

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

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

2022

Open to Public Inspection

For calendar year 2022 or tax year beginning		, 2022, and ending		, 20	
J.W. & H.M. GOODMAN FAMILY CHARITABLE FOUNDATION 620 SAND HILL ROAD 100G PALO ALTO, CA 94304				A Employer identification number 77-0559337	
				B Telephone number (see instructions) 503-750-1814	
				C If exemption application is pending, check here <input type="checkbox"/>	
				D 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation. <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change				E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation				F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, column (c), line 16) \$ 7,688,314.		J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d), must be on cash basis.)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule) . . .				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities.	136,021.	136,021.		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	109,052.			
	b Gross sales price for all assets on line 6a 9,030,335.				
	7 Capital gain net income (from Part IV, line 2)		109,052.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule).					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11.	245,073.	245,073.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0.			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach sch) SEE ST 1	14,741.	1,348.		13,393.
	c Other professional fees (attach sch) SEE ST 2	43,599.	43,599.		
	17 Interest				
	18 Taxes (attach schedule)(see instrs) SEE STM 3	30,828.	27,828.		
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)				
	SEE STATEMENT 4	273.			273.
	24 Total operating and administrative expenses. Add lines 13 through 23.	89,441.	72,775.		13,666.
25 Contributions, gifts, grants paid. PART XIV	379,266.			379,266.	
26 Total expenses and disbursements. Add lines 24 and 25	468,707.	72,775.		392,932.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-223,634.				
b Net investment income (if negative, enter -0-)		172,298.			
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets		Beginning of year (a) Book Value	End of year	
			(b) Book Value	(c) Fair Market Value
Assets	1 Cash — non-interest-bearing			
	2 Savings and temporary cash investments	53,970.	139,951.	139,951.
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach sch)			
	Less: allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments — U.S. and state government obligations (attach schedule)			
	b Investments — corporate stock (attach schedule)			
	c Investments — corporate bonds (attach schedule)			
	11 Investments — land, buildings, and equipment: basis			
Liabilities	Less: accumulated depreciation (attach schedule)			
	12 Investments — mortgage loans			
	13 Investments — other (attach schedule)	8,556,447.	8,230,552.	7,538,617.
	14 Land, buildings, and equipment: basis			
	Less: accumulated depreciation (attach schedule)			
	15 Other assets (describe SEE STATEMENT 5)		9,746.	9,746.
	16 Total assets (to be completed by all filers — see the instructions. Also, see page 1, item I)	8,610,417.	8,380,249.	7,688,314.
	17 Accounts payable and accrued expenses			
Net Assets or Fund Balances	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, & other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe)			
	23 Total liabilities (add lines 17 through 22)	0.	0.	
Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. <input checked="" type="checkbox"/>	24 Net assets without donor restrictions	8,610,417.	8,380,249.	
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30. <input type="checkbox"/>			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
	29 Total net assets or fund balances (see instructions)	8,610,417.	8,380,249.	
	30 Total liabilities and net assets/fund balances (see instructions)	8,610,417.	8,380,249.	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year — Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	8,610,417.
2	Enter amount from Part I, line 27a.	2	-223,634.
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3.	4	8,386,783.
5	Decreases not included in line 2 (itemize) SEE STATEMENT 6	5	6,534.
6	Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 29	6	8,380,249.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P — Purchase D — Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a SEE STATEMENT 7				
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a				
b				
c				
d				
e				
2 Capital gain net income or (net capital loss)..... If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7			2	109,052.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8..... 			3	-286,553.

Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 — see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here. <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary — see instructions)			
b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b)..... 		1	2,395.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-).....		2	0.
3 Add lines 1 and 2.....		3	2,395.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-).....		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-.....		5	2,395.
6 Credits/Payments:			
a 2022 estimated tax pymts and 2021 overpayment credited to 2022.....	6a	5,310.	
b Exempt foreign organizations — tax withheld at source.....	6b		
c Tax paid with application for extension of time to file (Form 8868).....	6c		
d Backup withholding erroneously withheld.....	6d		
7 Total credits and payments. Add lines 6a through 6d.....	7	5,310.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.....	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	0.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	2,915.	
11 Enter the amount of line 10 to be: Credited to 2023 estimated tax 2,915. Refunded	11	0.	

BAA

Form 990-PF (2022)

Part VI-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b	X
If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		
c Did the foundation file Form 1120-POL for this year?	1c	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation \$ <u>0.</u> (2) On foundation managers \$ <u>0.</u>		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ <u>0.</u>		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	X
If "Yes," attach a detailed description of the activities.		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X
b 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?	5	X
If "Yes," attach the statement required by <i>General Instruction T</i> .		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	X
8a Enter the states to which the foundation reports or with which it is registered. See instructions <u>N/A</u>		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation.	8b	X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2022 or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes," complete Part XIII.	9	X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses.	10	X
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11	X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? ... Website address: <u>WWW.GOODMANFAMILYFOUNDATION.ORG</u>	13	X
14 The books are in care of <u>MICHELE A. GOODMAN</u> Telephone no. <u>503-750-1814</u> Located at <u>1001 NW LOVEJOY ST #1510 PORTLAND OR</u> ZIP + 4 <u>97209</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here. <input type="checkbox"/> N/A and enter the amount of tax-exempt interest received or accrued during the year. 15 <u>N/A</u>		
16 At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country		

BAA

Form 990-PF (2022)

Part VI-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):		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person?		X
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?		X
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person?		X
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		X
(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)?		X
(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.)		X
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.		
c	Organizations relying on a current notice regarding disaster assistance, check here. <input type="checkbox"/>		
d	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2022?		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	At the end of tax year 2022, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2022? If "Yes," list the years 20 __ , 20 __ , 20 __ , 20 __		X
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.)		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20 __ , 20 __ , 20 __ , 20 __		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		X
b	If "Yes," did it have excess business holdings in 2022 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2022.)		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2022?		X

BAA

Form 990-PF (2022)

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

	Yes	No
5a During the year, did the foundation pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	5a(1)	X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	5a(2)	X
(3) Provide a grant to an individual for travel, study, or other similar purposes?	5a(3)	X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	5a(4)	X
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	5a(5)	X
b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions	5b	N/A
c Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
d If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A	5d	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	6a	X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.	6b	X
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	7a	X
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A	7b	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	8	X

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 8		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 0

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0

Part VIII-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 number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	
2	
3	
4	

Part VIII-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0.

BAA

Form 990-PF (2022)

Part IX **Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities.....	1a	8,393,500.
b	Average of monthly cash balances.....	1b	96,960.
c	Fair market value of all other assets (see instructions).....	1c	4,873.
d	Total (add lines 1a, b, and c).....	1d	8,495,333.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).....	1e	0.
2	Acquisition indebtedness applicable to line 1 assets.....	2	0.
3	Subtract line 2 from line 1d.....	3	8,495,333.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions).....	4	127,430.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3.....	5	8,367,903.
6	Minimum investment return. Enter 5% (0.05) of line 5.....	6	418,395.

Part X **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.)

1	Minimum investment return from Part IX, line 6.....	1	418,395.
2a	Tax on investment income for 2022 from Part V, line 5.....	2a	2,395.
b	Income tax for 2022. (This does not include the tax from Part V.).....	2b	
c	Add lines 2a and 2b.....	2c	2,395.
3	Distributable amount before adjustments. Subtract line 2c from line 1.....	3	416,000.
4	Recoveries of amounts treated as qualifying distributions.....	4	
5	Add lines 3 and 4.....	5	416,000.
6	Deduction from distributable amount (see instructions).....	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1.....	7	416,000.

Part XI **Qualifying Distributions** (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26.....	1a	392,932.
b	Program-related investments — total from Part VIII-B.....	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.....	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required).....	3a	
b	Cash distribution test (attach the required schedule).....	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4.....	4	392,932.

BAA

Form 990-PF (2022)

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
1 Distributable amount for 2022 from Part X, line 7				416,000.
2 Undistributed income, if any, as of the end of 2022:				
a Enter amount for 2021 only			361,942.	
b Total for prior years: 20 __, 20 __, 20 __		0.		
3 Excess distributions carryover, if any, to 2022:				
a From 2017				
b From 2018				
c From 2019				
d From 2020				
e From 2021				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2022 from Part XI, line 4: \$ 392,932.				
a Applied to 2021, but not more than line 2a ..			361,942.	
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus (Election required — see instructions)	0.			
d Applied to 2022 distributable amount				30,990.
e Remaining amount distributed out of corpus ..	0.			
5 Excess distributions carryover applied to 2022 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5.	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount — see instructions		0.		
e Undistributed income for 2021. Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2022. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2023				385,010.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)	0.			
8 Excess distributions carryover from 2017 not applied on line 5 or line 7 (see instructions) ..	0.			
9 Excess distributions carryover to 2023. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2018				
b Excess from 2019				
c Excess from 2020				
d Excess from 2021				
e Excess from 2022				

BAA

Form 990-PF (2022)

Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9)

N/A

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2022, enter the date of the ruling					
b Check box to indicate whether the foundation is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2022	(b) 2021	(c) 2020	(d) 2019	
b 85% (0.85) of line 2a					
c Qualifying distributions from Part XI, line 4, for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test — enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test — enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed					
c "Support" alternative test — enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year — see instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

SEE STATEMENT 9

b The form in which applications should be submitted and information and materials they should include:

SEE STATEMENT FOR LINE 2A

c Any submission deadlines:

SEE STATEMENT FOR LINE 2A

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

SEE STATEMENT FOR LINE 2A

Part XIV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year SEE STATEMENT 10				
Total			3a	379,266.
b Approved for future payment				
Total			3b	

2022

FEDERAL STATEMENTS

PAGE 1

J.W. & H.M. GOODMAN FAMILY CHARITABLE
FOUNDATION

77-0559337

STATEMENT 1
FORM 990-PF, PART I, LINE 16B
ACCOUNTING FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES.....	\$ 14,741.	\$ 1,348.		\$ 13,393.
TOTAL	<u>\$ 14,741.</u>	<u>\$ 1,348.</u>		<u>\$ 13,393.</u>

STATEMENT 2
FORM 990-PF, PART I, LINE 16C
OTHER PROFESSIONAL FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES.....	\$ 43,599.	\$ 43,599.		
TOTAL	<u>\$ 43,599.</u>	<u>\$ 43,599.</u>		<u>\$ 0.</u>

STATEMENT 3
FORM 990-PF, PART I, LINE 18
TAXES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAX.....	\$ 3,000.			
FOREIGN TAX PAID.....	27,828.	\$ 27,828.		
TOTAL	<u>\$ 30,828.</u>	<u>\$ 27,828.</u>		<u>\$ 0.</u>

STATEMENT 4
FORM 990-PF, PART I, LINE 23
OTHER EXPENSES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK FEES.....	\$ 73.			\$ 73.
DEPARTMENT OF JUSTICE.....	200.			200.
TOTAL	<u>\$ 273.</u>	<u>\$ 0.</u>		<u>\$ 273.</u>

STATEMENT 5
FORM 990-PF, PART II, LINE 15
OTHER ASSETS

	BOOK VALUE	FAIR MARKET VALUE
DIVIDENDS RECEIVABLE.....	\$ 9,746.	\$ 9,746.
TOTAL	\$ 9,746.	\$ 9,746.

STATEMENT 6
FORM 990-PF, PART III, LINE 5
OTHER DECREASES

PRIOR PERIOD ADJUSTMENTS.....	\$	6,534.
	TOTAL \$	6,534.

STATEMENT 7
FORM 990-PF, PART IV, LINE 1
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

ITEM	(A) DESCRIPTION	(B) HOW ACQUIRED	(C) DATE ACQUIRED	(D) DATE SOLD
1	TD AMERITRADE A/C 240098969	PURCHASED	VARIOUS	VARIOUS
2	TD AMERITRADE A/C 240098969	PURCHASED	VARIOUS	VARIOUS
3	TD AMERITRADE A/C 240392449	PURCHASED	VARIOUS	VARIOUS
4	TD AMERITRADE A/C 240392449	PURCHASED	VARIOUS	VARIOUS
5	MORGAN STANLEY A/C 838015978	PURCHASED	VARIOUS	VARIOUS
6	MORGAN STANLEY A/C 838015978	PURCHASED	VARIOUS	VARIOUS
7	MORGAN STANLEY A/C 838015978	PURCHASED	7/06/2022	VARIOUS
8	MORGAN STANLEY A/C 838015979	PURCHASED	VARIOUS	VARIOUS
9	MORGAN STANLEY A/C 838015979	PURCHASED	VARIOUS	VARIOUS
10	MS A/C 838015979 ACCD MKT DISCOUNT	PURCHASED	VARIOUS	VARIOUS
11	MORGAN STANLEY A/C 838015980	PURCHASED	VARIOUS	VARIOUS
12	MORGAN STANLEY A/C 838015980	PURCHASED	VARIOUS	VARIOUS
13	MORGAN STANLEY A/C 838015980	PURCHASED	7/06/2022	VARIOUS
14	CAPITAL GAIN DIVIDENDS			

	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)
	GROSS	DEPREC.	COST	GAIN	FMV	ADJ. BAS.	EXCESS	GAIN
<u>ITEM</u>	<u>SALES</u>	<u>ALLOWED</u>	<u>BASIS</u>	<u>(LOSS)</u>	<u>12/31/69</u>	<u>12/31/69</u>	<u>(I) - (J)</u>	<u>(LOSS)</u>
1	180,242.		200,531.	-20,289.				\$ -20,289.
2	1055907.		843,332.	212,575.				212,575.
3	8,106.		8,676.	-570.				-570.
4	79,769.		68,537.	11,232.				11,232.
5	1524119.		1750853.	-226,734.				-226,734.
6	4137304.		4142449.	-5,145.				-5,145.
7	460.		0.	460.				460.
8	209,064.		231,745.	-22,681.				-22,681.
9	1443909.		1306320.	137,589.				137,589.
10	0.		243.	-243.				-243.
11	102,587.		119,349.	-16,762.				-16,762.
12	261,050.		249,248.	11,802.				11,802.
13	23.		0.	23.				23.
14								27,795.
							TOTAL	\$ 109,052.

STATEMENT 8
FORM 990-PF, PART VII, LINE 1
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
JOSEPH W. GOODMAN 620 SAND HILL RD UNIT 100G PALO ALTO, CA 94304	CHAIRMAN 0	\$ 0.	\$ 0.	\$ 0.
MICHELE A. GOODMAN 1001 NW LOVEJOY ST #1510 PORTLAND, OR 97209	PRESIDENT & CEO 15.00	0.	0.	0.
ALEXANDER A. SAWCHUK 1349 WARNER AVE LOS ANGELES, CA 90024	BOARD MEMBER 0	0.	0.	0.
MARIETTE T. SAWCHUK 1349 WARNER AVE LOS ANGELES, CA 90024	BOARD MEMBER 0	0.	0.	0.
ERIC A. WAN 1001 NW LOVEJOY ST #1510 PORTLAND, OR 97209	TREASURER & SEC 0	0.	0.	0.
HON MAI GOODMAN 620 SAND HILL RD #100G PALO ALTO, CA 94304	BOARD MEMBER 0	0.	0.	0.
SUSAN KENNEY 9021 SW WEST HAVEN DR PORTLAND, OR 97225	BOARD MEMBER 0	0.	0.	0.
PAMELA HAYS 15262 NW CASEY DR PORTLAND, OR 97229	BOARD MEMBER 0	0.	0.	0.
TOTAL		<u>\$ 0.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>

STATEMENT 9
FORM 990-PF, PART XIV, LINE 2A-D
APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:	JW & HM GOODMAN FAMILY CHARITABLE
NAME:	FOUNDATION
CARE OF:	MICHELE GOODMAN
STREET ADDRESS:	1001 NW LOVEJOY ST UNIT 1510
CITY, STATE, ZIP CODE:	PORTLAND, OR 97209
TELEPHONE:	530-750-1814
E-MAIL ADDRESS:	
FORM AND CONTENT:	SEE WEBSITE FOR APPLICATION INFORMATION - WWW.GOODMANFAMILYFOUNDATION.ORG
SUBMISSION DEADLINES:	SEE WEBSITE FOR SUBMISSION DEADLINES
RESTRICTIONS ON AWARDS:	GRANTS ARE MADE ONLY TO THE SAN FRANCISCO BAY AREA IN CALIFORNIA AND THE PORTLAND AREA IN OREGON. GRANTS ARE MADE IN THE FOLLOWING AREAS OF INTEREST:

J.W. & H.M. GOODMAN FAMILY CHARITABLE
FOUNDATION

77-0559337

STATEMENT 9 (CONTINUED)
FORM 990-PF, PART XIV, LINE 2A-D
APPLICATION SUBMISSION INFORMATIONARTS & CULTURE, ENVIRONMENT, HEALTH & HUMAN SERVICES, AND
EDUCATION.STATEMENT 10
FORM 990-PF, PART XIV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
LAN SU CHINESE GARDEN 220 NW 2ND AVENUE, SUITE 1050 PORTLAND OR 97209	NONE	EOF	GENERAL OPERATING SUPPORT	\$ 20,000.
AIDS LEGAL REFERRAL PANEL (ALRP) 1663 MISSION STREET, SUITE 500 SAN FRANCISCO CA 94103	NONE	EOF	TWO LAW CLERK INTERNSHIPS	10,000.
ENVIRONMENTAL ACTION COMMITTEE OF W P.O. BOX 6090 POINT REYES STATION CA 94956	NONE	EOF	TWO LEGAL AND POLICY INTERNSHIPS	10,000.
OREGON MESA PO BOX 243 PORTLAND OR 97207	NONE	EOF	SUPPORT A CURRICULUM AND TRAINING INTERNSHIP POSITION	8,000.
POINT REYES BIRD OBSERVATORY 3820 CYPRESS DRIVE #11 PETALUMA CA 94954	NONE	EOF	SUPPORT TWO GRADUATE STUDENT INTERNS	16,000.
THE CONTINGENT 809 N RUSSELL ST #203 PORTLAND OR 97227	NONE	EOF	DISCRETIONARY GRANT	1,000.
UPWARD SCHOLARS 855 JEFFERSON AVENUE, BOX 506 REDWOOD CITY CA 94064	NONE	EOF	FUND AN INTERN	8,000.
WOMEN'S AUDIO MISSION (WAM) 542-544 NATOMA STREET, #C-1 SAN FRANCISCO CA 94103	NONE	EOF	FUND INTERNSHIPS FOR TWO COLLEGE STUDENTS	8,000.

STATEMENT 10 (CONTINUED)
FORM 990-PF, PART XIV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
COLUMBIA LAND TRUST 850 OFFICERS' ROW VANCOUVER WA 98661	NONE	EOF	FUND WORK	\$ 10,000.
ECOTRUST 1140 SE 7TH AVE STE 150 PORTLAND OR 97214	NONE	EOF	FOREST AND ECOSYSTEM SERVICES	10,000.
NATIONAL FOREST FOUNDATION BLDG. 27, STE. 3 FORT MISSOULA RD MISSOULA MT 59804	NONE	EOF	FUND LADYBUG PROJECT	10,000.
NORTH COAST LAND CONSERVANCY PO BOX 67 SEASIDE OR 97138	NONE	EOF	DISCRETIONARY GRANT	1,000.
PACIFIC FOREST TRUST 1001-A O'REILLY AVENUE SAN FRANCISCO CA 94129	NONE	EOF	SUPPORT MT. ASHLAND DEMONSTRATION FOREST RESILIENCY PROJECT	5,000.
PEPPERWOOD FOUNDATION 2130 PEPPERWOOD PRESERVE ROAD SANTA ROSA CA 95404	NONE	EOF	GENERAL OPERATING SUPPORT	10,000.
SUSTAINABLE NORTHWEST 1130 SW MORRISON ST STE 510 PORTLAND OR 97205	NONE	EOF	WORK IN SOUTHERN OREGON AROUND FOREST AND WILDFIRE RESILIENCY	10,000.
THE NATURE CONSERVANCY IN CA 830 S STREET SACRAMENTO CA 95811	NONE	EOF	SUPPORT NORTH YUBA FOREST RESILIENCY PROJECT	10,000.
WILD RIVERS LAND TRUST PO BOX 1158 PORT ORFORD OR 97465	NONE	EOF	SUPPORT WORK IN PORT ORFORD TO SAFEQUARD THEIR WATERSHED	10,000.
COMMUNITY FOR POSITIVE AGING 1820 NE 40TH AVENUE PORTLAND OR 97212	NONE	EOF	GENERAL OPERATING SUPPORT	10,000.

J.W. & H.M. GOODMAN FAMILY CHARITABLE
FOUNDATION

77-0559337

STATEMENT 10 (CONTINUED)
FORM 990-PF, PART XIV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
CURRY SENIOR CENTER 333 TURK ST SAN FRANCISCO CA 94102	NONE	EOF	GENERAL OPERATING SUPPORT	\$ 10,000.
SAN FRANCISCO VILLAGE 3220 FULTON STREET SAN FRANCISCO CA 94118	NONE	EOF	GENERAL OPERATING SUPPORT	10,000.
SELF HELP FOR THE ELDERLY 731 SANSOME ST, SUITE 100 SAN FRANCISCO CA 94111	NONE	EOF	DISCRETIONARY GRANT	1,000.
AGC OF CALIFORNIA CONSTRUCTION EDUCATION 3095 BEACON BLVD W. SACRAMENTO CA 95691	NONE	EOF	FUND NONPROFIT INTERNSHIP	10,000.
ASIAN ART MUSEAUM OF S.F. 200 LARKIN ST SAN FRANCISCO CA 94102	NONE	EOF	GENERAL OPERATING SUPPORT	10,000.
CHINESE HISTORICAL SOCIETY OF AMERICA 965 CLAY ST SAN FRANCISCO CA 94108	NONE	EOF	GENERAL OPERATING SUPPORT	12,500.
COLUMBIA RIVERKEEPER P O BOX 950 HOOD RIVER OR 97031	NONE	EOF	DISCRETIONARY GRANT	1,000.
COMPASS FAMILY SERVICES 37 GROVE ST SAN FRANCISCO CA 94102	NONE	EOF	FUND AN INTERNSHIP STIPEND FOR GRADUATE STUDENT TRAINEE	16,266.
HOOD RIVER VALLEY ADULT CENTER 2010 STERLING PLACE HOOD RIVER OR 97031	NONE	EOF	GENERAL OPERATING SUPPORT	10,000.
JAPANESE GARDEN SOCIETY OF OREGON 611 SW KINGSTON AVE PORTLAND OR 97205	NONE	EOF	GENERAL OPERATING SUPPORT	10,000.
MEALS ON WHEELS PEOPLE P O BOX 19477 PORTLAND OR 97280	NONE	EOF	SUPPORT EXPANSION PROJECT IN THE VOLUNTEER SPACE	20,000.

STATEMENT 10 (CONTINUED)
FORM 990-PF, PART XIV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
OAKLAND ASIAN CULTURAL CENTER 388 9TH ST STE 290 OAKLAND CA 94607	NONE	EOF	GENERAL OPERATING SUPPORT	\$ 7,500.
OPEN HOUSE 65 LAGUNA ST SAN FRANCISCO CA 94102	NONE	EOF	GENERAL OPERATING SUPPORT	10,000.
PLANNED PARENTHOOD COLUMBIA P O 97166 WASHINGTON DC 20090	NONE	EOF	DISCRETIONARY SUPPORT	2,000.
PORTLAND CHINATOWN HISTORY FDN P O BOX 2925 PORTLAND OR 97208	NONE	EOF	GENERAL OPERATING SUPPORT	10,000.
PORTLAND PLAYHOUSE 602 PRESCOTT ST PORTLAND OR 97211	NONE	EOF	SUPPORT TWO PROJECTION APPRENTICESHIPS	12,000.
REBUILDING TOGETHER PENINSULA 841 KAYNYNE ST #A REDWOOD CITY CA 94063	NONE	EOF	GENERAL OPERATING SUPPORT	17,000.
SHARE THE CARE NAPA VALLEY 162 SOUTH COOMBS ST NAPA CA 94559	NONE	EOF	GENERAL OPERATING SUPPORT	10,000.
STORE TO DOOR OF OREGON 7730 SW 31ST AVE PORTLAND OR 97219	NONE	EOF	GENERAL OPERATING SUPPORT	10,000.
TAKOHACHI INC. 2619 SE 63RD AVE PORTLAND OR 97206	NONE	EOF	SUPPORT PROGRAM AND STAFFING EXPANSION	7,500.
WESTERN ENVIRONMENTAL LAW CENTER 120 SHELTON MCMURPHEY BLVD STE 340 EUGENE OR 97401	NONE	EOF	SUMMER LAW STUDENT INTERNSHIP	8,000.
YOUNG AUDIENCES OF OREGON & SW WASHINGTO 1220 SW MORRISON ST STE1000 PORTLAND OR 97205	NONE	EOF	SUPPORT ASIAN ART AND CULTURE PROGRAMMING	7,500.

TOTAL \$ 379,266.

March 7, 2023

J.W. & H.M. GOODMAN FAMILY CHARITABLE
FOUNDATION
620 SAND HILL ROAD Suite 100G
PALO ALTO, CA 94304

Dear Michele:

Your 2022 Federal Return of Private Foundation will be electronically filed with the Internal Revenue Service upon receipt of a signed Form 8453-TE - Exempt Organization Declaration and Signature for Electronic Filing. No tax is payable with the filing of this return. There is an overpayment of \$2,915, of which \$2,915 has been applied to your 2023 estimated tax.

The organization has undistributed income of \$385,010 on Form 990-PF for the tax year 2022. The organization must distribute this amount by the end of its 2023 tax year so that it will not be liable for the tax on undistributed income.

Your 2022 California Exempt Organization Annual Information Return will be electronically filed with the State of California upon receipt of a signed Form 8453-EO. No tax is payable with the filing of this return.

Enclosed is your California Registration/Renewal Fee Report to the Attorney General. The original should be signed at the bottom of page one. There is a fee due of \$75 payable by May 15, 2023. Make the check or money order payable to "Department of Justice" and mail your California report on or before May 15, 2023 to:

REGISTRY OF CHARITABLE TRUSTS
P.O. BOX 903447
SACRAMENTO, CA 94203-4470

Please be sure to call us if you have any questions.

Sincerely,

Dan K. Deaver

2022

California Exempt Organization
Annual Information Return

199

Calendar Year 2022 or fiscal year beginning (mm/dd/yyyy) _____, and ending (mm/dd/yyyy) _____.

Corporation/Organization name J.W. & H.M. GOODMAN FAMILY CHARITABLE FOUNDATION		California corporation number 2321197
Additional information. See instructions.		FEIN 77-0559337
Street address (suite or room) 620 SAND HILL ROAD #100G		PMB no.
City PALO ALTO	State CA	Zip code 94304
Foreign country name	Foreign province/state/county	Foreign postal code

<p>A First return. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>B Amended return. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>C IRC Section 4947(a)(1) trust. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>D Final information return? <input type="checkbox"/> Dissolved <input type="checkbox"/> Surrendered (Withdrawn) <input type="checkbox"/> Merged/Reorganized Enter date: (mm/dd/yyyy) • _____</p> <p>E Check accounting method: 1 <input checked="" type="checkbox"/> Cash 2 <input type="checkbox"/> Accrual 3 <input type="checkbox"/> Other</p> <p>F Federal return filed? 1 • <input type="checkbox"/> 990T 2 • <input checked="" type="checkbox"/> 990-PF 3 • <input type="checkbox"/> Sch H (990) 4 <input type="checkbox"/> Other 990 series</p> <p>G Is this a group filing? See instructions. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>H Is this organization in a group exemption If "Yes," what is the parent's name? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>I Did the organization have any changes to its guidelines not reported to the FTB? See instructions. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>J If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>K Is the organization exempt under R&TC Section 23701g? ... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," enter the gross receipts from nonmember sources. \$ _____</p> <p>L Is the organization a limited liability company? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>M Did the organization file Form 100 or Form 109 to report taxable income? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>N Is the organization under audit by the IRS or has the IRS audited in a prior year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>O Is federal Form 1023/1024 pending? <input type="checkbox"/> Yes <input type="checkbox"/> No Date filed with IRS _____</p>
--	--

Part I Complete Part I unless not required to file this form. See General Information B and C.

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8.	1	9,166,356.
	2	Gross dues and assessments from members and affiliates.	2	
	3	Gross contributions, gifts, grants, and similar amounts received.	3	
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$50,000, see General Information B ..	4	9,166,356.
	5	Cost of goods sold.	5	
	6	Cost or other basis, and sales expenses of assets sold.	6	8,921,283.
	7	Total costs. Add line 5 and line 6.	7	8,921,283.
	8	Total gross income. Subtract line 7 from line 4.	8	245,073.
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18.	9	465,707.
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8.	10	-220,634.
Filing Fee	11	Total payments.	11	
	12	Use tax. See General Information K.	12	
	13	Payments balance. If line 11 is more than line 12, subtract line 12 from line 11.	13	
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12.	14	
	15	Penalties and interest. See General Information J.	15	
	16	Balance due. Add line 12 and line 15. Then subtract line 11 from the result.	16	0.
Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
Paid Preparer's Use Only	Signature of officer	Title PRESIDENT	Date	Telephone 503-750-1814
	Preparer's signature	DAN K. DEAVER	Date	PTIN P00035597
	Firm's name (or yours, if self-employed) and address	COMYNS, SMITH, MCCLEARY & DEAVER, LLP		Firm's FEIN 68-0307221
		1777 BOTELHO DRIVE SUITE 350		Telephone (925) 299-1040
		WALNUT CREEK, CA 94596		
May the FTB discuss this return with the preparer shown above? See instructions. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				

Part II Organizations with gross receipts of more than \$50,000 and private foundations
 regardless of amount of gross receipts – complete Part II or furnish substitute information.

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions.	•	1	
	2	Interest	•	2	
	3	Dividends	•	3	136,021.
	4	Gross rents	•	4	
	5	Gross royalties	•	5	
	6	Gross amount received from sale of assets (See instructions)	•	6	9,030,335.
	7	Other income. Attach schedule.	•	7	
	8	Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1.	•	8	9,166,356.
	9	Contributions, gifts, grants, and similar amounts paid. Attach schedule. SEE STATEMENT 1	•	9	379,266.
	10	Disbursements to or for members.	•	10	
Expenses and Disbursements	11	Compensation of officers, directors, and trustees. Attach schedule. SEE STMT 2	•	11	0.
	12	Other salaries and wages	•	12	
	13	Interest	•	13	
	14	Taxes. SEE STATEMENT 3	•	14	27,828.
	15	Rents	•	15	
	16	Depreciation and depletion (See instructions)	•	16	
	17	Other expenses and disbursements. Attach schedule. SEE STATEMENT 4	•	17	58,613.
	18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9.	•	18	465,707.

Schedule L Balance Sheet		Beginning of taxable year		End of taxable year	
		(a)	(b)	(c)	(d)
Assets					
1	Cash		53,970.	•	139,951.
2	Net accounts receivable			•	
3	Net notes receivable			•	
4	Inventories			•	
5	Federal and state government obligations			•	
6	Investments in other bonds			•	
7	Investments in stock			•	
8	Mortgage loans			•	
9	Other investments. Attach schedule.		8,556,447.	•	8,230,552.
10 a	Depreciable assets.				
b	Less accumulated depreciation.				
11	Land			•	
12	Other assets. Attach schedule. STM 5			•	9,746.
13	Total assets		8,610,417.		8,380,249.
Liabilities and net worth					
14	Accounts payable			•	
15	Contributions, gifts, or grants payable			•	
16	Bonds and notes payable			•	
17	Mortgages payable			•	
18	Other liabilities. Attach schedule.				
19	Capital stock or principal fund		8,610,417.	•	8,380,249.
20	Paid-in or capital surplus. Attach reconciliation.			•	
21	Retained earnings or income fund			•	
22	Total liabilities and net worth		8,610,417.		8,380,249.

Schedule M-1 Reconciliation of income per books with income per return

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000.

1	Net income per books	•	-223,634.	7	Income recorded on books this year not included in this return. Attach schedule	•	
2	Federal income tax	•	3,000.	8	Deductions in this return not charged against book income this year. Attach schedule.	•	
3	Excess of capital losses over capital gains	•		9	Total. Add line 7 and line 8		
4	Income not recorded on books this year. Attach schedule.	•		10	Net income per return. Subtract line 9 from line 6.		-220,634.
5	Expenses recorded on books this year not deducted in this return. Attach schedule	•					
6	Total. Add line 1 through line 5.		-220,634.				

STATEMENT 1

FORM 199, PART II, LINE 9

CONTRIBUTIONS, GIFTS, GRANTS, AND SIMILAR AMOUNTS PAID

DONEE'S NAME - IND LAN SU CHINESE GARDEN
DONEE'S STREET ADDRESS: 220 NW 2ND AVENUE, SUITE 1050
DONEE'S CITY PORTLAND
DONEE'S STATE OR
DONEE'S ZIP CODE 97209
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: \$ 20,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND AIDS LEGAL REFERRAL PANEL (ALRP)
DONEE'S STREET ADDRESS: 1663 MISSION STREET, SUITE 500
DONEE'S CITY SAN FRANCISCO
DONEE'S STATE CA
DONEE'S ZIP CODE 94103
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 10,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND ENVIRONMENTAL ACTION COMMITTEE OF W
DONEE'S STREET ADDRESS: P.O. BOX 6090
DONEE'S CITY POINT REYES STATION
DONEE'S STATE CA
DONEE'S ZIP CODE 94956
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 10,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND OREGON MESA
DONEE'S STREET ADDRESS: PO BOX 243
DONEE'S CITY PORTLAND
DONEE'S STATE OR
DONEE'S ZIP CODE 97207
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 8,000.

CLASS OF ACTIVITY: EDUCATION
DONEE'S NAME - IND POINT REYES BIRD OBSERVATORY
DONEE'S STREET ADDRESS: 3820 CYPRESS DRIVE #11
DONEE'S CITY PETALUMA
DONEE'S STATE CA
DONEE'S ZIP CODE 94954
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 16,000.

STATEMENT 1 (CONTINUED)

FORM 199, PART II, LINE 9

CONTRIBUTIONS, GIFTS, GRANTS, AND SIMILAR AMOUNTS PAID

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND THE CONTINGENT
DONEE'S STREET ADDRESS: 809 N RUSSELL ST #203
DONEE'S CITY PORTLAND
DONEE'S STATE OR
DONEE'S ZIP CODE 97227
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: \$ 1,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND UPWARD SCHOLARS
DONEE'S STREET ADDRESS: 855 JEFFERSON AVENUE, BOX 506
DONEE'S CITY REDWOOD CITY
DONEE'S STATE CA
DONEE'S ZIP CODE 94064
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 8,000.

CLASS OF ACTIVITY: EDUCATION
DONEE'S NAME - IND WOMEN'S AUDIO MISSION (WAM)
DONEE'S STREET ADDRESS: 542-544 NATOMA STREET, #C-1
DONEE'S CITY SAN FRANCISCO
DONEE'S STATE CA
DONEE'S ZIP CODE 94103
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 8,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND COLUMBIA LAND TRUST
DONEE'S STREET ADDRESS: 850 OFFICERS' ROW
DONEE'S CITY VANCOUVER
DONEE'S STATE WA
DONEE'S ZIP CODE 98661
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 10,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND ECOTRUST
DONEE'S STREET ADDRESS: 1140 SE 7TH AVE STE 150
DONEE'S CITY PORTLAND
DONEE'S STATE OR
DONEE'S ZIP CODE 97214
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 10,000.

STATEMENT 1 (CONTINUED)

FORM 199, PART II, LINE 9

CONTRIBUTIONS, GIFTS, GRANTS, AND SIMILAR AMOUNTS PAID

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND NATIONAL FOREST FOUNDATION
DONEE'S STREET ADDRESS: BLDG. 27, STE. 3 FORT MISSOULA RD
DONEE'S CITY MISSOULA
DONEE'S STATE MT
DONEE'S ZIP CODE 59804
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: \$ 10,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND NORTH COAST LAND CONSERVANCY
DONEE'S STREET ADDRESS: PO BOX 67
DONEE'S CITY SEASIDE
DONEE'S STATE OR
DONEE'S ZIP CODE 97138
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 1,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND PACIFIC FOREST TRUST
DONEE'S STREET ADDRESS: 1001-A O'REILLY AVENUE
DONEE'S CITY SAN FRANCISCO
DONEE'S STATE CA
DONEE'S ZIP CODE 94129
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 5,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND PEPPERWOOD FOUNDATION
DONEE'S STREET ADDRESS: 2130 PEPPERWOOD PRESERVE ROAD
DONEE'S CITY SANTA ROSA
DONEE'S STATE CA
DONEE'S ZIP CODE 95404
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 10,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND SUSTAINABLE NORTHWEST
DONEE'S STREET ADDRESS: 1130 SW MORRISON ST STE 510
DONEE'S CITY PORTLAND
DONEE'S STATE OR
DONEE'S ZIP CODE 97205
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 10,000.

STATEMENT 1 (CONTINUED)

FORM 199, PART II, LINE 9

CONTRIBUTIONS, GIFTS, GRANTS, AND SIMILAR AMOUNTS PAID

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND THE NATURE CONSERVANCY IN CA
DONEE'S STREET ADDRESS: 830 S STREET
DONEE'S CITY SACRAMENTO
DONEE'S STATE CA
DONEE'S ZIP CODE 95811
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: \$ 10,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND WILD RIVERS LAND TRUST
DONEE'S STREET ADDRESS: PO BOX 1158
DONEE'S CITY PORT ORFORD
DONEE'S STATE OR
DONEE'S ZIP CODE 97465
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 10,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND COMMUNITY FOR POSITIVE AGING
DONEE'S STREET ADDRESS: 1820 NE 40TH AVENUE
DONEE'S CITY PORTLAND
DONEE'S STATE OR
DONEE'S ZIP CODE 97212
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 10,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND CURRY SENIOR CENTER
DONEE'S STREET ADDRESS: 333 TURK ST
DONEE'S CITY SAN FRANCISCO
DONEE'S STATE CA
DONEE'S ZIP CODE 94102
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 10,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND SAN FRANCISCO VILLAGE
DONEE'S STREET ADDRESS: 3220 FULTON STREET
DONEE'S CITY SAN FRANCISCO
DONEE'S STATE CA
DONEE'S ZIP CODE 94118
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 10,000.

STATEMENT 1 (CONTINUED)

FORM 199, PART II, LINE 9

CONTRIBUTIONS, GIFTS, GRANTS, AND SIMILAR AMOUNTS PAID

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND SELF HELP FOR THE ELDERLY
DONEE'S STREET ADDRESS: 731 SANSOME ST, SUITE 100
DONEE'S CITY SAN FRANCISCO
DONEE'S STATE CA
DONEE'S ZIP CODE 94111
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: \$ 1,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND AGC OF CALIFORNIA CONSTRUCTION EDUCATION
DONEE'S STREET ADDRESS: 3095 BEACON BLVD
DONEE'S CITY W. SACRAMENTO
DONEE'S STATE CA
DONEE'S ZIP CODE 95691
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 10,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND ASIAN ART MUSEAUM OF S.F.
DONEE'S STREET ADDRESS: 200 LARKIN ST
DONEE'S CITY SAN FRANCISCO
DONEE'S STATE CA
DONEE'S ZIP CODE 94102
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 10,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND CHINESE HISTORICAL SOCIETY OF AMERICA
DONEE'S STREET ADDRESS: 965 CLAY ST
DONEE'S CITY SAN FRANCISCO
DONEE'S STATE CA
DONEE'S ZIP CODE 94108
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 12,500.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND COLUMBIA RIVERKEEPER
DONEE'S STREET ADDRESS: P O BOX 950
DONEE'S CITY HOOD RIVER
DONEE'S STATE OR
DONEE'S ZIP CODE 97031
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 1,000.

STATEMENT 1 (CONTINUED)

FORM 199, PART II, LINE 9

CONTRIBUTIONS, GIFTS, GRANTS, AND SIMILAR AMOUNTS PAID

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND COMPASS FAMILY SERVICES
DONEE'S STREET ADDRESS: 37 GROVE ST
DONEE'S CITY SAN FRANCISCO
DONEE'S STATE CA
DONEE'S ZIP CODE 94102
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: \$ 16,266.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND HOOD RIVER VALLEY ADULT CENTER
DONEE'S STREET ADDRESS: 2010 STERLING PLACE
DONEE'S CITY HOOD RIVER
DONEE'S STATE OR
DONEE'S ZIP CODE 97031
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 10,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND JAPANESE GARDEN SOCIETY OF OREGON
DONEE'S STREET ADDRESS: 611 SW KINGSTON AVE
DONEE'S CITY PORTLAND
DONEE'S STATE OR
DONEE'S ZIP CODE 97205
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 10,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND MEALS ON WHEELS PEOPLE
DONEE'S STREET ADDRESS: P O BOX 19477
DONEE'S CITY PORTLAND
DONEE'S STATE OR
DONEE'S ZIP CODE 97280
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 20,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND OAKLAND ASIAN CULTURAL CENTER
DONEE'S STREET ADDRESS: 388 9TH ST STE 290
DONEE'S CITY OAKLAND
DONEE'S STATE CA
DONEE'S ZIP CODE 94607
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 7,500.

STATEMENT 1 (CONTINUED)

FORM 199, PART II, LINE 9

CONTRIBUTIONS, GIFTS, GRANTS, AND SIMILAR AMOUNTS PAID

CLASS OF ACTIVITY:	CHARITABLE	
DONEE'S NAME - IND	OPEN HOUSE	
DONEE'S STREET ADDRESS:	65 LAGUNA ST	
DONEE'S CITY	SAN FRANCISCO	
DONEE'S STATE	CA	
DONEE'S ZIP CODE	94102	
RELATIONSHIP OF DONEE:	NONE	
ORGANIZATIONAL STATUS OF DONEE:	501 (C) (3)	
CASH AND NONCASH AMOUNT:		\$ 10,000.

CLASS OF ACTIVITY:	CHARITABLE	
DONEE'S NAME - IND	PLANNED PARENTHOOD COLUMBIA	
DONEE'S STREET ADDRESS:	P O 97166	
DONEE'S CITY	WASHINGTON	
DONEE'S STATE	DC	
DONEE'S ZIP CODE	20090	
RELATIONSHIP OF DONEE:	NONE	
ORGANIZATIONAL STATUS OF DONEE:	501 (C) (3)	
CASH AND NONCASH AMOUNT:		2,000.

CLASS OF ACTIVITY:	CHARITABLE	
DONEE'S NAME - IND	PORTLAND CHINATOWN HISTORY FDN	
DONEE'S STREET ADDRESS:	P O BOX 2925	
DONEE'S CITY	PORTLAND	
DONEE'S STATE	OR	
DONEE'S ZIP CODE	97208	
RELATIONSHIP OF DONEE:	NONE	
ORGANIZATIONAL STATUS OF DONEE:	501 (C) (3)	
CASH AND NONCASH AMOUNT:		10,000.

CLASS OF ACTIVITY:	CHARITABLE	
DONEE'S NAME - IND	PORTLAND PLAYHOUSE	
DONEE'S STREET ADDRESS:	602 PRESCOTT ST	
DONEE'S CITY	PORTLAND	
DONEE'S STATE	OR	
DONEE'S ZIP CODE	97211	
RELATIONSHIP OF DONEE:	NONE	
ORGANIZATIONAL STATUS OF DONEE:	501 (C) (3)	
CASH AND NONCASH AMOUNT:		12,000.

CLASS OF ACTIVITY:	CHARITABLE	
DONEE'S NAME - IND	REBUILDING TOGETHER PENINSULA	
DONEE'S STREET ADDRESS:	841 KAYNYNE ST #A	
DONEE'S CITY	REDWOOD CITY	
DONEE'S STATE	CA	
DONEE'S ZIP CODE	94063	
RELATIONSHIP OF DONEE:	NONE	
ORGANIZATIONAL STATUS OF DONEE:	501 (C) (3)	
CASH AND NONCASH AMOUNT:		17,000.

STATEMENT 1 (CONTINUED)

FORM 199, PART II, LINE 9

CONTRIBUTIONS, GIFTS, GRANTS, AND SIMILAR AMOUNTS PAID

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND SHARE THE CARE NAPA VALLEY
DONEE'S STREET ADDRESS: 162 SOUTH COOMBS ST
DONEE'S CITY NAPA
DONEE'S STATE CA
DONEE'S ZIP CODE 94559
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: \$ 10,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND STORE TO DOOR OF OREGON
DONEE'S STREET ADDRESS: 7730 SW 31ST AVE
DONEE'S CITY PORTLAND
DONEE'S STATE OR
DONEE'S ZIP CODE 97219
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 10,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND TAKOHACHI INC.
DONEE'S STREET ADDRESS: 2619 SE 63RD AVE
DONEE'S CITY PORTLAND
DONEE'S STATE OR
DONEE'S ZIP CODE 97206
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 7,500.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND WESTERN ENVIRONMENTAL LAW CENTER
DONEE'S STREET ADDRESS: 120 SHELTON MCMURPHEY BLVD STE 340
DONEE'S CITY EUGENE
DONEE'S STATE OR
DONEE'S ZIP CODE 97401
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 8,000.

CLASS OF ACTIVITY: CHARITABLE
DONEE'S NAME - IND YOUNG AUDIENCES OF OREGON & SW WASHINGTO
DONEE'S STREET ADDRESS: 1220 SW MORRISON ST STE1000
DONEE'S CITY PORTLAND
DONEE'S STATE OR
DONEE'S ZIP CODE 97205
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: 501 (C) (3)
CASH AND NONCASH AMOUNT: 7,500.

TOTAL \$ 379,266.

STATEMENT 2**FORM 199, PART II, LINE 11****COMPENSATION OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES****CURRENT OFFICERS:**

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	TOTAL COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
JOSEPH W. GOODMAN 620 SAND HILL RD UNIT 100G PALO ALTO, CA 94304	CHAIRMAN 0	\$ 0.	\$ 0.	\$ 0.
MICHELE A. GOODMAN 1001 NW LOVEJOY ST #1510 PORTLAND, OR 97209	PRESIDENT & CEO 15.00	0.	0.	0.
ALEXANDER A. SAWCHUK 1349 WARNER AVE LOS ANGELES, CA 90024	BOARD MEMBER 0	0.	0.	0.
MARIETTE T. SAWCHUK 1349 WARNER AVE LOS ANGELES, CA 90024	BOARD MEMBER 0	0.	0.	0.
ERIC A. WAN 1001 NW LOVEJOY ST #1510 PORTLAND, OR 97209	TREASURER & SEC 0	0.	0.	0.
HON MAI GOODMAN 620 SAND HILL RD #100G PALO ALTO, CA 94304	BOARD MEMBER 0	0.	0.	0.
SUSAN KENNEY 9021 SW WEST HAVEN DR PORTLAND, OR 97225	BOARD MEMBER 0	0.	0.	0.
PAMELA HAYS 15262 NW CASEY DR PORTLAND, OR 97229	BOARD MEMBER 0	0.	0.	0.
TOTAL		\$ 0.	\$ 0.	\$ 0.

STATEMENT 3**FORM 199, PART II, LINE 14****TAXES**

FOREIGN TAX EXPENSE.....	\$ 27,828.
TOTAL	\$ 27,828.

2022

CALIFORNIA STATEMENTS
J.W. & H.M. GOODMAN FAMILY CHARITABLE
FOUNDATION

PAGE 10

77-0559337

STATEMENT 4
FORM 199, PART II, LINE 17
OTHER EXPENSES

ACCOUNTING FEES.....	\$	14,741.
OTHER PROFESSIONAL FEES.....		43,599.
BANK FEES.....		73.
DEPARTMENT OF JUSTICE.....		200.
TOTAL	\$	<u>58,613.</u>

STATEMENT 5
FORM 199, SCHEDULE L, LINE 12
OTHER ASSETS

DIVIDENDS RECEIVABLE.....		9,746.
TOTAL	\$	<u>9,746.</u>

STREET ADDRESS:
1300 I Street
Sacramento, CA 95814
(916) 210-6400

WEBSITE ADDRESS:
www.oag.ca.gov/charities



(For Registry Use Only)

ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

Sections 12586 and 12587, California Government Code
11 Cal. Code Regs. sections 301-306, 309, 311, and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties. Revenue & Taxation Code section 23703; Government Code section 12586.1. IRS extensions will be honored.

J.W. & H.M. GOODMAN FAMILY CHARITABLE FOUNDATION Name of Organization		Check if: <input type="checkbox"/> Change of address <input type="checkbox"/> Amended report	
List all DBAs and names the organization uses or has used 620 SAND HILL ROAD 100G Address (Number and Street)		State Charity Registration Number 116551	
PALO ALTO, CA 94304 City or Town, State, and ZIP Code		Corporation or Organization No. 2321197	
503-750-1814 Telephone Number		Federal Employer ID No. 77-0559337	
E-mail Address			

ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311, and 312) Make Check Payable to Department of Justice

Total Revenue	Fee	Total Revenue	Fee	Total Revenue	Fee
Less than \$50,000	\$25	Between \$250,001 and \$1 million	\$100	Between \$20,000,001 and \$100 million	\$800
Between \$50,000 and \$100,000	\$50	Between \$1,000,001 and \$5 million	\$200	Between \$100,000,001 and \$500 million	\$1,000
Between \$100,001 and \$250,000	\$75	Between \$5,000,001 and \$20 million	\$400	Greater than \$500 million	\$1,200

PART A – ACTIVITIES

For your most recent full accounting period (beginning 1/01/22 ending 12/31/22) list:

Total Revenue \$
(including noncash contributions) 245,073. Noncash Contributions \$ 0. Total Assets \$ 8,380,249.

Program Expenses \$ 392,932. Total Expenses \$ 465,707.

PART B – STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: All questions must be answered. If you answer "yes" to any of the questions below, you must attach a separate page providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

	Yes	No
1 During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof, either directly or with an entity in which any such officer, director or trustee had any financial interest?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2 During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3 During this reporting period, were any organization funds used to pay any penalty, fine or judgment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4 During this reporting period, were the services of a commercial fundraiser, fundraising counsel for charitable purposes, or commercial coventurer used?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5 During this reporting period, did the organization receive any governmental funding?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6 During this reporting period, did the organization hold a raffle for charitable purposes?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7 Does the organization conduct a vehicle donation program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8 Did the organization conduct an independent audit and prepare audited financial statements in accordance with generally accepted accounting principles for this reporting period?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9 At the end of this reporting period, did the organization hold restricted net assets, while reporting negative unrestricted net assets?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, the content is true, correct and complete, and I am authorized to sign.

MICHELE A. GOODMAN	PRESIDENT	
Signature of Authorized Agent	Printed Name	Title
		Date