οχ, ι n of or/t	t che inles ficer rust	ss pers and a	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099*NI3C)	MISC)	related organizations
(1) JOSEPH E WESTON	1 0	×		×				0	0	0
PRESIDENT								Ü	Ů	
(2) DAVID RIANDA	1 0	×		×				0	0	0
VICE PRESIDENT				Ĺ				0	Ŭ	
(3) KEITH VERNON	1 0	×		×				0	0	0
SECRETARY/TREASURER		^						O	0	
(4) JEFFREY WESTON	1 0	×						0	0	0
TRUSTEE		^						0	0	0
(5) SUE MILLER	1 0	×						0	0	0
TRUSTEE		_ ^						0	0	U
(6) TIFFANY WESTON	1 0	×						0	0	0
TRUSTEE		^						0	0	0
(7) GEORGE PASSADORE	1 0	×						0	0	0
TRUSTEE		_ ^						0	0	0
(8) TOM FINK	1 0	×						0	0	0
TRUSTEE		^						0	0	0
(9) JAMES MEYER	1 0	×						0	0	0
TRUSTEE		^						0	0	0
(10) MAX WILLIAMS	1 0	×						0	260, 202	94.630
TRUSTEE	40 0	^						0	360,282	84,639
(11) Greg Chaille	1 0			×				0	o	0
TRUSTEE EMERITUS				Ĺ				0	o d	
(12) ELIZABETH CAREY	1 0			×				0	221,413	66,583
ASST SECRETARY/TREASURER	40 0			<u> </u>				0	221,413	00,363
										Form <b>990</b> (2018)
										101111 990 (2010)

Form 990 (2018)										Page <b>8</b>
Part VII Section A. Officers, Direct	tors, Trustees	s, Key I	Empl	loye	es,	and I	High	nest Compensate	d Employees (co	ntinued)
<b>(A)</b> Name and Title	(B) Average hours per week (list any hours		ne b	ox, ι n of	t che inles ficer	s pers	on	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	2/1033-MISC)	organization and related organizations

		•		ed		
1h Sub-Total				-		

1b 9	Sub-Total						<b>&gt;</b>								
c 1	T <mark>otal from continuation sheets to</mark> Pa	rt VII <b>, Section</b>	Α				▶								
d 1	otal (add lines 1b and 1c)						▶			0		58:	1,695		151,222
2	Total number of individuals (including of reportable compensation from the c			e liste	ed al	bove	e) who	rece	eived mo	re than	\$100,0	00			
														Yes	No
3	Did the organization list any <b>former</b> oline 1a? <i>If "Yes," complete Schedule J</i>												3		No

c 1	Gub-Total	5		151,222
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 0	•		
			Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for	4	res	
-	Bid any person listed on line 14 receive of accordence compensation from any difference or gamzadion of many data			

_	of reportable compensation from the organization ▶ 0			
			Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Vos	
	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for	4	Yes	
	services rendered to the organization? If "Yes." complete Schedule 1 for such person	l _		l

Se				
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
	line 1a? If "Yes," complete Schedule J for such individual	3		No

3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

	organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes						
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person									
Section B. Independent Contractors									
1	1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation								

	ındıvıdual	4	Yes						
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No					
Section B. Independent Contractors									
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of contractors.	npens	ation						

	services rendered to the organization? If "Yes," complete Schedule J for such person		5	No			
Se	Section B. Independent Contractors						
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year						
	(A)	(B)		(C)			

S	Section B. Independent Contractors								
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year								
	(A) Name and business address	(B) Description of services	(C) Compensation						

Form **990** (2018)

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 0

Part	VIII Statement of	Pevenue						Page <b>9</b>
rail			sponse or note to	any line in this Par	t VIII .			🗆
	0.000.00	9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	550130 01 11000 10	(A) Total revenu		(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1a Federated campaign	ns 1	<u>.                                     </u>			revenue		512 - 514
nts nts	<b>b</b> Membership dues		i					
irai 10u	c Fundraising events							
S, C An	d Related organizatio							
<u>a</u> ë	e Government grants (co			_				
ns,	f All other contributions,		<u>-  </u>	_				
itio er S	and similar amounts no above	ot included 1	<b>f</b> 40,085,7	722				
뜔	g Noncash contribution							
Contributions, Gifts, Grants and Other Similar Amounts			40,085,722					
<u> </u>	h Total. Add lines 1a-	.11	•	40,085,	722			
E E	2a		Busi	ness Code				
2								
Program Service Revenue	b ———							
ě	d ———							
S	e							
gra	<b>f</b> All other program se	rvice revenue				0	0	0 0
ĕ	<b>9Total.</b> Add lines 2a-2	f	<b>&gt;</b>	0				
	3 Investment income (in		s, interest, and ot	ther	1,907			1,907
	similar amounts) . 4 Income from investme		t bond proceeds	•				<u>'</u>
				<b>▶</b>				
		(ı) Real	(II) Person	al				
	<b>6a</b> Gross rents	5,391,9	969					
	<b>b</b> Less rental expenses							
	c Rental income or	5,391,9	969	0				
	(loss)	3,331,.	,,,,,					
	<b>d</b> Net rental income or			<b>P</b>	91,969		3,074,333	2,317,636
	<b>7a</b> Gross amount	(ı) Securities	(II) Other					
	from sales of assets other		5,20	00,000				
	than inventory							
	<b>b</b> Less cost or other basis and		4,99	0,000				
	sales expenses  C Gain or (loss)		0 21	0,000				
	<b>d</b> Net gain or (loss)				10,000			210,000
	8a Gross income from fu		; <u> </u>					
nue	(not including \$ contributions reporte	of d on line 1c)						
₹ •	See Part IV, line 18		а					
ă,	<ul><li>b Less direct expenses</li><li>c Net income or (loss)</li></ul>		b					
Other Revenue	<b>9a</b> Gross income from g			<u>•</u>				
0	See Part IV, line 19		a					
	<b>b</b> Less direct expense:	s	ь					
	c Net income or (loss)			<b>▶</b>				
	10aGross sales of invent returns and allowand	ory, less						
	returns and anowand	.es	a					
	<b>b</b> Less cost of goods s	sold	b					
	<b>c</b> Net income or (loss)			<u>•</u>				
	Miscellaneous		Business Co	ode 00099	6,500	6,500		
	11aScholarship Refunds	5			5,500	0,300		
	b							
	_							
	с ————							
	d All other revenue .		+		0	0	0	0
	e Total. Add lines 11a			<b>&gt;</b>	6,500			
	12 Total revenue. See	Instructions .		<b>•</b>		. F.C.	2.074.000	2 522 542
				[ 45,69	96,098	6,500	3,074,333	2,529,543 Form <b>990</b> (2018)

orn	n 990 (2018)				Page <b>10</b>
	Statement of Functional Expenses ion 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	anızatıons must comp	elete column (A)	
	Check if Schedule O contains a response or note to any	line in this Part IX $ . $			<u> <math>\square</math></u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	9,497,346	9,497,346		
2	Grants and other assistance to domestic individuals See Part IV, line 22	832,500	832,500		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management				
b	Legal	5,594		5,594	
c	Accounting				
d	ILobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				_
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	4,720	4,720	0	0
12	Advertising and promotion				
13	Office expenses				
14	Information technology				_
15	Royalties				_
16	Occupancy				_
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
	Depreciation, depletion, and amortization				
	Insurance				
	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
	a State and Federal Fees	2,004,599		2,004,599	
	<b>b</b> Real Estate Expenses	254,986		254,986	
	c OCF Administrative Fee	155,940	77,970	77,970	
,	d Scholarship Fee	29,500	29,500		
	e All other expenses	3,034	500	2,534	0
25	Total functional expenses. Add lines 1 through 24e	12,788,219	10,442,536	2,345,683	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation  Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				
	Check here F Li II following 50P 96-2 (ASC 936-720)				

Forn	990	(2018)				Page <b>11</b>
P	art X	Balance Sheet				
		Check if Schedule O contains a response or not	e to any line in this Part IX			🗆
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		1,614,758	1	838,122
	2	Savings and temporary cash investments .	[	1,423,877	2	3,027,748
	3	Pledges and grants receivable, net	[		3	
	4	Accounts receivable, net	[		4	
	5	Loans and other receivables from current and for trustees, key employees, and highest compensa Part II of Schedule L	ated employees Complete	0	5	0
Assets	7	Loans and other receivables from other disquali section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organizations voluntary employees' beneficiary organizations Part II of Schedule L	n 4958(c)(3)(B), and itions of section 501(c)(9) (see instructions) Complete		6	0
SS	8	Inventories for sale or use			8	
Ø	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 143,025,404			
	ь	Less accumulated depreciation	<b>10b</b> 0	127,811,525	<b>10</b> c	143,025,404
	11	Investments—publicly traded securities .			11	
	12	Investments—other securities See Part IV, line	11	0	12	
	13	Investments—program-related See Part IV, line	0	13		
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11	243,939,887	15	291,530,585	
	16	Total assets.Add lines 1 through 15 (must equ	374,790,047	16	438,421,859	
	17	Accounts payable and accrued expenses	2,134	17	9,656	
	18	Grants payable		604,833	18	504,500
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
c۸	21	Escrow or custodial account liability Complete F	Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former key employees, highest compensated employee				
æ		persons Complete Part II of Schedule L			22	0
=	23	Secured mortgages and notes payable to unrela	ted third parties		23	
	24	Unsecured notes and loans payable to unrelated	I third parties		24	
	25	Other liabilities (including federal income tax, pa and other liabilities not included on lines 17 - 24 Complete Part X of Schedule D	0	25	0	
	26	Total liabilities. Add lines 17 through 25	Ī	606,967	26	514,156
Balances	27	Organizations that follow SFAS 117 (ASC 9 complete lines 27 through 29, and lines 33 Unrestricted net assets		374,183,080	27	437,907,703
3a is	28	Temporarily restricted net assets			28	
D E	29	Permanently restricted net assets			29	
Fund		Organizations that do not follow SFAS 117	(ASC 958),			
or F		check here ▶ ☐ and complete lines 30 th				
	30	Capital stock or trust principal, or current funds			30	
Assets	31	Paid-in or capital surplus, or land, building or ed	uipment fund		31	
	32	Retained earnings, endowment, accumulated in	come, or other funds		32	
Vet	33	Total net assets or fund balances	[	374,183,080	33	437,907,703

3a

3b

No

Form 990 (2018)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Audit Act and OMB Circular A-133?

## Additional Data

**Software ID:** 18007697

**Software Version:** 2018v3.1

**EIN:** 93-1046399

Name: OCF Joseph E Weston Public Foundation

Form 990 (2018)

Form 990, Part III, Line 4a: The Weston Foundation provides grants and scholarships primarily in the greater Portland. Oregon area. The Weston Foundation makes grants to support children, the working poor, people with disabilities, senior citizens and the homeless. The Foundation awards scholarships to students at Oregon private high schools and first year students at Oregon public colleges. In 2018, the foundation awarded 468 grants, 227 high school scholarships and 105 college scholarships

efile GRAPHIC print - DO NOT PROCES			T PROCESS	As Filed Data -				DLN: 93493303021709		
SC	HED	ULE A		Public C	harity Status	and Dub	lic Suppo		OMB No 1545-0047	
	m 99		Cor	nplete if the org	ganization is a section 4947(a)(1) nonexer	on 501(c)(3) oi npt charitable t	ganization or trust.	1	2018	
•		f the Treasury		► Go to <u>v</u>	www.irs.gov/Form9	90 for the lates	t information.		Open to Public Inspection	
Nam	e of tl	<del>nue Service</del> <b>he organiza</b> E Weston Public						Employer identifica	<u> </u>	
JCF J	oseph E	: Weston Public	Foundation					93-1046399		
	rt I				<b>s</b> (All organizations it is (For lines 1 throu			ee instructions.		
1	organiz		•		ociation of churches d	•		(A)(i)		
2		,		,				A)(1).		
					)(A)(ii). (Attach Sch	,	, ,	::>		
3		·	·	·	ce organization descri					
4		name, city,	and state		d in conjunction with a	·			·	
5	Ш		ition operate ( <b>iv).</b> (Compl		of a college or univers	sity owned or ope	erated by a gove	ernmental unit describ	ped in <b>section 170</b>	
6		A federal, s	tate, or loca	l government or	governmental unit des	crıbed ın <b>sectior</b>	170(b)(1)(A	)(v).		
7				rmally receives a ( <b>vi).</b> (Complete	substantial part of its Part II )	support from a g	governmental ui	nit or from the genera	l public described in	
8		A communi	ty trust desc	ribed in <b>section</b>	170(b)(1)(A)(vi) (	Complete Part II	)			
9					scribed in <b>170(b)(1)(</b> e instructions Enter t				ege or university or a	
LO		from activit	ies related t income and	o its éxempt func	(1) more than 331/3% tions—subject to certains ss taxable income (less inplete Part III )	aın exceptions, aı	nd (2) no more	than 331/3% of its su	pport from gross	
l1		•			exclusively to test for	public safety Se	e section 509(	(a)(4).		
L <b>2</b>	<b>✓</b>	more public	ly supported	d organizations de	exclusively for the bei escribed in <b>section 50</b> the type of supporting	9(a)(1) or sect	ion 509(a)(2)	. See section 509(a		
а	<b>✓</b>	<b>Type I.</b> A so	supporting or n(s) the pow	rganızatıon opera	ted, supervised, or co	ntrolled by its su	pported organiz	ation(s), typically by		
b		Type II. A manageme	supporting on nt of the sup	organization supe	rvised or controlled in tion vested in the sam			- ' ' '	_	
С		Type III f	unctionally	integrated. A su	upporting organization ons) You must comp				ed with, its	
d		functionally	integrated	The organization	. A supporting organiz generally must satisf IV, Sections A and	y a distribution re	and the second s		1. A	
e		Check this	box if the or	ganızatıon receive	ed a written determina ntegrated supporting	ation from the IR	S that it is a Tyl	oe I, Type II, Type III	functionally	
f	Enter	r the number	of supporte	d organizations				_1		
g					ported organization(s					
(i) Name of supported ( organization		(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the orga in your governi		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
						Yes	No			
(A) T	he Oreg	gon Community	Foundation	237315673	8	Yes		10,329,846	C	
Гotа	ıl		1					10,329,846	(	
		work Reduc	- 1	tice, see the In	structions for	Cat No 11285F	: s	ichedule A (Form 99	0 or 990-EZ) 2018	

instructions

rage	_
170	

oport Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170
(1)(A)(ix)
mplete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part
If the organization fails to qualify under the tests listed below, please complete Part III.)

	III. If the organization fai						iy under Part
_	Section A. Public Support	iis to quality ut	ider the tests his	ted below, pied.	se complete rai	C 111.)	
	Calendar year		I	T	T		
	(or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grant ")						
2	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	<b>Total.</b> Add lines 1 through 3						
5	The portion of total contributions by						
5	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from						
	line 4						
S	Section B. Total Support						
	Calendar year	(a)2014	<b>(b)</b> 2015	(c)2016	(d)2017	(e)2018	(f)Total
	(or fiscal year beginning in) ▶	(-,	(=,====	(3,2323	(-)	(0)2020	(1).010.
7							
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
_	income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the business is regularly carried on						
10							
10	loss from the sale of capital assets						
	(Explain in Part VI )						
11	<b>Total support.</b> Add lines 7 through						
	10						
12	Gross receipts from related activities, e	tc (see instruction	ons)			12	
13	First five years. If the Form 990 is for	the organization	s first, second, th	urd, fourth, or fifth	n tax vear as a sec	tion 501(c)(3) org	anization.
	check this box and <b>stop here</b>	=				· · · · · · <u>-</u>	_
_	section C. Computation of Public						_
	Public support percentage for 2018 (line			column (f))			
				column (1))		14	
	Public support percentage for 2017 Sch					15	
<b>16</b> a	33 1/3% support test—2018. If the				ne 14 is 33 1/3% o	r more, check this	box
	and <b>stop here.</b> The organization qualif						··►□
b	<b>33 1/3% support test—2017.</b> If the	organization did	not check a box o	on line 13 or 16a,	and line 15 is 33 i	1/3% or more, chec	k this
	box and stop here. The organization	qualifies as a pub	olicly supported or	ganızatıon			▶□
<b>17</b> a	10%-facts-and-circumstances test-	<b>–2018.</b> If the or	ganization did not	check a box on lir	ne 13, 16a, or 16b	, and line 14	
	is 10% or more, and if the organization						
	in Part VI how the organization meets t	he "facts-and-cir	cumstances" test	The organization	qualifies as a publ	icly supported	
	organization						▶ □
Į.	10%-facts-and-circumstances test	-2017. If the o	rganization did no	ticheck a box on l	ine 13, 16a, 16h	or 17a, and line	
0	15 is 10% or more, and if the organiza						
	Explain in Part VI how the organization						
	supported organization			5-	4	,	▶□
10	Private foundation. If the organization	n did not check :	hov on line 12 1	6a 16h 17a or 1	7h check this has	and see	<b>F</b> L
TΩ	Trivate roundation, if the organization	ii ala not check e	4 POV OIL HIE TO, T	ou, 100, 1/a, 01 1	. , D, CHECK HIIS DU)	, unu see	

Р	Support Schedule for						
	(Complete only if you c						ler Part II. If
- C	the organization fails to ection A. Public Support	quality under t	ne tests listed	pelow, please co	omplete Part II.	)	
30	Calendar year		43.554.5		413.004-		(0) =
	(or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
_	organization's tax-exempt purpose Gross receipts from activities that are						
3	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
_	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6 )						
36	ection B. Total Support  Calendar year			I	1		1
	(or fiscal year beginning in) ▶	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
b	income from similar sources Unrelated business taxable income						
D	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12							
	loss from the sale of capital assets						
	(Explain in Part VI )						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for	r the organization	ı 's fırst, second, tl	nird, fourth, or fift	:h tax vear as a se	ction 501(c)(3) c	rganization.
	check this box and <b>stop here</b>	3	, ,	, ,	,	( ), ( )	• □
Se	ection C. Computation of Public	Support Perce	ntage				<u> </u>
15	Public support percentage for 2018 (lin			column (f))		15	
16	Public support percentage from 2017 S					16	
	ection D. Computation of Investi					1 1	
<u> </u>	Investment income percentage for 201			line 13, column (f	·))	17	
18	Investment income percentage from 2	•		,(	••	18	
	331/3% support tests—2018. If the		·	on line 14 and lin	ne 15 is more than		ne 17 is not
							_
	more than 33 1/3%, check this box and s						
b	33 1/3% support tests—2017. If the	-			•		_
	not more than 33 1/3%, check this box	and stop here.	The organization	qualifies as a publ	icly supported org	anızatıon	▶⊔_
20	Private foundation. If the organization	on did not check a	box on line 14, 1	.9a, or 19b, check	this box and see	instructions	▶ □

Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Page 4

6

7

8

9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

No

No

No

No

No

No

No

Schedule A (Form 990 or 990-EZ) 2018

6

7

8

10a

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V ) Section A. All Supporting Organizations

	ecction At An eapporting enganizations								
			Yes	No					
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose,								
	describe the designation If historic and continuing relationship, explain	1	Yes						
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described								
	ın section 509(a)(1) or (2)	2		No					
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)								

	If No, describe in Fait VI now the supported organizations are designated in designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1	Yes	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described			
	ın section 509(a)(1) or (2)	2		No
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a		No
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the	·		

		_	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		
	below	3a	No
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$ , $(5)$ , or $(6)$ and satisfied the public support tests under section $509(a)(2)$ ? If "Yes," describe in <b>Part VI</b> when and how the organization made the		
	determination	3b	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?		
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use	3с	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I. answer (b) and (c) below		
	cnecked iza or izbin Marti. answeribilandici below		l

		)		•
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the			
	determination	3b		
С	e organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use			
4a				
	checked 12a or 12b in Part I, answer (b) and (c) below	4a		No
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or	4h		

c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes  5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)  5b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?  5b		rised by or in connection with its supported organizations	4b	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)  5a  Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	Indicate the organization support any foreign supported organization that does not have an IRS determination under sections 01(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support			
(c) below (if applicable) Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)  b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?  5b	e i	foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c	
amendment to the organizing document)  b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?  5b	elo nız	low (if applicable) Also, provide detail in <b>Part VI,</b> including (i) the names and EIN numbers of the supported zations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the	F2	No
organization's organizing document?	nd.	lment to the organizing document)	- Ja	110
	e I	I or Type II only. Was any added or substituted supported organization part of a class already designated in the	$oxed{oxed}$	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	nız	zation's organizing document?	5b	
The state of the s	sti	itutions only. Was the substitution the result of an event beyond the organization's control?	5c	

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing

organization's supported organizations? If "Yes," provide detail in Part VI.

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

organization had an interest? If "Yes," provide detail in Part VI.

provide detail in Part VI.

answer line 10b below

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

	New York State Control of the Contro			aye 3
i k	Supporting Organizations (continued)			
	The the consequence of the first control of the con		Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		No
b	A family member of a person described in (a) above?	11b		No
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		No
	Section B. Type I Supporting Organizations	<u> </u>	l	
	,, <u>, , , , , , , , , , , , , , , , , ,</u>		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	Yes	
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2	103	No
S	Section C. Type II Supporting Organizations		V	₿1.:
	War		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
_	Section D. All Type III Supporting Organizations			
	ection D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	!		
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard	3		
S	Section E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions)		
	a			
	b  The organization is the parent of each of its supported organizations  Complete <b>line 3</b> below			
	The organization supported a governmental entity Describe in <b>Part VI</b> how you supported a government entity (see	. ınstru	ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
	<ul> <li>a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.</li> </ul>	3a		
	<ul> <li>b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard</li> </ul>	3h		

3b

Sched	lule A (Form 990 or 990-EZ) 2018			Page <b>6</b>
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	<b>1</b> b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount		_	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrat	ed Type III supporting or	ganızatıon (see

Schedule A (Form 990 or 990-EZ) (2018)

c Remainder Subtract lines 4a and 4b from 4

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2
If the amount is greater than zero, explain in Part VI

Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.
 Excess distributions carryover to 2019. Add lines.

**a** Excess from 2014. . . . . **b** Excess from 2015. . . . . **c** Excess from 2016. . . . .

See instructions

d Excess from 2017.e Excess from 2018.

3<sub>j</sub> and 4c

8 Breakdown of line 7

## **Additional Data**



**EIN:** 93-1046399

Name: OCF Joseph E Weston Public Foundation

Page 8

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Instructions)

Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

**Supplemental Financial Statements** 

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990.

DLN: 93493303021709 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

▶ Go to www.irs.gov/Form990 for the latest information. Name of the organization **Employer identification number** OCF Joseph E Weston Public Foundation 93-1046399 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par	11111	Organizations Ma	aintaining Coll	lections of Art, I	listori	ical T	reas	ures, or (	Other	<u>Similar Asse</u>	<b>ts</b> (con	inued)	
3		the organization's acquis (check all that apply)	uisition, accessior	n, and other records,	check	any of	the fo	ollowing tha	at are a	significant use	of its co	llection	
а		Public exhibition			d		Loar	n or exchan	ge prog	rams			
b		Scholarly research			e		Othe	er					
С		Preservation for future	e generations										
4	Provid Part >	de a description of the o	organızatıon's coll	ections and explain	how the	ey furtl	her th	ne organizat	ion's ex	kempt purpose i	n		
5		ig the year, did the organists to be sold to raise fun									Yes	□ N	lo
Pai	rt IV	Escrow and Custo Complete if the org X, line 21.			m 990	), Part	IV,	line 9, or r	eporte	d an amount	on Forr	n 990,	Part
1a		e organization an agent ded on Form 990, Part )		an or other intermed	liary for	contri	butioi	ns or other	assets I		Yes	□ N	lo
b	If "Y∈	es," explain the arrange	ement in Part XIII	and complete the fo	llowing	table				Amo	unt		_
c		nning balance			_				1c				_
d	Addıt	ions during the year							1d				_
е	Dıstrı	butions during the year	r						1e				_
f	Endın	ig balance							<b>1</b> f				_
2a	Did th	he organization include	an amount on Fo	rm 990, Part X, line	21, for	escrow	v or c	ustodial acc	ount lia	ıbılıty? 🗆	Yes	□ N	– lo
b	If "Ye	es," explain the arrange											
Pa	rt V	Endowment Fund	<b>ds.</b> Complete ıf	the organization a	answei	red "Y	es" o	n Form 99	90, Par	t IV, line 10.			
				(a)Current year		rıor yea	$\overline{}$	(c)Two year		(d)Three years b		Four yea	
	-	ing of year balance .		374,183,080		291,844	-	•	742,756	·			316,544
b	Contrib	outions		40,085,722		63,188			963,486				644,500
C	Net inv	estment earnings, gain	ns, and losses	29,695,059		32,779			352,245	10,016,			322,294
d	Grants	or scholarships	•	10,329,846		7,757	7,332	6,	727,742	5,706,	666	5,	109,239
е		expenditures for facilitie ograms	es	-6,619,371		3,142	2,169	-	567,792	153,	706		68,998
f	Admını	strative expenses .		2,345,683			0,426		53,773		967		45,209
g	End of	year balance		437,907,703		374,183	3,080	291,	844,764	82,742,	756	74,	059,892
2 a		de the estimated percei d designated or quasi-ei	=	ent year end balance 100 %	(line 1	g, colu	mn (a	a)) held as					
b	Perm	anent endowment ▶	0 %										
c	Temp	oorarily restricted endov	vment ▶ 0	%									
·		percentages on lines 2a,											
3a		here endowment funds			on tha	t are h	eld ar	nd administ	ered fo	r the			
	_	nization by										Yes	No
	• •	nrelated organizations				•					3a(i)		No
b		elated organizations . es" on 3a(ii), are the rel				 Salula D					3a(ii)	Yes Yes	
4		ribe in Part XIII the inte	_	•							30	165	
	rt VI	Land, Buildings,			Millette	Tarras							
U GI		Complete if the ord			m 990	), Part	IV, I	line 11a. S	See For	m 990, Part >	(, line 1	.0.	
	Descri	ption of property	(a) Cost or oth (investme		or other	basis (	other)	(c) Accum	nulated d	epreciation	(d) I	Book valu	е
1a	Land					143,0	25,404	1				143	3,025,404
	Buildin	gs											
		nold improvements											
		nent											
	Other	ŀ								+			
		lines 1a through 1e (Co	ı olumn (d) must ed	ual Form 990, Part	X, colui	mn (B)	, line	10(c)).		<b>•</b>		143	3,025,404
		(00	( = )	,	,,		,	- 1 -/ / -	- '	1		_ r.	, , 10-

	(Form 990) 2018				Page <b>3</b>
Part VII	Investments—Other Securities. Complete if the org See Form 990, Part X, line 12.  (a) Description of security or category (including name of security)	janiza	(b) Book value	(c) Meth	90, Part IV, line 11b. od of valuation f-year market value
	ll derivatives				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
	n (b) must equal Form 990, Part X, col (B) line 12 )	•			
Part VIII	Investments—Program Related.  Complete if the organization answered 'Yes' on Form 9	990, F	Part IV, lı	ne 11c. See Form 990	, Part X, line 13.
	(a) Description of investment		ook value	(c) Meth	od of valuation if-year market value
(1)					. , ,
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col (B) line 13 )				
Part IX	Other Assets. Complete if the organization answered 'Yes' (a) Description	on For	m 990, Pa	rt IV, line 11d See Form	(b) Book value
(2)	nterest in Weston Investment Company LLC				291,530,585
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Part X	mn (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization answe	· · red 'Y	es' on Fo		291,530,585 1e or 11f.
1.	See Form 990, Part X, line 25.  (a) Description of liability		<b>(b)</b> B	ook value	
	ncome taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)		$\dashv$			
	n (b) must equal Form 990, Part X, col (B) line 25 )	<b>•</b>			
	or uncertain tax positions In Part XIII, provide the text of the for 's liability for uncertain tax positions under FIN 48 (ASC 740)				

Schedule D (Form 990) 2018

Pa		venue per Audited Financial Statements With Reve zation answered 'Yes' on Form 990, Part IV, line 12a.	nue per Return	
1		upport per audited financial statements	. 1	
2		ot on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on i	nvestments   2a		
b	Donated services and use of facil	ties		
С	Recoveries of prior year grants	2c		
d				
е	Add lines 2a through 2d		2e	
3	Subtract line <b>2e</b> from line <b>1</b> .		3	
4	Amounts included on Form 990, I	Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not include	d on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII ) .	4b		
c	Add lines 4a and 4b	<del></del>	4c	
5	Total revenue Add lines 3 and 4	c. (This must equal Form 990, Part I, line 12)	. 5	
Par		penses per Audited Financial Statements With Expersation answered 'Yes' on Form 990, Part IV, line 12a.	enses per Return	
1	Total expenses and losses per au	dited financial statements	. 1	
2	Amounts included on line 1 but n	ot on Form 990, Part IX, line 25		
а	Donated services and use of facil	ties		
b	Prior year adjustments			
С	Other losses	2c		
d	Other (Describe in Part XIII ) $\ .$	2d		
е	Add lines 2a through 2d	<del></del>	. 2e	
3	Subtract line ${f 2e}$ from line ${f 1}$ .		. 3	
4	Amounts included on Form 990, I	Part IX, line 25, but not on line 1:		_
а	Investment expenses not include	d on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII ) $\ .$	4b		
С	Add lines 4a and 4b	<del></del>	. 4с	
5	Total expenses Add lines 3 and 4	1c. (This must equal Form 990, Part I, line 18)	5	
Pai	t XIII Supplemental Info	ormation		
		art II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b 2 2d and 4b Also complete this part to provide any additional info		4, Part X, line 2, Part
	Return Reference	Explanation		
See /	Addıtıonal Data Table			

Page **4** 

Schedule D (Form 990) 2018	Page <b>5</b>
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

# Additional Data

**Software ID:** 18007697 **Software Version:** 2018v3.1

EIN: 93-1046399

Name: OCF Joseph E Weston Public Foundation

Supplemental Information

Supplemental Information					
Return Reference	Explanation				
	The Foundation uses endowment fund distributions to make grants to non-profit organization s (primarily in Oregon) and to provide scholarship aid				

DLN: 93493303021709 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number OCF Joseph E Weston Public Foundation 93-1046399 **General Information on Grants and Assistance** Part I Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . 362 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

Schedule I (Form 990) 2018

### **Additional Data**

Foundation

Ste 100

104

1221 SW Yamhıll St

Salem, OR 97301

Portland, OR 972052108 Salem Free Clinics

1300 Broadway St NE Suite

**Software ID:** 18007697 **Software Version:** 2018v3.1 **EIN:** 93-1046399

Form 990. Schedule I. Part II	. Grants and Other Assistance	to Domestic Organizations and Dom	estic Governments.

or government		п аррпсавле	grane	assistance	other)
The Oregon Community	23-7315673	501(c)(3)	50,000		

501(c)(3)

(g) Description of

non-cash assistance

(h) Purpose of grant or assistance

Philnthrpy, Voluntarism

& Grntmaking

Health Care

organization if applicable grant cash (book FMV appraisal

(d) Amount of cash (e) Amount of non-

10,000

20-3549992

Name: OCF Joseph E Weston Public Foundation

(a) Name and address of **(b)** EIN (c) IRC section (f) Method of valuation

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Society of St Vincent de Paul 93-0464194 501(c)(3) 17.500 Human Services Mid-Willamette Valley Council

PO Box 7864 Salem, OR 97303 13-3271855 501(c)(3) 17.500 Health Care ALS Association Oregon & Southwest Washington Chapter

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

700 NE Multnomah St 1180 Portland, OR 97232

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Housing

St Andrew Nativity School 4925 NE 9th Avenue	93-1291049	501(c)(3)	75,000		Education
Portland, OR 97211					

10,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Housing Development Center

847 NE 19th Ave Suite 150 Portland, OR 97232 93-1116265

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Powerful Tools for Caregivers 36-4618829 501(c)(3) 7 0001 Health Care

4110 SE Hawthorne Portland, OR 97214	30-4010029	301(0)(3)	7,000		Treatti Ca
Community Housing Fund 3700 SW Murray Boulevard	27-0049012	501(c)(3)	20,000		Housing

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Beaverton, OR 970052372

190

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 93-0993469 501(c)(3) 20.000 Education

Oregon Outreach Inc 2215 N Lombard St Portland, OR 97217

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2306 NF Andresen Road Vancouver, WA 98661

Share 91-1205119 501(c)(3) 14,000 Human Services

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Community 101 - OCF 23-7315673 501(c)(3) 10.000 Philnthrpy, Voluntarism c/o OCF 1221 SW Yamhill St & Grntmaking

C/O OCF 1221 SW Yamhill St Ste 100
Portland, OR 972052108

MountainStar Family Relief 42-1560891 501(c)(3) 15,000

Education

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2125 NE Daggett Lane Bend, OR 97701

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance ition & Sports

Anımals

6.000

Oregon Sports Authority	93-1110745	501(c)(3)	7,500		Recreation
Foundation		( - / ( - /	.,		
1888 SW Madison 2nd Floor					
Portland OR 97205					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Guide Doas for the Blind

350 Los Ranchitos Road San Rafael, CA 94903

94-1196195

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 93-1234367 501(c)(3) 14.000 Salem Interfaith Hospitality Housing Network 1055 Edgewater Street NW

Recreation & Sports

10.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Salem, OR 97304

685 Court Street NE Salem, OR 97301

Counties

Family YMCA of Marion & Polk

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance Oral Hull Foundation for the 93-6032742 501(c)(3) 20 000 Human Services

Blind PO Box 157 Sandy, OR 97055					
Camp Taloalı	51-0186428	501(c)(3)	10,000		Recreation & Sports

PO Box 32 Stavton, OR 97383

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance Friends of Saturday Academy 20-3770321 501(c)(3) 19.500 Education 5000 N Willamette Blvd Portland, OR 97203 St Peter Catholic Church St 501(c)(3) 8.000 Human Services

Vincent de Paul Conference 8648 SE Foster Road Portland, OR 97266

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance St Andrew Catholic Church St 93-0391613 501(c)(3) 10.000 Human Services Vincent de Paul Conference

Human Services

9.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

806 NE Alberta Portland, OR 97211	
Immaculate Heart Cat Church St Vincent de Conference	

2926 N Williams Avenue Portland, OR 97227

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Special Olympics Oregon Inc 93-0752969 501(c)(3) 30.000 Recreation & Sports

419 NE 10th Ave Portland, OR 97232

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO Box 1661

Lake Oswego, OR 97035

Maurice Lucas Foundation 27-2562371 501(c)(3) 6,500 Diseases/Disorders

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Holy Cross Parish Blessed 93-0386845 501(c)(3) 10.000 Human Services

Mother & Child Education	23-7007546	501/6)/3)	18 000		Hoalth (
Frederic St Vincent de Paul Conference 5227 N Bowdoin St Portland, OR 97203					

1515 NE 41st Avenue Portland, OR 97232

Health Care Mother & Child Education 23-/09/546 201(C)(3)| T8,000 Center

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Blanchet House of Hospitality 93-6031009 501(c)(3) 27.500 Human Services 82-0385049 25.000 Health Care

310 NW Glisan Street Portland, OR 97209 Make-A-Wish Foundation of 501(c)(3) Oregon 2000 SW First Avenue Suite

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

410

Portland, OR 97201

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Education

Friends of OSD	20-5805821	501(c)(3)	8,500		Education
PO Box 15053					
Salem, OR 97309					

60,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Family Building Blocks

2425 Lancaster Drive NE Salem, OR 97305

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 93-0867552 Health Care

Donate Life Northwest 501(c)(3) 12.000 PO Box 532

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

10 N Russell Street Portland, OR 972271619

Portland, OR 972070532 Urban League of Portland 93-0395590 501(c)(3) 7.500 Public, Society Benefit

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 26-3967833 501(c)(3) 25.000 Portland Homeless Family Housing Solutions 6220 SF 92nd Ave

Education

30.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Portland, OR 97266

Community Transitional School

6601 NE Killingsworth Street Portland, OR 97218

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance Catholic Charities 93-0386801 501(c)(3) 66.000 Human Services 2740 SE Powell Blvd 1 Portland, OR 97202

Human Services

45.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Portland, OR 97202

Community Action of Washington County

1001 SW Baseline Street Hillsboro, OR 97124

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

Human Services

Rebuilding Together Portland 94-3132936 501(c)(3) 10.000 Housing 5000 N Willamette Boulevard Portland, OR 97203

Youth Rights & Justice 93-0900864 501(c)(3) 20,000 1785 NE Sandy Blvd Suite 300

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Portland, OR 97232

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Mental Health.

Substance Abuse

Resolutions Northwest	93-0881865	501(c)(3)	20,000		Crime & Legal
2538 NE Broadway Suite A					
Portland OR 97232					

22,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

93-0725294

Lines for Life

5100 SW Macadam Ave 400

Portland, OR 972396102

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Education

Love INC of Clackamas County	20-0905821	501(c)(3)	8,500		Religion
PO Box 2378			·		_
Oregon City, OR 97045					

All Hands Raised 93-1149789 501(c)(3) 8.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2069 NE Hovt St Portland, OR 97232

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance pear (program education art 93-1327944 501(c)(3) 17.500 Arts. Culture & recreation) Humanities

Arts, Culture &

Humanities

6.500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

338 NW 6th Avenue Portland, OR 97209 Pittock Mansion Society

3229 NW Pittock Drive

Portland, OR 97210

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 93-1127186 501(c)(3) 8.500 Recreation & Sports

Housing

10,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Community Cycling Center 1805 NE 2nd Ave Portland, OR 97212

93-1323419

Bethlehem Inn

PO Box 8540 Bend, OR 97708

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Incight Company 43-1985190 501(c)(3) 22.000 Employment 111 SW Columbia St Suite 940

Employment

10,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Portland, OR 97201
Step It Up Inc

PO Box 4862 Portland, OR 97208

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 93-1120908 501(c)(3) 10.000 Rebuilding Together Housing Washington County Inc.

12550 SW 3rd Street Beaverton, OR 97005						
Northwest Catholic Counseling Center 8383 NE Sandy Boulevard	93-1088962	501(c)(3)	9,500		1	Mental Health, Substance Abuse

Suite 205

Portland, OR 97220

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance National Multiple Sclerosis 13-5661935 501(c)(3) 17,500 Diseases/Disorders

Sparrow Clubs USA	91-1672700	501(c)(3)	6.500		Health Care
Society Oregon Chapter 5331 SW Macadam Avenue Suite 290 Portland, OR 97239					

・、、しハン) 906 NE Greenwood Avenue Suite 2

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Bend, OR 97701

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance My Sisters' Place 93-0769100 501(c)(3) 7.500 Crime & Legal

PO Box 2152 Newport, OR 97365 Domestic Violence Resource 93-0665804 501(c)(3) 20,000 Center

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Crime & Legal PO Box 494 Hillsboro, OR 971230494

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance me & Legal

St Andrew Legal Clinic	93-0739368	501(c)(3)	10,000		Crime
807 NE Alberta Street					
Portland, OR 97211					

1675 W 11th Ave Eugene, OR 97402

A Family For Every Child 20-4151057 501(c)(3) 12,500 Human Services

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Crohn's & Colitis Foundation of 13-6193105 501(c)(3) 8.500 Diseases/Disorders America - Northwest Chapter

9 Lake Bellevue Drive Suite 203 Bellevue, WA 98005

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Canby, OR 97013

Thelma's Place 26-1372818 501(c)(3) 8,000 Human Services 352 NW 2nd Avenue

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 72-1618287 501(c)(3) 16.000 Health Care North by Northeast Community Health Center

714 NF Alberta St Portland, OR 97211 20-4034255 501(c)(3) 7.000 Health Care

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Returning Veterans Project PO Box 14035

Portland, OR 97293

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance oluntarısm

Wilsonville Rotary Foundation PO Box 362 Wilsonville, OR 97070	93-1114902	501(c)(3)	7,500		1	& Grntmaking
Autism Research & Resources of Oregon	93-1287227	501(c)(3)	17,500			Mental Health, Substance Abuse

PO Box 4282

Portland, OR 972084282

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance Orogon Commission for the 93-6001718 170(c)(1) 12 500 Human Services

Blind 535 SE 12th Avenue Portland, OR 97214	93-0001710	170(0)(1)	12,300		Truman Serv
Children's Institute	93-1095351	501(c)(3)	25,000		Education

Portland, OR 97205

1411 SW Morrison St Suite 205

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Multnomah Bar Foundation 20-2738888 501(c)(3) 8.500 Crime & Legal 620 SW Fifth Avenue Suite 1220

Civil Rights, Social

Action & Advocacy

15.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Portland, OR 97204

National Federation of the

Blind of Oregon

5005 Main Street Springfield, OR 97478

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

Kınshıp House 1823 NE 8th Ave Portland, OR 97212	93-1180331	501(c)(3)	25,000		Human Services
Partners in Care Inc	93-0756143	501(c)(3)	17,500		Health Care

2075 NE Wyatt Court Bend, OR 97701

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Autistic Community Activity 94-3042607 501(c)(3) 15.000 Education Program

Diseases/Disorders

20.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

PO Box 4606
Portland, OR 97208

Children's Cancer Association
1200 NW Naito Parkway Suite

140

Portland, OR 97209

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance Birch Community Services 93-1186020 501(c)(3) 17.500 Food, Agriculture & 17780 NE San Rafael Nutrition

17780 NE San Rafael
Portland, OR 97230

Volunteers in Medicine Clinic of the Cascades

Nutrition

Nutrition

Nutrition

Health Care

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2300 NE Neff Road Bend, OR 97701

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance NAMI of Multnomah County 93-0862647 501(c)(3) 20.000 Mental Health. 524 NE 52nd Avenue Substance Abuse

Human Services

9.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Portland, OR 97213
L'Arche Portland

435 SE 85th Avenue Portland, OR 97216

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 93-0986696 501(c)(3) 20.000 Housing

Education

 Samaritan House Inc
 93-0986696
 501(c)(3)
 20,000
 House Inc
 House Inc
 10,000
 House Inc
 House Inc<

28,500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Library Foundation

620 SW Fifth Avenue 1025 Portland, OR 97204

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance Maybelle Center for 93-1060938 501/61/31 47 nonl Human Services

Traybelle deficer for	22 100020	301(0)(3)	17,000		1	I raman scr
Community						
121 NW 6th Avenue						
Portland, OR 97209						
Portland Jewish Academy	93-0504473	501(c)(3)	18,000			Education

6651 SW Capitol Highway Portland, OR 972191914

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

Children's Community Clinic	93-0811915	501(c)(3)	25,000		Health Care
2252 Lloyd Center					
Portland, OR 972321311					

Cascade AIDS Project 93-0903383 501(c)(3) 7.000 Diseases/Disorders

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

520 NW Davis St Suite 215 Portland, OR 97209

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance Portland Playhouse 30-0507198 501(c)(3) 6.500 Arts. Culture & Humanities

602 NE Prescott St Portland, OR 97211 Providence St Vincent Medical 93-0575982 501(c)(3) 28,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Health Care Foundation 9205 SW Barnes Rd Portland, OR 97225

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Mater Dei Radio 93-0838318 501(c)(3) 8.000 Arts, Culture &

Mater Del Radio 93-0838318 501(c)(3) 8,000 Arts, Culture PO Box 5888 Portland, OR 972285888

CDM In-Home Care Services 91-1057994 501(c)(3) 18,000 Health Care

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2409 Broadway Vancouver, WA 98663

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Portland Public Schools District 93-6000830 170(c)(1) 13.549 Education

Oregon Food Bank	02 0705706	E01/a)/2)	40,000		Food Asses
1J 501 N Dixon St Portland, OR 97227			٠		

Portland, OR 97211

|Food, Agriculture & Oregon Food Bank 93-0/85/86 501(C)(3)| 40,000 7900 NE 33rd Avenue Nutrition

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Bradley Angle 51-0188664 501(c)(3) 16.000 Crime & Legal 5432 N Albına Ave

Food, Agriculture &

Nutrition

45.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

5432 N Albina Ave Portland, OR 97217 Union Gospel Mission

3 NW 3rd Avenue

Portland, OR 97209

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Arts, Culture &

Humanities

 World Forestry Center
 93-6034757
 501(c)(3)
 7,500
 Arts, Culture & Humanities

 4033 SW Canyon Road Portland, OR 97221
 93-1278089
 501(c)(3)
 30,000
 Arts, Culture & Arts, Culture & Cultur

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

4015 SW Canvon Road

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Oregon Museum of Science 93-0402877 501(c)(3) 155.000 Arts, Culture & and Industry Humanities 1945 SF Water Ave Portland, OR 972143354 My Father's House A 93-1306035 501(c)(3) 25.000

Community Shelter PO Box 1147 Gresham, OR 97030 Housing

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Dress for Success of Oregon 93-1250115 501(c)(3) 8,500 Employment

1532 NE 37th Avenue Portland, OR 97232					
Young Audiences of Oregon & SW Washington	93-0521848	501(c)(3)	11,000		Arts, Culture & Humanities

Portland, OR 972052228

1220 SW Morrison 1000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance Sexual Assault Resource 93-0800739 501(c)(3) 15.000 Mental Health, Center Substance Abuse 4900 SW Griffith Drive Suite 100 Beaverton, OR 97005

501(c)(3) 7,500 Oregon Tradeswomen Inc 31-1655001 Education 3934 NW Martin Luther King Jr Blvd

Suite 101

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Children's Trust Fund of 93-1310666 501(c)(3) 20.000 Crime & Legal

Recreation & Sports

7.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Oregon Foundation	
PO Box 14694	
Portland, OR 97293	

46-4451148

Harper's Playground

1477 NW Everett Street Portland, OR 97209

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Neighborhood House Inc 93-0386875 501(c)(3) 17,500 Education

7780 SW Capitol Highway Portland, OR 972192477					
St Louise Food Pantry St Vincent de Paul Conference PO Box 42157	93-0456525	501(c)(3)	8,000		Human Services

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance 93-1088674 501(c)(3) 25.000 Youth Development Transitional Youth

1500 NW 167th Place Beaverton, OR 97006 Holy Rosary Catholic Church St 93-0391576 501(c)(3) 8.500 Human Services Vincent de Paul Conference

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

375 NE Clackamas St Portland, OR 97232

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance 93-0706892 501(c)(3) 30.000 Mental Health, De Paul Treatment Centers PO Box 3007 Substance Abuse Portland, OR 97208

PO Box 3007
Portland, OR 97208

QUAD Inc
5100 SW Macadam Ave Suite
130

Education

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 93-0624672 501(c)(3) 12.500 Education Head Start Clackamas County Children's Commission 16518 SE River Road Marylhurst, OR 97267

Human Services

9.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

St Rita Catholic Church St

Vincent de Paul Conference 10029 NE Prescott Portland, OR 97220

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance E047 3733 7 000 Services

Recreation & Sports

Upward Bound	93-0749992	501(c)(3)	20.000		Recreation
Vincent de Paul Conference 2727 NE 54th Avenue Portland, OR 97213	93-0391633	501(c)(3)	7,000		Human Se

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO Box C Stavton, OR 97383

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 93-0848530 501(c)(3) 21.000 Health Care Legacy Hopewell House Hospice c/o Good Samaritan Foundation PO Box 4484 Portland, OR 97208 St Anthony Parish St Vincent 501(c)(3) 8.500 Human Services de Paul Conference

3600 SE 79 Ave Portland, OR 97206

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance St Anne Catholic Church St 501(c)(3) 7.500 Human Services Vincent de Paul Conference

1015 SF 182 Ave Portland, OR 97233 All Saints Parish St Vincent de 501(c)(3) 8.000 Human Services

Paul Conference 3847 NF Glisan

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance St Therese Catholic Church St 501(c)(3) 8.500 Human Services Vincent de Paul Conference 1260 NF 132nd Ave. Portland, OR 97230 Ascension Catholic Church St 93-0406411 501(c)(3) 8.500 Human Services

Vincent de Paul Conference

7507 SE Yamhıll Portland, OR 97215

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance St Henry Catholic Church St. 93-0454781 501(c)(3) 8.500 Human Services

Vincent de Paul Conference 346 NW 1st St Gresham, OR 97030	= = = < - / (= /	,,,,,,		
Our Lady of Sorrows Catholic Church St Vincent de Paul	501(c)(3)	8,500		Human Services

Conference 5239 SE Woodstock Blvd

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Troacure Valley Children's 26-1022252 501/61/31 an nool Education

Substance Abuse

Deleaf News and	20-1932332	301(0)(3)	20,000		Luucation
Relief Nursery					
780 SE 6th St					
Ontario, OR 97914					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

3415 SE Powell Boulevard

Portland, OR 97202

70.000 Mental Health. Trillium Family Services 93-0386966 501(c)(3)

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance St Anthony Catholic Church St 93-0415217 501(c)(3) 9.000 Human Services

Vincent de Paul Conference 9905 SW McKenzie Tigard, OR 97223			-,		
Chess For Success	93-1208405	501(c)(3)	8,500		Recreation & Sports

2701 NW Vaughn 101 Portland, OR 97210

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Catholic Youth 93-0386803 501(c)(3) 400.333 Religion OrganizationCamp Howard

Nutrition

 OrganizationCamp Howard
 825 NE 20th Ave 120

 Portland, OR 972322295
 93-0748169

 Sisters of The Road Cafe
 93-0748169

 501(c)(3)
 15,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

133 NW Sixth Avenue

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Garten Services 93-0582004 501(c)(3) 10.000 Employment PO Box 13970

Employment

70,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Salem, OR 97309

Portland YouthBuilders

4816 SE 92nd Avenue Portland, OR 97266

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 93-0841022 Human Services

Northwest Family Services 501(c)(3) 12.500 6200 SE King Road Portland, OR 97222

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Portland, OR 97219

Oregon Public Broadcasting 93-0814638 501(c)(3) 35,000 Arts, Culture & 7140 SW Macadam Ave Humanities

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance sing

Human Services

Good Neighbor Center	93-1269989	501(c)(3)	15,000		Housii
11130 SW Greenburg Road					i
Tigard, OR 97223					İ

22,500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Metropolitan Family Service

1808 SE Belmont Street Portland, OR 97214

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Children's Center 75-3027143 501(c)(3) 8.000 Mental Health.

15,000

Substance Abuse

Human Services

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

1713 Penn Lane

Outside In

Oregon City, OR 97045

1132 SW 13th Avenue Portland, OR 97205

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance DePaul Industries 93-0607857 501(c)(3) 25 000 Employment

4950 NE Martin Luther King Jr	33 0007037	]	23,000		Limployment
Blvd Portland, OR 972113351					
Elders in Action	93-1168567	501(c)(3)	18,000		Housing

Elders in Action 1411 SW Morrison St Ste 290

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance ation

Substance Abuse

Serendipity Center Inc	93-0730861	501(c)(3)	28,500		Education
PO Box 33350					
Portland, OR 97292					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO Box 86852

Portland, OR 972860852

Dougy Center 93-0833241 501(c)(3) 28,500 Mental Health.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Portland Youth Philharmonic 93-0386902 501(c)(3) 8.000 Arts. Culture & 9320 SW Barbur Boulevard Humanities

Human Services

20.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Suite 140 Portland, OR 97219 William Temple House

2023 NW Hoyt Street Portland, OR 972091298

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Jewish Family & Child Service 93-0386851 501(c)(3) 30,000 Employment

1221 SW Yamhill St 301 Portland, OR 97205					
Mittleman Jewish Community	93-0386850	501(c)(3)	15,000		Recreation & Sports

6651 SW Capitol Highway Portland, OR 97219

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Meals on Wheels People 93-0584318 501(c)(3) 45.000 Food, Agriculture & PO Box 19477 Nutrition

Food, Agriculture &

Nutrition

15,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Portland, OR 972800477

Beaverton, OR 970750397

93-0900348

Care To Share

PO Box 397

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Care

Anımals

March of Dimes Greater	13-1846366	501(c)(3)	8,500		Health (
Oregon Chapter					
1220 SW Morrison Suite 510					
Portland, OR 972052297					

15.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Oregon Humane Society

1067 NE Columbia Boulevard Portland, OR 97211

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Education

Exceed Enterprises 5285 SE Mallard Way Milwaukie, OR 97222	23-7017274	501(c)(3)	12,000		Education
Milwaukie, OK 97222					

25.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Boys & Girls Clubs of Portland

8203 SE 7th Ave Suite 100 Portland, OR 97202

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 93-0386791 501(c)(3) 30.000 Boys & Girls Aid Society of Human Services Oregon 9320 SW Barbur Blvd Suite 200

Portland, OR 97219

Portland, OR 97368

Westwind Stewardship Group 20-1627314 501(c)(3) 12,000 Education PO Box 13070

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Community Partners for 93-1155559 501(c)(3) an nonl Housing

Affordable Housing Inc PO Box 23206	93-1133339	301(c)(3)	20,000		riousing
Tigard, OR 972813206					
YWCA of Greater Portland	93-0386984	501(c)(3)	17,500		Housing

PO Box 4587 Portland, OR 97208

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 211ınfo 93-0784586 501(c)(3) 10.000 Human Services 7535 NE Ambassador Place Stel

Human Services

91.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

,	
В	
Portland, OR 97217	
Albertina Kerr Centers	

424 NE 22nd Avenue Portland, OR 97232

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance United Cerebral Palsy of 93-0462580 501(c)(3) 20.000 Diseases/Disorders Oregon and SW Washington 305 NF 102nd Ave Suite 100 Portland, OR 97220

Youth Development

15.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Junior Achievement of Oregon

and SW Washington 7830 SE Foster Road Portland, OR 97206

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance

greater than 2916 NE Alberta St Suite D Portland, OR 97211	93-1037323	501(c)(3)	15,000		Education

United Way of the Columbia-93-0582124 501(c)(3) 8.500 Philnthrpy, Voluntarism Willamette l& Grntmaking

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

619 SW 11th Avenue Suite 300 Portland, OR 972052646

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Easter Seals Oregon 93-0386885 501(c)(3) 7.500 Mental Health. 7300 SW Hunziker Suite 103 Substance Abuse

Education

77,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Portland, OR 97223
Volunteers of America

3910 SE Stark Street Portland, OR 97214

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Religion

53-0196617 501(c)(3) 12.500 Sisters of the Holy Names PO Box 411 Maryhurst, OR 97034

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Portland, OR 97209

Young Musicians & Artists 93-0910160 501(c)(3) 8,500 Arts, Culture & 220 NW 8th Ave Humanities

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Neighborhood Partnerships 91-1943624 501(c)(3) 12.500 Housing

2501 SW First Avenue 120
Portland, OR 97201

Virginia Garcia Memorial Health 93-0717997 501(c)(3) 25,000

Health Care

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO Box 486 Cornelius, OR 97113

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 93-0452083 501(c)(3) 22.500 Education Oregon Alliance of Independent Colleges and Universities 15573 Bangy Road Suite 320

Arts, Culture &

Humanities

18,500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

93-0391604

Lake Oswego, OR 97035

Portland Art Museum

Portland, OR 97205

1219 SW Park Avenue

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Boy Scouts of America Cascade 93-0386792 501(c)(3) 30.000 Youth Development

Pacific Council 2145 SW Naito Parkway Portland, OR 97201 YMCA of Columbia-Willamette 93-0386981 501(c)(3) 57.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Portland, OR 97219

Recreation & Sports 9500 SW Barbur Boulevard 200

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 23-7345990 Mental Health.

Janus Youth Programs 23-7345990 501(c)(3) 47,500 Ment 707 NE Couch Street
Portland OR 97232

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Portland, OR 972052483

707 NE Couch Street
Portland, OR 97232

Oregon Historical Society
1200 SW Park Avenue

Substance Abuse
20,000

Arts, Culture & Humanities

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 84-0385934 15.000 Religion

Young Life Mt Hood Region 501(c)(3) PO Box 66868 Portland OR, OR 97290 Crime & Legal

Rose Haven 20-5922682 501(c)(3) 25,000 PO Box 10405

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Portland, OR 97296

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Senior Citizens Council of 93-0693668 501(c)(3) 9.500 Human Services Clackamas County PO Box 1777

Health Care

15.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

PO Box 1777
Oregon City, OR 97045

Providence Benedictine Nursing
Center Foundation

540 S Main Street Mt Angel, OR 97362

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Abbey Foundation of Oregon 04-3703021 509(a)(3) 6.500 Religion PO Box 497 St Benedict, OR 973730501 Ecumenical Ministries of 93-0625359 40.000 Housing

501(c)(3) Oregon 0245 SW Bancroft Street Suite

Portland, OR 97239

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 22-2406433 501(c)(3) 35.000 Salvation Army Cascade Human Services Division 8495 SE Monterey Avenue

Philnthrpy, Voluntarism

& Grntmaking

15.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Happy Valley, OR 97086
OHSU Foundation

1121 SW Salmon St

Ste 100 PO Box 4000 Portland, OR 97205

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Ride Connection 94-3076771 501(c)(3) 16.000 Human Services 9955 NE Glisan Street Portland, OR 97220

Religion

10,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

St Peter and St Paul Episcopal

Parish 247 SE 82nd Portland, OR 97216

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance an Services

Nutrition

Community Vision Inc	20-1288169	501(c)(3)	15,000		Human
2475 SE Ladd Ave Suite 240					
Portland, OR 97214					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2701 NW Vaughn St Suite 102

Portland, OR 97210

Lift Urban Portland 93-0923775 501(c)(3) 10.000 Food, Agriculture &

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 93-0606729 501(c)(3) 25.000 Education Centro Cultural de Washington County 1110 N Adair Street PO Box

Education

10,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

708 Cornelius, OR 97113

2154 NE Broadway 130 Portland, OR 97232

Shadow Project

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Tucker Maxon School 93-0391592 501(c)(3) 20.000 Education

2860 SE Holgate Blvd Portland, OR 972023697					
Southwest Community Health Center	74-3050497	501(c)(3)	15,000		Health Care

7754 SW Capitol Hwy Portland, OR 97219

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 93-0828781 501(c)(3) 8.000 Arts. Culture & Artists Repertory Theatre 1515 SW Morrison Humanities Portland, OR 97205

Anımals

1515 SW Morrison
Portland, OR 97205

DoveLewis Emergency Animal 93-0621534 501(c)(3) 15,000
Hospital 1945 NW Pettygrove

Portland, OR 97209

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 04 0405555 FO4 ( ) (3) 20.000

Store to Door 7730 SW 31st Ave Portland, OR 97219	94-3105555	501(c)(3)	28,000		Human Services
Raphael House of Portland	93-0710963	501(c)(3)	20,000		Crime & Legal

4110 SE Hawthorne Boulevard 503

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Portland, OR 97214

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance nan Services

Recreation & Sports

Northwest Pilot Project 1430 SW Broadway Suite 200 Portland, OR 97201	93-0635871	501(c)(3)	12,500		Huma
Tillamook County Family YMCA	93-0457167	501(c)(3)	30,000		Recre

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

610 Stillwell Avenue Tillamook, OR 97141

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 93-0593858 501(c)(3) 30.000 Education Portland Opportunities Industrialization Center 717 N Kıllınasworth Court Portland, OR 97217

Housing

45.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Habitat for Humanity-

PortlandMetro East 1478 NE Killingsworth Street Portland, OR 97211

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Society of St Vincent de Paul 93-0456525 501(c)(3) 25.000 Human Services

Portland Council PO Box 42157 Portland, OR 972420157 93-0354176 501(c)(3) 55.000 Morrison Child & Family

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Portland, OR 97220

Mental Health, Substance Abuse Services 11035 NE Sandy Blvd

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance All Classical Public Media Inc. 93-1042868 501(c)(3) 6,000 Arts, Culture &

211 SE Caruthers St Suite 200 Portland, OR 97214					Humanities
Clackamas Community College Foundation 19600 Molalla Avenue	93-0579576	501(c)(3)	97,000		Education

Oregon City, OR 970458980

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 93-6094804

Call to Safety 501(c)(3) 12.500 Mental Health. PO Box 42610 Substance Abuse Portland, OR 97242

Mt Hood Kiwanis Camp 93-0422242 501(c)(3) 11,500 Recreation & Sports

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

10725 SW Barbur Blvd 50 Portland, OR 97219

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance St Clare Church St Vincent de 93-0465871 501(c)(3) 8.000 Human Services Paul Conference 8535 SW 19th Ave

20.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Portland, OR 97219
Transition Projects

665 NW Hoyt Street Portland, OR 97209

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Western Oregon University 93-6033807 501(c)(3) 51,500 Education

Foundation 345 N Monmouth Ave Monmouth, OR 97361					
St Mary's Home for Boys 16535 SW Tualatın Valley	93-0391626	501(c)(3)	30,000		Human Services

Highway

Beaverton, OR 970065143

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Pongo Fund 27-0646992 501(c)(3) 7.500 Anımals PO Box 8244

Food, Agriculture &

Nutrition

17,500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Portland, OR 97207

PO Box 160

SnowCap Community Charities

Fairview, OR 970240160

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Medical Teams International 93-0878944 501(c)(3) 16 000 Intl. Foreign Affairs &

PO Box 10 Portland, OR 972070010	33 0070311	301(0)(3)	10,000		1	Natl Security
First Image 7931 NE Halsey Street Suite	93-0854417	501(c)(3)	7,500			Health Care

200

Portland, OR 97213

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

Substance Abuse

Mainspring 3500 NE 82nd Ave Portland, OR 97220	93-0638179	501(c)(3)	25,000		Human Services
Autism Society of Oregon	93-0771249	501(c)(3)	17,500		Mental Health,

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO Box 69635

Portland, OR 97239

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Our Lady of Victory St Vincent 501(c)(3) 9.000 Human Services de Paul Conference PO Box 29 Seaside, OR 97138

9.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Madeleine Parish St Vincent de

Paul Conference 3123 NE 24st Avenue Portland, OR 97212

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 93-0437951 501(c)(3) 9.000 Holy Family Parish St Vincent Human Services de Paul Conference 3666 SE Claybourne St Portland, OR 97202

8.500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Christ the King Parish St

Vincent de Paul Conference 7414 SE Michael Drive Milwaukie, OR 97222

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 72-1620801 501(c)(3) 10.000 The Giving Tree Housing 408 NW 5th Ave Portland, OR 97209

8.500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

St Anthony Catholic Church St

Vincent de Paul Conference

Forest Grove, OR 97116

1660 Elm St

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance St Aloysius Catholic Church St 501(c)(3) 9.000 Human Services Vincent de Paul Conference PO Box 1199 Estacada, OR 97023 St Agatha Catholic Church St 93-0751859 501(c)(3) 7.500 Human Services

Vincent de Paul Conference 1430 SE Nehalem St Portland, OR 97202

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Sacred Heart Church St 93-0391610 501(c)(3) 9.000 Human Services

| Vincent de Paul Conference | 3910 SE 11th Avenue | Portland, OR 97202 | St Frederic Parish St Vincent | 501(c)(3) | 8,500 | Human Services

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

de Paul Conference 175 S 13th St St Helens, OR 97051

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance St Flizabeth Catholic Church St 501(c)(3) 7 0001 Human Services

Vincent de Paul Conference 3145 SW 192nd Aloha, OR 97006		301(0)(3)	7,000		Trainan 3
St Cyril Catholic Church St	53-0196617	501(c)(3)	7,500		Human S

Wilsonville, OR 97070

Services Vincent de Paul Conference -Wilsonville 9210 SW 5th St

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 23-7361814 501(c)(3) 6.000 Jesuit Volunteer Corps Philnthrpy, Voluntarism & Grntmaking

Northwest PO Box 22125 Portland, OR 97269 93-0446529

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Beaverton, OR 97005

St Cecilia Catholic Church St 501(c)(3) 9.500 Human Services Vincent de Paul Conference 5105 SW Franklin

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Recreation & Sports

Pathfinders of Oregon	93-1137236	501(c)(3)	14,000		Education
2501 SW 1st Avenue 300					
Portland, OR 97201					

10,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Camp Kuratlı Salvation Army

8495 SE Monterey Avenue Happy Valley, OR 97086

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance USO Northwest Portland 91-0573116 501(c)(3) 15,000 Public, Society Benefit

Education

Center 7000 NE Airport Way Suite 3112 Portland, OR 97218				

10,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Playworks

Portland, OR 97214

1125 SE Madison St Suite 210

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 91-1803863 501(c)(3) 15.000 Oregon Foster Parent Human Services Association

410 Mill St 366 Salem, OR 97308

Portland, OR 97293

Children First for Oregon 94-3168157 501(c)(3) 42,000 Human Services

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Assistance League of Greater 93-6032769 501(c)(3) 12.500 Philnthrov, Voluntarism

Portland 4000 SW 117th Ave Beaverton, OR 970052211			,		& Grntmaking
El Programa Hispano Catlico	93-0386801	501(c)(3)	15,000		Human Services

333 SE 223rd Ave Suite 100 Gresham, OR 97030

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 23-7348113 501(c)(3) 68.000 Education 9020 SW Beaverton-Hillsdale Portland, OR 97225

Education

14.000

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501(c)(3)

Edison High School Highway

Mt Scott Park Center for

6148 SE Holgate Boulevard Portland, OR 97206

Learning

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Camp Fire Columbia 93-0386901 501(c)(3) 18.000 Education

Portland Rescue Mission 93-0429004 501(c)(3) 15,000 Education 93-0429004 Fundamental Portland Rescue Mission Portland Rescue Mission 93-0429004 Fundamental Portland Rescue Mission Portland Rescue Missio

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO Box 3713

Portland, OR 972083713

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Archdiocese of Portland 93-0114100 501(c)(3) 1.481.364 Education 2838 E Burnside Street

Environment

15,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Portland, OR 97214

National Outward Bound USA

4 Airline Drive Suite 202 Albany, NY 12205 04-2375956

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance New Avenues for Youth Inc. 93-0910213 501(c)(3) 25.000 Education

Human Services

20,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

1220 SW Columbia St Portland, OR 97201 Bridge Meadows

8502 N Wayland Ave Portland, OR 97203 20-2028975

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

St Juan Diego Catholic Church	32-0032429	501(c)(3)	8,500		Religion
5995 NW 178th Ave		1			
Portland, OR 97229					

Northwest Kidney Kids 05-0632305 501(c)(3) 15,000 Diseases/Disorders

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO Box 230075 Portland, OR 97281

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance 93-0805248 501(c)(3) 10.000 Operation Nightwatch Human Services PO Box 4005 Portland, OR 97208

Religion

20,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Saint Andre Bessette Catholic

Church 601 W Burnside Portland, OR 97209 93-0391635

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Marion-Polk Food Share Inc. 94-3034161 501(c)(3) 14.000 Food, Agriculture & 1660 Salem Industrial Drive Nutrition NF Salem, OR 973010374

Education

25.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

93-0757378

Open School

Administrative Office 7633 N Wabash Avenue Portland, OR 97217

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance Alzheimer's Association Oregon 13-3039601 501(c)(3) 25,000 Diseases/Disorders

Housing

8,000

Chapter				
1650 NW Naito Parkway Suite				
190				
Portland, OR 97209				

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

93-1029893

Oregon Energy Fund

1020 SW Taylor St Suite 620 Portland, OR 97205

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance St Francis Catholic Church of 53-0196617 501(c)(3) 8,000 Religion

Portland 330 SE 11th Avenue Portland, OR 972141317					
Girl Scouts of Oregon and SW Washington Portland Service Center	93-0399051	501(c)(3)	17,500		Youth Development

9620 SW Barbur Boulevard Portland, OR 97219

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 93-0813981 501(c)(3) 15.000 REACH Community Housing Development

4150 SW Moody Ave Portland, OR 97239					
Muscular Dystrophy Association Greater Oregon District 4800 SW Macadam Suite 205	13-1665552	501(c)(3)	20,000		Diseases/Disorders

Portland, OR 97239

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 93-1319640 501(c)(3) 15.000 Blosser Center for Dyslexia Diseases/Disorders Resources

PO Box 18082 Portland, OR 97218

CASA for Children Inc 93-0923866 501(c)(3) 30,000 Human Services

1401 NE 68th Avenue

Portland, OR 97213

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Northwest Association for Blind 26-0244283 501(c)(3) a nool Recreation & Sports

Vancouver, WA 98665					
PO Box 65265					
Athletes					
Horanivese Association for Billia	20 02 11203	301(0)(3)	7,000		I veci catioi

Oregon City, OR 97045

Mental Health. Northwest Autism Foundation 501(c)(3) 20.000 93-1234288 519 15th Street Substance Abuse

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 93-0429354 501(c)(3) 20.000 Food, Agriculture & Sunshine Division Nutrition

687 N Thompson Street Portland, OR 97227 American Red Cross Cascades 53-0196605 501(c)(3) 35.000 Public Safety, Disaster Services

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Region 3131 N Vancouver Ave

Portland, OR 97227

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 93-0806912 501(c)(3) 18.000 Health Care Ronald McDonald House Charities of Oregon and

Southwest Washington 2620 N Commercial Avenue Portland, OR 97227					
Hacienda Community	93-0979064	501(c)(3)	7,000		Housing

Portland, OR 97218

Development Corporation 6700 NE Killingsworth St

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance Providence Child Center 93-0800140 501(c)(3) 66 000 Health Care

	02 1205272	E04( )(2)	10.000		
Foundation 830 NE 47th Avenue Portland, OR 97213					
Farm data a	33 0000110	]	00,000		Tredien ec

St Helens, OR 97051

Mental Health, Amanı Center 93-1295272 501(c)(3)| 10,000 PO Box 1001 Substance Abuse

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance In4All 93-0900111 501(c)(3) 15,000 Employment

12745 SW Beaverdam Rd Suite 220 Beaverton, OR 97005					
Holy Redeemer Catholic Church St Vincent de Paul Conference	93-0964356	501(c)(3)	9,500		Human Services

25 N Portland Blvd Portland, OR 97217

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance Big Brothers Big Sisters 93-1303640 501(c)(3) 22 500 Education

Humanities

Columbia Northwest 1827 NE 44th Ave 100 Portland, OR 97213		552(5)(5)	,		
MetroArts Inc	93-1260537	501(c)(3)	22,500		Arts, Culture &

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

0240 SW Canby Street

Portland, OR 97219

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance Clackamas Women's Services 93-0900119 501(c)(3) 28.000 Crime & Legal 256 Warner Milne Road

Oregon City, OR 97045 Oregon Alliance for Arts 93-0771793 501(c)(3) 8.500 Education

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Arts, Culture & Humanities 5247 SE Mall St Portland, OR 97206

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Friendly House 93-0524232 501(c)(3) 20.000 Education

Housina

27,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

2617 NW Savier Street Portland, OR 97210 Human Solutions Inc

12350 SE Powell Blvd Portland, OR 97236 93-0977166

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 93-1029151 501(c)(3) 20.000 Arts, Culture &

Oregon Children's Theatre 1939 NE Sandy Blvd Portland, OR 972322894

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Portland, OR 97209

Humanities Central City Concern 93-0728816 501(c)(3) 30,000 Employment 232 NW Sixth Ave

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance E047 3733 25 222

Portland Leadership Foundation 809 N Russell 203 Portland, OR 97227	26-4224606	501(c)(3)	25,000		Public, Society Benefit
Parrott Creek Child & Family	93-0591772	501(c)(3)	15,000		Crime & Legal

1001 Molalla Avenue Suite 209 Oregon City, OR 97045

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Portland Community College 93-0811291 501(c)(3) 151.000 Education

Foundation PO Box 19000 Portland, OR 972800990 Foundations for a Better 42-1606106 501(c)(3) 18.000 Education

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Oregon

221 NW 2nd Ave Suite 201E Portland, OR 97209

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 20-4223437 501(c)(3) 20.000 Education

Schoolhouse Supplies Inc 4916 NE 122nd Ave Portland, OR 97230

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Portland, OR 972923530

Impact NW 93-0557964 501(c)(3) 45.000 Human Services PO Box 33530

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance PHAME Academy 93-0991167 501(c)(3) 12.500 Arts. Culture & 1631 NE Broadway 134 Humanities Portland, OR 97232 Lutheran Community Services 93-0386860 501(c)(3) 25.000 Human Services Northwest Multnomah County Office

605 SE Cesar E Chavez Blvd Portland, OR 972143298

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Gales Creek Camp Foundation 93-6010464 501(c)(3) 20.000 Diseases/Disorders 6950 SW Hampton St Suite 242 Tigard, OR 97223

Human Services

8.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

45-0228055

Good Samaritan Society

Fairlawn Village 3457 NE Division Street Gresham, OR 97030

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance LifeWorks NW 93-0502822 501(c)(3) 60,500 Mental Health, ince Abuse

14600 NW Cornell Road Portland, OR 97229					Substance A
Franciscan Montessori Earth School	22-3164899	501(c)(3)	15,000		Education

14750 SE Clinton Street Portland, OR 972362316

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 93-0495657 501(c)(3) 8.000 Religion St Pius X Catholic Church St Vincent de Paul Conference 1280 NW Saltzman Road

Health Care

7.000

Portland, OR 97229

94-3399504

501(c)(3)

SacredFlight

PO Box 6866 Portland, OR 97228

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance St Charles Catholic Church St 93-0391615 501(c)(3) 9.000 Human Services Vincent de Paul Conference 5310 NE 42nd Ave Portland, OR 97218 American Diabetes Association 13-1623888 501(c)(3) 45.000 Diseases/Disorders of Oregon SW Washington &

Southern Idaho 4380 SW Macadam Ave Ste 270

Portland, OR 97239

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 93-6041506 501(c)(3) 10.000 Oregon Lions Sight and Philnthrpy, Voluntarism l& Grntmaking

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

3969 NE MLK Jr Blvd Portland, OR 97212

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance APC of Multnomah-Clackamac 02-0420765 501/61/31 15 000 Human Services

6929 NE Halsey Portland, OR 97213	93-0439763	301(c)(3)	15,000		numan services
The Healing Circle 1054 Exchange Street PO Box	93-1108161	501(c)(3)	10,000		Mental Health, Substance Abuse

964

Astoria, OR 97103

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Humanities

Urban Gleaners PO Box 6344 Portland, OR 97228	20-4641665	501(c)(3)	8,500		Food, Agriculture & Nutrition
Pacific Northwest College of Art	93-1139187	501(c)(3)	9,000		Arts, Culture &

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

511 NW Broadway

Portland, OR 97209

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance Self Enhancement Inc 93-1086629 501(c)(3) 7.000 Human Services 501(c)(3) 9.000 Human Services

3920 N Kerby Avenue Portland, OR 972271255		
St Francis Catholic Church St Vincent de Paul Conference	93-0395584	

1131 SE Oak Portland, OR 97214

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Mt Hood Community College 23-7061622 501(c)(3) 91.000 Education Foundation 26000 SE Stark Street Gresham, OR 97030

Human Services

8.500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

St John the Apostle Church St

Vincent de Paul Conference 417 Washington St Oregon City, OR 97045 93-0391620

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance Growing Gardens 93-1213728 501(c)(3) 6.000 Food, Agriculture & Nutrition

2203 NE Oregon St Portland, OR 97232 St Ignatius Parish St Vincent 93-1088941 501(c)(3) 7.500 Human Services de Paul Conference 3400 SE 43rd

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Portland, OR 97206

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance St Mary's Church St Vincent do 501/61/31 e nool Human Services

SMART	93-1051724	501(c)(3)	11,000		_	Education
Paul Conference 960 Missouri Avenue Vernonia, OR 97064						
Strialy's Church St vilicent de l		301(0)(3)	0,000			Triuman Serv

101 SW Market St Portland, OR 97201

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance St Joseph Catholic Church St 93-0437956 501(c)(3) 8.500 Human Services Vincent de Paul Conference 2310 SF 148th Ave Portland, OR 97233 St John Fisher Parish St 93-0480212 501(c)(3) 7.500

Human Services

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Vincent de Paul Conference 7007 SW 46th Ave Portland, OR 97219

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance St John the Baptist Church St 93-0391621 501(c)(3) 8.500 Human Services Vincent de Paul Conference

10955 SE 25th Ave Milwaukie, OR 97222					
Canby St Vincent de Paul Food Bank c/o St Patrick Catholic Church PO Box 754	93-0456525	501(c)(3)	9,000		Food, Agriculture & Nutrition

Canby, OR 97013

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance St Michael Parish St Vincent de 501(c)(3) 7.500 Human Services Paul Conference 18090 SE Langensand Road Sandy, OR 97055

Human Services

10.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

St Matthew Parish St Vincent

de Paul Conference 447 SE 3rd Ave Hillsboro, OR 97123 93-0429016

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Wallace Medical Concern 93-0853709 501(c)(3) 15.000 Health Care 501(c)(3) 8.500 Human Services

124 NE 181st Ave 103 Portland, OR 97230 St Mary Star of the Sea Catholic Church St Vincent de

Paul Conference 1465 Grand Avenue

Astoria, OR 97103

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance B'nai B'rith Camn 91-1842787 501(c)(3) 15.000 Recreation & Sports

9400 SW Beaverton-Hillsdale					
Hwy					
Suite 200					
Beaverton, OR 97005					
St Wenceslaus Catholic Church	93-0408079	501(c)(3)	9,000		Human Services

St Vincent de Paul Conference 51555 Old Portland Road Scappoose, OR 97056

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 94-3144895 501(c)(3) 12.500 ROSE Community Housing

Housing

Development Corporation 5215 SE Duke Street Portland, OR 97206		( )( )	,
JOIN	93-1090005	501(c)(3)	32,000

PO Box 16490 Portland, OR 97292

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 93-0441769 501(c)(3) 20.000 Food, Agriculture & Portland Adventist Community Services Nutrition 11020 NE Halsev Street Portland, OR 97220 Friends of the Children -93-1098105 501(c)(3) 15.000 Education

Portland 44 NE Morris St Portland, OR 97212

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Clatsop County Women's 93-0691750 501(c)(3) 9.000 Crime & Legal Resource Center PO Box 1342 Astoria, OR 97103 Church of St Michael the 95-4621392 501(c)(3) 9.000 Religion

Archangel 424 SW Mill Street Portland, OR 97201

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 45-3744697 501(c)(3) 8.000 Education

Education

30,000

Bridges Middle School 45-3744697 501(c)(3) 8,000 Ed 2510 SW First Avenue Portland, OR 97201

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Education Northwest

101 SW Main Street 500 Portland, OR 972043228 93-0553346

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance St Vincent de Baul of Crook 87-0747592 501(c)(3) 8 5001 Human Services

St villecht de l'adi of clook	0, 0, 4,352	301(0)(3)	0,500		I raman 5
County					
PO Box 545					
Prineville, OR 97754					

Portland, OR 97211

93-1155647 501(c)(3) 7.500 Education Constructing Hope 405 NE Church St

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Relay Resources 93-0468214 501(c)(3) 10.000 Employment 5312 NE 148th Avenue

Religion

50,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Portland, OR 972303438

Visitation Catholic Church

4285 NW Visitation Road Forest Grove, OR 97116 93-0479886

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance an Services

FosterClub Inc 810 Broadway Street 203	93-1287234	501(c)(3)	10,000			Humai
Seaside, OR 97138						

315 SW Fifth Avenue Suite 900

Portland, OR 97204

CareOregon 93-0933975 501(c)(3) 40.000 Health Care

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance

Diseases/Disorders

St Mary's Cathedral of the Immaculate Conception	93-6017570	501(c)(3)	10,000		Religion
1716 NW Davis St					
Portland, OR 97209					

7.500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

20-2381913

Park Academy

1915 South Shore Blvd Lake Oswego, OR 97034

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Village Enterprises 91-1828496 501(c)(3) 16.500 Housing

Education

PO Box 83749 Portland, OR 97283

375,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Central Catholic High School 93-0391557 2401 SE Stark

Portland, OR 97214

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance other) or government assistance Faith Bible Christian School 93-1027843 501(c)(3) 8.000 Education 8975 NE Walker Road 120 Hillsboro, OR 97006

Education

8975 NE Walker Road 120
Hillsboro, OR 97006

La Salle Catholic College 93-0553268 501(c)(3) 18,500
Preparatory

11999 SE Fuller Road Milwaukie, OR 97222

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance Pacific Crest Community 93-1103293 501(c)(3) 6 500 Education

racine crest community	JJ 11032JJ	301(0)(3)	0,500		Laacac
School					
116 NE 29th Avenue					
Portland, OR 97232					

Salem, OR 97301

Blanchet Catholic School 93-1171184 501(c)(3) 7.000 Education 4373 Market Street NE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 93-1287554 501(c)(3) 35.000 Education De La Salle North Catholic High! School 7528 N Fenwick Avenue

Education

51.500

Portland, OR 97217 St Marv's Academy

1615 SW Fifth Avenue Portland, OR 97201

93-0386918

501(c)(3)

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 91-2083459 501(c)(3) 20.000 Education Seton Catholic College Preparatory High School

9000 NE 64th Avenue Vancouver, WA 98665

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Compassion Connect

26-2304524 17.500 Crime & Legal

501(c)(3) 12135 SE Lincoln St Portland, OR 97216

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 93-0719295 501(c)(3) 6.500 Religion Christ the Vine Lutheran Church 18677 SE Highway 212 Damascus, OR 97089 Resurrection ChurchSt Vincent 93-0456525 501(c)(3) 7.500 Human Services

de Paul Conference 21060 SW Stafford Rd Tualatin, OR 97062

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance Father's Heart Street Ministry 65-1224857 501(c)(3) 8,000 Human Services

603 12th Street Oregon City, OR 97045					
Yamhıll County Gospel Rescue Mıssıon PO Box 373	20-0758858	501(c)(3)	8,500		Housing

McMinnville, OR 97128

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance

Project Lemonade PO Box 96144	46-1675159	501(c)(3)	7,500		Human Services
Portland, OR 97296					
Multnomah County Department	93-6002309	170(c)(1)	12,000		Crime & Legal

of Community Justice

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 SE Hawthorne Blvd 250 Portland, OR 97214

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Fourth Dimension Recovery 46-2702985 501(c)(3) 6,000 Mental Health,

Center 3807 NE MLK Blvd Portland, OR 97212					Substance Abuse
Senior Advocates for Generational Equity Inc	45-3599268	501(c)(3)	6,500		Philnthrpy, Voluntarism & Grntmaking

1515 SW Fifth Avenue Suite 600

Portland, OR 97201

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance

Victory Academy PO Box 428 Tualatin, OR 97062	36-4642494	501(c)(3)	30,000		Education
ASD Oregon	27-2430848	501(c)(3)	8,500		Recreation & Sports

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

12042 SE Sunnvside Rd 450 Clackamas, OR 97015

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance E2 0406647 E047 3733 100 000

7007 SW 46th Ave Portland, OR 97219	53-019661/	501(c)(3)	100,000		Religion
Community Resource Trust 265 Commercial St SE Suite	27-2773359	501(c)(3)	70,000		Community Dev, Business & Industry

265 Commercial St SE Suite 270

Salem, OR 97301

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

St Alexander Catholic Church	93-0624350	501(c)(3)	8,500		Religion
PO Box 644					
Cornelius, OR 97113					

10814 NE Halsey Street Portland, OR 97220

on Guardian Partners 46-0907112 501(c)(3) 8,500 Crime & Legal

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Cascadia Behavioral Healthcare 93-0770054 501(c)(3) 20.000 Mental Health, Inc Substance Abuse

Bend, OR 97702

847 NE 19th Ave POB 8459 Portland, OR 97207						
Children's Museum of Central Oregon 61396 SE Blakely Road Suite 215	47-4683838	501(c)(3)	10,000		I	Arts, Culture & Humanities

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance Villages NW 46-4190513 501(c)(3) 10.000 Human Services

PO Box 33642 Portland, OR 97292	10 1150010	301(0)(0)	10,000		Traman Services
Cupcake Girls	45-3970815	501(c)(3)	12,000		Crime & Legal

3110 S valley view blvd Suite 201

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Las Vegas, NV 89102

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance me & Legal

Tualatin, OR 97062 Foster Closet Inc	27-0898182	501(c)(3)	9.000		Human Services
A Village for One PO Box 3973	46-1536234	501(c)(3)	8,000		Crime & Legal

PO Box 1301 Hillsboro, OR 97123

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Davbreak Youth Services 91-1083936 501(c)(3) 10.000 Mental Health. 11910 NE 154th St Substance Abuse

Religion

25,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Brush Prairie, WA 98606
Sacred Heart Catholic Church

3910 SE 11th Ave Portland, OR 97202 53-0196617

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance St Joseph the Worker Catholic 93-0437956 501(c)(3) 50.000 Religion Church 2310 SF 148th Ave

Church
2310 SE 148th Ave
Portland, OR 97223

AAUW of Oregon 93-6026956 501(c)(3) 6,500 Education

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO Box 196 Williams, OR 97544

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Bevond Differences 27-1772372 501(c)(3) 24.000 Education 711 Grand Ave Suite 200

Religion

50,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

San Rafael, CA 94901
The Madeleine Parish

3123 NE 24th Ave Portland, OR 97212 93-0391560

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance Episcopal Church of the Holv 501(c)(3) 6.500 Religion

Spirit PO Box 1117 Battle Ground, WA 98604

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

The Madonna's Center for Life 81-2324020 501(c)(3) 6.000 Human Services

PO Box 22368

Milwaukie, OR 97269

efil	e GRAPHIC pr	rint - DO NOT PROCESS	DLN: 934	9330	3021	.709	
Schedule J		Compensation Information	on om	B No	1545-0	0047	
(For	n 990)	For certain Officers, Directors, Trustees, Key Employ					
		Compensated Employees  ▶ Complete if the organization answered "Yes" on Form	990. Part TV. line 23.	20	18	₹	
		▶ Attach to Form 990.		pen to Public			
	tment of the Treasury al Revenue Service	► Go to <u>www.irs.gov/Form990</u> for instructions and the	latest information.		ectio		
	me of the organiza		Employer identificat	ion nu	ımber		
OCF	Joseph E Weston Pu	ublic Foundation	93-1046399				
Pa	rt I Questi	ons Regarding Compensation	•				
					Yes	No	
1a		opiate box(es) if the organization provided any of the following to or for ection A, line 1a Complete Part III to provide any relevant information					
			residence for personal use				
	_		s use of personal residence				
		nification and gross-up payments  Health or social club of					
	L Discretion	nary spending account LJ Personal services (e g	ງ , maid, chauffeur, chef)				
b		xes in line 1a are checked, did the organization follow a written policy reall of the expenses described above? If "No," complete Part III to explain		<b>1</b> b			
2		ation require substantiation prior to reimbursing or allowing expenses in ses, officers, including the CEO/Executive Director, regarding the items of		2			
	directors, truste	res, officers, including the CEO/Executive Director, regarding the items of	thecked in line 1a.				
3		If any, of the following the filing organization used to establish the complex of					
	_	ed organization to establish compensation of the CEO/Executive Director					
	Componer	ation committee	contract				
		ent compensation consultant					
			d or compensation committee				
4		, did any person listed on Form 990, Part VII, Section A, line 1a, with re	espect to the filing organization or a				
	related organiza	ation					
а		ance payment or change-of-control payment?		4a		No	
b	•	r receive payment from, a supplemental nonqualified retirement plan?		4b		No	
С		r receive payment from, an equity-based compensation arrangement? of lines 4a-c, list the persons and provide the applicable amounts for ea	ch item in Part III	4c		No	
	,	· · · · · · · · · · · · · · · · · · ·					
	Only 501(c)(3	), $501(c)(4)$ , and $501(c)(29)$ organizations must complete lines	5-9.				
5		ed on Form 990, Part VII, Section A, line 1a, did the organization pay or ontingent on the revenues of	· accrue any				
а	The organization	n <sup>7</sup>		5a		No	
b	Any related orga			5b		No	
_	-	5a or 5b, describe in Part III					
6		ed on Form 990, Part VII, Section A, line 1a, did the organization pay or ontingent on the net earnings of	accrue any				
a	The organization			6a		No	
b	Any related orga			6b		No	
7	•	6a or 6b, describe in Part III	lo any nonfivod				
7	payments not d	ed on Form 990, Part VII, Section A, line 1a, did the organization provid escribed in lines 5 and 6? If "Yes," describe in Part III		7		No	
8		nts reported on Form 990, Part VII, paid or accured pursuant to a contr nitial contract exception described in Regulations section 53 4958-4(a)(3		8		No	
9	If "Yes" on line 5 53 4958-6(c)?	8, did the organization also follow the rebuttable presumption procedure	e described in Regulations section	9		110	
For I	Danarwark Badu	iction Act Notice, see the Instructions for Form 990.	Cat No 50053T Schedule 1	/Earn	, 000)	2018	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (B) Breakdown of W-2 and/or 1099-MISC compensation (A) Name and Title (C) Retirement and (D) Nontaxable (E) Total of columns (F) Compensation in column (B) reported other deferred (B)(ı)-(D) benefits (i) Base (ii) Bonus & incentive (iii) Other compensation as deferred on prior compensation reportable compensation Form 990 compensation 1 MAX WILLIAMS (i) 0 0 0 0 0 TRUSTEE 356,981 0 39,139 (ii) 3,301 45.500 444,921 2 ELIZABETH CAREY 0 (i) 0 0 0 0 0 ASST 219,035 2,000 378 23,422 287,996 (ii) 43,161 SECRETARY /TREASURER

Schedule J (Form 990) 2018

	ruge <b>3</b>
Part III Supplemental Inform	nation
Provide the information, explanation, or	descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information
Return Reference	Explanation
Schedule J, Part I, Line 3 PROCESS	

OCF's CEO The Board reviews the CEO's salary annually In setting the CEO's salary, the Board reviews salaries and benefits of similar positions nationally and locally Information reviewed includes survey data and Forms 990 of similar organizations. The Board's process and decision regarding CEO's salary is documented in the Board minutes. During 2018, a comprehensive compensation review of the CEO's salary was performed and shared with the Executive Committee of the

Page 3

Schedule 1 (Form 990) 2018

lBoard

efile GRAPHI	C print - DO	NOT PROCES	SS A	s Filed Data -					DL	N: 93	4933	030	21709
Schedule L (Form 990 or 990	I-EZ) ► Com	plete if the org	anizatio	ions with Ir	" on Form 9	90, Part IV, li	nes 2	5a, 2	25b, 26		МВ No	1545	5-0047
			► A	r 28c, or Form 99 ttach to Form 990	or Form 99	00-EZ.		<b>!.</b>			2018		
Department of the Tre Internal Revenue Serv	I	<b>⊳G</b> o t	to <u>www.</u>	<u>irs.gov/Form990.</u>	for the late	st information	1.				Open Ins	to P	ublic
Name of the org	anızatıon	tion					Er	nplo	yer ide	ntifica			
•									6399				
				501(c)(3), section 5 on Form 990, Part 1						ne 40b			
		qualified person		(b) Relationship be	tween disqua			(c) D	escript	ion of	(d	) Cor	rected?
				С	rganization			tr	ansactı	on	Y	es	No
			_										
			-										
Part II Los Cor	ans to and/ nplete if the or orted an amou	or From Integration answers on Form 990, ship (c) Purpose	rested ered "Yes Part X, II	s" on Form 990-EZ,				In	line 26 (I Appro boai	s, or if  h)  ved by rd or  nittee?	(	ganıza i)Writ greem	tten
			То	From			Yes	No	Yes	No	Yes		No
Total				<u> </u>	\$			l .					
Part IIII Gra	nte or Accid	tance Renefit	tina In	terested Persoi	16								
				"Yes" on Form 9		, line 27.							
(a) Name of inte	rested person	(b) Relationshi interested perso organiza	on and th		of assistance	( <b>d)</b> Type o	of assi	stanc	ce	<b>(e)</b> Pu	rpose (	of ass	ıstance
						1							
						1			_				
For Paperwork Rec	luction Act Noti	ce, see the Instru	ictions fo	r Form 990 or 990-E	<b>Z.</b> C.	l at No 50056A		Scl	nedule I	(Form	990 0	- 990-	EZ) 2018

(a) Name of interested person	between interested person and the organization	transaction	(u) Description of transaction	of organization's revenues?		
				Yes	No	
(1) Weston Investment Company LLC	Entity more than 35% owned by J Weston trustee and officer		Weston Investment Company LLC leases land at fair market value		No	

Part V **Supplemental Information** Provide additional information for responses to questions on Schedule L (see instructions)

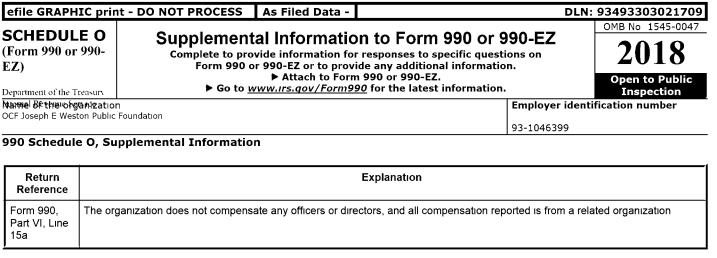
Explanation

Schedule L (Form 990 or 990-EZ) 2018

Return Reference

efil	e GRAPHIC pr	int - DO NOT PR	OCESS	As Filed Data -		DLN: 9	349330	3021	709		
	EDULE M		ı	loncash Contri	hutions	(	OMB No 1	.545-0	047		
(For	m 990)										
		l -	_	anizations answered "Yes" on Form 990, Part IV, lines 29 or 30. $2018$							
		► Attach to Form		100 for the latest informat	.i.a		_				
Intern	tment of the Treasury al Revenue Service		ov/ Forms	190 for the latest informat			Open to Inspe	ection	1		
Name OCF J	e of the organizat oseph E Weston Pub	i <b>on</b> lic Foundation				Employer identif	ication n	umbe	r		
						93-1046399					
Pa	rt I Types	of Property		<b>.</b>							
			(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method c	(d) of determinatribution a		ts		
1	Art—Works of art	t			•						
2	Art—Historical tr	easures .									
3	Art—Fractional in										
4	Books and public										
5	Clothing and hou goods	ısehold • • • • •									
6	Cars and other v					1					
7	Boats and planes										
8	Intellectual prope										
9	Securities—Public	cly traded .									
10	Securities—Close	ely held stock .									
11	Securities—Partr		X	1	20 225 722	Opinions of exper	+-				
12	or trust interest			1	20,233,722	Opinions of exper	LS				
13	Securities—Misce Qualified conserv										
13	contribution—Hi structures	istoric									
14	Qualified conserv										
	contribution—Of			3	0.700.000	0					
	Real estate—Res		X	2 2		Opinions of exper					
17	Real estate—Oth		<u> </u>		3,400,000	Opinions of exper	LS				
18	Collectibles .										
19	Food inventory										
20	Drugs and medic										
21	Taxidermy .										
22	Historical artifact	ts									
23	Scientific specim	ens									
	Archeological art										
	Other ▶ (					ļ					
	Other ► (										
27	Other ▶ (	•									
	Other ▶ (	· · · · · · · · · · · · · · · · · · ·				<del>                                     </del>					
29				ation during the tax year for 3, Part IV, Donee Acknowled		29			4		
20-	During the	did the space	n rocente la	u contribution and access	concepted in Daul T. Lines 4 at-	rough 30 #k-# #		Yes	No		
30a	must hold for at	least three years fr	om the date	y contribution any property re e of the initial contribution, a	and which is not required to	be used for exemp	ot   30a		l No		
b	If "Yes," describ	e the arrangement (	n Part II				304		No		
31	Does the organi	zation have a gift ac	ceptance p	olicy that requires the reviev	of any nonstandard control	butions?	31	Yes	<u> </u>		
32a				or related organizations to so		sh 	32a		No		
b	If "Yes," describ	e ın Part II									
33	If the organizati	•	amount ın	column (c) for a type of pro	perty for which column (a)	s checked,					
		nn Act Notice, see the	Instruction	as for Form 990	Cat No. 512271	Schadu	le M (Form	000)	(2018)		

Schedule M (Form 990) (2018)	Page 2						
Part II  Supplemental Information.  Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in P I, column (b), the number of contributions, the number of items received, or a combination of both. Also complet this part for any additional information.							
Return Reference	Explanation						
	Real estate - Commercial - NUMBER OF ITEMS RECEIVED Securities - Partnership, LLC, or trust interests - number of contributions Real estate - Residential - number of items received						
	Schedule M (Form 990) (2018)						



Return Reference	Explanation
Form 990, Part VI, Line 2 Family/business relationships amongst interested persons	Jeffrey Weston, Tiffany Weston, Joe Weston - Family relationship, Keith Vernon, Joe Weston - Business relationship

Return Reference	Explanation
Form 990, Part VI, Line 7a Members or stockholders electing members of governing body	OCF is entitled to appoint 5 (of 9) Trustees of the Board of Trustees Joseph E Weston (or his successor) is entitled to appoint 4 Trustees

Return Explanation
Reference

Form 990,	The Oregon Community Foundation prepares the Form 990 which is reviewed by OCF's Vice Pres
Part VI, Line	ident/CFO and a third-party accounting firm
11b Review	completed 990 before it is filed
of form 990	
by governing	
body	

Return Reference	Explanation
Form 990, Part VI, Line 12c Conflict of interest policy	Board members receive copies of the Foundation's conflict of interest policy and confirm t hat they have read and understand the policy Board members are asked to declare conflicts of interest before votes on grants or business issues. All Board members complete disclos ure statements each year regarding transactions and grants made in previous years.

990 Schedule O, Supplemental Information

Return Explanation

Deference

the public

Reference	
Form 990,	The Foundation is a supporting organization of the Oregon Community Foundation (OCF) OCF
Part VI, Line	posts the consolidated financial statements on its website (www oregonof org). Conflict of
19 Required	interest policies and governing documents are provided upon request either by mail, elect
documents	ronically or review in the office
available to	

990 Schedule O, Supplemental Information

Return Explanation

Form 990,
Part XI, Line
9 Other
changes in
net assets or
fund
balances

Transfer from OCF for grants and other payments - 6342167, Transfer to OCF - -5008575,

Part XI, Line
9 Other
changes in
net assets or
fund
balances

Return Explanation

Kelelelice	
	The Oregon Community Foundation's audit committee oversees the audit and selection of the independent accountants
Part XII, Line	
20	

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R** 

(Form 990)

Department of the Treasury

Internal Revenue Service

## **Related Organizations and Unrelated Partnerships**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 2018

DLN: 93493303021709

Open to Public Inspection

OCF Joseph E Weston Public Foundation								loyer identi 046399	ficatio	n number		
Part I Identification of Disregarded Entities Complete if the	he organi:	zation answe	ered "Yes	" on Form	990, Part	IV, line 3						
(a)  Name, address, and EIN (if applicable) of disregarded entity		<b>(b)</b> Primary ac	tivity	Legal dom or foreigr		(d) Total inco	ome	<b>(e)</b> End-of-year a	ssets	Direct co	<b>f)</b> ontrolling tity	
Part II Identification of Related Tax-Exempt Organizations related tax-exempt organizations during the tax year.	<b>s</b> Complet	te if the orga	nızatıon	answered	"Yes" on F	orm 990,	Part I\	/, line 34 be	ecause	e it had one or	more	
(a) Name, address, and EIN of related organization	Prima	(b) ry activity	Legal dom	c) ncile (state n country)	(d) Exempt Cod	e section		(e) harity status on 501(c)(3))	D	(f) rect controlling entity	(13) co ent	g) n 512(b ontrolled tity?
(1)The Oregon Community Foundation 1221 SW Yamhill St Suite 100 Portland, OR 97205 23-7315673	Make gran life in Oreg	ts to Improve gon	(	DR	501(c)(3)	1	3		NA		Yes	No No
											+	<u> </u>
											<u> </u>	
For Paperwork Reduction Act Notice, see the Instructions for Form 99	90.		Ca	t No 5013	5Y				Sch	edule R (Form	990) 2	018

Name, address, and EIN of related organization		<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total Income	(g) Share of end-of- year assets	alloca	rtionate tions?	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	aging ner?	<b>(k</b> Percen owner
eston Investment Company LLC		real estate	OR	na	Excluded	23,763,367	291,530,585	Yes	No	-75,002	Yes	No No	
Center SW Morrison St Ste 600 Id, OR 97205 75156		, car estate			- CASIAGO	23,, 63,36,	251,650,665			,5,002			
t IV Identification of Related Organiz							answered "Ye	s" on F	orm 9	990, Part IV	/, line	e 34	
because it had one or more related (  (a)  Name, address, and EIN of	organizations treat (b) Primary activit	<u>.</u>	(c) Lega	) al	(d)   Direct controlling	(e)	(f) y Share of tota	     Shar	(g) e of end	-of- Perc	( <b>h)</b> entage		(ı) Section
related organization			domic (state or		entity	(C corp, S cor	p, income		year assets	own	ership	[(	(13) con entit <b>Yes</b>
			count			or trust)						-	
						or trust)							
						or trust)							
						or trust)							
						or trust)							

(1)The Oregon Community Foundation

(2)The Oregon Community Foundation

(3)The Oregon Community Foundation

(4)The Oregon Community Foundation

r Other transfer of cash or property to related organization(s) . . .

(a) Name of related organization

Schedule R (Form 990) 2018		Pa	age <b>3</b>
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	. 1a		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)	. 1b	Yes	
c Gıft, grant, or capital contribution from related organization(s)			No
d Loans or loan guarantees to or for related organization(s)	<del>-</del>		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	<b>1</b> g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	<u>1j</u>		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
	11	1	No

e Loans or loan guarantees by related organization(s)	1e	No
f Dividends from related organization(s)	1f	No
g Sale of assets to related organization(s)	<b>1</b> g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	No
Performance of services or membership or fundraising solicitations for related organization(s)	. 11	No

g	Sale of assets to related organization(s)	1g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
1	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	Yes	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
o	Sharing of paid employees with related organization(s)	10		No
p	Reimbursement paid to related organization(s) for expenses	<b>1</b> p		No
q	Reimbursement paid by related organization(s) for expenses	<b>1</b> q		No

(b)

Transaction

type (a-s)

В

Μ

R

(c)

Amount involved

60,000

155,940

5,008,575

6,342,167

cash

cash

cash

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

1r Yes **1**s Yes

(d) Method of determining amount involved

Schedule R (Form 990) 2018

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	section 501(c)(3) organizations?		section 501(c)(3) organizations?		Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		e all partners I Share of		total end-of-yea	end-of-year	nd-of-year allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership	
			514)	Yes	No			Yes	No		Yes	No										
Schedule R (Form 990) 2018												0) 2018										

