Form	9	9	0

(Rev. January 2020)

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 foundations)

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations G Do not enter social security numbers on this form as it may be made public. G Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

^	For the	2010 colon	dar yoar or tay yoar bagin	ning	2019, and ending				
<u>A</u>			dar year, or tax year begin	ining ,	2019, and ending	·	Translation	, identification n	uma h o r
В		applicable:	-			_	1 5		umber
		ress change	Oregon Center fo					186075	
	Nam	ne change	6420 S Macadam # Portland, OR 972			E	Telephone		
	Initia	al return	FULLIANU, UK 972	37			(971)) 279-47	'32
	Final	return/terminated							
	Ame	ended return				G	Gross rece	eipts \$ 1	, 186, 004.
	Appl	lication pending	F Name and address of principa	^{lofficer:} John Mullin		H(a) Is this a grou			103 110
			Same As C Above		ŀ	H(b) Are all subor If "No," attac	dinates in	cluded?	Yes No
Ι	Tax-ex	empt status:	X 501(c)(3) 501(c) ()H (insert no.) 4947(a)(1) or 527	ii No, attac	11 8 1131. (3		
J	Webs	site: G ww	w. ocpp. org			H(c) Group exemp	otion numb	ber G	
к	Form o	of organization:	X Corporation Trust	Association OtherG	L Year of formatio		1	te of legal domi	cile: OR
_	art I	Summar				1770			OIT
		Briefly descri	be the organization's missi	ion or most significant activities	suse resear	ch and a	nalv	sis to a	advance
~	r			nat improve the ecor					
Governance	<u>1</u> (Oregoni a					<u> </u>		<u></u>
rna									
Nel	2 C	Check this bo	ox G if the organizatio	n discontinued its operations of	r disposed of mor	re than 25% o	of its ne	et assets.	
				rning body (Part VI, line 1a)				3	8
ა ი	4 N			s of the governing body (Part V				4	8
itie	5 T			n calendar year 2019 (Part V, li				5	9
Activities &	6 ⊺			necessary)				6	13
Ă				Part VIII, column (C), line 12				7a	0.
	b N	let unrelated	business taxable income	from Form 990-T, line 39		1		7b	0.
		N = t!!= t! = =		4.)		Prior			rrent Year
e			-	1h)			04, 32	1. 1	, 175, 712.
Revenue		 9 Program service revenue (Part VIII, line 2g) 0 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 						7	2 050
Jev Lev			e (Part VIII, column (A), lir		<u>1, 49</u> 94		<u>3, 950.</u> 6, 342.		
				(must equal Part VIII, column			94 06, 76	-	<u>, 186, 004.</u>
				X, column (A), lines 1-3)			50, 70	Ζ.	, 160, 004.
				X, column (A), line 4)					
				e benefits (Part IX, column (A),			14 70	4	E01 00E
es	15 S						06, 79	4.	591,005.
Expenses	16a ⊦	rofessional	fundraising fees (Part IX, o	column (A), line 11e)					
- dx	b⊺	otal fundrais	sing expenses (Part IX, col	umn (D), line 25) G	103, 997.				
ш	17 C	Other expens	ses (Part IX, column (A), lii	nes 11a-11d, 11f-24e)		19	91, 52	2.	174, 735.
	18 T	otal expense	es. Add lines 13-17 (must	equal Part IX, column (A), line	25)	69	98, 31	6.	765, 740.
	19 R	Revenue less	s expenses. Subtract line 1	8 from line 12		10	08,44	6.	420, 264.
or Ses						Beginning of	Current Y	/ear Er	nd of Year
iano Iano	20 ⊤	otal assets	(Part X, line 16)			48	33, 24	8.	904, 022.
Net Assets or Fund Balances	21 ⊺	otal liabilitie	es (Part X, line 26)				63	3.	1, 143.
Peter	22 N	let assets or	fund balances. Subtract li	ne 21 from line 20		48	32, 61	5.	902, 879.
Pa	art II	Signatur	e Block				, -		
				urn, including accompanying schedules an all information of which preparer has any	d statements, and to th	ne best of my kno	wledge an	nd belief, it is tru	ue, correct, and
com	plete. Dec	laration of prepa	arer (other than officer) is based on	all information of which preparer has any	knowledge.	5	5		
		Δ							
Sig	ŋn	Signatu	ire of officer			Date			
Sign HereΔ Al ej andro QueralDate Executive Di r.									
		Type or	print name and title						
		Print/Type p	preparer's name	Preparer's signature	Date	Chec	k	if PTIN	
Ра	id	Ri char	rd Winkel	Ri chard Wi nkel		self-e	employed	P0084	16914
	eparer	Firm's name	G RI CHARD WI NKI		•				
	e Only		0			Firm	s EIN G	4122485	54
	-			R 97006		Phor		603-332-	
Ma	y the IR	S discuss th		shown above? (see instruction	s)				'es No
_	,		Reduction Act Notice, see t			A0101L 01/21/20			orm 990 (2019)

	n 990 (2019) Oregon Center for Public Policy	93-118607	5 <u>P</u> a	ge 2
Par	rt III Statement of Program Service Accomplishments			
	Check if Schedule O contains a response or note to any line in this Part III			
1	Briefly describe the organization's mission:			
	Use research and analysis to advance policies and practices that			
	and social opportunities of all Oregonians.			
2	Did the organization undertake any significant program services during the year which were not listed on the	prior		
	Form 990 or 990-EZ?		Yes X I	No
	If "Yes," describe these new services on Schedule O.			
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	services?	Yes X I	No
	If "Yes," describe these changes on Schedule O.			
4	Describe the organization's program service accomplishments for each of its three largest program s Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and alloca and revenue, if any, for each program service reported.	ervices, as measured tions to others, the to	d by expense otal expense	€S. S,
1 a	a (Code:) (Expenses \$ 611, 084. including grants of \$) (Revenue \$)
4 0			to ficco	/
	Through research and analysis, produce printed educational mate			<u>-</u>
	and economic topics and communicate the information to service			
	interested groups.		·	
			·	
4 k	b (Code:) (Expenses \$ including grants of \$)) (Revenue 3)
4 c	c (Code:) (Expenses \$ including grants of \$) (Revenue \$)
1.0	d Other program services (Describe on Schedule O.)			
40	(Expenses \$ including grants of \$) (Revenue	\$)	
10	e Total program service expenses G 611, 084.	Ŧ)	
RAA			Form 990 (2	2019)

			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	Х					
2	5 1 1 , , , , , , , , , , , , , , , , ,	2	Х					
3	for public office? If 'Yes,' complete Schedule'C, Part I.							
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	Х					
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		Х				
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		Х				
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		Х				
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х				
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		Х				
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V.	10		Х				
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.							
i	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х					
I	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.	11 b		Х				
(c 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	11 c		Х				
(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	11 d		Х				
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х				
	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	11 f		Х				
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Х					
I	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	12 b		Х				
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х				
14 ;	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х				
I	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		Х				
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		Х				
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or fore for eign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х				
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? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х				
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х				
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		Х				
20a	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х				
k	o If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b						
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 12 If 'Ves' complete Schedule L, Parts L and II.	21		Х				

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		Oregon				Policy
Part IV	Chec	klist of R	equired S	Scheo	lules	

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Form 990 (2019)OregonCenterforPublicPolicyPart IVChecklist of Required Schedules (continued)

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	Yes	No X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	22		
	and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		Х
24 a	a 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	240		х
I	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		~
(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		
(d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a 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		Х
I	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		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
	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):			
	a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV	28a		Х
	o A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV.	28b	 	Х
(c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
	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		Х
	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
I	o If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa	rt 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			
		· · · · · ·	Yes	No
	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 1			
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Х	
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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			1
			Yes	No
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, filed for the calendar year ending with or within the year covered by this return 2 a 9			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
	o If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule O	3 b		
4 a	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)?	4 a		х
	b If 'Yes,' enter the name of the foreign countryG	4 d		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5 a	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
С	: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a	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?	6 a		х
	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	4 h		
7	Organizations that may receive deductible contributions under section 170(c).	6 b		
а	a 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?	7 a		X
h	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 a 7 b		~
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			Х
	Form 8282?	7 c		^
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
	Did the organization receive any runds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899	/1		~
	as required?	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
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		
9	Sponsoring organizations maintaining donor advised funds.			
а	a Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	a 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 10b			
11	Section 501(c)(12) organizations. Enter:			
а	a Gross income from members or shareholders 11a			
b	O Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.). 11b			
12 a	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
b	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	a Is the organization licensed to issue qualified health plans in more than one state?	13 a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	DEnter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14 a	a Did the organization receive any payments for indoor tanning services during the tax year?	14 a		Х
b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	14 b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or		1	1
-	excess parachute payment(s) during the year?	15		Х
14	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
10	If 'Yes,' complete Form 4720, Schedule O.	10		

 Part VI
 Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI.
 X

 Section A. Governing Body and Management
 X

 1 a Enter the number of voting members of the governing body at the end of the tax year.
 1 a

 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 on Schedule O.
 1 a

	authority to an executive committee or similar committee, explain on Schedule O.										
I	Enter the number of voting members included on line 1a, above, who are independent 1b 8										
2											
	officer, director, trustee, or key employee?										
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?										
4	Did the organization make any significant changes to its governing documents										
	since the prior Form 990 was filed?	4		Х							
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х							
6	Did the organization have members or stockholders?	6		Х							
7 8	a 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?	7 a		х							
I	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		х							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by										
0	the following:										
ä	a The governing body?	8 a	Х								
I	b Each committee with authority to act on behalf of the governing body?	8 b	Х								
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 on Schedule O	9		X							
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Re	evenu		r -							
		10 a	Yes	No X							
1	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?										
11;	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a	Х								
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O										
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	Х								
	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	Х								
(c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c		х							
13		13		X							
14	Did the organization have a written document retention and destruction policy?	14		Х							
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?										
	a The organization's CEO, Executive Director, or top management official	15 a		Х							
	b Other officers or key employees of the organizationSee. Schedul e0.	15 b	Х								
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).										
16 a	16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?										
ł	taxable entity during the year? 1 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?										
Sec	Section C. Disclosure										
17											
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 5 available for public inspection. Indicate how you made these available. Check all that apply.	01(c)(3)s or	nly)							
	V Own website Another's website V Unon request										

 X
 Own website
 Another's website
 X
 Upon request
 Other (explain on Schedule O)

19		(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.	See Schedule 0
~~		

20 State the name, address, and telephone number of the person who possesses the organization's books and records G

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest (Independent Contractors	Compensated Employee	es, and
Check if Schedule O contains a response or note to any line in this Part VII		
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensate	ed Employees	
1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending w organization's tax year.		

? List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -O- 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, and 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.

See instructions for the order in which to list the persons above.

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

				(C))					
(A) Name and title	(B) Average hours per	thar is	n one l s both dire	box, an o	unles officer /truste		on	(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Al ej andro Queral Executi ve Di r.	$-\frac{40}{0}$			Х				95, 630.	0.	0.
Xaren_Jacobson	1	1		~				75, 050.	0.	0
Treasurer	0	Х		Х				0.	0.	0.
<u>_(3) John Mullin</u> President	<u>1</u> 0	х		Х				0.	0.	0.
(4) Joe Rodriguez Secretary	<u>1</u> 0	х		Х				О.	0.	0.
(5) Mary King Vi ce Presi dent	<u>1</u> 0	X		X				0.	0.	0.
(6) Jenny Lee Di rector	<u>1</u> 0	X						0.	0.	0.
(7) Phi I Barnhart Di rector	<u>1</u> 0	X						0.	0.	0.
	<u>1</u> 0	X						<u> </u>	0.	0.
(9) Mel anni Rosal es Di rector	<u>1</u> 0	X						0.	0.	0.
(10)										
(12)										
(13)	 									
ВАА	TEEA0	107L	07/31	/19						Form 990 (2019)

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Part VII Section A. Officers, Directors, Tru	istees, l	Key	Em	nplo	эуе	es,	and	d Highest Corr	pensated Emp	loyees (continued)
	(B)			(0						
(A) Name and title	Average hours per	box	unle	heck ss pe	erson	e than is botl or/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	week (list any hours	or di	Instit	Officer	Key	High	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization
	for related organiza	Individual trustee or director	nstitutional trustee	ĕ	Key employee	Highest compensated employee	ner			and related organizations
	- tions below dotted	truste	al trus		yee	mpen				
	line)	8	tee			sated				
(15)										
(16)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1 b Subtotal							G	95, 630.	0.	0.
c Total from continuation sheets to Part VII, Section	on A						G	0.	0.	0.
d Total (add lines 1b and 1c)							G	95, 630.	0.	0.
2 Total number of individuals (including but not limited from the organization G 0	to those I	isted	abov	ve) \	wno	recer	ved	more than \$100,00	0 of reportable comp	
3 Did the organization list any former officer, direct	or truste	o ka		mnl		or	hiat	nest compensated	employee	Yes No
on line 1a? If 'Yes,' complete Schedule J for such	n individu	al	, y Ci						····	. <u>3</u> X
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	r than \$1	50,00)0?	lf 'Y	'es,'	com	nple	te Schedule J for		. 4 X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes	e compen	isatio	n fr	om	anv	unre	late	ed organization or	individual	
Section B. Independent Contractors										
 Complete this table for your five highest compensation from the organization. Report compensation 	sated inde sation for	epen the ca	alen	t coi dar j	ntrao year	endi	tha ng v	it received more the vith or within the or	nan \$100,000 of ganization's tax year	
(A) Name and business addr	ess							(B) Description of	of services	(C) Compensation
2 Total number of independent contractors (including b	ut not limi	itad tr	the	NSO 1	listor	1 aho		who received more	than	
\$100,000 of compensation from the organization		แอน แ	JUIC	136 I	ເປັ	i auu	vej		undii	

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Part VIII Statement of Revenue

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. u.	Check if Schedule O contains a response or note to any	line in this Part V	111		
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1 a Federated campaigns 1 a				
Grai	b Membership dues 1b				
ts, (Am	c Fundraising events 1c				
Gif İlar	d Related organizations 1d				
ns, Sim	e Government grants (contributions) 1 e f All other contributions, gifts, grants, and				
utio	similar amounts not included above 1f 1, 175, 712.				
oth	g Noncash contributions included in				
pu	Ines 1a-1f 1g h Total. Add lines 1a-1f G	1, 175, 712.			
	Business Code	1, 175, 712.			
/enu	2a				
Rey	b				
rice	c				
Sen	d				
am	e				
ogr	f All other program service revenue				
ď	g Total. Add lines 2a-2f G				
Scellaneous Contributions iscellaneous 1 a Fed b Me C b C Fund c Fund C d Rel C e C C g Non C d Rel C g Non C d C C d C C d C C d C C d Tot C d Net Tot d Net Tot <	3 Investment income (including dividends, interest, and other similar amounts)	3, 950.			3, 950.
		3, 750.			5, 750.
	(i) Real (ii) Personal				
3 4 5 6 7	6 a Gross rents 6 a				
	b Less: rental expenses 6b				
	c Rental income or (loss) 6c				
	d Net rental income or (loss) G				
	7 a Gross amount from (i) Securities (ii) Other				
	other than inventory / a				
	b Less: cost or other basis and sales expenses 7b				
	c Gain or (loss) 7c				
	d Net gain or (loss) G				
e	8 a Gross income from fundraising events				
nua	(not including \$				
eve	of contributions reported on line 1c).				
чF	See Part IV, line 18				
the	b Less: direct expenses 8 b c Net income or (loss) from fundraising events G				
Q					
	9 a Gross income from gaming activities. See Part IV, line 19				
	b Less: direct expenses 9b				
	c Net income or (loss) from gaming activities				
	10 a Gross sales of inventory, less				
	returns and allowances 10a				
	b Less: cost of goods sold 10b				
	c Net income or (loss) from sales of inventory G Business Code				
sno	11 o N'	6, 342.			6, 342.
nue	b	0, 342.			0, 342.
ella vei	c				
isc. Re	d All other revenue				
Σ	e Total. Add lines 11a-11d G	6, 342.			
	12 Total revenue. See instructions	1, 186, 004.	0.	0.	10, 292.

bit Dr. bit Superior Expenses 1 Grants and other assistance to domestic individuals. See Part IV, line 22. Image: Comparison of the comp	(C) Management and general expenses	(D) Fundraising expenses
organizations and domestic governments. See Part IV, line 21 a Grants and other assistance to domestic individuals. See Part IV, line 25 a Grants and other assistance to foreign organizations, foreign governments, and for- eign individuals. See Part IV, line 35 and 16 b Eenefits paid to or for members. c Compensation of current officers, directors, trustees, and key employees. g Compensation not included above to disgualified persons (as defined under section 4958(1(1)) and persons described in sector 4958(1(1)) and persons described in sector 4958(1(1)) and persons described in sector 401(k) and 403(b) g Pension plan accruals and contributions (include sector 401(k) and 403(b) g Payroll taxes. g Other employee benefits. g Adaption the many services (nonemployees): a Management. b Legal. c Accounting. d Lobbying e Professional fundatising services. See Part IV, line 17. p Other difficient management fees. g Other, filme 11g anount exceeds 10% of filme 25, oolmm (A) amount list line 11g genesses on Schedule 0). 13 Office expenses. g Noyallies. g Outer expenses. g Noyallies. g Outer depress for any federal, state, or local public officials. g Depreciation, depletion, and amoritzation g Payments to affiliates.		
individuals. See Part IV, line 22		
organizations, foreign governments, and for- eign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members		
5 Compensation of current officers, directors, trustees, and key employees 95, 630. 74, 829. 6 Compensation not included above to disqualified persons (as defined under section 4958(1(11) and persons described in section 4958(1(11) and persons described 0. 0. <td></td> <td></td>		
6 Compensation not included above to disqualified persons (as defined under section 4958(0/10) and persons described in section 401(k) and 403(b) employer contributions) 0.	7, 325.	13, 476.
7 Other salaries and wages 346, 092. 270, 808. 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions). 112, 729. 88, 208. 9 Other employee benefits 36, 554. 28, 602. 10 Payroll taxes 36, 554. 28, 602. 11 Fees for services (nonemployees): a Management 36, 554. 28, 602. 12 Accounting 4 4 2 14 Lobbying. 9 9 9 15 Royalties 9 9 9 14 Information technology. 10 9 10 13 Office expenses 28, 097. 16, 688. 10 14 Information technology. 10 10 10 15 Royalties. 10 10 10 10 16 Occupancy. 44, 402. 34, 744. 11 11, 707. 1, 336. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials. 11 11 11 11 11 11 11 11 <td>0.</td> <td>0.</td>	0.	0.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions). 112, 729. 88, 208. 9 Other employee benefits. 36, 554. 28, 602. 10 Payroll taxes. 36, 554. 28, 602. 11 Fees for services (nonemployees): a Management. 36, 554. 28, 602. 14 Ees for services (nonemployees): a Management. 1 1 15 Caccounting. 1 1 16 Potessional fundraising services. See Part IV, line 17. 1 1 17 Investment management fees. 9 9 16. 12 Advertising and promotion. 73, 636. 70, 357. 13 Office expenses. 28, 097. 16, 688. 14 Information technology. 1 1 15 Royalties. 22, 117. 21, 594. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials. 1 1, 707. 1, 336. 10 Interest. 1 1, 707. 1, 336. 1 1 10 Payments to affiliates. 1 1, 707.	26, 512.	48, 772.
10 Payroll taxes 36, 554. 28, 602. 11 Fees for services (nonemployees): a Management.	8, 635.	15, 886.
11 Fees for services (nonemployees): a Management b Legal b Legal c Accounting d Lobbying		
11 Fees for services (nonemployees): a Management	2, 800.	5, 152.
b Legal		
c Accounting		
c Accounting		
d Lobbying		
e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.) 12 Advertising and promotion 13 Office expenses 14 Information technology. 15 Royalties. 16 Occupancy. 17 Travel. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials. 19 Conferences, conventions, and meetings 21 Payments to affiliates. 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on Schedule 0.) a Events 4, 776. a Events 4, 776. b 4, 776.		
f Investment management fees		
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.)		
(A) amount, list line 11g expenses on Schedule 0.) 73, 636. 70, 357. 12 Advertising and promotion 1 13 Office expenses 28, 097. 16, 688. 14 Information technology. 1 16, 688. 15 Royalties 1 16 16 Occupancy. 44, 402. 34, 744. 17 Travel. 22, 117. 21, 594. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials. 1 1 19 Conferences, conventions, and meetings. 1 1 1 1 21 Payments to affiliates 1 1 1 336. 21 Payments to affiliates 1 1 1 336. 22 Depreciation, depletion, and amortization 1, 707. 1, 336. 1 23 Insurance 1 2 4, 776. 3, 918. 1 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on Schedule O.). 4, 776. 3, 918. 1 25 Column (A) amount, list line 24e expenses on Schedule		
14 Information technology. Image: Constraint of the system of the s	1, 457.	1, 822.
14 Information technology. Image: Constraint of the system of the s	398.	11, 011.
15 Royalties. 44, 402. 34, 744. 16 Occupancy. 44, 402. 34, 744. 17 Travel. 22, 117. 21, 594. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials. 22, 117. 21, 594. 19 Conferences, conventions, and meetings 20 1nterest. 21 20 Interest. 21 29 20 20 21 Payments to affiliates. 21 21, 336. 21 22 Depreciation, depletion, and amortization 1, 707. 1, 336. 21 23 Insurance 21 24. 11 miscellaneous expenses on covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 4, 776. 3, 918. 4 C 4, 776. 3, 918. 4, 776. 3, 918.		
16 Occupancy 44, 402. 34, 744. 17 Travel. 22, 117. 21, 594. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials. 21, 594. 21, 594. 19 Conferences, conventions, and meetings. 22 21, 594. 21, 594. 19 Conferences, conventions, and meetings. 21 21, 594. 21, 594. 20 Interest 22 21, 594. 21, 594. 21, 594. 20 Interest 22 21, 594. 21, 594. 21, 594. 21 Payments to affiliates. 21 21, 594. 21, 594. 21, 594. 21 Payments to affiliates. 21 21, 707. 1, 336. 21 22 Depreciation, depletion, and amortization 1, 707. 1, 336. 21 23 Insurance 21 24. 116.24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 24. 4, 776. 3, 918. 22 C 24. 4, 776. 3, 918. 24. 33 C 25. 26. 26.		
17 Travel. 22, 117. 21, 594. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 20, 117. 21, 594. 19 Conferences, conventions, and meetings 20 10 11 20 Interest 20 11, 707. 1, 336. 21 Payments to affiliates 21 21, 594. 11 20 Interest 21 21, 594. 11 21 Payments to affiliates 21 21 21 21 22 Interest 21	3, 401.	6, 257.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a Events b	5,401.	523.
expenses for any federal, state, or local public officials. 19 Conferences, conventions, and meetings. 20 Interest 21 Payments to affiliates. 22 Depreciation, depletion, and amortization 1, 707. 23 Insurance 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a Events 4, 776. 3, 918. b c		523.
20 Interest		
21 Payments to affiliates 1, 707. 1, 336. 22 Depreciation, depletion, and amortization 1, 707. 1, 336. 23 Insurance 20 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 4, 776. 3, 918. a Events 4, 776. 3, 918. b 2 2 2		
22 Depreciation, depletion, and amortization 1, 707. 1, 336. 23 Insurance 1 1, 707. 1, 336. 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 4, 776. 3, 918. a Events 4, 776. 3, 918. b		
23 Insurance		
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.). 4, 776. 3, 918. a Events 4, 776. 3, 918. c c 5 5 5 c 5 5 5 c 5 5 5	131.	240.
covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.). 4, 776. 3, 918. a Events 4 4 4 5 c		
b		
b		858.
c		0.00.
· · · · · · · · · · · · · · · · · · ·		
d		
d		
e All other expenses.		100.007
25 Total functional expenses. Add lines 1 through 24e 765, 740. 611, 084.	50, 659.	103, 997.
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 G if following SOP 98-2 (ASC 958-720)		

Form 990 (2019) Oregon Center for Public Policy

93-	11	8	60	7	5

Part X Balance Sheet

		Check if Schedule O contains a response or note to	o any line ir	h this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash ' non-interest-bearing			82, 755.	1	56, 701.
	2	Savings and temporary cash investments			396, 937.	2	840, 987.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net		4			
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these per	er officer, c l contributor rsons	lirector, r, or 35%		5	
	6	Loans and other receivables from other disqualified post section 4958(f)(1)), and persons described in section	ersons (as	defined under		6	
	7	Notes and loans receivable, net				7	
2	8	Inventories for sale or use				8	
Assets	9	Prepaid expenses and deferred charges				9	
As		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		42, 535.		_	
	b	b Less: accumulated depreciation.		36, 201.	3, 556.	10 c	6, 334.
	11	Investments ' publicly traded securities	· · · ·		0,000.	11	0,004.
	12	Investments ' other securities. See Part IV, line 11				12	
	13	Investments ' program-related. See Part IV, line 11.				13	
	14	Intangible assets.				14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equal line	33)		483, 248.	16	904, 022.
		Accounts payable and accrued expenses			633.	17	1, 143.
	18	Grants payable		18			
	19	Deferred revenue		19			
ø	20	Tax-exempt bond liabilities				20	
tie	21	Escrow or custodial account liability. Complete Part I				21	
iliqei	22	Loans and other payables to any current or former off key employee, creator or founder, substantial contribu- controlled entity or family member of any of these per		22			
Liabilities	23	Secured mortgages and notes payable to unrelated th	nird parties.			23	
	24	Unsecured notes and loans payable to unrelated third	•			24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	es to related plete Part >	d third parties, X of Schedule D.		25	
_	26	Total liabilities. Add lines 17 through 25			633.	26	1, 143.
lces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	eG X				
alar	27	Net assets without donor restrictions			342, 282.	27	531, 332.
ñ	28	Net assets with donor restrictions		· · · · · · <u>· · ·</u> · · · · · · · · · ·	140, 333.	28	371, 547.
Fund Balance		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	e ck here G				
5	29	Capital stock or trust principal, or current funds				29	
ats	30	Paid-in or capital surplus, or land, building, or equipm				30	
ŏ	31	Retained earnings, endowment, accumulated income,	, or other fu	inds		31	
						1 1	
Net Assets	32	Total net assets or fund balances Total liabilities and net assets/fund balances			482, 615.	32	902, 879.

BAA

Form 990 (2019)

Forn	n 990 (2019) Oregon Center for Public Policy 93-1	186075		Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI.				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1, 1	86, C	04.
2	Total expenses (must equal Part IX, column (A), line 25)	2	7	65,7	40.
3	Revenue less expenses. Subtract line 2 from line 1	3	4	20, 2	264.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).	4	4	82,6	o15.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	9	02,8	379.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain				
	in Schedule O.				
2 8	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
I	b Were the organization's financial statements audited by an independent accountant?		2 b	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separat	te			
	basis, consolidated basis, or both:				
	X 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?		2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
3 8	a 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?		3 a		Х
I	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit		<u> </u>		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3 b		<u> </u>
BAA	LEEAUT2L 01/21/20		Form	990 ((2019)

SCHEDULE A	
(Form 990 or 990-EZ)	Com

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. G Attach to Form 990 or Form 990-EZ. OMB No. 1545-0047

			G Atta	ch to Form 990 or Forr	n 990-EZ	<u>Z</u> .		Open to Public		
Departr Internal	ment of the Treasury I Revenue Service	G (Go to www.irs.gov/Fo	orm990 for instructions	and the	latest i	nformation.	Inspection		
Name o	of the organization						Employer identific	ation number		
	gon Center						93-118607			
Part				rganizations must o				tions.		
	Ĕ-	•		For lines 1 through 12,		2				
1				hurches described in sec Schedule E (Form 990 or			(1).			
2 3				,			\) <i>(</i> iii)			
4										
5		ion operated for		ege or university owned				escribed in		
6	A federal, sta	ate, or local gov	ernment or governme	ental unit described in s	ection 1	70(b)(1))(A)(v).			
7	X An organization in section 17	on that normally r 0(b)(1)(A)(vi) .(eceives a substantial p Complete Part II.)	part of its support from a	governm	ental un	it or from the general pu	blic described		
8	A community	trust described	in section 170(b)(1)(A)(vi). (Complete Part	II.)					
9		r a non-land-grai	nt college of agriculture	:tion 170(b)(1)(A)(ix) oper e (see instructions). Enter	r the nan	ne, city,				
10	from activities investment in	on that normally r s related to its e acome and unre	receives: (1) more than exempt functions' sul	33-1/3% of its support fr bject to certain exception e income (less section	om conti ons, and	ributions (2) no	more than 33-1/3% of	its support from gross		
11	An organizati	on organized a	nd operated exclusive	ely to test for public safe	ety. See	sectior	ו 509(a)(4).			
12	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.									
а	organization(s	oorting organizati) the power to re rt IV, Sections <i>I</i>	gularly appoint or elect	d, or controlled by its sup t a majority of the directo	ported or trus	rganizat stees of t	ion(s), typically by giving the supporting organizat	g the supported ion. You must		
b	management		organization vested in	controlled in connection the same persons that c						
С	·			tion operated in connectio plete Part IV, Sections	n with, ai A, D, an	nd functi d E.	onally integrated with, its	supported		
d	functionally in	ntearated. The a	proanization generally	anization operated in cor must satisfy a distribu as A and D, and Part V.	nnection tion req	with its s uiremen	supported organization(s t and an attentiveness) that is not requirement (see		
е	Check this bo	x if the organiz	ation received a writt	en determination from	the IRS	that it is	s а Туре I, Туре II, Тур	e III functionally		
f				supporting organizatior						
q			n about the supported							
((i) Name of supported c	organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat in your g	s the ion listed overning nent?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
					Yes	No				
(A)										
(B)										
(C)										
(D)										
(E)										
								1		

Total

Schedule A (Form 990 or 990-EZ) 2019 Oregon Cent

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 in) G **(b)** 2016 (d) 2018 (a) 2015 (c) 2017 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.)..... 1 <u>601, 8</u>74 645,966 637,608 804, 321. Tax revenues levied for the 2 organization's benefit and either paid to or expended on its behalf. The value of services or 3 facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3.... 601,874 645,966 804, 321. 4 637,608 The portion of total 5 contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). Public support. Subtract line 5 from line 4 6 Sec Cale beg 7 8 9 10

Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) G	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	601, 874.	637, 608.	645, 966.	804, 321.	1, 175, 712.	3, 865, 481.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	189.		1, 271.	1, 497.	3, 950.	6, 907.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
11	Total support. Add lines 7 through 10						3, 872, 388.
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	0.
13	First five years. If the Form 990 is organization, check this box and	for the organization	n's first, second, th			on 501(c)(3)	G 🗌
Sec	tion C. Computation of Pu	blic Support P	ercentage				
	Public support percentage for 20						
15	Public support percentage from	2018 Schedule A,	Part II, line 14				56. 77 %
16a	33-1/3% support test' 2019. If t and stop here. The organization	he organization di qualifies as a put	d not check the b plicly supported or	ox on line 13, and rganization	d line 14 is 33-1/3	3% or more, chec	k this box
b	33-1/3% support test' 2018. If the and stop here. The organization	ne organization did i qualifies as a pu	d not check a box blicly supported o	on line 13 or 16a rganization	, and line 15 is 3	3-1/3% or more, o	check this box
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstances	s' test, check this	box and stop her	re. Explain in Par	t VI how
b	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-an	meets the 'facts-a	and-circumstances	s' test check this	box and stop her	re Explain in Par	t VI how the

Schedule A (Form 990 or 990-EZ) 2019

G

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

Dan		2
Pay	e.	2

О.

 \cap

481

(f) Total

3,865,481.

3,865,

2,011,706.

1,853,775.

93-1186075

(e) 2019

1, 175, 712

1, 175,

712.

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Part III

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 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.)

Sec	tion A. Public Support						
Calend 1	dar year (or fiscal year beginning in) G Gifts, grants, contributions, and membership fees	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	received. (Do not include any 'unusual grants.')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.).						
Sec	tion B. Total Support						
Calen	dar year (or fiscal year beginning in) G	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6					.,	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
с 11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include 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 organization, check this box and	stop here		nd, third, fourth, c	or fifth tax year as	a section 501(c)(3	³⁾ G
Sec	tion C. Computation of Pu		ų			· · ·	
15	Public support percentage for 20						%
16	Public support percentage from				<u></u>	16	%
Sec	tion D. Computation of Inv	estment Incor	ne Percentage	9			
17	Investment income percentage f	or 2019 (line 10c,	column (f), divide	ed by line 13, col	umn (f))	17	%
18	Investment income percentage f	rom 2018 Schedu	le A, Part III, line	17			%
19a	33-1/3% support tests' 2019. If is not more than 33-1/3%, check	the organization d this box and sto	lid not check the l p here . The orgar	box on line 14, an	nd line 15 is more as a publicly supp	than 33-1/3%, and orted organization	d line 17 G
b	33-1/3% support tests' 2018. If the line 18 is not more than 33-1/3%	the organization d	id not check a bo and stop here . Th	ox on line 14 or line organization qu	ne 19a, and line 1 alifies as a public	6 is more than 33- ly supported organ	1/3%, and nization G
20	Private foundation. If the organi	zation did not che	ck a box on line	14, 19a, or 19b, o	check this box and	see instructions.	G

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. 1 Did the organization have any supported organization that does not have an IRS determination of status under section 2 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). 2 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below. 3a b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in **Part VI** 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 *Part VI* what controls the organization put in place to ensure such use. 3c 4a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a b 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)? 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. 4c 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 5a amendment to the organizing document). b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b c Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one 6 or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI. 6 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ). 7 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 I of Schedule L (Form 990 or 990-EZ). 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 Part VI. 9a b Did one or more disgualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI. 9b c Did a disqualified person (as defined in line 9a) 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 **Part VI**. 9c 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type II non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below. 10a
 - **b** 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

93-1186075

Schedule A (Form 990 or 990-EZ) 2019 Oregon Center for Public Policy Dart IV Supporting Organizations (continued)

	Yes	No
11a		
11b		
11c		
	11b	11a 11b

ection B. Type I Supporting Organizations

- Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint 1 or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI 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.
- 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 Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations

			163	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 Part VI how control or management of the			
	g organization was vested in the same persons that controlled or managed the supported organization(s).			

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported $\sigma(a)$ or (ii) serving on the governing body of a supported organization? If 'No' explain in Part VI how			
	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 <i>Part VI</i> 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 Part VI the role the organization's supported organizations played			
	in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
 - The organization satisfied the Activities Test. Complete *line 2* below. а
 - The organization is the parent of each of its supported organizations. Complete *line 3* below. b
 - The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions). С

2 Activities Test. Answer (a) and (b) below.

- 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 Part VI identify those supported organizations and explain 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.
- 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 Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- Parent of Supported Organizations. Answer (a) and (b) below. 3
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.

2a

2h

3a

3b

Yes

Voc No

1

2

No



Schedule A (Form 990 or 990-EZ) 2019Oregon Center for Public PolicyPart VType III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Dogo	1
Page	6

1 Check here if the organization satisfied the Integral Part Test as a qualifying true instructions. All other Type III non-functionally integrated supporting organization	st on No ons must	v. 20, 1970 (explain ir complete Sections A	n Part VI). See . 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):			
a 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 Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C ' Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
		-	

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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Schedule A (Form 990 or 990-EZ) 2019

Part V Type III Non-Functionally Integrated 509(a)(3) Su	upporting Organiza	tions (continued)	
Section D ' Distributions			Current Year
1 Amounts paid to supported organizations to accomplish exempt pu	rposes		
2 Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity	of supported organization:	S,	
3 Administrative expenses paid to accomplish exempt purposes of su	upported organizations		
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval required)			
6 Other distributions (describe in Part VI). See instructions.			
7 Total annual distributions. Add lines 1 through 6.			
8 Distributions to attentive supported organizations to which the organizati in Part VI). See instructions.	on is responsive (provide	details	
9 Distributable amount for 2019 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-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required ' explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

BAA

Schedule A (Form 990 or 990-EZ) 2019

SCHEDULE C	
(Form 990 or 990-E	Z)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Department of the Treasury Internal Revenue Service G Complete if the organization is described below. G Attach to Form 990 or Form 990-EZ. G Go to *www.irs.gov/Form990* for instructions and the latest information. Open to Public Inspection

2019

inten					•				
? ?	Section 501(c)(3) organization Section 501(c) (other than sec	on Form 990, Part IV, line 3, or Form 990-EZ, I ns: Complete Parts I-A and B. Do not comp ction 501(c)(3)) organizations: Complete Pa	lete Part I-C.						
	? Section 527 organizations: Complete Part I-A only.								
		on Form 990, Part IV, line 4, or Form 990-EZ, I that have filed Form 5768 (election under sect			a Dart II B				
?		ns that have NOT filed Form 5768 (election	())						
(Pro	oxy Tax) (see separate instruc	s,' on Form 990, Part IV, line 5 (Proxy Tax) tions), then organizations: Complete Part III.	(see separate instru	ctions) or Form 990-EZ,	Part V, line 35c				
	e of organization			Employer identifica	ation number				
0r	egon Center for Pub	lic Policy		93-118607	5				
Pa	rt I-A Complete if the o	rganization is exempt under section	on 501(c) or is a	section 527 organiz	zation.				
	Provide a description of the	organization's direct and indirect political con of 'political campaign activities')							
2	Political campaign activity e	xpenditures (see instructions)		G\$					
3	Volunteer hours for political	campaign activities (see instructions)							
Pa	rt I-B Complete if the o	rganization is exempt under section	on 501(c)(3).						
1	Enter the amount of any exc	cise tax incurred by the organization under	section 4955	G\$	0.				
2	Enter the amount of any exc	cise tax incurred by organization managers	under section 4955	G\$	0.				
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No				
					Yes No				
	b If 'Yes,' describe in Part IV.								
Pa	-	rganization is exempt under section							
1	Enter the amount directly ex	pended by the filing organization for section	on 527 exempt functi	on activities G\$					
2	Enter the amount of the filin 527 exempt function activitie	ng organization's funds contributed to other	organizations for se	ction G\$					
3	Total exempt function exper line 17b	nditures. Add lines 1 and 2. Enter here and	on Form 1120-POL,	G\$					
4	Did the filing organization fil	le Form 1120-POL for this year?			Yes No				
5	organization made payments amount of political contribution	and employer identification number (EIN) s. For each organization listed, enter the ans received that were promptly and directly del al action committee (PAC). If additional spa	mount paid from the livered to a separate p	filing organization's fund political organization, such	ds. Also enter the as a separate				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0				
(1)									
(2)									
(3)									
(4)									
(5)									
(6)		<u> </u>							
BAA	For Paperwork Reduction Act	Notice, see the Instructions for Form 990 or	990-EZ.	Schedule C (Fo	rm 990 or 990-EZ) 2019				

Schedule C (Form 990 or 990-EZ) 2019 Oregon	Center for Public Policy	
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Schedule C (Form 990 or 990-EZ) 2019 Oregon Center for Public Policy		93-1186	075 Page 2
	on is exempt under section 501(c)(3) and	filed Form 5768 (el	ection under
	ngs to an affiliated group (and list in Part IV each affiliand share of excess lobbying expenditures).	ted group member's name	2,
	ecked box A and 'limited control' provisions apply.		
Limits on Lobb (The term 'expenditures' me	ying Expenditures ans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditures to influence p	ublic opinion (grassroots lobbying)	198.	
b Total lobbying expenditures to influence a	legislative body (direct lobbying)	11, 159.	
c Total lobbying expenditures (add lines 1a	and 1b)	11, 357.	0.
d Other exempt purpose expenditures		754, 383.	
e Total exempt purpose expenditures (add l	ines 1c and 1d)	765, 740.	0.
f Lobbying nontaxable amount. Enter the ar both columns.	nount from the following table in	139, 861.	
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.		
5	of line 1f)	34, 965.	0.
-	ss, enter -0	0.	0.
i Subtract line 1f from line 1c. If zero or les	s, enter -0	0.	0.
	r line 1h or line 1i, did the organization file Form 4720		Yes 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						
(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total		
120, 113.	117, 099.	129, 747.	139, 861.	506, 820.		
				760, 230.		
3, 505.	15, 742.	15, 289.	11, 357.	45, 893.		
30, 028.	29, 275.	32, 437.	34, 965.	126, 705.		
				190, 058.		
250.	250.	250.	198.	948.		
	(a) 2016 120, 113. 3, 505. 30, 028.	(a) 2016 (b) 2017 120, 113. 117, 099. 3, 505. 15, 742. 30, 028. 29, 275.	(a) 2016 (b) 2017 (c) 2018 120, 113. 117, 099. 129, 747. 3, 505. 15, 742. 15, 289. 30, 028. 29, 275. 32, 437.	(a) 2016 (b) 2017 (c) 2018 (d) 2019 120, 113. 117, 099. 129, 747. 139, 861. 3, 505. 15, 742. 15, 289. 11, 357. 30, 028. 29, 275. 32, 437. 34, 965.		

BAA

Schedule C (Form 990 or 990-EZ) 2019

Schedule C (Form 990 or 990-EZ) 2019 Oregon Center for Public Policy

93-1186075 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)		
For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		No	Am	ount	
1 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:					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c 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 Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?					
j Total. Add lines 1c through 1i.					
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If 'Yes,' enter the amount of any tax incurred under section 4912					
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501 section 501(c)(6).	(c)(5)	, or			
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the	prior y	ear?	3		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) answered 'Yes.'	(c)(5) Part	, or s III-A,	ection 50 line 3, is	01(c)	
1 Dues assessments and similar amounts from members		1			

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).		
a Current year	2 a	
b Carryover from last year.	2 b	
c Total.	2 c	
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	
Part IV Supplemental Information		

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Page 3

SCHEDULE D Supplemental Financial Statements			OMB No. 15	545-0047			
	(Form 990) G Complete if the organization answered 'Yes' on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.			2019			
Departme	G Attach to Form 990. G Go to <i>www.irs.gov/Form990</i> for instructions and the latest information.			Open to Public Inspection			
	the organization		-		Employer ic	lentification num	
	Oregon Ce	enter for Public P	olicy		93-118	6075	
Part I		tions Maintaining Dong	or Advised Funds or Other wered 'Yes' on Form 990, F	Similar Funds or Acc	ounts.		
	complete		(a) Donor advised fun		unds and	other accoun	nte
1 T	otal number at e	end of year				JUIEI ACCOUI	11.5
		ntributions to (during year).					
3 A	ggregate value of gra	Ints from (during year).					
4 A	ggregate value a	at end of year					
			nor advisors in writing that the as organization's exclusive legal co			Yes	No
6 D)id the organizati	ion inform all grantees, dong	rs, and donor advisors in writing	that grant funds can be us	ed only		_
to ir	npermissible pur	vate benefit?	t of the donor or donor advisor, o	r for any other purpose cor		Yes	No
Part I		tion Easements.				<u> </u>	
	Complete	if the organization ans	wered 'Yes' on Form 990, F				
1 P			y the organization (check all that	11 37			
		f land for public use (for exam	ple, recreation or education)	Preservation of a histo			irea
-		natural habitat		Preservation of a certi	fied historie	c structure	
2 C		of open space	neld a qualified conservation contrib	nution in the form of a consor	vation case	mont on the	
	ast day of the tax				valion ease		
					leld at the	End of the T	ax Year
			·····				
		=	ments fied historic structure included in				
			n (c) acquired after 7/25/06, and				
u N S	tructure listed in	the National Register.		2 d			
	lumber of conserv ax year G	ration easements modified, trai	nsferred, released, extinguished, or	terminated by the organization	on during th	e	
			ervation easement is located G				
а	5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?						
G	Ĵ		inspecting, handling of violations, a	J. J. J. J. J. J. J. J. J. J. J. J. J. J		0 5	
	mount of expense	es incurred in monitoring, insp	ecting, handling of violations, and er	nforcing conservation easeme	ents during	the year	
а	nd section 170(h	ı)(4)(B)(ii)?	n line 2(d) above satisfy the requ			Yes	No
ir	n Part XIII, descr nclude, if applica onservation ease	able, the text of the footnote	oorts conservation easements in i to the organization's financial sta	its revenue and expense st itements that describes the	atement ar organizati	nd balance s on's account	heet, and ting for
Part I	Organizat Complete	t ions Maintaining Coll e if the organization ans	ctions of Art, Historical Tr wered 'Yes' on Form 990, F	easures, or Other Sin Part IV, line 8.	nilar Ass	ets.	
h	istorical treasure	es, or other similar assets he	r FASB ASC 958, not to report in Id for public exhibition, education al statements that describes these	n, or research in furtherance	balance s e of public	heet works o service, pro	of art, vide in
h fc	istorical treasures ollowing amounts	s, or other similar assets held f s relating to these items:	r FASB ASC 958, to report in its or public exhibition, education, or re	esearch in furtherance of publ	ic service,	t works of ar provide the	t,
			line 1				
			nistorical traccuractor of other similar			owing	
2 lf a	mounts required	to be reported under FASB	nistorical treasures, or other similar ASC 958 relating to these items:	assets for financial gain, pro	vide ine toll	owing	
			. 1				
			Instructions for Form 000				000) 2010
DAA F	OI Paperwork R	equiction activotice, see the	e Instructions for Form 990.	IEEA3301L 8/22/19	Scried	ule D (Form	77U) 2019

Schedule D (Form 990) 2019 Orego					93-1186	
Part III Organizations Mainta	ining Colle	ctions of Ar	t, Historica	al Treasures, or	Other Similar Asso	ets (continued)
3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):						
a Public exhibition		d		change program		
b Scholarly research		е	Other			
 c Preservation for future gener 4 Provide a description of the organiz 		ons and explain	how they furth	ner the organization's	exempt purpose in	
Part XIII. 5 During the year, did the organiza	tion solicit or	receive donatio	ons of art, his	storical treasures, or	other similar assets	
5 During the year, did the organiza to be sold to raise funds rather the						Yes No
Part IV Escrow and Custodia line 9, or reported an					wered 'Yes' on For	m 990, Part IV,
1 a Is the organization an agent, trus on Form 990, Part X?	stee, custodia	n or other inter	mediary for c	ontributions or othe	r assets not included	Yes No
b If 'Yes,' explain the arrangement					L	
						Amount
c Beginning balance d Additions during the year						
e Distributions during the year						
f Ending balance						
2 a Did the organization include an a						Yes No
b If 'Yes,' explain the arrangement					~	
Part V Endowment Funds. C	omplete if t	the organiza	tion answe	ered 'Yes' on For	r <u>m 990, Part IV, lin</u>	<u>e 10.</u>
	(a) Current	year (b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance						
b Contributions						
c 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	C 11		(1) 4			<u> </u>
2 Provide the estimated percentage		nt year end bai %	-	, column (a)) held a	IS:	
 a Board designated or quasi-endowm b Permanent endowment G 	eni G)			
c Term endowment G	^//					
The percentages on lines 2a, 2b, a	nd 2c should e	oual 100%				
			ion that are h	ald and administrate	for the	
3 a Are there endowment funds not in t organization by:	ne possession	or the organizat	ion that are ne	eid and administered	for the	Yes No
(i) Unrelated organizations						3a(i)
(ii) Related organizations						3a(ii)
b If 'Yes' on line 3a(ii), are the rela	-		-			3b
4 Describe in Part XIII the intended		-	endowment fu	unds.		
Part VI Land, Buildings, and						
Complete if the organi						
Description of property		(a) Cost or othe (investme	er basis (I nt)	o) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land						
b Buildings						
c Leasehold improvements	-					
d Equipment e Other	-			40 505	2/ 201	/ 224
Total. Add lines 1a through 1e. (Colum		ual Form 000	Part X colum	42, 535.	<u> </u>	<u> </u>
BAA	in (u) must eq	uur i Unin 770,				0, 334. Jle D (Form 990) 2019

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Part VII		Other Securities.		N/A	
() >				, Part IV, line 11b. See Form	
		egory (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
-	rield equity interes	sts			
(3) Other (A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
(I)					
		90, Part X, column (B) line 12.)G			
Part VIII	Investments '	Program Related.	l 'Ves' on Form 990	N/A , Part IV, line 11c. See Form	990 Part X line 13
	(a) Description of		(b) Book value	(c) Method of valuation: Cost or en	
(1)				~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10) Total (Colum	on (b) must equal Form 0	90, Part X, column (B) line 13.) G			
Part IX	Other Assets.		N/A		
	Complete if the			, Part IV, line 11d. See Form	
(1)		(a) De	scription		(b) Book value
(1)					
(3)					
(4)					
(5)					
(6)					
(7) (8)					
(9)					
(10)					
Total. (Col	lumn (b) must equa	I Form 990, Part X, column (I	B) line 15.)		G
Part X	Other Liabilitie	es.			•
	Complete if the orc			e or 11f. See Form 990, Part X, line 2	
1. (1) Feder	ral income taxes	(a) Descr	iption of liability		(b) Book value
(2)					
(3)					
(4)					
(5)					
(6)					
(7) (8)					
(9)					
(10)					
(11)					
Total. (Colum	nn (b) must equal Form 9	90, Part X, column (B) line 25.)		· · · · · · · · · · · · · · · · · · ·	G
2 Lah !!!!!!					

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2019 Oregon Center for Public Policy 93	3-1186075	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1 1, 1	86,004.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments 2a		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1.	3 1, 1	86,004.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b. 4 a		
b Other (Describe in Part XIII.) 4 b		
c Add lines 4a and 4b.	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5 1, 1	86,004.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per		
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1 7	65, 740.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments	-	
c Other losses.	-	
d Other (Describe in Part XIII.)	-	
e Add lines 2a through 2d.	2 e	
3 Subtract line 2e from line 1.	3 7	65, 740.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.) 4 b		
c Add lines 4a and 4b	4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 7	65, 740.
Part XIII Supplemental Information.		

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

G Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Oregon Center for Public Policy

93-1186075

Form 990, Part VI, Line 11b - Form 990 Review Process

The 990 is provided to the Board for review prior to filing.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & 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 financial information is available upon request