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	>	_π, Σ	
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	2		
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J	Γ,)	

00	A =	Exempt O	rganization	Business	Inc	ome T	ax Re	turn	_	0	MB No. 1545-0047
Form 99	U-1		nd proxy tax						•		00.4
							*	. 20			2019
D		=	other tax year begin .irs.gov/Form990			and ending					
Department of the internal Revenue			nbers on this form						(c)(3).	Open 501/c	to Public Inspection for (3) Organizations Only
	box if s changed	_	ition (_	dentification number
B Exempt und		_	E WESTON PUBL	-		J 11130 QC00713.	,				trust, see instructions.)
S Exempt und	DO3) Print	Number street a	and room or suite no.			ons.		+		93	-1046399
408(e)		4004 014/ 444	HILL STREET, 100	· ·				-	E Unrel		usiness activity code
408A	220(e) Type	' 	e or province, countr		n posta	l code	1		(See	instruc	tions.)
529(a)	_ 555(4)	PORTLAND, O	•	,, = = t. t							525990
C Book value at end of ye	of all assets F G		number (See in	structions.)	_						-
at end or ye	64,625,258 G C				on	<u></u> 501(d	c) trust		401(a)	trus	Other trust
H Enter th	e number of the	organization's u	nrelated trades	or businesses.	>	1	De	scribe	the or	ily (o	r first) unrelated
trade o	r business here	► INVESTMENTS	}	, If c	only or	ne, comple					one, describe the
first in t	the blank space	at the end of th	ne previous sent	ence, complete	Part	s I and II,	complet	e a Sc	hedule	e M f	or each additional
trade of	r business, then o	complete Parts I	III–V.							_	
I During t	he tax year, was th	ne corporation a s	subsidiary in an af	filiated group or	a pare	ent-subsidia	ry contro	lled gr	oup? .	. ▶	☐ Yes 🗹 No
If "Yes,	" enter the name	and identifying	number of the p	arent corporati	on. 🕨						
	oks are in care of					Tele	phone n	umber	•		(503) 227-6846
Parti	Unrelated Trac	de or Busines	s Income			(A) Inc	ome	(B)	Expense	98	(C) Net
	ss receipts or sal		0								
	s retums and allo			c Balance ►	1c		0				
	t of goods sold (-		2	<u> </u>	0				
	ss profit. Subtrac				3		0				0
•	ital gain net inco	•	•		4a		0		_/		0
	gain (loss) (Form		• •	•	4b		0				0
	oital loss deduction				4c		0	_/_			0
	ome (loss) from ement)		or an S corpo		_	_	242			ļ	0.040.404
	•				6	2,	318,194				2,318,194
	t income (Sched	•			7	/-	0			0	0
	elated debt-finan		•		8		0			0	0
	est, annuities, royaltic stment income of a		=		8		0			-	0
	loited exempt ac	•			10		0				0
•	ertising income (•			11		0			0	0
	er income (See ir	•			12		0				
_	al. Combine lines	=	•	./	13	2	318,194			0	2,318,194
Part II	Deductions No	t Taken Elsewi	here (See ipstru	etions for limi	tation	s on dedi	etions.)	(Dedu	ıctions	mus	t be directly
	Deductions No connected with npensation of off	the unrelated b	usiness income	9.)		EIVE	كاسرن	"			
14 Con	npensation of off	icers, directors,	and trustees (So	chedule (5) .	RE		- /0			14	0
	ries and wages		/	1			ρI . ρc	<i>ኢ</i> ኒ		15	0
16 Rep	alrs and mainten	ance /		<u> </u> <u> </u>	. MU	N 1.6 20	المستدينا	<u> </u>	[16	0
	debts			:::: / 8	· ino	GDEN	TIT.].		17	0
	rest (attach sche			· · · · • • • · • · • · • · • · • · • ·	پيسا	COEN	سنسند		[18	0
19 Tax	es and licenses .				0	سيواف	·		. [19	207,802
	reciation (attach					2	0		0		
21 Les	s depreciation of								0	21b	0
•									. [22	26
	tributions to defe	•	•						. [23	0
	oloyee benefit pro								. [24	0
	ess exempt expe								.	25	0
	ese readership c	•	•							26	0
,	er deductions (at	•						· • •		27	3,420
,	al deductions. A		•							28	211,248
,	elated business t		•	_						29	2,106,946
	luction for net o										_
/	ructions)									30	2 406 046
. ,	elated business t			πom line 29				<u> </u>	•	31	2,106,946
For Paperw	ork Reduction Ac	t Notice, see inst	ructions.		Cat	t. No. 11291J					Form 990-T (2019)

225 WEST WACKER DRIVE, SUITE 2600, CHICAGO, IL 60606-1224

Firm's address ▶

(312) 899-7000

0 Form **990-T** (2019)

0

Enter here and on page 1,

Part I, line 7, column (B).

property (attach schedule)

Total dividends-received deductions included in column 8

(1)

(2)

(3)

(4)

(attach schedule)

96

%

%

%

Enter here and on page 1,

Part I, line 7, column (A).

Schedule F-Interest, Ann	Schedule F—Interest, Annuities, Royalties, and Rents From Controlled Organizations (see Instructions) Exempt Controlled Organizations								
Name of controlled organization	2. Employer identification number	3. Net unre	lated Income Instructions)		5. Part of column included in the corganization's grounds.	controlling	conn	eductions directly ected with income in column 5	
(1)			 -		-		<u> </u>		
(2)									
(3)									
(4)					<u> </u>		<u> </u>		
Nonexempt Controlled Organia	zations								
7. Taxable Income	8. Net unrelated in (loss) (see instruct			otal of specified yments made	10. Part of column included in the corganization's grant attention of the column includes the column inclu	controlling	conne	eductions directly cted with income in column 10	
(1)					_		ļ		
(2)							<u> </u>		
(3)							 		
(4)				-			 		
					Add columns : Enter here and o Part I, line 8, co	on page 1,	Enter h	columns 6 and 11 nere and on page 1, line 8, column (B).	
Totals								0	
Schedule G-Investment	Income of a Sect	ion 501(zation (see ins	tructions			
1. Description of Income	2. Amount o	f income		Deductions ctly connected ach schedule)	4. Set-aside (attach sched	-	and s	otal deductions et-asides (col. 3 plus col. 4)	
(1)			ļ						
(2)									
(3)			•		=				
(4)	Enter here and Part I, line 9, o			'	<u></u>		Enter he Part I, II	re and on page 1, ne 9, column (B).	
Totals			o					0	
Schedule I-Exploited Exe	empt Activity Inc		-	Advertising In	come (see inst	tructions)		
Description of exploited activ	2. Gross unrelated	me conr pro	Expenses directly nected with duction of nrelated ness income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that Is not unrelated business income	6. Exp	enses table to mn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).	
(1)									
(2)									
(3)									
(4)	Enter here and page 1, Part line 10, col (I, pag A). line	here and on e 1, Part I, 10, col. (B).			<u> </u>		Enter here and on page 1, Part II, line 25.	
Totals	. •	0	0	<u> </u>] 0	
Schedule J—Advertising I Part I Income From P	reriodicals Repor		Concoli	dated Basis					
Part Income From F	eriouicais nepoi	ted on a	Conson	4. Advertising		1		7. Excess readership	
1. Name of periodical	2. Gross advertising income		L Direct tising costs	gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Read		costs (column 6 minus column 5, but not more than column 4)	
(1)									
(2)									
(3)									
(4)									
Totals (carry to Part II, line (5))	. ▶	0	0	0				0 0 990-T (2019)	

Page 5

Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns Part II 2 through 7 on a line-by-line basis.) 4. Advertising gain or (loss) (col. 2 minus col. 3). If 7. Excess readership 2. Gross costs (column 6 3. Direct 5. Circulation 6. Readership 1. Name of periodical advertising minus column 5, but income costs advertising costs income a gain, compute not more than cols. 5 through 7. column 4). (1) (2) (3) (4) 0 0 0 Totals from Part I Enter here and Enter here and on Enter here and on page 1, Part I, line 11, col. (A). page 1, Part I, line 11, col. (8). on page 1, Part II, line 26 0 Totals, Part II (lines 1-5) Schedule K-Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	-
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		▶	

Form **990-T** (2019)

Form 990T Part I, Line 5

Income (loss) from Partnership and S Corporations

Name of Partnership	EIN	UBI
INVESTMENTS		
(1) WESTON INVESTMENT COMPANY, LLC	93-0475156	2,318,194
	Total	2,318,194

Form 990T Part II, Line 19	Taxes and Licenses	

Description	Amou	unt
INVESTMENTS		
(1) OR STATE TAXES		206,302
(2) CA STATE TAXES		1,500
	Total	207,802

Form 990T Part II, Line 27	Other Deductions	
	Description	Amount
INVESTMENTS		
(1) PROFESSIONAL FEES		3,420

Form 990 Part III line 34 Chantable Contribution	Form	990T Part III. Line 34	Chantable Contributions
--------------------------------------------------	------	------------------------	-------------------------

Year Generated	Amount Generated	Amount Used in Prior Years	Amount Used in Current Year	Amount Converted to NOL	Amount Remaining	Contribution Carryover Expires
2017	7,757,332	302,136			7,455,196	2022
2018	10,329,846	258,423			10,071,423	2023
2019	12,968,992		210,695		12,758,297	2024
Totals	31,056,170	560,559	210,695	0	30,284,916	

Form 990T Part V. Line 51b	Estimated Tax Payments
FORTH 990 I Part V. Line 5 ID 1	Estiliated rax rayinons

Date	<u></u>	Amount
04/05/2019		231,049
06/14/2019		150,000
09/13/2019		150,000
	Totals	531,049