TERMINATING UNDER 507(B)(1)(B) Return of Private Foundation

Form **990-PF**Department of the Treasury

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

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No. 1545-0052 **2015**Open to Public Inspection

For calendar year 2015 or tax year beginning JUL 1, 2015 JUN 30, 2016 , and ending A Employer identification number Name of foundation WOMEN'S FOUNDATION OF OREGON 93-0386905 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite **B** Telephone number 302 221 NW SECOND AVENUE (971)230-1294City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 97209-3958 PORTLAND, OR G Check all that apply: Initial return Initial return of a former public charity **D** 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Accrual Cash F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ...► X (from Part II, col. (c), line 16) Other (specify) 4,320,173. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) for charitable purposes (cash basis only) expenses per books income income 148,121. Contributions, gifts, grants, etc., received Check if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments $\overline{21}$. 21. STATEMENT 122,683. 122,683. STATEMENT 4 Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) -1,214.6a Net gain or (loss) from sale of assets not on line 10. **b** Gross sales price for all assets on line 6a 135,483. 7 Capital gain net income (from Part IV, line 2) 0. 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances **b** Less: Cost of goods sold ... c Gross profit or (loss) 11 Other income 269,611. 122,704 0. Total. Add lines 1 through 11 85,000. 69,996. 0. 0. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 60,800. 50,068. 0. 0. 15 Pension plans, employee benefits 16a Legal fees STMT 3 100. 33. 0. 67. Expenses 1,054 b Accounting fees STMT 4 3,163. 0. 2,108. 137,234. 107,674. c Other professional fees STMT 5 25,607. 0. 17 Interest Taxes STMT 6 671. 0. 0. 0. 18 Ō. Depreciation and depletion 369. 369. 19 10,287. 8,435. 0. 0. 20 Occupancy 21 Travel, conferences, and meetings 37,385. 0. 0. 44,974. and 39,877. 22 Printing and publications 40,850. 0. 0 . 54,117. 23 Other expenses STMT 7 29,341. 0. 0. 24 Total operating and administrative 429,976. 26,694. 369 352,540. expenses. Add lines 13 through 23 70,600. 10,600. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 500,576 26,694. 369 363,140. Add lines 24 and 25 27 Subtract line 26 from line 12: -230,965 **8** Excess of revenue over expenses and disbursements 96,010. **b Net investment income** (if negative, enter -0-) 0. C Adjusted net income (if negative, enter -0-).

Р	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	•
Ė		column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	7,047.	3,086.	3,086.
	2	Savings and temporary cash investments Accounts receivable ► 1,250.	138,547.	96,629.	96,629.
	3	Accounts receivable ► 1,250.			
		Less: allowance for doubtful accounts ▶	44,000.	1,250.	1,250.
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other			
	-	disqualified persons			
	7	Other notes and loans receivable			
	l	Less: allowance for doubtful accounts			
"	١.				
Assets		Inventories for sale or use	564.		
Ass		Prepaid expenses and deferred charges		151 016	151 016
•		Investments - U.S. and state government obligations STMT 9	158,945.	151,816.	151,816.
	6	Investments - corporate stock STMT 10	2,893,591.	2,728,154.	2,728,154.
	C	Investments - corporate bonds STMT 11	1,287,152.	1,301,887.	1,301,887.
	11	Investments - land, buildings, and equipment: basis			
		Less: accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis ► 54,444. Less: accumulated depreciation STMT 8 ► 17,093.			
		Less: accumulated depreciation STMT 8 > 17,093.	45,744.	37,351.	37,351.
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	4,575,590.	4,320,173.	4,320,173.
_	17	Accounts payable and accrued expenses	17,150.	62,695.	
	18	Grants payable	·	,	
s	19				
Liabilities	l	Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable			
Ë		Other liabilities (describe ►)			
)			
	23	Total liabilities (add lines 17 through 22)	17,150.	62,695.	
_		Foundations that follow SFAS 117, check here	= 1 / = 0 0 1	02,000	
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted	4,558,440.	4,257,478.	
2	25		1/330/1100	1,237,1700	
3ala	l	Temporarily restricted			
Ā	26	Permanently restricted			
μ		Foundations that do not follow SFAS 117, check here			
٥		and complete lines 27 through 31.			
Assets or Fund Balances	27	Capital stock, trust principal, or current funds			
SS	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Net ⊿	29	Retained earnings, accumulated income, endowment, or other funds	4,558,440.	4,257,478.	
ž	30	Total net assets or fund balances	4,330,440.	4,237,470.	
	31	Total liabilities and net assets/fund balances	4,575,590.	4,320,173.	
Б	art			, ,	
				г	
1		net assets or fund balances at beginning of year - Part II, column (a), line 3			1 EEO 110
^		st agree with end-of-year figure reported on prior year's return)			4,558,440.
		amount from Part I, line 27a			-230,965.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3	ONT TATTO CONSTRA		4,327,475.
		eases not included in line 2 (itemize) UNREALIZED LOSS			69,997.
6	ı ota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umm (b), line 30	6	4,257,478.
					Form 990-PF (2015)

	arehouse; or common st	erty sold (e.g., real estate, tock, 200 shs. MLC Co.)	(b	How acquired P - Purchase D - Donation	(c) Date acqui (mo., day, y	vr.) (mo., day, yr.)
1a CHARLES SCHWAB	- 2913			P	S 06/30/16	
b						
c d						
e						
(e) Gross sales price	(f) Depreciation al (or allowable		st or other basis expense of sale		(h) Gain o (e) plus (f)	
a 135,483.			136,697	•		-1,214.
b						
C						
d				_		
Complete only for assets showir	a gain in column (h) an	d owned by the foundation	on 12/21/60		(I) O-i (O-1 (I	h) nata astawa
Complete only for assets shown	· · · · · · · · · · · · · · · · · · ·				(I) Gains (Col. (I ol. (k), but not le	n) gain minus ess than -0-) or
(i) F.M.V. as of 12/31/69	(j) Adjusted ba as of 12/31/6		cess of col. (i) col. (j), if any		Losses (fror	n col. (h))
a			(),,			-1,214.
- b						
C						
d						
е						
		in, also enter in Part I, line	7			
2 Capital gain net income or (net ca	ıpital loss) If (lo	in, also enter in Part I, line oss), enter -0- in Part I, line	, 7 <i>)</i>	2		-1,214.
3 Net short-term capital gain or (los	•					
If gain, also enter in Part I, line 8,	column (c).	, , , , ,		.		/ -
If (loss), enter -0- in Part I, line 8		140(a) far Dadres		3		N/A
Part V Qualification U					come	
(For optional use by domestic private	e foundations subject to	the section 4940(a) tax on	net investment incor	ne.)		
If section 4940(d)(2) applies, leave the	nis part blank.					
Was the foundation liable for the sec	tion 1012 tay on the die	tributable amount of any ve	ar in the hace period	2		Yes X No
If "Yes," the foundation does not qual		, ,	•			
1 Enter the appropriate amount in				es.		
(a) Base period years		(b)	(c)		(d) Distribution ratio
Calendar year (or tax year beginni	ng in) Adjusted q	qualifying distributions	Net value of nonch	aritable-use asset	s (col.	
2014		152,246.		1 264 02		(b) divided by col. (c))
2013				1,364,02		(b) divided by col. (c)) • 034887
		4,205.		3,421,42	2.	(b) divided by col. (c)) • 034887 • 001229
2012		198,755.		3,421,42: 2,995,69:	2. 1.	(b) divided by col. (c)) • 034887 • 001229 • 066347
2012 2011		198,755. 189,504.		3,421,42 2,995,69 2,948,96	2. 1. 9.	(b) divided by col. (c))
		198,755.		3,421,42: 2,995,69:	2. 1. 9.	(b) divided by col. (c))
2011 2010		198,755. 189,504. 231,137.		3,421,42 2,995,693 2,948,963 2,984,673	2. 1. 9. 8.	(b) divided by col. (c)) .034887 .001229 .066347 .064261 .077441
2011 2010 2 Total of line 1, column (d)		198,755. 189,504. 231,137.		3,421,42 2,995,69 2,948,96 2,984,67	2. 1. 9. 8.	(b) divided by col. (c)) .034887 .001229 .066347 .064261 .077441
2011 2010 2 Total of line 1, column (d)	5-year base period - divi	198,755. 189,504. 231,137. ide the total on line 2 by 5,	or by the number of y	3,421,423 2,995,693 2,948,963 2,984,673	2. 1. 9. 8. 2	(b) divided by col. (c))
2011 2010 2 Total of line 1, column (d)	5-year base period - divi	198,755. 189,504. 231,137. ide the total on line 2 by 5,	or by the number of y	3,421,423 2,995,693 2,948,963 2,984,673	2. 1. 9. 8. 2	.034887 .034887 .001229 .066347 .064261 .077441
2011 2010 2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in existe	5-year base period - divi nce if less than 5 years _.	198,755. 189,504. 231,137. ide the total on line 2 by 5,	or by the number of y	3,421,42 2,995,69 2,948,96 2,984,67	2. 1. 9. 88. 2	(b) divided by col. (c)) .034887 .001229 .066347 .064261 .077441 .244165
2011 2010 2 Total of line 1, column (d)	5-year base period - divi nce if less than 5 years _.	198,755. 189,504. 231,137. ide the total on line 2 by 5,	or by the number of y	3,421,42 2,995,69 2,948,96 2,984,67	2. 1. 9. 88. 2	(b) divided by col. (c)) .034887 .001229 .066347 .064261 .077441 .244165
2011 2010 2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in existe 4 Enter the net value of noncharitation	5-year base period - divi nce if less than 5 years ble-use assets for 2015 f	198,755. 189,504. 231,137. ide the total on line 2 by 5,	or by the number of y	3,421,42 2,995,69 2,948,96 2,984,67 vears	2.1.9.88.	(b) divided by col. (c)) .034887 .001229 .066347 .064261 .077441 .244165 .048833
2011 2010 2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in existe	5-year base period - divi nce if less than 5 years ble-use assets for 2015 f	198,755. 189,504. 231,137. ide the total on line 2 by 5,	or by the number of y	3,421,42 2,995,69 2,948,96 2,984,67 vears	2.1.9.88.	(b) divided by col. (c)) .034887 .001229 .066347 .064261 .077441 .244165
2011 2010 2 Total of line 1, column (d)	5-year base period - divi nce if less than 5 years ple-use assets for 2015 f	198,755. 189,504. 231,137. ide the total on line 2 by 5, from Part X, line 5	or by the number of y	3,421,42 2,995,69 2,948,96 2,984,67	2	(b) divided by col. (c)) .034887 .001229 .066347 .064261 .077441 .244165 .048833 4,143,464.
2011 2010 2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in existe 4 Enter the net value of noncharitation	5-year base period - divi nce if less than 5 years ple-use assets for 2015 f	198,755. 189,504. 231,137. ide the total on line 2 by 5, from Part X, line 5	or by the number of y	3,421,42 2,995,69 2,948,96 2,984,67	2	(b) divided by col. (c)) .034887 .001229 .066347 .064261 .077441 .244165 .048833 4,143,464.
2011 2010 2 Total of line 1, column (d)	5-year base period - divince if less than 5 years on the less than 5 years of the less than 5 years on the less than 5 years of the less than 5 ye	198,755. 189,504. 231,137. ide the total on line 2 by 5, from Part X, line 5	or by the number of y	3,421,42 2,995,69 2,948,96 2,984,67	2	(b) divided by col. (c)) .034887 .001229 .066347 .064261 .077441 .244165 .048833 4,143,464. 202,338.
2011 2010 2 Total of line 1, column (d)	5-year base period - divince if less than 5 years on the less than 5 years of the less than 5 years on the less than 5 years of the less than 5 ye	198,755. 189,504. 231,137. ide the total on line 2 by 5, from Part X, line 5	or by the number of y	3,421,42 2,995,69 2,948,96 2,984,67	2	(b) divided by col. (c)) .034887 .001229 .066347 .064261 .077441 .244165 .048833 4,143,464.
2011 2010 2 Total of line 1, column (d)	5-year base period - divince if less than 5 years on the less than 5 years of the less than 5 years on the less than 5 years of the less than 5 ye	198,755. 189,504. 231,137. ide the total on line 2 by 5, from Part X, line 5	or by the number of y	3,421,42 2,995,69 2,948,96 2,984,67	2	(b) divided by col. (c)) .034887 .001229 .066347 .064261 .077441 .244165 .048833 4,143,464. 202,338.

Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 - see	instru	ictio	ns)
18	Exempt operating foundations described in section 4940(d)(2), check here and enter					
	Date of ruling or determination letter: (attach copy of letter if necessary)					
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here		1		9	60.
	of Part I, line 27b					
(All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of F	Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others	s enter -0-)	2			0.
3	Add lines 1 and 2		3		9	60.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others	s enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		9	60.
6	Credits/Payments:					
á	2015 estimated tax payments and 2014 overpayment credited to 2015	Sa				
t	Exempt foreign organizations - tax withheld at source	Sb .				
		Sc Sc				
(Backup withholding erroneously withheld 6	6d				
7	Total credits and payments. Add lines 6a through 6d		7			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	d	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9		9	60.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10			
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax	Refunded ▶	11			
Pa	rt VII-A Statements Regarding Activities	•				
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation	n or did it participate or intervene	in		Yes	No
	any political campaign?			1a		Х
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and co	opies of any materials publishe	ed or			
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?			1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation. \blacktriangleright \$ 0 • (2) On foundation managers. \blacktriangleright	\$ 0.				
6	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure	tax imposed on foundation				
	managers. ► \$0 .					
2	$\label{thm:condition} \mbox{Has the foundation engaged in any activities that have not previously been reported to the IRS?}$			2		Х
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instru	ument, articles of incorporation, o	or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year? $$.			4a		Х
t	If "Yes," has it filed a tax return on Form 990-T for this year?			4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? \dots			5		Х
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	•				
	By language in the governing instrument, or					
	ullet By state legislation that effectively amends the governing instrument so that no mandatory directions $ullet$					
	remain in the governing instrument?			6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comple	ete Part II, col. (c), and Part XV	/	7	X	
88	Enter the states to which the foundation reports or with which it is registered (see instructions)	<u> </u>				
	OR					
t	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorn					
	of each state as required by General Instruction G? If "No," attach explanation			8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section					77
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," comp			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule list	ting their names and addresses		10		X

Pa	irt VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address WWW.WOMENSFOUNDATIONOFOREGON.ORG		004	
14	The books are in care of ► EMILY JENSEN Telephone no. ► 971-23	$\frac{0-1}{200}$	294	
	Located at ► 221 NW SECOND AVE NO. 302, PORTLAND, OR ZIP+4 ►97	209	- 39	58
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			· []
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	NIa
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,	10	Yes	NO X
	securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	16		Λ
	foreign country			
Pa	irt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			110
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)? $oxed{oxed}$ Yes $oxed{f X}$ No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			v
•	before the first day of the tax year beginning in 2015?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)): At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
•	hafara 20152			
	Teme all the			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year? Yes X No			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2015.) N/A	3b		77
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	AL.		v

Form 990-PF (2015) WOMEN'S FOUNDATION OF OR			93-03869	905	Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be I	Required (continu	ied)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e)) ?	Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955); o					
any voter registration drive?		Ye	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
4945(d)(4)(A)? (see instructions)			s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,					
the prevention of cruelty to children or animals?			s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und			27 / 2		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	ere		▶□		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr			l		
expenditure responsibility for the grant?		N/A Ye	es L No		
If "Yes," attach the statement required by Regulations section 53.494	• •				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to			77		
a personal benefit contract?		Ye	s LX No		1,7
\boldsymbol{b} Did the foundation, during the year, pay premiums, directly or indirectly, on a \boldsymbol{p}	ersonal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.			77		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	anagers, Highly	<i>'</i>		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
		(c) Compensation	(d) Contributions to	(e) Ex accoun	pense
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	accoun	it, other ances
	το ροσιτιστί	Citter 0)	compensation	- unowe	211000
SEE STATEMENT 12		0.	0.		0.
					
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
A Name and address of each ample as paid many than PFO 000	(b) Title, and average hours per week	0	(d) Contributions to employee benefit plans and deferred	(e) Ex accoun	pense
(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation	allow	ances
EMILY JENSEN - 221 NW SECOND AVE	EXECUTIVE DIF	ECTOR			
NO. 302, PORTLAND, OR 97209-3958	40.00	85,000.	0.	.	0.
· · · · · · · · · · · · · · · · · · ·					
				1	
				1	
				1	
Total number of other employees paid over \$50,000				-	C

WOMEN'S FOUNDATION OF OREGON 93-0386905 Form 990-PF (2015) Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation ECO NORTHWEST SW COLUMBIA ST #1600, PORTLAND, OR 97201 100,508. CONSULTING Total number of others receiving over \$50,000 for professional services. Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the Expenses number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions. Total. Add lines 1 through 3

Form **990-PF** (2015)

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: a Average monthly fair market value of securities 4,171,362. 1a 35,200. **b** Average of monthly cash balances 1b c Fair market value of all other assets 1c 4,206,562. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. Acquisition indebtedness applicable to line 1 assets 2 4,206,562. 3 Subtract line 2 from line 1d 3 63,098. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 4,143,464. 207,173. Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here

and do not complete this part.) Minimum investment return from Part X, line 6 207,173. Tax on investment income for 2015 from Part VI, line 5 960. 2a Income tax for 2015. (This does not include the tax from Part VI.) 2b 960 Add lines 2a and 2b 2c C Distributable amount before adjustments. Subtract line 2c from line 1 3 3 Recoveries of amounts treated as qualifying distributions 4 206,213 5 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 6 206,213 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 363,140. 1a Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes _____ 2 3 Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) За Cash distribution test (attach the required schedule) 3b 365,909. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 960 income. Enter 1% of Part I, line 27b 5 Adjusted qualifying distributions. Subtract line 5 from line 4 364,949. 6 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form **990-PF** (2015)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
Distributable amount for 2015 from Part XI, line 7				206,213.
2 Undistributed income, if any, as of the end of 2015:				,
a Enter amount for 2014 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2015: a From 2010		0.		
f Total of lines 3a through e	146,402.			
4 Qualifying distributions for 2015 from Part XII, line 4: ►\$ 365,909. a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions) c Treated as distributions out of corpus		0.		
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount	•			206,213.
e Remaining amount distributed out of corpus	159,696.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	306,098.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2016				0.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	18,408.			
9 Excess distributions carryover to 2016.	007 600			
Subtract lines 7 and 8 from line 6a	287,690.			
10 Analysis of line 9: a Excess from 2011 47,786.				
a Excess from 2011 b Excess from 2012 61 , 066.				
c Excess from 2013 19,142.				
d Excess from 2014				
e Excess from 2015 159,696.				

Form 990-PF (2015) WOMEN'S	FOUNDATION	OF OREGON		93-03	86905 Page 10
Part XIV	Private Operating F	oundations (see ins	structions and Part VII	-A, question 9)	N/A	
1 a If the fou	ndation has received a ruling o	determination letter that	it is a private operating			
	on, and the ruling is effective for			•		
	ox to indicate whether the found				4942(j)(3) or 49	42(j)(5)
	lesser of the adjusted net	Tax year		Prior 3 years	(// (/	(7)
	rom Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	ent return from Part X for					
	r listed					
b 85% of li						
	g distributions from Part XII,					
-	each year listed					
	s included in line 2c not					
	ectly for active conduct of					
	activities					
	g distributions made directly					
•	e conduct of exempt activities.					
	line 2d from line 2c					
	e 3a, b, or c for the					
	ve test relied upon:					
	alternative test - enter: e of all assets					
(2) Valu	e of assets qualifying er section 4942(j)(3)(B)(i)					
	nent" alternative test - enter					
2/3 of mi	inimum investment return					
shown in	Part X, line 6 for each year					
	" alternative test - enter:					
	Il support other than gross stment income (interest,					
divid	dends, rents, payments on					
	rities loans (section					
	(a)(5)), or royalties)					
(2) Sup and	port from general public 5 or more exempt					
orga	inizations as provided in					
	ion 4942(j)(3)(B)(iii)					
	jest amount of support from					
	xempt organization					
(4) Gros	ss investment income	rmation (Cample	to this part only	if the foundation	had \$5 000 ar ma	ro in cocoto
Part AV	at any time during t			ii tile loullaation	i iiau \$5,000 or iiic	ne ili assets
4 1 6			uctions.,			
	ation Regarding Foundatio		bhan 00/ af tha tatal agus		formulation bafava the aloc	a af amu tau
	managers of the foundation who tonly if they have contributed m			ributions received by the	ioundation before the clos	e or any tax
NONE	only in anoy have contained in	ιστο επαπ φο,σσο): (σσο σ	oddon oor (d)(L)i)			
	manage of the foundation wh	100/	t	an an annalli lanna nauti		utu a u a la in a u
	managers of the foundation whe tity) of which the foundation has			or an equally large portion	on of the ownership of a pa	rthership or
NONE	ary or which the roundation had	a 1070 of grouter interes				
		0	Oshalanskia ata Da			
	ation Regarding Contributi ere ► X if the foundation o					anto for friends 16
	dation makes gifts, grants, etc. (
		<u>, , , , , , , , , , , , , , , , , , , </u>				<u>u.</u>
	e, address, and telephone numl		ne person to wnom appli	cauons snould be addres	sseu:	
	COMMITTEE, (9		T X NID OD O7	200 2050		
	SECOND AVE NO					
D The form	ı in which applications should b	e submiπea and informat	ion and materials they sh	iouia inciuae:		
c Any subr	mission deadlines:					
,	-					

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

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year ADELANTE MUJERES N/A SUPPORT GRANT ÞС 2036 MAIN STREET STE A FOREST GROVE, OR 97116 31,200. BUILDING HEALTHY FAMILIES SUPPORT GRANT N/A PC 207 NE PARK STREET ENTERPRISE, OR 97828 20,000. JACKSON COUNTY SART N/A PC SUPPORT GRANT 43 MORNINGLIGHT DRIVE ASHLAND, OR 97520 10,000. IMPACT NW N/A РC SUPPORT GRANT 1785 NE SANDY BOULEVARD STE 200 PORTLAND, OR 97232 4,800. COALITION OF COMMUNITIES OF COLOR N/A PC SUPPORT GRANT 221 NW SECOND AVENUE STE 303 PORTLAND, OR 97209 1,200. SEE CONTINUATION SHEET(S) 70,600. Total ➤ 3a **b** Approved for future payment NONE Total **▶** 3b

Form 990-PF (2015)

inter gross amounts unless otherwise indicated.	Unrelated b	ousiness income	Excluded b	y section 512, 513, or 514	(e)	
	(a) Business	(b) Amount	(C) Exclu- sion	(d)	Related or exempt	
1 Program service revenue:	code	Amount	code	Amount	function income	
a						
b						
C						
d						
e						
f						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash						
investments			14	21.		
4 Dividends and interest from securities			14	122,683.		
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal property						
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory			18	-1,214.		
9 Net income or (loss) from special events						
O Gross profit or (loss) from sales of inventory						
1 Other revenue:						
a						
b						
С						
d						
e						
2 Subtotal. Add columns (b), (d), and (e)			0.	121,490.	0	
3 Total. Add line 12, columns (b), (d), and (e)				13	121,490	
See worksheet in line 13 instructions to verify calculations.)						
Part XVI-B Relationship of Activities to	the Accom	nnlishment of	Exempt Di	Irnoses		
Tiend do not write a to	, die Accon	iphoninent U	-xempt F	ai p0000		

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
$\overline{}$	

Form **990-PF** (2015) 523621 11-24-15

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of								Yes	No	
	the Code (other than section $501(c)(3)$ organizations) or in section 527 , relating to political organizations?									
а		ansfers from the reporting foundation to a noncharitable exempt organization of: Cash								v
								1a(1)		X
								1a(2)		
D	Other tran			·				45 (4)		v
	(1) Sales	of assets to a noncharital	ole exempt organizat	ion				1b(1)		X
										X
(3) Rental of facilities, equipment, or other assets										X
(4) Reimbursement arrangements (5) Loans or loan guarantees										X
	(5) Loans	s or loan guarantees						1b(5)		X
										X
							£-:		-4-	_^_
a				-			fair market value of the good		ets,	
		s given by the reporting it. i) the value of the goods, (ue ili aliy iralisa	action or sharing arrangemer	it, Silow iii		
<u>(۵)</u>		(b) Amount involved			e exempt organization	(d) Doog	ription of transfers, transactions,	and charing ar	ongome	nto
u)_	ille lio.	(b) / linount involved	(b) Name of	N/A	c cxcmpt organization	(d) Desc	inplient of transfers, transactions, a	and Sharing an	angeme	1115
				IV/A						
						+				
2a	Is the four	ndation directly or indirect	ly affiliated with, or r	elated to, one	or more tax-exempt organ	izations describ	ped			
	in section	501(c) of the Code (other	than section 501(c)	(3)) or in sect	tion 527?			Yes	X	No
b		omplete the following sch								
		(a) Name of org	anization		(b) Type of organization		(c) Description of relation	onship		
		N/A								
	11	nonolitica of non-him Library	that I have accessed 200	nakum testi t	ng accompanying schedules and	d atatams : t '	to the book of my live suite des			
o:	and he				ng accompanying schedules and In taxpayer) is based on all infor		,	May the IRS or return with the		
Się He					1	DDE	СТРЫМП	shown below		tr.)?
		nature of officer or trustee			Doto		SIDENT	X Yes		J No
	Sigi	Print/Type preparer's na	me	Preparer's s	Date	Title Date	Check if PT	IN		
		Triniviye preparer Sila	ши	ι ισμαισι δ δ	η γιατά το	Date	self- employed	IIV		
Pa	id	I.FAH D DT	CBECOBIO	T.E'AU D	. DIGREGORI			00362	101	
	eparer				SCHMIDT, PO	<u> </u>	Firm's EIN ▶ 93			
	e Only	THIN S HATTIE PROF	THAM, SIE	MUTT 0	. DCIIIIIDI, PC	•	FIIIII SEIN F 33-	01434	- 2 U	
	y	Firm's address ▶ 49	00 MEADOW	S ROAD	STE. 200					
					7035-3295		Phone no. 503-	220-5	900	
				, 010)	, , , , , , , , , , , , , , , , , , , ,		Ti liulie liu. 303			(0045)

Part XV | Supplementary Information

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y				
Recipient (form or horizon)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	oonan baaon	
TANNOVARITYE GUANGEG	NT / 2	D.C.	GUDDODE GDANE	
INNOVATIVE CHANGES 2010 LLOYD CENTER	N/A	PC	SUPPORT GRANT	
PORTLAND, OR 97232				1,200.
PORTLAND STATE UNIVERSITY FOUNDATION	N/A	PC	SUPPORT GRANT	
1600 SW 4TH AVENUE STE 730				
PORTLAND, OR 97201				1,200.
ILLINOIS VALLEY SAFE HOUSE ALLIANCE	N/A	PC	SUPPORT GRANT	
103 S. KERBY AVENUE				
CAVE JUNCTION, OR 97523				500.
SAFE OF COLUMBIA COUNTY	N/A	PC	SUPPORT GRANT	
PO BOX 22				500.
ST HELENS, OR 97051				500.
Total from continuation sheets				3,400.

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Employer identification number

2015

WOMEN'S FOUNDATION OF OREGON 93-0386905 Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year _______
\$ _ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

WOMEN'S FOUNDATION OF OREGON

93-0386905

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CLARK LEWIS FAMILY FOUNDATION 300 SE SPOKANE STREET PORTLAND, OR 97202	\$ 20,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	LAURA AND LYLE HENDERSON 12480 SE WIESE ROAD DAMASCUS, OR 97089	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	MEYER MEMORIAL TRUST 425 NW 10TH AVE PORTLAND, OR 97209	\$ 5,785.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	EILEEN FISHER 2 BRIDGE STREET SUITE 230 IRVINGTON, NY 10533	\$ 5,340.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

WOMEN'S FOUNDATION OF OREGON

93-0386905

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Page 4 Name of organization Employer identification number 93-0386905 WOMEN'S FOUNDATION OF OREGON Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for Part III the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Form **2220**

Underpayment of Estimated Tax by Corporations

Attach to the corporation's tax return.

FORM 990-PF

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

Information about Form 2220 and its separate instructions is at www.irs.gov/form2220.

2015

WOMEN'S FOUNDATION OF OREGON

Employer identification number 93-0386905

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38 on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220.

F	Part I Required Annual Payment				1	1
1	Total tax (see instructions)				1	960.
	a Personal holding company tax (Schedule PH (Form 1120), lin					
	b Look-back interest included on line 1 under section 460(b)(2)					
	contracts or section 167(g) for depreciation under the income			2b		
	Credit for federal tax paid on fuels (see instructions)					
(d Total. Add lines 2a through 2c				2d	
3	Subtract line 2d from line 1. If the result is less than \$500, do		· ·	•		0.50
	does not owe the penalty				3	960.
4	Enter the tax shown on the corporation's 2014 income tax ret	•	,			
	or the tax year was for less than 12 months, skip this line a	na en	ter the amount from line	3 ON LINE 5	4	
5	Required annual payment. Enter the smaller of line 3 or line	∕l If t	he cornoration is require	d to skin line 1		
J	enter the amount from line 3				5	960.
F	Part II Reasons for Filing - Check the boxes belo					, , ,
_	even if it does not owe a penalty (see instructions).			, p		
6	The corporation is using the adjusted seasonal installi	nent	method.			
7	The corporation is using the annualized income install					
8	The corporation is a "large corporation" figuring its firs	st req	uired installment based o	n the prior year's tax.		
F	Part III Figuring the Underpayment					
			(a)	(b)	(c)	(d)
9	Installment due dates. Enter in columns (a) through					
	(d) the 15th day of the 4th (<i>Form 990-PF filers:</i> Use 5th month), 6th, 9th, and 12th months of the					
	corporation's tax year	9	11/15/15	12/15/15	03/15/16	06/15/16
10	Required installments. If the box on line 6 and/or line 7					
	above is checked, enter the amounts from Sch A, line 38. If					
	the box on line 8 (but not 6 or 7) is checked, see instructions					
	for the amounts to enter. If none of these boxes are checked,					
	enter 25% of line 5 above in each column.	10	240.	240.	240.	240.
11	Estimated tax paid or credited for each period (see					
	instructions). For column (a) only, enter the amount					
	from line 11 on line 15	11				
	Complete lines 12 through 18 of one column					
	before going to the next column.					
	Enter amount, if any, from line 18 of the preceding column	12				
	Add lines 11 and 12	13		0.40	400	700
	Add amounts on lines 16 and 17 of the preceding column	14		240.		720.
	Subtract line 14 from line 13. If zero or less, enter -0-	15	0.	0.	0.	0.
16	If the amount on line 15 is zero, subtract line 13 from line			0.40	400	
	14. Otherwise, enter -0-	16		240.	480.	
17	,					
	subtract line 15 from line 10. Then go to line 12 of the next			2.12		
	column. Otherwise, go to line 18	17	240.	240.	240.	240.
18	Overpayment. If line 10 is less than line 15, subtract line 10					
	from line 15. Then go to line 12 of the next column	18				

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

Form 2220 (2015)

Part IV Figuring the Penalty

			(a)	(b)	(c)			(d)
19	Enter the date of payment or the 15th day of the 3rd month							
	after the close of the tax year, whichever is earlier (see							
	instructions). (Form 990-PF and Form 990-T filers:							
	Use 5th month instead of 3rd month.)	19						
20	Number of days from due date of installment on line 9 to the							
	date shown on line 19	20						
21	Number of days on line 20 after 4/15/2015 and before 7/1/2015	21						
22	Underpayment on line 17 x Number of days on line 21 x 3%	22	¢	\$	\$		\$	
22	365		Ψ	Ψ	Ψ		Ψ	
23	Number of days on line 20 after 06/30/2015 and before 10/1/2015	23						
20	number of days on line 20 after 00/30/2013 and before 10/1/2013	20						
24	Underpayment on line 17 x Number of days on line 23 x 3%	24	\$	 \$	\$		\$	
	365		*	7	·			
25	Number of days on line 20 after 9/30/2015 and before 1/1/2016	25						
26	Underpayment on line 17 x Number of days on line 25 x 3%	26	\$	\$	\$		\$	
	365							
27	Number of days on line 20 after 12/31/2015 and before 4/1/2016	27	SEE	ATTACHED W	ORKSHEET			
28	Underpayment on line 17 x Number of days on line 27 x 3%	28	\$	\$	\$		\$	
••	300							
29	Number of days on line 20 after 3/31/2016 and before 7/1/2016	29						
วก	Underpayment on line 17 x Number of days on line 29 x *%	30	¢	\$	\$		\$	
30	366	30	Ψ	Ψ	Ψ		Ψ	
31	Number of days on line 20 after 6/30/2016 and before 10/01/2016	31						
•	Trained of days of line 20 and 0,00/2010 and before 10/01/2010	<u> </u>						
32	Underpayment on line 17 x Number of days on line 31 x *%	32	\$	 \$	\$		\$	
	366		•					
33	Number of days on line 20 after 9/30/2016 and before 1/1/2017	33						
34	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$		\$	
	366							
35	Number of days on line 20 after 12/31/2016 and before 2/16/2017 $\hfill \ldots$	35						
36	Underpayment on line 17 x Number of days on line 35 x *%	36	\$	\$	\$		\$	
07			ф	Φ.	ф.		ው	
3/	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	[Φ	\$	<u> </u> \$		\$	
20	Penalty. Add columns (a) through (d) of line 37. Enter the to	tal b	ore and an Earm 1100. Iii	no 22:				
30	or the comparable line for other income tax returns	iai II	ore and on Form 1120, III	it 33,		38	¢	28.
	OF THE COMPANIENTE THE TOT OTHER HICUITE LAY LEGITIE					UO	u))	40.

Form **2220** (2015)

^{*} Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at **www.irs.gov.** You can also call 1-800-829-4933 to get interest rate information.

FORM 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s)				Identifying N	umber
WOMEN'S FO	UNDATION OF	OREGON		93-03	86905
(A)	(B)	(C) Adjusted	(D) Number Days	(E) Daily	(F)
*Date	Amount	Balance Due	Balance Due	Penalty Rate	Penalty
11/15/15	240.	-0- 2 4 0.	30	.000082192	1.
12/15/15	240.	480.	16	.000082192	
			75		
12/31/15	0.	480.		.000081967	
03/15/16	240.	720.	16	.000081967	
03/31/16	0.	720.	76	.000109290	
06/15/16	240.	960.	153	.000109290	16.
				1	
				+	
				+	
				_	
				_	
				1	
Penalty Due (Sum of Col	umn F).				28.

^{*} Date of estimated tax payment, withholding credit date or installment due date.

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT 1
SOURCE		(A REVE PER B	NUE		(B) IVESTMENT ICOME	(C) ADJUSTED NET INCOME
ALBINA BANK			21.		21.	21.
TOTAL TO PART I, LI	NE 3		21.		21.	21.
FORM 990-PF	DIVIDENDS	S AND INTER	EST FRO	OM SECUR	ITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RE	(A) EVENUE R BOOKS	(B) NET INVES MENT INCO	
EARNINGS ON INVESTMENTS	122,683	•	0. 1	22,683.	122,68	3. 122,683.
TO PART I, LINE 4	122,683		0. 1	22,683.	122,68	122,683.
FORM 990-PF		LEGAL	FEES			STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(E NET IN MENT I	WEST-	(C) ADJUSTED NET INCOM	
LEGAL FEES		100.		33.		0. 67.
TO FM 990-PF, PG 1,	LN 16A =	100.		33.		0. 67.
FORM 990-PF		ACCOUNTI	NG FEES	<u> </u>		STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(E NET IN MENT I	WEST-	(C) ADJUSTED NET INCOM	
ACCOUNTING FEES		3,163.		1,054.		0. 2,108.
TO FORM 990-PF, PG	1, LN 16B	3,163.		1,054.		0. 2,108.

FORM 990-PF	OTHER PROFES	SIONAL FEES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INVESTMENT ADVISORY FEES CONSULTING FEES	25,607. 111,627.	25,607.	0.	0. 107,674.	
TO FORM 990-PF, PG 1, LN 160	137,234.	25,607.	0.	107,674.	
FORM 990-PF	TAX	ES	ST	PATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FEDERAL EXCISE TAX	671.	0.	0.	0.	
TO FORM 990-PF, PG 1, LN 18	671.	0.	0.	0.	
FORM 990-PF	OTHER E	XPENSES	STATEMENT 7		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INSURANCE MISCELLANEOUS PROFESSIONAL DEVELOPMENT PAYROLL TAXES BANK FEES POSTAGE & DELIVERY SUPPLIES SOFTWARE SUBSCRIPTIONS WEBSITE & IT AMORTIZATION TO FORM 990-PF, PG 1, LN 23	3,204. 4,480. 2,333. 13,827. 3,681. 2,029. 6,054. 2,684. 5,032. 10,793.	0. 0. 0. 0. 0. 0. 0.	0. 0. 0. 0. 0. 0.	0. 2,731. 1,643. 10,162. 3,681. 1,980. 3,181. 1,050. 4,913. 0.	

FORM 990-PF DEPRECIATION	OF ASSETS NO	T HELD FOR	INV	ESTMENT	STATEMENT
DESCRIPTION	COST OR OTHER BASIS	ACCUMULAT DEPRECIAT		BOOK VALUE	FAIR MARKET
MERGER CAPITALIZATION MERGER CAPITALIZATION MERGER CAPITALIZATION WEBSITE DEVELOPMENT COST	2,200. 1,500. 20,425.	2	18. 17. 37.	1,882 1,283 17,588	1,283
2015 WEBSITE UPDATES COMPUTERS	27,050. 500. 2,769.	_	50. 02. 69.	13,900. 298. 2,400.	. 298
TO 990-PF, PART II, LN 14	54,444.	17,0	93.	37,351	37,351
FORM 990-PF U.S. AN	D STATE/CITY	GOVERNMENT	OBL	IGATIONS	STATEMENT
DESCRIPTION	U.; GOV		вс	OOK VALUE	FAIR MARKET VALUE
FIXED INCOME	X			151,816.	151,816
TOTAL U.S. GOVERNMENT OBLI	GATIONS			151,816.	151,816
TOTAL STATE AND MUNICIPAL	GOVERNMENT OB	LIGATIONS			
TOTAL TO FORM 990-PF, PART	II, LINE 10A			151,816.	151,816
FORM 990-PF	CORPORA	TE STOCK			STATEMENT 1
FORM 990-PF DESCRIPTION	CORPORA'	TE STOCK	ВС	OOK VALUE	STATEMENT 1 FAIR MARKET VALUE
		TE STOCK	ВС	OOK VALUE 2,728,154.	FAIR MARKET

FORM 990-PF	CORPORATE BONDS		STAT	EMENT 11
DESCRIPTION		BOOK VALU		MARKET ALUE
BOND FUNDS	•	1,301,8	87. 1	.,301,887.
TOTAL TO FORM 990-PF, PART	II, LINE 10C	1,301,8	87. 1	,301,887.
	I - LIST OF OFFICERS, D EES AND FOUNDATION MANA		STAT	EMENT 12
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION		E I EXPENSE B ACCOUNT
JULIE FALK C/O THE FOUNDATION PORTLAND, OR 97207	PRESIDENT 10.00	0.	0.	0.
BETH HUTCHISON C/O THE FOUNDATION PORTLAND, OR 97207	VP OF RESEARCH 5.00	0.	0.	0.
MEGAN WENTWORTH C/O THE FOUNDATION PORTLAND, OR 97207	VP OF MEMBERSH 5.00	IP 0.	0.	0.
NADYA OKAMOTO C/O THE FOUNDATION PORTLAND, OR 97207	SECRETARY 5.00	0.	0.	0.
VALERIE AITCHISON C/O THE FOUNDATION PORTLAND, OR 97207	ASSISTANT SECR 2.00	ETARY	0.	0.
SARA PIETKA C/O THE FOUNDATION PORTLAND, OR 97207	TREASURER 10.00	0.	0.	0.
MARCELLA MCGEE C/O THE FOUNDATION PORTLAND, OR 97207	ASSISTANT TREA 2.00	SURER 0.	0.	0.
MAYRA ARREOLA C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.

WOMEN'S FOUNDATION OF OREGON			93-0386	905
VERNA BAILEY C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
KAAREN BEAVER C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
COVENTRY BOUCHER C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
KHADIJA BRUCE C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
MARYBETH FOSSATI C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
ANNE FOSTER C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
BRENDA GROOTENDORST C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
SUE HILDICK C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
COBI JACKSON C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
MARY KALAFATIS C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
MOLLY KREUZMAN C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
LAURA LUTHI C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
LYNNE PARKER C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.

WOMEN'S FOUNDATION OF OREGON			93-03	386905
TRACI ROSSI C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
AMY SAMPLE WARD C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
JEANNIE SANTOS C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
KIMBERLEE SHENG C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
AMANDA STUERMER C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
SUE SULLIVAN C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
JENNI TANN C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
MARY KAY TETREAULT C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
WENDY USHER C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
JANET WILLIAMSON C/O THE FOUNDATION PORTLAND, OR 97207	BOARD MEMBER 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.

2015 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1 990-PF

Asset No.	Description	Dat Acqu		Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1		042	114	248	180M	43	2,200.			2,200.	171.		147.
3		0512	214	248(A)180M	43	1,500.			1,500.	117.		100.
4		0601	1 1 4	248(A)180M	43	20,425.			20,425.	1,475.		1,362.
	WEBSITE DEVELOPMENT COST 2015	0120	15		36M	43	27,050.			27,050.	4,133.		9,017.
26	WEBSITE UPDATES	0414	115		36 M	43	500.			500.	35.		167.
37	COMPUTERS * TOTAL 990-PF PG 1	1100	5 1 5	SL	5.00	16	2,769.			2,769.			369.
	DEPR & AMORT						54,444.		0.	54,444.	5,931.	0.	11,162.
	CURRENT ACTIVITY												
	BEGINNING BALANCE						51,675.		0.	51,675.	5,931.		
	ACQUISITIONS						2,769.		0.	2,769.	0.		
	DISPOSITIONS						0.		0.	0.	0.		
	ENDING BALANCE						54,444.		0.	54,444.	5,931.		
	ENDING ACCUM DEPR										17,093.		
	ENDING BOOK VALUE										37,351.		

Name(s) shown on return

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

► Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

Business or activity to which this form relates

OMB No. 1545-0172

Attachment Sequence No. **179**

990-PF

Identifying number

Par	t I Election To Expense Certain Prope	rty Under Section 1	79 Note: If yo	u have any lis	sted property, o	omplete Part		
								500,000.
	otal cost of section 179 property plac							
3 TI	hreshold cost of section 179 property	before reduction	in limitation					2,000,000.
4 R	eduction in limitation. Subtract line 3	from line 2. If zero	or less, ente	r -0-				
5 Do	ollar limitation for tax year. Subtract line 4 from line	e 1. If zero or less, enter	-0 If married fili	ng separately, see	instructions		5	
6	(a) Description of pr	roperty		(b) Cost (busin	ess use only)	(c) Elected	cost	
7 Li	isted property. Enter the amount from	n line 29			7			
8 T	otal elected cost of section 179 prope						8	
	entative deduction. Enter the smaller							
	arryover of disallowed deduction from							
	usiness income limitation. Enter the s							
	ection 179 expense deduction. Add I							
	arryover of disallowed deduction to 2						12	
	Do not use Part II or Part III below for				10			
Par		,			de listed nrone	rty)		
	pecial depreciation allowance for qua		-	•				
						_	14	
	ne tax year							
	roperty subject to section 168(f)(1) ele							369.
Par		at include listed p					16	305.
ı uı	WAONS Depreciation (Do no	Jt iriciade listed pi		ction A)			
	MACDO de divertir en ferri en						47	
	IACRS deductions for assets placed						17	
18 If y	you are electing to group any assets placed in ser	vice during the tax year	into one or more					
	Soction P Accets						tion Syste	om
	Section B - Assets	Placed in Service	e During 20	15 Tax Year I	Jsing the Gen		ition Syst	em
	Section B - Assets (a) Classification of property	(b) Month and year placed	(c) Basis for (business/ir	15 Tax Year I depreciation vestment use				em (g) Depreciation deduction
	(a) Classification of property	Placed in Service (b) Month and	(c) Basis for (business/ir	15 Tax Year I	Jsing the Gen	eral Deprecia		
19a	(a) Classification of property 3-year property	(b) Month and year placed	(c) Basis for (business/ir	15 Tax Year I depreciation vestment use	Jsing the Gen	eral Deprecia		
19a b	(a) Classification of property 3-year property 5-year property	(b) Month and year placed	(c) Basis for (business/ir	15 Tax Year I depreciation vestment use	Jsing the Gen	eral Deprecia		
	(a) Classification of property 3-year property 5-year property 7-year property	(b) Month and year placed	(c) Basis for (business/ir	15 Tax Year I depreciation vestment use	Jsing the Gen	eral Deprecia		
b	(a) Classification of property 3-year property 5-year property	(b) Month and year placed	(c) Basis for (business/ir	15 Tax Year I depreciation vestment use	Jsing the Gen	eral Deprecia		
b c	(a) Classification of property 3-year property 5-year property 7-year property	(b) Month and year placed	(c) Basis for (business/ir	15 Tax Year I depreciation vestment use	Jsing the Gen	eral Deprecia		
b c d	(a) Classification of property 3-year property 5-year property 7-year property 10-year property	(b) Month and year placed	(c) Basis for (business/ir	15 Tax Year I depreciation vestment use	Jsing the Gen	eral Deprecia		
b c d	(a) Classification of property 3-year property 5-year property 7-year property 10-year property 15-year property	(b) Month and year placed	(c) Basis for (business/ir	15 Tax Year I depreciation vestment use	Jsing the Gen	eral Deprecia		
b c d e f	(a) Classification of property 3-year property 5-year property 7-year property 10-year property 15-year property 20-year property 25-year property	(b) Month and year placed	(c) Basis for (business/ir	15 Tax Year I depreciation vestment use	Jsing the Gen (d) Recovery period	eral Deprecia	(f) Method	
b c d e f	(a) Classification of property 3-year property 5-year property 7-year property 10-year property 15-year property 20-year property	(b) Month and year placed	(c) Basis for (business/ir	15 Tax Year I depreciation vestment use	Jsing the Gen (d) Recovery period	(e) Convention	(f) Method	
b c d e f g	(a) Classification of property 3-year property 5-year property 7-year property 10-year property 20-year property 25-year property Residential rental property	(b) Month and year placed	(c) Basis for (business/ir	15 Tax Year I depreciation vestment use	Jsing the Gen (d) Recovery period 25 yrs. 27.5 yrs.	(e) Convention	(f) Method	
b c d e f	(a) Classification of property 3-year property 5-year property 7-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property	(b) Month and year placed in Service	ce During 20 (c) Basis for (business/ir only - see	depreciation vestment use instructions)	25 yrs. 27.5 yrs. 39 yrs.	eral Deprecia (e) Convention MM MM MM MM	(f) Method S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction
b c d e f g	(a) Classification of property 3-year property 5-year property 7-year property 10-year property 20-year property 25-year property Residential rental property	(b) Month and year placed in Service	ce During 20 (c) Basis for (business/ir only - see	depreciation vestment use instructions)	25 yrs. 27.5 yrs. 39 yrs.	eral Deprecia (e) Convention MM MM MM MM	(f) Method S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction
b c d e f g	(a) Classification of property 3-year property 5-year property 7-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property	(b) Month and year placed in Service	ce During 20 (c) Basis for (business/ir only - see	depreciation vestment use instructions)	25 yrs. 27.5 yrs. 39 yrs.	eral Deprecia (e) Convention MM MM MM MM	(f) Method S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction
b c d e f g h	(a) Classification of property 3-year property 5-year property 7-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Assets F	(b) Month and year placed in Service	ce During 20 (c) Basis for (business/ir only - see	depreciation vestment use instructions)	25 yrs. 27.5 yrs. 39 yrs.	eral Deprecia (e) Convention MM MM MM MM	S/L	(g) Depreciation deduction
b c d e f g h	(a) Classification of property 3-year property 5-year property 7-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Assets F	(b) Month and year placed in Service	ce During 20 (c) Basis for (business/ir only - see	depreciation vestment use instructions)	25 yrs. 27.5 yrs. 39 yrs.	eral Deprecia (e) Convention MM MM MM MM	S/L S/L S/L S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction
b c d e f g h i	(a) Classification of property 3-year property 5-year property 7-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Assets F Class life 12-year 40-year	(b) Month and year placed in Service	ce During 20 (c) Basis for (business/ir only - see	depreciation vestment use instructions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. sing the Altern	eral Deprecia (e) Convention MM MM MM MM MM MM ative Deprecia	S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction
b c d e f g h i	(a) Classification of property 3-year property 5-year property 7-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Assets F Class life 12-year 40-year	b Placed in Service (b) Month and year placed in service / / / / Placed in Service	ce During 20 (c) Basis for (business/ir only - see	depreciation vestment use instructions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. sing the Alterr 12 yrs. 40 yrs.	eral Deprecia (e) Convention MM MM MM MM MM MM ative Deprecia	S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction
b c d e f g h i 20a b c Par 21 L	(a) Classification of property 3-year property 5-year property 7-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Assets I Class life 12-year 40-year **IV* Summary (See instructions.)	b Placed in Service (b) Month and year placed in service / / / / / Placed in Service / e 28	ce During 20 (c) Basis for (business/ir only - see	depreciation vestment use instructions) Tax Year Use	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. Sing the Altern 12 yrs. 40 yrs.	eral Deprecia (e) Convention MM MM MM MM MM MM ative Deprecia	S/L	(g) Depreciation deduction
b c d e f g h i 20a b c Par 21 L 22 To	(a) Classification of property 3-year property 5-year property 7-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Assets F Class life 12-year 40-year t IV Summary (See instructions.) isted property. Enter amount from line otal. Add amounts from line 12, lines	b Placed in Service (b) Month and year placed in service / / / Placed in Service / e 28 14 through 17, lin	ce During 20 (c) Basis for (business/ir only - see	depreciation vestment use instructions) Tax Year Use Tax Year Year Year Year Year Year Year Year	25 yrs. 27.5 yrs. 27.5 yrs. 27.5 yrs. 27.5 yrs. 40 yrs.	eral Deprecia (e) Convention MM MM MM MM MM MM MM MM MM	S/L S/L	(g) Depreciation deduction
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Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns

(g) Date placed in property (list vehicles first) Date placed in placed in livestment (list vehicles first) Date placed in placed in livestment (list vehicles first) Date placed in placed in placed in livestment (list vehicles first) Date precipitation placed in service during the tax year and used more than 50% in a qualified business use: 5 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use: 6 Property used more than 50% in a qualified business use: 96	248	Section A - Do							_							٦.,
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15 Property used more than 50% in a qualified business use: 16	25					•		•	-	•						
7 Property used 50% or less in a qualified business use: 96 S/L S/L S/L 96 S/L 97 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 97 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 98 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 99 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 90 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 90 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 90 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 90 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 90 Add amounts in column (h), lines 25 through 28 29 90 Add amounts in column (h), lines 25 through 28 29 90 Add amounts in column (h), lines 25 through 28 29 90 Add amounts in column (h), lines 25 through 28 29 90 Add amounts in column (h), lines 25 through 28 29 90 Add amounts in column (h), lines 26 through 28 29 90 Add amounts in column (h), lines 25 through 29 29 90 Add amounts in column (h), lines 25 through 29 29 90 Add amounts in column (h), lines 25 through 29 29 90 Add amounts in column (h), lines 25 through 29 29 90 Add amounts in column (h), lines 25 through 29 29 90 Add amounts miles driven during the year 20 20 20 20 20 20 20 2												25				
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	8 9 0 1	Do you provide more than the use of the vehicles, and Do you meet the requirement Note: If your answer to 37 art VI Amortization (a) Description of contraction	five vehicled retain the ents concerns, 38, 39, 4	les to your em e information erning qualified 0, or 41 is "Ye Date: ring your 2015	received autom s," do n (b) amortization begins tax years	d?obile de ot comp	monstra lete Sec	tion use	······································	covered ve	ehicles.	(e)	tion	Αι	(f)	



Form **8940**

(Rev. June 2011)

Department of the Treasury Internal Revenue Service

Request for Miscellaneous Determination

Under Section 507, 509(a), 4940, 4942, 4945, and 6033 of the Internal Revenue Code

OMB No. 1545-2211

Use the instructions to complete this form. A User Fee must be attached to this form, if required. For user fee information or additional help, visit our website at www.irs.gov/eo or call IRS Exempt Organizations Customer Account Services toll-free at 1-877-829-5500. If the required information and documents are not submitted with payment of the appropriate user fee, the form may be returned to you.

Part		Identification of Organiz	ation					
1a	Full	Name of Organization	***************************************		A CONTRACTOR OF THE CONTRACTOR	· · · · · · · · · · · · · · · · · · ·		
Wo	men'	's Foundation of Or	regon (former):	, Portlar	nd Women's Founda	+ion\		
b	Addr	ess (number, street and room/s	uite) If a P.O. Box, see	instructions.	c City	d State	e Zip Code + 4	
			,,			u Otate	e zip code + 4	
		4901			Portland	OR	97208-4901	
2	⊾mp	loyer Identification Number	3 Month Tax Year Ends (MM)	4 Person t	o Contact if More Informa	ation is Ne	eded	
		6905	06(formerly 04)	Mary F	loberts			
5	Cont	act Telephone Number		6 Fax Num	ber (optional)	7	User Fee Submitted	
97	1-99	08-7146					400.00	
Part	I	Type of Request		-L			400.00	
8		*****						
•	to inc	e select the item(s) below that lude the organization's name an	best describe your reque ld EIN on each additional	est. Using an Isheet	attachment, provide a detail	ed explana	tion of your request. Be sure	
а		Advance approval of certain			942(a)(2)			
	ш	The state of the s		a #1 5000011 4	0 1 2(9)(2)			
b		Advance approval of voter	registration activities	described in	section 4945(f)			
c		Advance approval of schola	arship procedures des	scribed in se	ction 4945(g)			
d		Exemption from Form 990	filing requirements					
е		Advance approval that a po	tential grant or contril	bution consti	tutes an "unusual grant"			
f		Change in Type (or initial de	etermination of Type)	of a section	509(a)(3) organization			
g		Reclassification of foundation	on status, including a	voluntary red	quest from a public charity	y for priva	te foundation status	
h	X Termination of private foundation status under section 507(b)(1)(B)-advance ruling request							
i		Termination of private found	dation status under se	ection 507(b)	(1)(B)-60-month period en	nded		
Jnder pe s true, co	nalties o	of perjury, I declare that I have exam nd complete.	nined this application, include	ding accompany	ring statements and schedules, a	nd to the be	st of my knowledge and belief, it	
Please								
riease Sign Here	•	(Signature of Officer, Director, 7	Trustee or other authorized of	ficial.)			(Date)	
		Mary Roberts			President			
······································		(Type or print name of signer)			(Type or print title or author	rity of signer)		
or Pap	erwork	Reduction Act Notice, see sep	parate instructions.			- (Earn 8940 (Bay C 2044)	



Form **872-B** (Rev. Dec. 2004)

Department of the Treasury - Internal Revenue Service

Consent to Extend the Time to Assess Miscellaneous Excise Taxes

In reply refer to:

Taxpayer Identification Number

93-0386905

Nomen's Foundation of Oregon (Formerly Portland Women's Foundation)	, taxpayer(s)
(Name(s))	, taxpayer(s)
PO Box 4901, Portland, OR 97208-4901	and the
(Number, Street, City or Town, State, ZIP Code)	
Commissioner of Internal Revenue consent and agree to the following:	
The amount of liability for Chapter 42 Excise Tax (Kind)	tax, imposed on the taxpayer(s) by
ection 4940 of the Internal Revenue Code due for the pe	riod July 1, 2014 through June 30, 2019
(Internal Revenue Code, Revenue Act, etc.)	
may be assessed at any time on or before	November 15, 2023
2) The collection provisions and limitations now in effect will also apply to any ta	(Expiration date) X assessed within the extended period
, and apply to any to	A dooddad within the extended period.
3) The taxpayer(s) may file a claim for credit or refund and the Service may credits agreement ends.	lit or refund the tax within 6 months after
Your Rights as a Taxpayer out have the right to refuse to extend the period of limitations or limit this extension to a magned-upon period of time. Publication 1035, Extending the Tax Assessment Period, this and the consequences of the choices you may make. If you have not already receivotained, free of charge, from the IRS official who requested that you sign this consent or alling toll free at 1-800-829-3676. Signing this consent will not deprive you of any appeal	provides a more detailed explanation of your /ed a Publication 1035, the publication can be from the IRS' web site at www.irs.gov.or.by
ntitled.	
DUR SIGNATURE HERE —	
n aware that I have the right to refuse to sign this consent or to limit the extension to mutually agreed-upon issues and/or period of ti	(Date signed)
XPAYER'S REPRESENTATIVE	
GN HERE	me as set forth in LR C. \$ 6501(c)(4)(B) (Date signed)
addition, the taxpeyer(s) has been made aware of these rights.	
DRPORATE — Women's Foundation of Oregon (Grenerly Portland Wom
me I my fee from	sixent 9-25-2014
DRPORATE (TI	tle) (Date signed)
SN HERE DOC COURT	(Date signed) 948444 9-25-2014
(T)	ne) (Date signed)
e) am aware that I (we) have the right to refuse to sign this consent or to limit the extension to mulually agreed-upon issues and/or p	eriod of time as set form in i.k.C. § 5501(c)(4)(B).
TERNAL REVENUE SERVICE SIGNATURE AND TITLE	
(Division Executive Name - see instructions) (Division	Executive Title - see instructions)
,	······································
(Authorized Official Circustum and Title can instructions)	(Data signad)

Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

OMB No. 1545-1709

If you a	are filing for an Automatic 3-Month Extension, complet	te only Pa	art I and check this box		▶	X		
If you a	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of t	his form).				
Do not co	omplete Part II unless you have already been granted a	an automa	atic 3-month extension on a previous	ly filed Fo	rm 8868.			
Electroni	ic filing (e-file). You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of tim	ne to file (6	months for a corp	oration		
required t	to file Form 990-T), or an additional (not automatic) 3-mor	nth extens	sion of time. You can electronically fil	e Form 8	368 to request an e	xtension		
of time to	file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for T	ransfers /	Associated With Ce	rtain		
Personal	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details o	n the elec	ctronic filing of this t	form,		
visit www	r.irs.gov/efile and click on e-file for Charities & Nonprofits							
Part I	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies nee	eded).				
A corpora	ation required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and c	complete				
Part I only	y				>			
	corporations (including 1120-C filers), partnerships, REM	ICs, and t	rusts must use Form 7004 to reques	t an exten	sion of time			
to file inc	ome tax returns.			Enter file	er's identifying nun	nber		
Type or print	Name of exempt organization or other filer, see instru	ctions.		Employe	ridentification numb	oer (EIN) or		
File by the	WOMEN'S FOUNDATION OF OREGO				93-038690)5		
due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, so 221 NW SECOND AVENUE, NO. 3		tions.	Social se	curity number (SSN	1)		
instructions.	City, town or post office, state, and ZIP code. For a for PORTLAND, OR 97209-3958	oreign add	lress, see instructions.					
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4		
Applicati	on	Return	Application			Return		
Is For		Code	Is For			Code		
Form 990	or Form 990-EZ	01	Form 990-T (corporation)		07			
Form 990	-BL	02	Form 1041-A			08		
Form 472	0 (individual)	03	Form 4720 (other than individual)		09			
Form 990	-PF	04	Form 5227		10			
Form 990	-T (sec. 401(a) or 408(a) trust)	05	Form 6069					
Form 990	-T (trust other than above)	06	Form 8870		12			
Teleph If the o	EMILY JENSEN books are in the care of ▶ 221 NW SECOND A conner No. ▶ 971-230-1294 organization does not have an office or place of business is for a Group Return, enter the organization's four digit of the group, check this box ▶	s in the Ur Group Exe	emption Number (GEN) If	this is fo	r the whole group, o	check this		
	quest an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time	until		7101.		
	FEBRUARY 15, 2017 , to file the exempt	t organiza	tion return for the organization name	d above.	The extension			
is fo	or the organization's return for:							
▶ļ	calendar year or		00 0046					
▶l	X tax year beginning JUL 1, 2015	, an	d ending JUN 30, 2016		<u> </u>			
2 If th	ne tax year entered in line 1 is for less than 12 months, c	heck reas	on: Initial return F	Final retur	n			
3a If th	nis application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069,	enter the tentative tax, less any					
	refundable credits. See instructions.	,	,	За	\$	0.		
	nis application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	y refundable credits and					
	imated tax payments made. Include any prior year overp	·	•	3b	\$	0.		
c Bal	ance due. Subtract line 3b from line 3a. Include your pa	yment wit	th this form, if required,					
	using EFTPS (Electronic Federal Tax Payment System).			Зс	\$	0.		
Caution.	If you are going to make an electronic funds withdrawal	(direct de	bit) with this Form 8868, see Form 8	453-EO aı	nd Form 8879-EO fo	or payment		

instructions.