Form	990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

1 0111			Undo	contion E01/a	527 or 4047(a)	(1) of the Interne	Boyonu	o Codo (oxoo	nt privato found	otional		2018
_			Under		:), 527, or 4947(a) nter social securit			-		ations	'	Open to Public
		the Treasury ue Service			vww.irs.gov/Forn	-		-	-			Inspection
			dar vear. or	tax year begir			07-01	, 2018, and e		06-	-30	,2019
_		applicable:			OOD MULTNOM	AH		,,	J			ployer identification no.
	ddress o		Doing bus	•								3934102
	lame cha	-			ox if mail is not delivered	l to street address)			Room/suite	E		phone number
	nitial retu	-	5830	NE ALAMED	A ST						(26'	7)441-6271
F	inal retu	rn/terminated	City or tov	vn, state or province	, country, and ZIP or for	eign postal code				(G Gro	ss receipts
A	mended	l return	PORTI	LAND, OR 9	7213						\$	1,943,669
A	pplicatio	on pending	F Name and	d address of principa	l officer:				H(a) Is this a grou	p return fo	r subordii	nates? Yes X No
									H(b) Are all sub	ordinates	include	ed? Yes No
т 1	ax-exem	npt status: X	501(c)(3)	501(c) () 🗲 (insert no.)	4947(a)(1) or	527		If "No,"	' attach a	list. (se	e instructions)
JV	Vebsite:	► N/A							H(c) Group ex	emption i	number	•
		organization: X	Corporation	Trust Ass	sociation Other	•	L Ye	ear of formation:	2015 M Stat	e of lega	l domici	le: OR
Pa	rt I	Summar	ſy									
	1	Briefly desci	ribe the org	anization's miss	ion or most signific	cant activities:	TO ASS	IST AND F	ROVIDE SHEI	TER	то у	/ETERANS ON
e		A TEMPOR	ARY AND	PERMANENI	BASIS							
anc												
Governance												
Š	2			-	n discontinued its o					I	1	
	3		-	-	erning body (Part \					3		8
ies	4			-	s of the governing							8
Activities &	5				n calendar year 20					5		75
Act	6			ers (estimate if						6	-	84
					Part VIII, column (7a	-	0
	b	Net unrelate	ed business	taxable income	e from Form 990-T	, line 38		•••••		7b	-	0
		O sa ta'h sa t' sa			41.)				Prior Year			Current Year
e	8		-		1h)						-	1,943,669
nue	9	-			e 2g)							0
Revenue	10 11				A), lines 3, 4, and 7 nes 5, 6d, 8c, 9c, 1							0
	12				(must equal Part V							1,943,669
	13				IX, column (A), line							1,943,009
	14				X, column (A), line							0
	15	•			e benefits (Part IX,							789,535
ses					column (A), line 11							0
Expense					lumn (D), line 25)			8,493				Ū
Ä	17				nes 11a-11d, 11f-2							713,551
	18	•	`		equal Part IX, col	,						1,503,086
	19				18 from line 12 .							440,583
or									Beginning of Curre	nt Year	1	End of Year
Net Assets or Fund Balances	20	Total assets	(Part X, lin	e16)						3,477	7	534,573
Ass	21	Total liabiliti	es (Part X,	line 26)								37,815
Pure	22	Net assets of	or fund bala	inces. Subtract	line 21 from line 2	0			2	3,477	7	496,758
Pa	rt II	Signatu	ire Block	K								
					Irn, including accompan ficer) is based on all info				knowledge and belief,	it is		
	0011000, 1						arer nao any	into mougo.				
0:			S AIOSA	, BOARD								
Sig		Signatu	re of officer							Date	1	
Her	е				XECUTIVE DI	RECTOR						
		Type or	print name and	d title	1		<u>г.</u>		_			
. .		Print/Type pre	eparer's name		Preparer's signature		Da		Check []	⊈ if F	PTIN	
Paie			N L HRYC		KATHRYN L HI	RYCIW	04	-14-2020	self-employ	yed	P0	0697790
	parer							Firm's EIN				
USe	Only								Phone no.			
		.			O OR 97206	•• .			5	503-7	57-1	
					nown above? (see			••••				
	aperv	vork Reducti	on Act Not	lice, see the se	parate instruction	ns.						Form 990 (2018)
EEA												

Forn	n 990 (2018) do good multnomah	47-3934102	Page 2
	Int 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: TO ASSIST AND PROVIDE SHELTER TO VETERANS ON A TEMPORARY AND PERMANENT BASIS	9	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	V Vas	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? If "Yes," describe these changes on Schedule O.	Yes 🛛	No
4	Describe the organization's program service accomplishments for each of its three largest program services, as measure expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to the total expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 1,452,492 including grants of \$) (Revenue MAINTAIN THE SHELTER SPACE FOR DISPLACED VETERNS. PROVIDE MEALS AND SLEEPING	\$)
	TRANSPORTATION. PURCHASE OF SUPPLIES TO MAINTAIN SHELTER AND TO LOCATE LOW		INTS
	AND PLACE THE VETERANS IN THE APARTMENTS ON A PERMANENT BASIS.		
4b	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 1,452,492		
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Pa	rt IV Checklist of Required Schedules		-	·
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A		X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	. 2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	. 3		X
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		X
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		X
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		X
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		X
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 temporarily restricted			
	endowments, permanent endowments, or 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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	. 11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	. 11b		Х
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	. 11c		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	. 11d		Х
е			X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	. 11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	. 12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	. 12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?			X
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			
10	assistance to or for foreign 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	. 10		- 23
.,	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	• – "	1	- 22
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	. 18	1	v
10		. 10	1	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40	1	v
<u> </u>	If "Yes," complete Schedule G, Part III.			X
20 a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>			X
b		. 20b	1	<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		1	37
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	. 21	<u> </u>	X

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Pa	rt IV Checklist of Required Schedules (continued)			
		0	Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
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, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			37
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	07		37
20	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
-	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	00-		v
a L	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	201		v
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		v
20	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	20		v
24	conservation contributions? If "Yes," complete Schedule M	30 31		X X
31 22	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		
32	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	52		
55	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	- 35		
	or IV, and Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			\square
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable	1		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			
-	reportable gaming (gambling) winnings to prize winners?	1c		
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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this returm 2a 75	5		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
ua	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	Va		
N	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	00		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
а	and services provided to the payor?	70		v
h		7a 7b		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	70		v
-1	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7.		v
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
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		X
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		Х
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a	-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	-		
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
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	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			l
	excess parachute payment(s) during the year	15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			

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Par	rt 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 in Schedule O. See i				
	Check if Schedule O contains a response or note to any line in this Part VI				. X
Sec	tion A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	8			
	If there are material differences in voting rights among members of the governing body, or				
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent 1b	8			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with				
	any other officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct				
	supervision of officers, directors, or trustees, or key employees to a management company or other person?		3		X
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		<u>X</u>
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint				
_	one or more members of the governing body?		7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,		_		
_	stockholders, or persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during				
	the year by the following:			37	
a	The governing body?	• • • • •	8a oh	X	
b	Each committee with authority to act on behalf of the governing body?	••••	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at				v
500	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		<u>X</u>
000	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			N.	
10a	Did the organization have local chapters, branches, or affiliates?		10a	Yes	<u>No</u> X
b	Did the organization have local chapters, branches, or affiliates?		IVa		<u> </u>
D	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form	· · · · · ?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	•••	Tiu	21	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflic	ts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"				
-	describe in Schedule O how this was done		12c	Х	
13	Did the organization have a written whistleblower policy?		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?				
а	The organization's CEO, Executive Director, or top management official		15a	Х	
b	Other officers or key employees of the organization		15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement				
	with a taxable entity during the year?		16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its				
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the				
	organization's exempt status with respect to such arrangements?		16b		
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 502)	l (c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.				
	Own website Another's website I Upon request Other (explain in Schedule O)				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,	and			
	financial statements available to the public during the tax year.				
20	State the name, address, and telephone number of the person who possesses the organization's books and records:	•			

DRAGONFLY TAX LLC (503)757-1196, 5611 SE POWELL BLVD, PORTLAND, OR 97206

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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Co Independent Contractors	ompensated Employee	s, 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 Compensated Employees		
1a Complete to organization's	his table for all persons required to be listed. Report compensation for the calendar year ending with or v tax year.	vithin the	

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, 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.

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

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

					(C)	54				
(A) Name and Title	(B) Average hours per week (list any hours for related	box, offic	unles er and	Pos eck m ss per d a di	sition ore th son is rector	han one s both an r/trustee)		(D) Reportable compensation from the	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(w-2/1099-MISC)	organization and related organizations
(1) ERIK_DEGREGORIO, TREASURER TREASURER	<u>5.00</u>			Х					0 0	0
(2) DEANNA DALTON, OFFICER PRESIDENT	5.00			Х					0 0	0
(3) BRITNI CHILDS, OFFICER SECRETARY	5.00_			Х					0 0	0
(4) CHRISTOPHER T_AIOSA, DIRECTOR EXECUTIVE DIRECTOR	40.00					x		51,53	2 0	0
(5)										
<u>(6)</u>										
(7)										
<u>(8)</u>										
<u>(9)</u>										
<u>(10)</u>										
(11)										
(12)										
(13)										
(14)										
										E

	90 (2018) DO GOOD MULTNOMAH									47-39341	L02	Р	age 8
Part	VII Section A. Officers, Directors, Trustees,	Key Emplo	yees,	and	Hig	hes	t Com	npen	sated Employees	s (continued)	1		
	(A) Name and title	(B) Average hours per week (list any	(do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from	(E) Reportable compensation from related		(F) stimated mount of other	
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	org	npensatio from the ganizatio nd related janization	n d
(15)													
(16)													
(17)													
(18)													
(19)													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													
1b c	Sub-total	 n A	•••	•••	••	• •	•••	►					
d	Total (add lines 1b and 1c)			•••	•••	•••	· · ·		51,532	0			0
2	Total number of individuals (including but not limited												
	reportable compensation from the organization >									0			
3	Did the organization list any former officer, director	r, or trustee,	key en	nplo	yee	, or l	highes	t cor	npensated			Yes	No
	employee on line 1a? If "Yes," complete Schedule										3		Х
4	For any individual listed on line 1a, is the sum of rep												
	organization and related organizations greater than individual										4		Х
5	Did any person listed on line 1a receive or accrue co												Λ
	for services rendered to the organization? If "Yes,"	•		-			-				5		Х
Secti	on B. Independent Contractors												
1	Complete this table for your five highest compensation compensation from the organization. Report compen- year.												
	(A)								(B)			(C)	
	Name and business address								Description of	services	Com	pensation	n

2	Total number of independent contractors (including but not limited to those listed above) who
	received more than \$100.000 of compensation from the organization

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Part	VIII	Statement of Revenu	le						
		Check if Schedule O contair	ns a response	or n	ote to any line in th	is Part VIII			<u> [</u>
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
N N	1a	Federated campaigns		1a					
ount	b	Membership dues		1b					
Amo G	c	Fundraising events		1c	8,842				
Sifts lar /	d	Related organizations		1d					
, sc Simi	е	Government grants (contribution	ons)	1e	300,000				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, gr	rants,						
Qth		and similar amounts not includ	led above	1f	1,634,827	_			
Sont	g	Noncash contributions include	d in lines 1a-1	f: \$					
	h	Total. Add lines 1a-1f			<u> </u>	1,943,669			
					Business Code				
Program Service Revenue	2a								
Rev	b								
vice	C								
Ser	d								
Jram	е								
Proç		All other program service rever							
	g	Total. Add lines 2a-2f			•••••				
	3	Investment income (including d							
		and other similar amounts) .							
	4	Income from investment of tax-							
	5	Royalties		••					
	0		(i) Real		(ii) Personal	-			
		Gross rents				-			
		Less: rental expenses							
		Rental income or (loss) Net rental income or (loss) .			L				
			(i) Securities		(ii) Other				
	7a	Gross amount from sales of assets other than inventory	(i) Securities			-			
	b	Less: cost or other basis and sales expenses							
		Gain or (loss)							
		Net gain or (loss)		•••					
Other Revenue	8a	Gross income from fundraising							
eve		events (not including \$	8,842	2					
Ŗ		of contributions reported on line							
the	Ι.	See Part IV, line 18				-			
0		Less: direct expenses							
		Net income or (loss) from fundi	-	•	· · · · · · · •				
	94	Gross income from gaming act See Part IV, line 19		2					
	h	Less: direct expenses				-			
		Net income or (loss) from gami			L				
		· · · -	ng activities	•••					
	10a	Gross sales of inventory, less returns and allowances		а					
	b	Less: cost of goods sold				-			
		Net income or (loss) from sales							
		Miscellaneous Revenue			Business Code				
	11a								
	b								
	с								
	d	All other revenue							
	е	Total. Add lines 11a-11d .							
	12	Total revenue. See instructions	<u> </u>			1,943,669	(0 0	(

o no	Check if Schedule O contains a response or note to a t include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
	, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1 (Grants and other assistance to domestic organizations				
á	and domestic governments. See Part IV, line 21				
2 (Grants and other assistance to domestic				
i	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
c	organizations, foreign governments, and foreign				
i	individuals. See Part IV, lines 15 and 16				
4 E	Benefits paid to or for members				
5 (Compensation of current officers, directors,				
t	trustees, and key employees	51,532	42,256	6,184	3,092
6 (Compensation not included above, to disqualified		-		
ŗ	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
	Other salaries and wages	676,190	676,190		
	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
	Other employee benefits				
		61,813	60,978	557	27
	Fees for services (non-employees):				
	Management				
		26,449	26,449		
	Lobbying	20,115	20,115		
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column				
•	(A) amount, list line 11g expenses on Schedule O.)	28,425	28,425		
	Advertising and promotion	9,554	20,125	9,554	
		1,087		1,087	
	Information technology	1,007		1,007	
	Royalties				
	Occupancy	9,500		9,500	
		9,500		9,500	
	Travel				
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
	Payments to affiliates	000	0.017	0.0	
	Depreciation, depletion, and amortization	923	827	96	
		7,354		7,354	
	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
	6601 BUSINESS LICENSE	943		943	
-	6603 TAXES	468		468	
-	5002 FUNDRAISING EXPENSE	5,123			5,12
d					
	All other expenses	623,725	617,367	6,358	
	Total functional expenses. Add lines 1 through 24e .	1,503,086	1,452,492	42,101	8,49
	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 F _ if				

Part	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	21,028	1	102,075
	2	Savings and temporary cash investments		2	124,707
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	78,816
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
		organizations (see instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ase	9	Prepaid expenses and deferred charges		9	5,000
	10a	Land, buildings, and equipment: cost or			*
		other basis. Complete Part VI of Schedule D 10a 226,126			
	b	Less: accumulated depreciation	2,449	10c	223,958
	11	Investments - publicly traded securities	•	11	•
	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	17
	16	Total assets. Add lines 1 through 15 (must equal line 34)	23,477	16	534,573
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ŝ	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and			
.iab		disqualified persons. Complete Part II of Schedule L		22	
-	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	37,815
	26	Total liabilities. Add lines 17 through 25 .	0	26	37,815
		Organizations that follow SFAS 117 (ASC 958), check here 🕞 🔀 and			
es		complete lines 27 through 29, and lines 33 and 34.			
anc	27		23,477	27	418,304
Bal	28	Temporarily restricted net assets		28	78,454
pu	29	Permanently restricted net assets		29	
Fu		Organizations that do not follow SFAS 117 (ASC 958), check here			
s or		complete lines 30 through 34.			
set	30	Capital stock or trust principal, or current funds		30	
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	23,477	33	496,758
	34	Total liabilities and net assets/fund balances	23,477	34	534,573
FFA					Form 990 (2018)

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Form 990 (2018)

DO GOOD MULTNOMAH

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Form	DO GOOD MULTNOMAH 47	-393410	2	Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				.Χ
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,9	943,	669
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,5	503,	086
3	Revenue less expenses. Subtract line 2 from line 1	3	4	440,	583
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		23,	477
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 in Schedule O)	9		32,	698
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	4	196,	758
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>. </u>
				Yes	No
1	Accounting method used to prepare the Form 990: 🛛 Cash 🗌 Accrual 🗌 Other	_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis 🖾 Consolidated basis 🗌 Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
EEA			Form	990 (2018)

SCHEDUL	E A

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.

OMB No. 1545-0047 2018

Open to Public

(Form 990	or	990-EZ)
Department of	f the	Treasury

► Attach to Form 990 or Form 990-EZ.

Intern	al Rev	enue Service	Go to www.irs.go	ov/Form990 for instruct	ions and	the latest	information.	inspe	ection
Name	e of the	e organization					Employer identific	cation number	
DO	GOO	D MULTNOMAH					47-39341	02	
Pa	rt I	Reason for Public Charit	y Status (All or	ganizations must co	omplete	this part	.) See instructior	IS.	
The	orgai	nization is not a private foundation bec	ause it is: (For lines	s 1 through 12, check onl	y one box.	.)			
1		A church, convention of churches, or	r association of chu	irches described in sect	ion 170(b))(1)(A)(i).			
2		A school described in section 170(b							
3	Π	A hospital or a cooperative hospital s							
4		A medical research organization ope	•				(1)(A)(iii) Enter the		
-		hospital's name, city, and state:		n with a hospital describ					
5		An organization operated for the bene	efit of a college or u	iniversity owned or opera	ated by a g	governmen	tal unit described in		
		section 170(b)(1)(A)(iv). (Complete	Part II.)						
6		A federal, state, or local government	or governmental u	nit described in section	170(b)(1)	(A)(v).			
7	Х	An organization that normally receive	s a substantial part	of its support from a dov	/ernmental	unit or fro	m the general public		
		described in section 170(b)(1)(A)(vi	•						
8		A community trust described in sect							
9		•			rotod in or	niunation	with a land grant call	0.00	
3		An agricultural research organization				•	•	eye	
		or university or a non-land-grant colle university:	ge of agriculture (s	see instructions). Enter th	e name, ci	ly, and sta	te of the college of		
10		An organization that normally receive	s: (1) more than 33	1/3% of its support from	n contributi	ons, memb	pership fees, and gros	S	
		receipts from activities related to its e							
		support from gross investment incom	•			,			
		acquired by the organization after Ju				,			
11		An organization organized and opera				,			
		• • •						~~	
12		An organization organized and opera		· ·			, , ,		
		of one or more publicly supported or	-				, ,		
		Check the box in lines 12a through 12				•		•	
	а	Type I. A supporting organizatio	n operated, superv	ised, or controlled by its	supported	l organizat	tion(s), typically by giv	ving	
		the supported organization(s) the	power to regularly	appoint or elect a major	ity of the c	directors or	r trustees of the		
		supporting organization. You mu	ust complete Part	IV, Sections A and B.					
	b	Type II. A supporting organization	on supervised or co	ontrolled in connection w	ith its supp	ported orga	anization(s), by havin	g	
		control or management of the sup	oporting organizatio	on vested in the same pe	rsons that (control or r	manage the supporte	d	
		organization(s). You must com	olete Part IV, Sect	ions A and C.					
	с	Type III functionally integrated	I. A supporting orga	anization operated in cor	nnection w	ith, and fu	nctionally integrated	with,	
		its supported organization(s) (se							
	d	Type III non-functionally integ	,	•				ion(s)	
		that is not functionally integrated.							
		requirement (see instructions). Y				•		0	
	•		-						
	е	Check this box if the organization				sa Type I,	туре п, туре п		
		functionally integrated, or Type II	-						
	f	Enter the number of supported organ				• • • • •		••••	
	g	Provide the following information abo		ganization(s).					
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the o	-	(v) Amount of monetary	(vi) Amou	
				above (see instructions))	docum	ur governing nent?	support (see instructions)	other suppo instructi	
						1	· · ·		,
					Yes	No			
(A)									
<u> </u>									
(B)									
(C)									
(D)									
(D)						1			

(E) Total

Sched		OOD MULTNOMA				47-3934102	Page 2
Pa	rt II Support Schedule for Org	ganizations De	escribed in Sec	ctions 170(b)(1	1)(A)(iv) and 1	70(b)(1)(A)(vi)	
	(Complete only if you chec						under
	Part III. If the organization	fails to qualify u	inder the tests I	isted below, ple	ease complete	e Part III.)	
Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
•	membership fees received. (Do not						
	include any "unusual grants.")		94,910	288,534	377,879	1,606,402	2,367,725
2	Tax revenues levied for the						
-	organization's benefit and either paid to or expended on its behalf						
-							
3	The value of services or facilities furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3		94,910	288,534	377,879	1,606,402	2,367,725
5	The portion of total contributions by		51/510	200,001	0117015	2,000,102	2,00,,,20
•	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
c							0 268 805
$\frac{6}{800}$	Public support. Subtract line 5 from line 4 tion B. Total Support						2,367,725
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	(a) 2014			. /		
8	Gross income from interest, dividends,		94,910	288,534	377,879	1,606,402	2,367,725
0	payments received on securities loans,						
	rents, royalties and income from						
	similar sources						
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						;
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
11	Total support. Add lines 7 through 10 .						2,367,725
12	Gross receipts from related activities, etc. (s	see instructions)			••••	12	
13	First five years. If the Form 990 is for the						
<u></u>	organization, check this box and stop here				• • • • • • • • •		· · · · ▶ []
	tion C. Computation of Public Su			\		44	
14	Public support percentage for 2018 (line 6, o						0.00 %
15	Public support percentage from 2017 Sched						0.00 %
16a	33 1/3% support test - 2018. If the organiz						
	box and stop here. The organization qualit						▶ 🛛
b	33 1/3% support test - 2017. If the organiz						
	this box and stop here. The organization of						▶⊔
17a	10%-facts-and-circumstances test - 2018	-					
	10% or more, and if the organization meets						
	Part VI how the organization meets the "fac	ts-and-circumstanc	es" test. The organi	zation qualifies as	a publicly support	ed	—
	organization						▶ ∐
b	10%-facts-and-circumstances test - 201	7. If the organization	n did not check a b	ox on line 13, 16a	, 16b, or 17a, and	line	
	15 is 10% or more, and if the organization				-		
	Explain in Part VI how the organization mee	ets the "facts-and-ci	rcumstances" test.	The organization q	ualifies as a public	cly	
	supported organization						►
18	Private foundation. If the organization did	not check a box of	n line 13, 16a, 16b,	17a, or 17b, chec	k this box and see	9	
	instructions						► 🗌
EEA						Schedule A (Forn	n 990 or 990-EZ) 2018

		OOD MULTNOMA				47-3934102	Page 3
Pa	art III Support Schedule for Org						
	(Complete only if you checl						Part II.
	If the organization fails to q	ualify under the	e tests listed b	elow, please c	omplete Part II	.)	
	ction A. Public Support		I	1	1		
Cale	endar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees 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						
6	Total. Add lines 1 through 5						
7a	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						
_	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
See	ction B. Total Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	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.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the or organization, check this box and stop here						►
Se	ction C. Computation of Public Su	pport Percent	age			1 F	
15	Public support percentage for 2018 (line 8, co						%
16	Public support percentage from 2017 Schedu					16	%
Se	ction D. Computation of Investme						
17	Investment income percentage for 2018 (line	.,	•	())			%
18	Investment income percentage from 2017 S	chedule A, Part III	, line 1.7			18	%
19a	33 1/3% support tests - 2018. If the organiz 17 is not more than 33 1/3%, check this box	zation did not cheo and stop here. Th	k the box on line he organization qu	14, and line 15 is ı Jalifies as a public	more than 33 1/3% ly supported organ	, and line ization	► 🗌
b	33 1/3% support tests - 2017. If the organiz line 18 is not more than 33 1/3%, check this	zation did not cheo	k a box on line 14	l or line 19a, and l	ine 16 is more thar	n 33 1/3%, and	_
20	Private foundation. If the organization did r	not check a box on	line 14, 19a, or 1	9b, check this box	and see instructio	ns	<u></u> ▶ □

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 S	Section	ns A	
	and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, co	mplete	;	
	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Pa	art V.)		
ecti	on A. All Supporting Organizations			
			Yes	Ν
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? 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		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 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		
la	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	Ju		
	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		
с	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		
а	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		
	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		
С	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)	4-		
	<i>purp</i> oses. Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If</i> "Yes,"	4c		
a	answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		
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		
	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 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		
}	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	•		
2	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
a	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		
	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which	Ja		
	the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
	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		
	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 III 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		

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in 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.	1		
_				
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	-		
0	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Soc	tion D. All Type III Supporting Organizations			
000	tion D. An Type in 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		103	110
•	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?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how</i>			
	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		
Sec	tion 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 in	struc	tions)).
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	struct	tions)
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	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.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	2 ⊾		
2	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
U	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
			- 000 57	0.0040

 Schedule A (Form 990 or 990-EZ) 2018
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 Part IV
 Supporting Organizations (continued)

Schedule A (Form 990 or 990-EZ) 2018

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Page 5

Schedule A (Form 990 or 990-EZ) 2018 DO GOOD MULTNOMAH		47-39	3 4102 Pag
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	-		
1 Check here if the organization satisfied the Integral Part Test as a qualifying			,
instructions. All other Type III non-functionally integrated supporting organi	zations	must complete Section	-
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (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		
ection B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (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		
ection 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	integra	ated Type III supportin	g organization (see
instructions).	- 0	21 11	

Schedule A (Form 990 or 990-EZ) 2018

Schedu	le A (Form 990 or 990-EZ) 2018 DO GOOD MULTNOMAH		47-393	34102 Page 7
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organia	zations (continued)	
Sec	tion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exem	npt purposes		
2	Amounts paid to perform activity that directly furthers exempt	purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes	s of supported organizat	ions	
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	e organization is respons	sive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
	Excess distributions carryover, if any, to 2018			
	From 2013			
	From 2014			
	From 2015			
	From 2016			
	From 2017			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
<u> i</u>	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from			
	Section D, line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
	Breakdown of line 7:			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
EFA	Excess from 2018		0-1-1	ule A (Form 990 or 990-EZ) 2018
- H A			Schodu	

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (For	m 990 or 990-EZ) 2018 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

(FORM 990) Complete if the organization assessment 'Yes' on Form 990, Part IV, line 7, 8, 9, 19, 19, 11, 11, 12, 11, 11, 12, 11, 11, 12, 11, 11	SCH	IEDULE D	Suppler	nental Financial Statements		OMB No. 1545-0047
Part W, Line 5, 2, 8, 9, 10, 11, 11, 5, 11, 11, 12, or 12b. Open to Public Impaction Impact of the research statust • Coro www.fr.gov/Form990 for instructions and the latest information. Qroup of the research of the resea	(Form 990)					2018
•••••••••••••••••••••••••••••••••			Part IV, line 6, 7,			
Name of the expansion Endpoint expansion Endpoint expansion 0 GOOD MULTINOVAHI 47 – 393 4410.2 Part II Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. 1 Total marks at end dyser (a) Ever added/arcs (b) Ever added/arcs (c) Ever	•					•
DC GOOD MULTINOWAH 47-3934102 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. 00 Pante video functions 1 Total number at end of year	-		Go to www.irs.gov/i	-orm990 for instructions and the latest informatio		•
Part II Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' on Form 900. Part V, line 6. Aggregate value of contributions to (during year) (a) Done advised funds (b) Funds wid other accounts Aggregate value of contributions to (during year) (a) Done advised funds (b) Turds wid other accounts Complete if the organization inform all donors and doors advisors in writing that prant funds can be used only for drainable purposes and to for the benefit of donor or durinos in writing that prant funds can be used only for drainable purposes and for the benefit of the donor or donor advisors in writing that prant funds can be used only for drainable purposes and for the donor of donor advisors in writing that prant funds can be used only for drainable purposes and for the donor of done advisors in writing that prant. Yes No Preservation of antibility purposes Complete if the organization in drain answered 'Yes' on Form 990, Part IV, line 7. Yes No Preservation of antibility purpose Complete inter or davisor of for any other advisors in writing that papy). Preservation of a batteriotically importance lands Yes No Preservation of antibility of the yogan. Complete inter a conservation assements 2a		-	ИОМАН			
Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (b) Fords and other account 1 Total number at end of year (b) Fords and other account 2 Aggregate value of contributions in (during year) (c) 3 Aggregate value of distributions in (during year) (c) 4 Aggregate value of organization in al donos and some advisors in writing that the assets held in donor advisor (c) 9 Did the organization inform gartees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the therefit of the donor or donor advisor, or for any other purpose (c) Partill Conservation Easements. (c) (c) (c) (c) Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. (c) (c) <td></td> <td></td> <td></td> <td>ed Funds or Other Similar Funds or Accour</td> <td></td> <td>51102</td>				ed Funds or Other Similar Funds or Accour		51102
Total number at end of year			-			
2 Aggregate value of combinitions to (duing year)		•	<u> </u>		(b) Funds a	nd other accounts
3 Aggregate value of grants from (during year)	1	Total number at er	nd of year			
Aggregate value at and of year	2	Aggregate value o	f contributions to (during year) .			
5 Did the organization inform all denors and denor advisors in writing that the assets held in donor advised funds are the organization's exclusive legal control?	3	Aggregate value o	f grants from (during year)			
function are the organization's experts, subject to the organization's exclusive legal control? IVes Not 6 Did the organization inform all grantees, donors, and door advisor, in writing that grant funds can be used only for chaitable purposes and not for the benefit of the donor of door advisor, or for any other purpose contering impermisable private benefit? IVes Not 7 Purpose(5) of conservation easements held by the organization (heck all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a centified historic structure 2 Complete if the organization held a qualified conservation contribution in the form of a conservation easement to the last dy of the tax year. Zei 3 Number of conservation easements Zei Zei 4 Number of conservation easements included in (c) expired after 7/25/06, and not on a historic structure listed in the National Register Zei Zei 3 Number of conservation easements included in (c) expired after 7/25/06, and not on a historic structure listed in the National Register Not conservation easements included in (c) expired after 7/25/06, and not on a historic structure listed in the National Register Not conservation easements included in (c) expired after 7/25/06, and not on a historic structure listed in the National Register 4 Number of conservation easements	4		•			
G Did the organization inform all grantees, donors, and donor advisors in writing the grant funds can be used only for charitable purposes and not for the benefit?	5	-		-		D. . D. .
ovj for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Yes Ne Part II Complete if the organization answered "Yes" on Form 930, Part IV, line 7. Yes Ne Purpose() of conservation essements Hed by the organization (check all that apply). Proservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Prosection of natural habitat Preservation or a conservation a conservation or a conservation 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation a conservation 2 Total number of conservation easements Za Za 3 Number of conservation easements Za Za 4 Number of conservation easements Za Za 3 Number of conservation easements Za Za 4 Number of conservation easements Sold (r) (2) acquired after 7/2/306, and not on a Number of conservation easements included in (c) acquired after 7/2/306, and not on a Number of conservation easements included in (c) acquired after 7/2/306, and not on a 4 Number of states where property subject to conservation easement is located > Sold and volunteer hours devided to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 5 Soles the organization	•	•		-		Yes 🗌 No
conferring impermissible private benefit? yes Note Part III Conservation Easements. Yes' on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of a historically important land area Protection of natural habitat Preservation of a conservation easements held by the organization check all that apply). Preservation of a conservation 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation a conservation a Total number of conservation easements Za Held at the End of the Tax Year a Total number of conservation easements Za Za b Total acreage restricted by conservation easements included in (c) acquired after 7/25/06, and not on a histicn: structure installed habits Za d Number of conservation easements included in (c) acquired after 7/25/06, and not on a histicn: structure installed in the National Register Za 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year > 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year > 7 Amount of expenses incurred in imonitoring, inspecting, handling of violatio	6	-	-			
Part II Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Pupose(c) of conservation easements held by the organization (check all that apply). Preservation of a historically important land area Protose(c) of conservation ababiat Preservation of a contified historic structure Preservation of open space Preservation of a conservation 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day 0 conservation easements 2d b Total arcnegar enstricted by conservation easements 2d c Number of conservation easements included in (a) acquired after 7220(6, and not on a historic structure liad of the National Register 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 2d 4 Number of states where property subject to conservation easement is located ▶ 2d 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year ▶ 6 Statf and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶\$ 9 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)(i) and section 170(h)(4)(B)(i)?		-				
Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). □ Preservation of lad for public use (e.g., recreation or education) □ Preservation of a certified historic structure □ Preservation of a charal habitat □ Preservation of a coretified historic structure □ Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a correlvation 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a correlvation a Total number of conservation easements 2a 2 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the tax year > 4 Number of accentration easements includes in holds? □ 5 Deces the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year > 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year list describes the organization have assement reports conservation easements in its revenue and expense statement and balance sheet works of art, historical FAS 116 (ASC SSB), not to report in its revenue statement and balance sheet works of art, historical resaures / Yes on Form 990, Part IV, line 8.	Pa		•		•••••	
1 Purpose(s) of conservation essements held by the organization (check all that apply). □ Preservation of a historically important land area □ Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Image: the tax year. a Total number of conservation easements b Total anceger estricted by conservation easements c Number of conservation easements included in (c) acquired after 7/25/06, and not on a nistoric structure listed in the National Register 2d 3 Number of conservation easements included in (c) acquired after 7/25/06, and not on a nistoric structure listed in the National Register 2d 3 Number of conservation easements included in (c) acquired after 7/25/06, and not on a 1 A regerization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements included in (c) acquired after 7/25/06, and not ona 4 Number of astates where property subject to conservation easements is located 5 Does the organization have a written policy regarding the periodic monitoring, inspecting, handling of violations, and enforcing conservation easements during the year <td< td=""><td>I U</td><td></td><td></td><td>es" on Form 990. Part IV. line 7.</td><td></td><td></td></td<>	I U			es" on Form 990. Part IV. line 7.		
Preservation of land for public use (e.g., recreation or education) Preservation of a larual habitat Preservation of a cartified historic structure Preservation of a cartified historic structure Preservation of a cartified historic structure Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total acreage restricted by conservation easements In the value listed in the National Register Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements moledled, transferred, released, extinguished, or terminated by the organization during the tax year Total acreage restricted by conservation easements is located >	1	· · · · · · · · · · · · · · · · · · ·				
Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements D Total acreage restricted by conservation easements D Total acreage restricted by conservation easements 2a d Number of conservation easements on a certified historic structure included in (a) acreage restricted by conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 3 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 4 Number of states where property subject to conservation easement is located 5 Dess the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year 5 S 3 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(i) 1 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements and balance sheat b Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(i) 9 In Part XIII, describe how the organization reports conservation easements in its revenue satement and balance sheat works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide hier Part XIII, herest the folo					important land	larea
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements on the last day of the tax year. a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure lised in the National Register 3 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure lised in the National Register 3 Number of states where property subject to conservation easement is located > 4 Number of states where property subject to conservation easements in holds? 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year * * 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year * \$ 0 Does each conservation easements: in tords? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year * \$ 0 Does each conservation easements: in the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Image: Section 170(h)(4)(B)(ii) 9 In Part XIII, describe how the organization reports conservation easements: in its revenue and expense statement, and balance sheet 0 organization's accounting for conservation easeme					istoric structure	
easement on the last day of the tax year. Total number of conservation easements Total acceage restricted by conservation easements Za		Preservation of	of open space			
a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements included in (a) 2c d Number of conservation easements included in (b) acquired after 7725/06, and not on a historic structure listed in the National Register 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year	2	Complete lines 2a	through 2d if the organization held a q	ualified conservation contribution in the form of a con	servation	
b Total acreage restricted by conservation easements 2b c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 2d 4 Number of states where property subject to conservation easements is located ▶		easement on the la	ast day of the tax year.		Held a	t the End of the Tax Year
c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 2d 4 Number of states where property subject to conservation easement is located	а	Total number of co	onservation easements		2a	
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year >	b	Total acreage rest	ricted by conservation easements		2b	
historic structure listed in the National Register 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year	С	Number of conserv	vation easements on a certified histori	c structure included in (a)	2c	
 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶	d	Number of conserv	vation easements included in (c) acqu	red after 7/25/06, and not on a		
 tax year >			Ũ			
 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \$ Boes each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organization sMaintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization r	3	Number of conserv	vation easements modified, transferred	d, released, extinguished, or terminated by the organ	ization during t	he
 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 		-				
violations, and enforcement of the conservation easements it holds? Yes No 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ✓ 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ✓ 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes No 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Yes No 9 In Part XIII, describe how the organization answered "Yes" on Form 990, Part IV, line 8. Yes No 9 In Part String organization answered "Yes" on Form 990, Part IV, line 8. Teresures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items: (i) Revenue inclu						
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 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \$	c	,				
 \$	0		nours devoted to monitoring, inspecti	ig, nandling of violations, and enforcing conservation	easements du	ring the year
 \$	7			andling of violations, and enforcing conservation eas	ements during	the year
 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(ii)? 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organizations accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be repo	'		es meaned in monitoring, inspecting, r		cilicina dulling	
 and section 170(h)(4)(B)(ii)? Yes No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X b Assets included in Form 990, Part X 	8		vation easement reported on line 2(d)	above satisfy the requirements of section 170(h)(4)(f	B)(i)	
 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X b Assets included in Form 990, Part X b Assets included in Form 990, Part X 					, , , ,	🗌 Yes 🗌 No
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Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X b Assets included in Form 990, Part X b Assets included in Form 990, Part X included in Form 990, Part X include on Form 990, Part X include on		balance sheet, and	include, if applicable, the text of the fo	ootnote to the organization's financial statements that	describes the	
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 works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X b Assets included in Form 990, Part X c) \$ b Assets included in Form 990, Part X c) \$ c) \$		Complet	te if the organization answered "ነ	es" on Form 990, Part IV, line 8.		
 public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X b Assets included in Form 990, Part X • \$ 	1a	If the organization	elected, as permitted under SFAS 116	6 (ASC 958), not to report in its revenue statement an	nd balance she	et
 b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X b Assets included in Form 990, Part X b Assets included in Form 990, Part X 						
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 (ii) Assets included in Form 990, Part X						•
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a Revenue included on Form 990, Part VIII, line 1	2	•			provide the	
b Assets included in Form 990, Part X	-	-			,	¢
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Sched	ule D (Form 990) 2018 DO GOOD MULTNOM	AH				47-393	4102	Page 2
Pa	rt III Organizations Maintaining Co	ollections of A	rt, Historical	Treasures,	or Othe	er Similar As	sets (cor	ntinued)
3	Using the organization's acquisition, accession, a							,
	collection items (check all that apply):			0	U			
а	Public exhibition	d 🗌 Loa	n or exchange pro	ograms				
b	Scholarly research	_	er	5				
c	Preservation for future generations							
4	Provide a description of the organization's collect	ions and explain ho	w they further the	organization's	exempt n	imose in Part		
-	XIII.			organizations	sxempt p			
5	During the year, did the organization solicit or rec	oive denations of a	t historical traceu	roc or other cir	nilor			
3								
Da	assets to be sold to raise funds rather than to be rt IV Escrow and Custodial Arrange		or the organization		•••		•• 📋 י	(es 🗌 No
Fa	Complete if the organization and		Eorm 000 D	art IV/ line 0	or rop	ortod on omo	unt on Ec	rm
		sweled res of	1 FUIII 990, F	art iv, inte 9	, or rep	oneu an amo		
	990, Part X, line 21.		e					
1a	Is the organization an agent, trustee, custodian or						Π.	
	-				• • • •	•••••	· · · 🗆 ١	res 🗌 No
b	If "Yes," explain the arrangement in Part XIII and	complete the follow	ing table:					
						Ai	mount	
С	Beginning balance				1c			
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on Form 9	990, Part X, line 21,	for escrow or cus	todial account li	ability?		۱ 🗌	(es 🗌 No
b	If "Yes," explain the arrangement in Part XIII. Che	eck here if the expla	nation has been p	rovided on Part	t XIII .			🗌
Pa	rt V Endowment Funds.							
	Complete if the organization and	swered "Yes" or	n Form 990, P	art IV, line 1	0.			
		(a) Current year	(b) Prior year	(c) Two year	s back	(d) Three years back	(e) Fou	r years back
1a	Beginning of year balance							
b								
С	Net investment earnings, gains, and							
	losses							
Ь	Grants or scholarships							
e	Other expenditures for facilities and							
C	programs							
4								
f	'							
g	End of year balance		 	hald an				
2	Provide the estimated percentage of the current y		ne ig, column (a))	neid as:				
a	Board designated or quasi-endowment	%						
b	Permanent endowment %							
С	Temporarily restricted endowment	%						
	The percentages on lines 2a, 2b, and 2c should e	•						
3a	Are there endowment funds not in the possessio	n of the organization	n that are held and	administered f	or the			
	organization by:						[Yes No
	(i) unrelated organizations				• • • •		. 3a(i)	
	() 5						. 3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization	ns listed as required	on Schedule R?.				. 3b	
4	Describe in Part XIII the intended uses of the org	anization's endown	nent funds.					
Pa	rt VI Land, Buildings, and Equipme	ent.						
	Complete if the organization ans	swered "Yes" or	<u>n Form 9</u> 90, P	<u>art IV, li</u> ne 1	<u>1a. See</u>	<u>e Form 9</u> 90, F	Part X, line	e 10.
	Description of property	(a) Cost or othe	er basis (b) Co	st or other basis	(c) /	Accumulated	(d) Boo	k value
	· · · · ·	(investme		(other)		preciation		
1a	Land							
b	Buildings			221,509				221,509
c	Leasehold improvements			222,505				,505
d		••		4,617		2,168		2,449
u e		••		7,01/		2,100		4,119
	I. Add lines 1a through 1e. (Column (d) must equ	I	X column (P) line	100	I			223 0=0
IULD	\mathbf{I} Aud intes ta unough te. (Column (a) must equ	ai ruini 990, rdil /	л, сошни (D), Ше	· · · · · · · · · · · · · · ·		· · · · · 🖻	4	223,958

Schedule D (Form 990) 2018

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Schedule	D	(Form	990)	2018	
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Page 3

Schedule D (Form	· ·	МАН	4/-3934102	Faye J
Part VII	Investments - Other Securities. Complete if the organization answere	ed "Yes" on Form 990. Pa	rt IV. line 11b. See Form 990. Part	X. line 12.
	(a) Description of security or category	(b) Book value	(c) Method of valuation:	<u>, ,</u>
	(including name of security)		Cost or end-of-year market value	
(1) Financial				
., ,	eld equity interests			
(3) Other				
(A) (B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Column (b)) must equal Form 990, Part X, col. (B) line 12.) 🕨			
Part VIII	Investments - Program Related.			
	Complete if the organization answere	ed "Yes" on Form 990, Pa	rt IV, line 11c. See Form 990, Part	X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation:	
			Cost or end-of-year market value	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7) (8)				
(9)				
) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.			
	Complete if the organization answere	ed "Yes" on Form 990, Pa	rt IV, line 11d. See Form 990, Part	X, line 15.
		Description		 Book value
(1) STRIP	E ACCT			20
(2) PAYPA	L ACCT			(3
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) Tatal (0a/		15.)		
Part X	n (b) must equal Form 990, Part X, col. (B) line 1 Other Liabilities.	5.)	· · · · · · · · · · · · · · · · •	17
Fail A	Complete if the organization answere	ad "Ves" on Form 990 Pa	rt IV line 11e or 11f See Form 990) Part X
	line 25.), i alt X,
1.	(a) Description of liability	(b) Book value		
	income taxes			
	LL LIABILITIES	37,815	-	
(3)			-	
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
) must equal Form 990, Part X, col. (B) line 25.) 🕨	37,815		
	uncertain tax positions. In Part XIII, provide the te		ation's financial statements that reports the	
	uncertain tax positions. In Part XIII, provide the ter liability for uncertain tax positions under FIN 48 (A			IL

Sched	ule D (Form 990) 2018 DO GOOD MULTNOMAH	47-3934102	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Return.	
	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	1,943,669
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	. 2e	
3	Subtract line 2e from line 1	. 3	1,943,669
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	. 4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	. 5	1,943,669
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	. 1	1,503,086
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	. 2e	
3	Subtract line 2e from line 1	. 3	1,503,086
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	. 5	1,503,086
Pa	rt 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.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

8

Open to Public Inspection

Employer identification number

47-3934102

DO GOOD MULTNOMAH

01. Form 990 governing body review (Part VI, line 11)

HARD COPIES OF THE 990 ARE PRESENTED TO THE BOARD FOR APPROVAL BEFORE RETURN IS FILED

02. Conflict of interest policy compliance (Part VI, line 12c)

BOARD MEMBERS REVIEW THE CONFLICT OF INTEREST POLICY ANNUALLY

03. CEO, executive director, top management comp (Part VI, line 15a)

COMPENSATION IS BASED ON REASONABLE STANDARDS FOR THE INDUSTRY. THEY ALSO EVALUATE

SALARIES BASED ON BUDGET REALTITIES.

04. Other officer or key employee compensation (Part VI, line 15b

THE BOARD ASSESSES EMPLOYEE COMPENSATION ANNUALLY. THEY EVALUATE SALARIES BASED ON BUDGET

REALITIES.

05. Governing documents, etc, available to public (Part VI, line 19)

FORM 990 EZ AND 990 FILED ARE AVAILABLE BY CONTACTING DO GOOD MULTNOMAH

06. Significant program services not listed on prior year return (Part III, line 2)

FINDLEY COMMONS APARTMENT COMPLEX FUNDED BY MEYER MEMORIAL TRUST GRANT

07. Explanation of other changes in net assets or fund balances (Part XI, line 9)

ADJUSTMENT FOR NET ASSEST MATCHING TAX RETURN TO PRIOR YEAR AUDIT FIGURES

08. List of other expenses (Part IX, line 24e)

LIST OF OTHER EXPENSES IS STATED ON THE OVERFLOW STATEMENT UNDER PROGRAM EXPENSES

Form	8868	
(Rev. Jar	nuary 2019)	

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

OMB No. 1545-1709

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Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filerle islentifisis . .

	Ent	er filer's identifying number, see instructions
Type or	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
print	DO GOOD MULTNOMAH	47-3934102
File by the	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)
due date for	5830 NE ALAMEDA ST	
filing your return. See	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
instructions.	PORTLAND, OR 97213	

. 01 Enter the Return Code for the return that this application is for (file a separate application for each return)

Application	Return	Application	Return
Is For	Code	Is For	Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

• The books are in the care of DRAGONFLY TAX LLC, 5611 SE POWELL BLVD, PORTLAND, OR 97206

-	Glephone No. ► 503-757-1196 FAX No.		
•	f the organization does not have an office or place of business in the United States, check this box		
•	f this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If the	nis is	
		attach	
	t with the names and EINs of all members the extension is for.		
1	I request an automatic 6-month extension of time until05-15, 20 20, to file the exempt organization for the organization's return for:	on retu	m
	► 🗌 calendar year 20 or		
		,20 1	.9.
2	If the tax year entered in line 1 is for less than 12 months, check reason:		
3	a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less		
	any nonrefundable credits. See instructions.	3a	\$
I	b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and		
	estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
(Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by		
	using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$
Саι	ition: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO	and Fo	orm 8879-EO for payment
inst	uctions		

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2019)

EEA

Form	88	79-	EO
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IRS *e-file* Signature Authorization for an Exempt Organization

For calendar year 2018, or fiscal year beginning 07-01-2018, and ending 06-30-2019

Do not send to the IRS. Keep for your records.

OMB No. 1545-1878

2018

Department of the Treasury
Internal Revenue Service
Name of exempt organization

► Go to www.irs.gov/Form8879EO for the latest information.

Employer identification number

47-3934102

DO GOOD MULTNOMAH

CHRIS AIOSA, BOARD, EXECUTIVE DIRECTOR

Part IType of Return and Return Information (Whole Dollars Only)Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a	Form 990 check here b Total revenue, if any (Form 990, Part VIII, column (A), line 12) 1b	
	Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9)	
3a	Form 1120-POL check here b Total tax (Form 1120-POL, line 22)	
4a	Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, line 5) 4b	
5a	Form 8868 check here b Balance Due (Form 8868, line 3c)	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 electronic retum and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic retum. I consent to allow my intermediate service provider, transmitter, or electronic retum originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic's electronic between the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

X I authorize DRAGONFLY TAX LLC ERO firm name	to enter my PIN <u>16271</u> as my signature Enter five numbers, but do not enter all zeros
, , , , , , , , , , , , , , , , , , ,	filed retum. If I have indicated within this retum that a copy of the retum is arities as part of the IRS Fed/State program, I also authorize the aforementioned consent screen.
	PIN as my signature on the organization's tax year 2018 electronically filed return. the retum is being filed with a state agency(ies) regulating charities as part of n the return's disclosure consent screen.
Officer's signature	Date ► 11-03-2019
Part III Certification and Authenticatio	1
ERO's EFIN/PIN. Enter your six-digit electronic filing ide	ntification
number (EFIN) followed by your five-digit self-selected P	N. 934129 51554
	Do not enter all zeros
	my signature on the 2018 electronically filed retum for the organization n in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) ess Returns.
ERO's signature	Date ► 04-14-2020
ERO Mus	t Retain This Form - See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see instructions.

Form 8879-EO (2018)

EEA

Amount <u>Amount</u> <u>\$ 8,842</u> \$ 8,842 \$ 300,000 \$ 3
\$ 8,842 \$ 8,842 \$ 8,842 Amount \$ 300,000
\$ 300,000
<u> </u>
Amount \$ 28,429 33,574 680 281,199 1,151,049 139,900 .:
Amount \$ 42,250 \$ 42,250
Amount \$ 676,190 \$ 676,190
Amount \$ 60,978 .: \$ 60,978
al

990	Overflow Statement	Т	Page 2
Name(s) as shown on return DO GOOD MULTNOMAH			FEIN 47-3934102
Description 6801 BOOKKEEPING 6805 LEGAL OTHER PROFESSIONAL		Total:	Amount \$5,849 6,044 14,556 \$26,449
Description 5900 IN KIND DONATIONS		Total:	Amount \$ 28,425 \$ 28,425
Description 6100 ADVERTISING		Total:	Amount \$ 9,554 \$ 9,554
Description 6710 RENT		Total:	Amount \$ 9,500 \$ 9,500
Description 6330 INSURANCE		Total:	Amount \$ 7,354 \$ 7,354

990	Overflow Statement	

2018 Page 3

Name(s) as shown on return

47-3934102

FEIN

DO GOOD MULTNOMAH

PROGRAM EXPENSE

Description	Z	mount
6280 EDUCATION AND TRAINING	\$	10,883
6711 REIMBURSEMENTS		1,021
FINDLEY COMMONS EXPENSE		37
OUTSIDE SERVICES		5,221
6015 CLIENT SCREENING		90
6021 PARKING		2
6041 RENTS		305,550
6042 RENTAL EQUIPMENT		2,091
6270 LAUNDRY		5,932
6290 OFFICE SUPPLIES		1,447
6300 SHELTER MEALS		7,704
6301 SHELTER SUPPLIES		15,454
6303 TRANSPORTATION		1,327
6504 TELEPHONE EXPENSE		2,364
6505 STAFF CARE AND TRAINING		2,727
6720 REPAIRS AND MAINTENANCE		59,298
6723 MEALS		324
6740 PROPERTY AND PROJECT MANAGEMENT		63,710
6750 SOFTWARE		330
6760 UTILITIES		43,463
6770 INTERNET		9,753
6700 TRAVEL EXPENSE		741
8010 CLIENT ASSIST		67,162
6715 COMPUTER PRINTER		4,236
6715 FURNITURE EQUIPMENT		6,500
Total:	_\$	617,367

Description	A	mount
BANK CHARGES	\$	25
6770 INTERNET		2,288
6723 MEALS		76
OTHER PROFESSIONAL		3,414
6504 TELEPHONE		555
Total:	\$	6,358

	Federal Filing Instructions	2018
Name as shown on return DO GOOD MULTNOMAH		Tax ID Number 47-3934102
Date to file by:	05-15-2020	
Form to be filed:	Form 990 and supplemental forms a	nd schedules
Sign and date: An officer must sign and date Form 990 on page 1.		rm 990
Address to file:	If you are not e-filing, mail to:	
	Department of the Treasury Internal Revenue Service Center Ogden, UT 84201-0027	
Refund:	Neither a refund nor a balance du	le
Other instructions:	If the return is not filed by the (including any extension granted) statement giving the reason for r	, attach a