DLN: 93493317061485

Open to Public

OMB No 1545-0047

Form **990** 

Department of the Treasury Internal Revenue Service

**Return of Organization Exempt From Income Tax** Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

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

 $\blacktriangleright$  Information about Form 990 and its instructions is at  $\underline{www.IRS.gov/form990}$ 

Inspection

A Fo	r the 2	2014 cal	endar year, or tax year beginning 01-01-2014 , and ending 12-	31-2014						
<b>B</b> Ch	eck if a	pplicable	C Name of organization Oregon Center for Public Policy			D Employ	er iden	tification number		
☐ Add	lress ch	nange	oregon center for rubile rolley			93-11	36075	;		
┌ Na	ne cha	nge	Doing business as							
┌ Init	ıal retu	m				E Talanka				
Fin			Number and street (or P O box if mail is not delivered to street address)	Room/suite		E Telephone number				
ret	ırn/terr	mınated	PO Box 7			(503)8	373-1	201		
	ended i	return n pending	City or town, state or province, country, and ZIP or foreign postal code Silverton, OR 97381			<b>G</b> Gross re	ceipts \$	470,446		
i Api	nication	i pending								
			F Name and address of principal officer		<b>H(a)</b> Is the subo	s a group i rdinates?	return	for ┌ Yes ┌ No		
					<b>H(b)</b> Are a		ates	┌ Yes 🔽 No		
<b>I</b> Ta	x-exem	npt status	▼ 501(c)(3)	.7	If "N	o," attach	alıst (	(see instructions)		
J W	ebsite	e: ► WW	VW OCPP ORG	1	H(c) Grou	ıp exemptı	on num	nber ►		
<b>K</b> For	n of org	ganızatıon	✓ Corporation Trust Association Other ►		<b>L</b> Year of fo	rmation 199	5 <b>M</b>	State of legal domicile OR		
Pa	rt I	Sum	mary							
aı.	ι	USE RES	escribe the organization's mission or most significant activities SEARCH AND ANALYSIS TO ADVANCE POLICIES AND PRAC TUNITIES OF ALL OREGONIANS	CTICEST	HAT IMPR	OVETHE	ECON	OMIC AND SOCIAL		
Governance	-							_		
Ĕ										
<u>\$</u>	2 (	Check th	his box $lacktriangledown$ if the organization discontinued its operations or dis	5% of its	net as	sets				
							_ 1			
Activities &	l		of voting members of the governing body (Part VI, line 1a) .				3	15		
Ě	l		of independent voting members of the governing body (Part VI,		4	15				
ਬ੍ਰ	l		mber of individuals employed in calendar year 2014 (Part V, line				5	7		
Q.	l		mber of volunteers (estimate if necessary)			• •	6			
			related business revenue from Part VIII, column (C), line 12 lated business taxable income from Form 990-T, line 34				7a 7b	0		
	ים	ivet unie	stated business taxable income from 1 offit 990-1, line 34	· ·		r Year	<u> </u>	Current Year		
	8	Contri	butions and grants (Part VIII, line 1h)	ŀ	FIIO	545,7	79	470,350		
9	9		am service revenue (Part VIII, line 2g)	- F		313,7		0		
Ravenue	10		tment income (Part VIII, column (A), lines 3, 4, and 7d)	F		1	36	96		
æ	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11			<u>_</u>		0		
	12	Totalı	revenue—add lines 8 through 11 (must equal Part VIII, column	(A ), line		545,9	1.5	470,446		
	13		s and similar amounts paid (Part IX, column (A), lines 1–3).					0		
	14		its paid to or for members (Part IX, column (A), line 4)					0		
ø	15		es, other compensation, employee benefits (Part IX, column (A)			460,4	9 2	417,058		
13e	16a	•	, ssional fundraising fees (Part IX, column (A), line 11e)					0		
Expenses	b		ındraısıng expenses (Part IX, column (D), lıne 25) ► 57,329							
	17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	[		104,4	60	95,584		
	18		expenses Add lines 13–17 (must equal Part IX, column (A), lin	-		564,9		512,642		
	19	Reven	ue less expenses Subtract line 18 from line 12			-19,0	37	-42,196		
Net Assets or Fund Balances						of Curren ear	t	End of Year		
988 888	20	Total	assets (Part X, line 16)	[		283,4	18	241,999		
절절	21	Total I	liabilities (Part X, line 26)		3,2	81	4,058			
<u>zz</u>	22	Netas	ssets or fund balances Subtract line 21 from line 20			280,1	37	237,941		

#### Part III Signature Block

Under penalties of perjury, I declare that I have examined this return, including my knowledge and belief, it is true, correct, and complete Declaration of prepar preparer has any knowledge

Sign Here Signature of officer A CHARLES SHEKETOFF EXEC DIRECTOR Type or print name and title

Paid **Preparer Use Only**  Print/Type preparer's name Thomas G Bode CPA Preparer's signature Thomas G Bode CPA

Firm's name F ALTEN SAKAI & COMPANY LLP

Firm's address ► 10260 SW GREENBURG RD SUITE 300

PORTLAND, OR 972235513

May the IRS discuss this return with the preparer shown above? (see instruction For Paperwork Reduction Act Notice, see the separate instructions.

**4e** Total program service expenses ► 274,858

art IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{\circ}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part $I^{\bullet}$	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and $11e^{2}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than $$5,000$ of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νο
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III </i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		N o
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		N o
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		Νo
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

# Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			厂_
	Enterthe number reported in Boy 2 -55 1006 Febru 0 -6		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 4  Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0	-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	,		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		No
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		No
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	7-		NI -
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a 7b		No
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	$\vdash$		
	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
_	contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7f		No
y	required?	7g		Νo
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
8	Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		N
Qa.	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12   10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		Νo
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		No
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI							.[▽

Se	ection A. Governing Body and Management			
			Yes	No
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νο
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Νo
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		Νo
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		Νo
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

#### Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed ▶OR
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►A CHARLES SHEKETOFF

204 N FIRST ST C

SILVERTON, OR 973810007 (503)873-1201

# Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

🔽 Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot ecto	not box h ar or/tr	check Highest compensated	ess er	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Secretary	0 00	х		х				0	0	0
(2) ROBERT LANDAUER  Director	0 50	X						0	0	0
(3) ANGELA MARTIN	0 50	х						0	0	0
Director	0 00									
(4) RAYMOND CABALLERO Director	0 50	х						0	0	0
(5) KEN LEWIS Director	0 50	х						0	0	0
(6) WILL NEUHAUSER	0 50	х						0	0	0
Director (7) JOE RODRIGUEZ	0 00 0 50									
Director	0 00	Х						0	0	0
(8) MARY KINGDirector	0 50	х						0	0	0
(9) MARK GARDINER	0 50	х						0	0	0
Director (10) BRAD LARSEN	0 00	Х		х				0	0	0
Treasurer (11) ROBIN JOHNSON	0 00	×						0	0	0
Director (12) BARBARA DUDLEY	0 00 0 50									
Director	0 00	Х						0	0	0
(13) KAREN JACOBSON  Chairman	1 00	×		х				0	0	0
(14) JIM MAYER  Director	0 50	х						0	0	0
Director	1 000					I	I			Form <b>990</b> (2014)

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours for related organizations below	person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
	dotted line)	lividual trustee director	Institutional Trustee	<u> -</u>	emplo}ee	Highest compensated employee	er 			,
(15) SIMONE REDE  Director	0 50 0 00	х						0	0	0
(16) A CHARLES SHEKETOFF  EXECUTIVE DIRECTOR	40 00					х		80,400	0	22,813

1b	Sub-Total	Ŧ		
c	Total from continuation sheets to Part VII, Section A	٠		
d	Total (add lines 1b and 1c)	٠	80,400	22,813

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►0

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

Section	D	Ind	- n	adon:	+ Ca	ntra	ctore
section	В.	THO	eber	ıaen	T LC	Intra	CTOFS

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	<b>(B)</b> Description of services	<b>(C)</b> Compensation
		_
		_

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

Part VI	***	Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII							
		Check if Schedule O Contains a response of note to any h	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514			
	1a	Federated campaigns 1a							
Contributions, Giffs, Grants and Other Similar Amounts	Ь	Membership dues 1b							
	c	Fundraising events 1c							
ا <u>ک</u> نو	_	Related organizations 1d							
<u>=</u> =	d								
R iii	е	Government grants (contributions) <b>1e</b>							
을띪	f	All other contributions, gifts, grants, and <b>1f</b> 470,350 similar amounts not included above							
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1,599	i						
털필		1a-1f \$	470,350						
ರ ಕ	h	Total. Add lines 1a-1f	470,330						
e		Business Code							
Program Serwce Revenue	2a								
æ	b								
M C	с								
33	d								
E	e								
50	f	All other program service revenue							
<u>*</u>	g	<b>Total.</b> Add lines 2a−2f	0						
	3	Investment income (including dividends, interest,	96			96			
	4	and other similar amounts)	0						
	5	Royalties	0						
		(ı) Real (ıı) Personal							
	6a	Gross rents	1						
	b	Less rental expenses							
	c	Rental income							
	d	or (loss)	- 0						
		(i) Securities (ii) Other							
	7a	Gross amount							
		from sales of assets other							
	b	than inventory Less cost or	-						
		other basis and sales expenses							
	c	Gain or (loss)	]						
	d	Net gain or (loss)	0						
une	8a	Gross income from fundraising events (not including \$							
Other Revenue		of contributions reported on line 1c) See Part IV, line 18 a							
<u> </u>	b	Less direct expenses b	1						
5		Net income or (loss) from fundraising events 🛌	0						
	9a	Gross income from gaming activities See Part IV, line 19							
	b	Less direct expenses b							
		Net income or (loss) from gaming activities	ا						
		Gross sales of inventory, less							
		returns and allowances .							
	L	a							
		Less cost of goods sold <b>b</b> Net income or (loss) from sales of inventory <b>b</b>	ا م						
-		Miscellaneous Revenue Business Code	1						
}	11a								
	b					1			
	c					1			
	d	All other revenue							
	e	Total. Add lines 11a-11d							
	12	Total revenue. See Instructions	0			+			
	12	iotai revenue. See Instructions	·I			l .			

### Part IX Statement of Functional Expenses

Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All other organizations must complete colu
---

	Check if Schedule O contains a response or note to any line in this	Part IX			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C)	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0			·
2	Grants and other assistance to domestic individuals See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	86,545	35,562	29,993	20,990
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	209,028	112,715	79,767	16,546
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	16,168	8,201	6,212	1,755
9	Other employee benefits	78,130	41,856	28,406	7,868
10	Payroll taxes	27,187	17,188	7,424	2,575
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	0			
C	Accounting	3,500		3,500	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	17,846	9,921	6,901	1,024
12	Advertising and promotion	0			
13	Office expenses	0			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	21,605	8,553	10,105	2,947
17	Travel	4,524	4,199	207	118
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	1,600	898	554	148
23	Insurance	1,014	914	100	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	SUPPLIES	15,328	8,675	4,491	2,162
b	EVENTS	10,533	8,985	1,326	222
С	INTERNET FEES	7,616	7,616		
d	Printing and Publications	6,871	6,787		84
e	All other expenses	5,147	2,788	1,469	890
25	<b>Total functional expenses.</b> Add lines 1 through 24e	512,642	274,858	180,455	57,329
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

					(A) Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing			68,535	1	50,179
	2	Savings and temporary cash investments			210,149		187,733
	3	Pledges and grants receivable, net			210,110	3	0
	4	Accounts receivable, net				4	0
	5	Loans and other receivables from current and former officers, direct		toes key		_	
		employees, and highest compensated employees Complete Part 1 Schedule L		tees, key		5	0
8	6	Loans and other receivables from other disqualified persons (as de 4958(f)(1)), persons described in section 4958(c)(3)(B), and con and sponsoring organizations of section $501(c)(9)$ voluntary emplorganizations (see instructions) Complete Part II of Schedule L		6	0		
Assets	7	Notes and loans receivable, net				7	0
4	8	Inventories for sale or use		•		8	0
	9	Prepaid expenses and deferred charges		•		9	0
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	30,372		9	
	Ь	Less accumulated depreciation	10b	26,285	4,734	10c	4,087
	11	Investments—publicly traded securities			,,,,,,	11	0
	12	Investments—other securities See Part IV, line 11				12	0
	13	Investments—program-related See Part IV, line 11				13	0
	14	Intangible assets				14	0
	15	Other assets See Part IV, line 11				15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)			283,418		241,999
	17	Accounts payable and accrued expenses		•	250,110	17	211,000
	18	Grants payable				18	
	19	Deferred revenue		•		19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Schedu				21	
lities	22	Loans and other payables to current and former officers, directors key employees, highest compensated employees, and disqualified	, trustees,				
Liabilit		persons Complete Part II of Schedule L				22	
ï	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related and other liabilities not included on lines 17-24) Complete Part X	third part				
		D			3,281	25	4,058
	26	Total liabilities. Add lines 17 through 25			3,281	26	4,058
رم م		Organizations that follow SFAS 117 (ASC 958), check here ► a	and comple	ete			
ည	l	lines 27 through 29, and lines 33 and 34.					
Fund Balance	27	Unrestricted net assets				27	
ř	28	Temporarily restricted net assets				28	
Ξ	29	Permanently restricted net assets				29	
or Fu		Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34.	►   and				
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .		•		31	
	32	Retained earnings, endowment, accumulated income, or other fund			280,137	32	237,941
ĕ	33	Total net assets or fund balances			280,137	33	237,941
_	34	Total liabilities and net assets/fund balances			283,418	34	241,999

	Check if Schedule O contains a response or note to any line in this Part XII			. Г
			Yes	No
L	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

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As Filed Data -

DLN: 93493317061485

Employer identification number

# SCHEDULE A Public (

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No 1545-0047

2014

Open to Public Inspection

Oregor	Cente	er for Public Policy					02 1196075		
Par	τI	Reason for Publi	c Charity S	Status (All organiza	tions must co	mnlete this r	93-1186075     93-1186075	ins	
		zation is not a private fo						113.	
1	Г	A church, convention							
2	_	A school described in					- / ( - / ( - / ( - / -		
3	<u></u>	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).							
4	,	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the							
•	,	hospital's name, city, and state							
5	$\Gamma$	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in							
		section 170(b)(1)(A)(	( <b>iv).</b> (Complet	e Part II)					
6	$\sqcap$	A federal, state, or loc	al governmen	t or governmental unit	described in se	ection 170(b)(1	L)(A)(v).		
7	~	An organization that n						general public	
	_	described in section 1				_	•	·	
8		A community trust des							
9	Г	An organization that n	ormally receiv	es (1) more than 33:	l/3% of its supp	ort from contri	butions, membership	fees, and gross	
		receipts from activitie	s related to it:	s exempt functions—s	ubject to certai	n exceptions, a	ind (2) no more than 3	31/3% of	
		its support from gross	ınvestment ır	ncome and unrelated b	usıness taxable	e income (less	section 511 tax) from	businesses	
		acquired by the organi	zatıon after Ju	ine 30, 1975 See <b>sec</b>	tion 509(a)(2).	. (Complete Pai	rt III)		
10	Γ	An organization organ	ized and opera	ated exclusively to tes	t for public safe	ety See <b>sectio</b> i	ı 509(a)(4).		
11	Γ	An organization organ							
		one or more publicly s	• • •		•	, , ,			
а	$\vdash$	the box in lines 11a th							
_	<b>Type I.</b> A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting								
	_	organization You mus						-	
b		Type II. A supporting							
		management of the su must complete Part IV			same persons t	hat control or r	nanage the supported	organization(s) <b>You</b>	
c	$\Gamma$	Type III functionally i			n operated in c	onnection with.	and functionally inte	grated with, its	
_	•	supported organization	_		•		•	,,	
d	Γ	Type III non-function							
		not functionally integr					ement and an attentiv	eness requirement	
e	$\vdash$	(see instructions) <b>You</b> Check this box if the o					saTvnel Tvnell T	vne III functionally	
_	'	integrated, or Type III					5 u 1 ypc 1, 1 ypc 11, 1	ype III lanetionany	
f		Enter the number of su							
g		Provide the following i	nformation abo	out the supported orga	ınızatıon(s)				
		ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	•	(v) A mount of	(vi) A mount of	
	1	organization		organization	listed in your docume		monetary support	other support (see	
				(described on lines 1-9 above or IRC	docume	entr	(see instructions)	ınstructions)	
				section (see					
				ınstructions))		<u> </u>			
					Yes	No			
Total									

Schedule A (Form 990 or 990-EZ) 2014 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 (e) 2014 **(b)** 2011 (c) 2012 (d) 2013 (f) Total in) 🕨 1 Gifts, grants, contributions, and membership fees received (Do not 542,593 493,900 481,511 545,779 470,350 2,534,133 include any "unusual grants ") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 542,593 493,900 481,511 545,779 470,350 2,534,133 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 749,139 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) **Public support.** Subtract line 5 from 1,784,994 line 4 Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 542,593 493,900 481,511 545,779 470,350 2,534,133 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties 1,208 529 194 136 96 2,163 and income from similar sources Net income from unrelated business activities, whether or 0 not the business is regularly carried on 10 Other income Do not include gain 1,750 1,750 or loss from the sale of capital assets (Explain in Part VI) Total support Add lines 7 through 11 2,538,046 Gross receipts from related activities, etc (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) 14 14 70 330 % Public support percentage for 2013 Schedule A, Part II, line 14 15 69 610 % 16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box **▶**▽ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test -2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test – 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14

is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2014 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 **(e)** 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15 16 Public support percentage from 2013 Schedule A, Part III, line 15 16

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

33 1/3% support tests—2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Section D. Computation of Investment Income Percentage

Investment income percentage from 2013 Schedule A, Part III, line 17

Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))

17

18

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

17

18

#### Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Se	ection A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or $(2)^2$ If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section $509(a)(1)$ or $(2)$ .	2		
За	Did the organization have a supported organization described in section $501(c)(4)$ , $(5)$ , or $(6)$ ? If "Yes," answer (b) and (c) below.	За		
t	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
t	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	: Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	<b>4</b> c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
Ŀ	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
t	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
Ŀ	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
L1	Has the organization accepted a gift or contribution from any of the following persons?			
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	112		
ŀ	• A family member of a person described in (a) above?	11a 11b		
	A 135% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
5	ection E. Type III Functionally-Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year <b>(see</b>	inetri	ıct ions)	
	The organization satisfied the Activities Test Complete line 2 below  The organization is the parent of each of its supported organizations. Complete line 3 below  The organization supported a governmental entity. Describe in Part VI how you supported a government e instructions.)			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	-			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	h Did the organization evergise a substantial degree of direction over the policies, programs and activities of each		1	l

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

#### Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

#### Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year		
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furthexcess of income from activity	ported organizations, in		
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
<b>a</b> From 2009			
<b>b</b> From 2010			
<b>c</b> From 2011			
d From 2012			
<b>e</b> From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount  i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
<b>b</b> Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
<b>7 Excess distributions carryover to 2015.</b> Add lines 3j and 4c			
8 Breakdown of line 7			
<b>a</b> From 2010			
<b>b</b> From 2011			
<b>c</b> From 2012			
d From 2013			

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

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

DLN: 93493317061485

OMB No 1545-0047

Open to Public Inspection

### **SCHEDULE C** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

**Political Campaign and Lobbying Activities** 

www.irs.gov/form990. If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	Section 501(c)(4), (5), or (6) orga	nızatıons Complete Part III			
	ime of the organization			Employer iden	tification number
JIE	Syon Center for Fubile Folley			93-1186075	
Par	t I-A Complete if the or	ganization is exempt unde	er section 501(	c) or is a section 527	organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect pol	ıtıcal campaıgn act	civities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Dar	t I-B Complete if the or	ganization is exempt unde	r costion E01/	o)(3)	
1	<u> </u>	e tax incurred by the organization i	•		
2	·	e tax incurred by organization man			₽
3		ection 4955 tax, did it file Form 4			↑ Yes
4a	Was a correction made?	oction 1300 tax, ara te me Form 1	, 20 101 1110 , 001		「Yes ✓ No
b	If "Yes," describe in Part IV				, 105 , 110
		ganization is exempt unde	r section 501(	c), except section 50	1(c)(3).
1	Enter the amount directly expe	nded by the filing organization for	section 527 exemp	pt function activities 🕨	\$
2	<del>_</del>	rganızatıon's funds contributed to	other organizations	s for section 527	
	exempt function activities			•	\$
3	Total exempt function expendit	tures Add lines 1 and 2 Enter her	re and on Form 112	.0-POL, line 17b ►	\$
4	Did the filing organization file <b>F</b>	orm 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments F amount of political contribution	nd employer identification number For each organization listed, enter is received that were promptly and political action committee (PAC)	the amount paid fro d directly delivered	om the filing organization's f to a separate political orga	unds Also enter the nization, such as a tion in Part IV
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
For I	Panerwork Reduction Act Notice se	e the instructions for Form 990 or 9	90-F7. /	Cat No 500849 Schodula C./	 

section 4911 tax for this year?

┌ Yes ┌ No

#### Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check ▶ 🗔 if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar	(a) Filing organization's totals	<b>(b)</b> Affiliated group totals	
1a	Total lobbying expenditures to influence public o			
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	4,478	
c	Total lobbying expenditures (add lines 1a and 1i	o)	4,478	
d	Other exempt purpose expenditures		508,164	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	512,642	
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both	101,896	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
	Grassroots nontaxable amount (enter 25% of lin	ne 1f)	25,474	
h	Subtract line 1g from line 1a If zero or less, ent	er-0-		
i	Subtract line 1f from line 1c If zero or less, ente	r-0-		
j	If there is an amount other than zero on either lii	ne 1h or line 1i, did the organization file Form 4720	reporting	□ Ves □ No

#### 4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

	Lobbying Expenditures During 4-Year Averaging Period							
	Calendar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	<b>(c)</b> 2013	( <b>d)</b> 2014	(e) Total		
2a	Lobbying nontaxable amount	110,885	93,714	109,744	101,896	416,239		
b	Lobbying ceiling amount (150% of line 2a, column(e))					624,359		
c	Total lobbying expenditures	8,789	5,452	20,150	4,478	38,869		
d	Grassroots nontaxable amount	27,721	23,429	27,436	25,474	104,060		
е 	Grassroots ceiling amount (150% of line 2d, column (e))					156,090		
f	Grassroots lobbying expenditures	690	178		lula C (Farra 200 a	1,137		

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	ТОИ			
For e	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	( a	1)	(b	)
activ		Yes	No	Amo	unt
1 a	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers?				
b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  Media advertisements?				
d	Mailings to members, legislators, or the public?				
e	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  Other activities?				
j	Total Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
Ь	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	, ,			<u> </u>	
Pa	t III-A Complete if the organization is exempt under section $501(c)(4)$ , section $501(c)(6)$	501(c	)(5), c	or secti	on
	501(c)(6).			Ye	s No
1	Were substantially all (90% or more) dues received nondeductible by members?		Г	1	1
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		F	2	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."				
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
С	Total	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
P	art IV Supplemental Information				
	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou see instructions), and Part II-B, line 1 Also, complete this part for any additional information	ıp lıst),	Part II	-A, lines	1 and
	Return Reference Explanation				

Part IV Supplemental Information (continued)							
Return Reference	Explanation						

Schedule C (Form 990 or 990EZ) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493317061485

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury

## **Supplemental Financial Statements**

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

Open to Public

ernal Revenue Service	Information about Schedule D (Form	990) and its instructions is at <u>www.ir</u> s	s.gov/form	990. Inspec	tion
Name of the organ			Employer	identification numb	er
Oregon Center for Pub	DIC POLICY		93-1186	075	
	nizations Maintaining Donor Adv				te if the
organ	<u>ızatıon answered "Yes" to Form 990</u>	i	(b) F	unds and other asses	unto
L Total number :	at and of year	(a) Donor advised funds	(D) F	unds and other acco	unts
	ue of contributions to (during year)				
	ue of grants from (during year)				
	ue at end of year				
Did the organi	zation inform all donors and donor adviso organization's property, subject to the or		or advised	┌ Yes	┌ No
used only for a conferring imp	ızatıon ınform all grantees, donors, and do charıtable purposes and not for the benef permissible private benefit?	it of the donor or donor advisor, or for a	ny other pur	☐ Yes	┌ No
	ervation Easements. Complete if		o Form 990	0, Part IV, line 7.	
Preservati Protection Preservati Complete line	conservation easements held by the orgation of land for public use (e g , recreation of natural habitat ion of open space es 2a through 2d if the organization held at the last day of the tax year	or education) Preservation of an Preservation of a	certified hist	coric structure	
	, ,		н	eld at the End of the	e Year
a Total number	of conservation easements		2a		
<b>b</b> Total acreage	restricted by conservation easements		2b		
c Number of cor	nservation easements on a certified histo	oric structure included in (a)	2c		
	nservation easements included in (c) acq ture listed in the National Register	uired after 8/17/06, and not on a	2d		
Number of cor	nservation easements modified, transferr	ed, released, extinguished, or terminate	ed by the org	anızatıon durıng	
the tax year 🕨	<u> </u>				
Number of sta	ates where property subject to conservati	ion easement is located ►			
	nization have a written policy regarding to of the conservation easements it holds?	the periodic monitoring, inspection, hand	dling of viola	tions, and <b>Yes</b>	┌ No
Staff and volu	nteer hours devoted to monitoring, inspe	cting, and enforcing conservation easer	ments during	the year	
A mount of exp ► \$	penses incurred in monitoring, inspecting	, and enforcing conservation easement:	s during the	year	
	nservation easement reported on line 2(of 70(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	ction 170(h)	(4)(B)(I) <b>Yes</b>	┌ No
balance sheet	describe how the organization reports cor t, and include, if applicable, the text of the on's accounting for conservation easeme	e footnote to the organization's financia			
	nizations Maintaining Collection lete		or Other :	Similar Assets.	
works of art, h	ation elected, as permitted under SFAS 1 historical treasures, or other similar asse de, in Part XIII, the text of the footnote t	ts held for public exhibition, education,	or research	in furtherance of pub	
works of art, h	ation elected, as permitted under SFAS 1 historical treasures, or other similar asse de the following amounts relating to thes	ts held for public exhibition, education,			olic
(i) Revenue II	ncluded in Form 990, Part VIII, line 1		•	+\$	
(ii) Assets ind	cluded in Form 990, Part X			<b>-</b> \$	
If the organiza	ation received or held works of art, histori unts required to be reported under SFAS			· -	
a Revenue inclu	ided in Form 990, Part VIII, line 1		•	- \$	

**b** Assets included in Form 990, Part X

Part	•••• Organizations Maintaining Col	llections of Art	<u>, His</u>	<u>stori</u>	<u>cal Tr</u>	<u>easur</u>	es, or O	<u>ther</u>	<u> Similar A</u>	sset	t <b>s</b> (co	<u>ntınued)</u>
3	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other recor	ds, ch	heck	any of t	he follo	wing that a	re a	sıgnıfıcant us	se of i	ts	
а	Public exhibition		d	Γ	Loan	or exch	ange progr	ams				
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIII	ollections and expla	ın hov	w the	y furthe	r the or	ganızatıon	's ex	empt purpose	e in		
5	During the year, did the organization solicit o								ılar	_		_
Dov	assets to be sold to raise funds rather than t								!! to Forms	<u> </u>		No
Per	Escrow and Custodial Arrange Part IV, line 9, or reported an am						answered	u re	es to romi	990,	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						other ass	ets n	ot	Г	es (	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follow	wing t	able		_					
									Δ	mou	nt	
C	Beginning balance						_	1c				
d	Additions during the year							1d				
е	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	e 21,	for e	scrow o	rcusto	dıal accoui	nt IIa	bility?	Γ,	es/	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expl	anatı	on has	been pr	ovided in F	art >	(III			Γ
Pai	rt V Endowment Funds. Complete											
		(a)Current year	(b	<b>)</b> Prior	year	<b>b (c)</b> Tw	o years back	(d)⊺	hree years back	( (e)	Four ye	ears back
1a	Beginning of year balance							<u> </u>				
b	Contributions							<del>                                     </del>		-		
С	Net investment earnings, gains, and losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the curr	ent year end baland	ce (lır	ne 1g	, colum	n (a)) h	eld as					
а	Board designated or quasi-endowment ►											
b	Permanent endowment ►											
C	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	uld equal 100%										
3a	Are there endowment funds not in the posses	ssion of the organiz	atıon	that	are held	l and ad	lmınıstered	fort	the	-		
	organization by								[a	-(:)	Yes	No_
	(i) unrelated organizations (ii) related organizations		•		• •	• •		•		a(i) a(ii)		
b	If "Yes" to 3a(II), are the related organization							٠. ٠	· · ·	3b		
4	Describe in Part XIII the intended uses of th	•										
Par	t VI Land, Buildings, and Equipme	nt. Complete if	the o	rgar	ızatıor	answ	ered 'Yes	' to	Form 990, F	Part 1	V, lır	ne
	11a. See Form 990, Part X, line 1	LO.		Τ.			1000		l			<del> </del>
	Description of property				a) Cost on a sistem (inve		(b)Cost or basis (oth		(c) Accumula depreciatio		(d) B	ook value
1a	Land											
b	Buildings											
c	Leasehold improvements		•									
	Equipment		•				2	7,886	2	3,799		4,087
	Other							2,486		2,486		
Total	<b>I.</b> Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part 🏾	X, colu	ımn (	B), line	10(c).)			🛌			4,087

See Form 990, Part X, line 12.  (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>F</b>	
Part VIII Investments—Program Related.		n answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13.	<b>_</b>	
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)  Part IX Other Assets. Complete if the organization	on answered 'Ves' to Form 990	) Part IV line 11d See Form 990 Part Y line 15
(a) Desc		(b) Book value
Tatal (Column (b) must equal form 000, Part V, cel (B) line	15 )	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line <b>Part X</b> Other Liabilities. Complete if the ord		
Form 990, Part X, line 25.	- 	
1 (a) Description of liability	(b) Book value	
Federal income taxes		
PAYROLL TAXES	4,058	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<b>▶</b> 4,058	
· · · · · · · · · · · · · · · · · · ·		

Pari	the organ	iation of Re						ts Wit	h Re	venue	per R	<b>eturn</b> Com	plete ıf
1	Total revenue, g										1		
2 Amounts included on line 1 but		not on Form	990, Part \	/III, line 1	. 2								
а	Net unrealized g	aıns (losses) o	n ınvestment	s			2a						
b	Donated service	s and use of fa	cilities				2b				7		
c	<b>c</b> Recoveries of prior year grant		5			2c			7				
<b>d</b> Other (Describe in Part XI		ın Part XIII )					2d				1		
e	Add lines <b>2a</b> thro	ough <b>2d .</b>				'					2e		
3 Subtract line 2e from line 1 .										3			
4 A mounts included on Form 9		d on Form 990	, Part VIII, I	ine 12, but	not on line	<b>1</b>							
а	Investment expe	vestment expenses not included on Form 990, Part VIII, line 7b . 4a											
b	Other (Describe	ın Part XIII )				. [	4b						
C	Add lines <b>4a</b> and	4b									4c		
5	Total revenue A										5		
Part		iation of Ex						nts Wi	ith E>	cpense	s per	Return. Co	omplete
1	Total expenses a	anization ans									1	T	
2	A mounts include						•	•	•	•	<u> </u>		
a	Donated service						2a	I					
b	Prior year adjust						2b						
c	Other losses .						2c						
d	Other (Describe						2d						
e	Add lines 2a thro	•											
3											3		
4	A mounts include												
а	Investment expe			-			4a						
b	Other (Describe						4b						
С	Add lines <b>4a</b> and <b>4b</b>							<del>'</del>			4c		
5	Total expenses	Add lines <b>3</b> and	d <b>4c.</b> (This mi	ıst equal Fo	orm 990, F	art I, line	18)				5		
Part	XIII Supple			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	-						
Prov Part	ide the description V, line 4, Part X, li	s required for F	art II, lines									de any additio	nal
Return Reference		Explanation											

Jenedale 2 (1 31111 33 3) 23 13		r age <b>3</b>		
Part XIII Supplemental Information	on (continued)			
Return Reference	Explanation			
l				
-				

Schedule D (Form 990) 2014

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2014

Open to Public Inspection

## Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization Oregon Center for Public Policy

**SCHEDULE 0** 

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Employer identification number

93-1186075

#### 990 Schedule O, Supplemental Information

Return Reference	Explanation					
Client Note 1						
Form 990, Part VI, Line 11b Form 990 Review Process	THE MEMBERS OF THE BOARD OF DIRECTORS ARE GIVEN AN ELECTRONIC COPY OF THE FORM 990 TO REVIEW BEFORE IT IS FILED					
Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	ALL BOARD MEMBERS, EMPLOYEES AND INTERNS SIGN AN ACKNOWLEDGEMENT OF RECEIPT OF THE CONFLIC T OF INTEREST POLICY AND A REPORTING FORM IS DISTRIBUTED					
Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	THE ORGANIZATION CONSULTS A SALARY SURVEY OF THE ORGANIZATIONS IN THE SFAI NETWORK					
Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	GOVERNING DOCUMENTS AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC ON REQUEST					