Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Α	For the	e 2023 calend	dar year, or tax y	year beginn	ing 6	701	, 2023,	, and endin	g 5/	31	,	20 2024	
В	Check if	applicable:	С							D Employ	er identi	fication number	
	Add	ress change	CITY CLUB	OF PORT	T.AND					93-	01402	220	
		-	221 NW 2NI							E Telepho			
		ne change	PORTLAND,			8							
	Initia	al return	l OKTEMB,	010 3720		, 0				503	-228	-7231	
	Final	return/terminated											
	Ame	ended return								G Gross r	eceipts 🕏	9:	2,339.
	App	lication pending	F Name and addre	ess of principal	officer: 🗜	ם ממעשח	KVAL		H(a) Is this	a group return	for subor		11
	Ш гл		SAME AS C	ABOVE	E.	DWARD D.	MAIL		H(b) Are all	subordinates " attach a list	included		
_	Tay ov	cempt status:	X 501(c)(3)	501(c) ((incort no.)	4947(a)(1) or	527	If "No,"	" attach a list	. See inst	tructions.	
<u> </u>					,	(insert no.)	4947(a)(1) 01	327					
J	Webs	site: WW	W.PDXCITYC	CLUB.ORG	j					exemption nu	ımber		
K	Form o	of organization:	X Corporation	Trust	Association	n Other	L,	Year of format	ion: 191	6 M s	State of le	egal domicile: C	R
Pa	art I	Summar	ν										
	1 E	Briefly descri	be the organizati	ion's missio	n or mos	t significant a	ctivities: TO	INFORM	ITS M	EMBERS	AND	THE	
	1 7		Y IN PUBLI										
ဦ	1 7		ONS OF CIT						-====				
<u>na</u>	-		0110 01 011										
ē	2 0	Check this bo	y lifthe	organization	discontin	nued its oper	ations or dispo	sed of mor	a than 25	% of its no	at acco		
Ĝ	3 1		ting members of	•			•				3		16
•প্ৰ	4		dependent voting	•		•	,				4		16
es	5 T		of individuals er								5		<u>10</u>
₹	6 1		of volunteers (e								6		30
Activities & Governance	7a T		ed business reve								7a		0.
•			l business taxabl								7a 7b		0.
	D I	vet uniterated	Dusiness taxabi	ic income in	OIII I OIIII	1 330-1, 1 art	1, 11110 11				75	C	
			and avanta (Dav	4 \ / /	h->					rior Year		Current	
<u>e</u>			and grants (Par							104,6	12.		3,341.
Revenue			rice revenue (Pa										1,173.
ě	1		icome (Part VIII,								67.	1	7,825.
E			e (Part VIII, colu				•			5,4			
			e – add lines 8 t							110,8	868.	9	2,339.
	13	Grants and si	milar amounts p	aid (Part IX	, column	(A), lines 1-3	3)						
	14 E	Benefits paid	to or for member	ers (Part IX,	column	(A), line 4)							
	15 8	Salaries, othe	er compensation	, employee	benefits	(Part IX, colu	mn (A), lines !	5-10)		31,5	81.	3	3,537.
Expenses	16a F		fundraising fees			•		-		34,7			
ens	100									34, 1	45.		
- Š	b⊺	otal fundrais	sing expenses (F	art IX, colu	mn (D), I	ine 25)		1,343.					
ш	17 C	Other expens	es (Part IX, colu	ımn (A), line	es 11a-11	ld, 11f-24e)				182,1	.83.	4	5,657.
	18 ⊺	otal expense	es. Add lines 13-	-17 (must ed	qual Part	IX, column (A), line 25)			248,5	09.	7	9,194.
	19 F	Revenue less	expenses. Subt	ract line 18	from line	9 12				-137,6			3,145.
, e									_	ng of Curren		End of \	
an c	20 T	otal assets ((Part X, line 16).							L, 153, 4			6,473.
Net Assets	21 T		s (Part X, line 20							50,1			$\frac{0,475.}{1,645.}$
¥ P	- ' '		•	•					-		-		•
ž	22 \		fund balances.	Subtract line	e 21 from	n line 20			. 1	1,103,2	287.	1,24	4,828.
Pa	art II	Signatur	e Block										
Unde	er penalties	s of perjury, I dec	lare that I have examinarer (other than officer	ned this return, ir	ncluding acc	ompanying schedu	les and statements,	and to the bes	t of my knowl	edge and beli	ef, it is tru	ie, correct, and	
com	plete. Dec	claration of prepa	irer (other than officer	r) is based on a	II informatio	on of which prepar	rer has any knowle	edge.					
Sig	an	Signature of	officer						Date				
He	ere	FDWARI	D B. KAYE					т	'REASUF	OFR.			
	0		t name and title					1	IVLASOI	ТП			
			preparer's name	1	Preparer's	cianatura		Data		T T	T., 1	PTIN	
			·		i reparer S	signature		Date		Check			
Pa			VERCELLIN:	•						self-employ	ed .	P0192274	9
Pr	eparei	Firm's name	EKERN &	THOMPS	ON LL	C							
Us	e Only	y Firm's addre	ess 1800 S	W FIRST	' AVEN	UE, SUIT	E 410			Firm's EIN	93-	-1157146	
			PORTLA		97201	<u> </u>				Phone no.	(503		338
Mar	v the IR	S discuss th	is return with the			ove? See inst	ructions				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	X Yes	No
iriu.	, \	- 4155455 [1]		- Propulor 3		11131						123 103	1110

Page 2

Par	
1	Check if Schedule O contains a response or note to any line in this Part III
'	
	TO INFORM ITS MEMBERS AND THE COMMUNITY IN PUBLIC MATTERS AND TO AROUSE IN THEM THE
	REALIZATION OF THE OBLIGATIONS OF CITIZENSHIP.
2	Did the organization undertake any significant program services during the year which were not listed on the prior
_	Form 990 or 990-EZ?
	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.
4	
-	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses,
	and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$46,498. including grants of \$) (Revenue \$)
	MEMBERSHIP
	CITY CLUB'S MEMBERSHIP TOTALED 423 AT YEAR-END. FREQUENT COMMUNICATION KEEPS MEMBERS
	APPRISED OF EVENTS AND RESEARCH. THE WEBSITE PDXCITYCLUB.ORG PROVIDES CURRENT
	INFORMATION.
4b	(Code:) (Expenses $\$$ 11,017. including grants of $\$$) (Revenue $\$$) (Revenue $\$$)
	FORUMS
	CITY CLUB HOLDS EVENTS TO EDUCATE ITS MEMBERS AND THE COMMUNITY, INCLUDING SPEAKERS,
	PANELS, DEBATES, AND "STATE OF" SPEECHES FROM ELECTED OFFICIALS. DURING 2023-24, 17
	EVENTS WERE HELD, IN PERSON AND VIRTUALLY.
4c	(Code:) (Expenses $\$$ 2,882. including grants of $\$$) (Revenue $\$$
	RESEARCH & ADVOCACY
	CITY CLUB IS THE LAST CITY CLUB IN THE COUNTRY CONDUCTING COMMUNITY BASED RESEARCH,
	WITH 1,000+ REPORTS COMPLETED. RESEARCH ACTIVITY RESUMED IN 2023-24 WITH TWO STUDIES
	LAUNCHED. ADVOCACY EFFORTS CONTINUED IN THE AREAS OF SEISMIC READINESS AND AIR
	TOXICS.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 60,397.

Form 990 (2023) CITY CLUB OF PORTLAND Part IV Checklist of Required Schedules

	·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	X	NO
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	2	Χ	
	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		Х
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? <i>If "Yes," complete Schedule C, Part II.</i>	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i>	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V.	10	Χ	
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.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Х	
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? <i>If "Yes," complete Schedule D, Part VII</i>	11b		Х
	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? <i>If "Yes," complete Schedule D, Part VIII</i>	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	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Χ
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)? <i>If "Yes," complete Schedule D, Part X</i>	11f		Х
	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII.</i>	12a		Х
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	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Χ
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> . See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

Form 990 (2023) CITY CLUB OF PORTLAND Part IV Checklist of Required Schedules (continued)

			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		Χ
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23		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		Х
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II.</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.	34		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? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		Χ
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? <i>If "Yes," complete Schedule R, Part VI.</i>	37		X
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance	· · ·		
	Check if Schedule O contains a response or note to any line in this Part V.			. L
12	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Χ	
ΣΛΛ	TFFA01041 08/23/23		000 (0000

Form 990 (2023) CITY CLUB OF PORTLAND

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			res	NO				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 1							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ					
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Χ				
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on 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				
	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		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Χ				
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c						
6a	6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?							
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?								
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X				
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 required to file Form 8282?	7c		Х				
d	If "Yes," indicate the number of Forms 8282 filed during the year							
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X				
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X				
J	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g						
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?								
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	8						
organization have excess business holdings at any time during the year?								
	Sponsoring organizations maintaining donor advised funds.							
	Did the sponsoring organization make any taxable distributions under section 4966?	9a						
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
а	Initiation fees and capital contributions included on Part VIII, line 12							
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							
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						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year							
	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						
	Note: See the instructions for additional information the organization must report on Schedule O.							
	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							
	Enter the amount of reserves on hand							
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on 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 excess parachute payment(s) during the year?	15		Х				
16	If "Yes," see the instructions and file Form 4720, Schedule N.	16		X				
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	10						
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would	17						
	result in the imposition of an excise tax under section 4951, 4952, or 4953?	17						
	TEF 4010FL 00/03/03	_		0000:				

Form 990 (2023) CITY CLUB OF PORTLAND 93-0140220 Page 6 Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI...... Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year 16 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent. 16 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Χ 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? Χ 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..... X 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Χ Did the organization have members or stockholders? SEE . SCHEDULE . O Χ 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Χ 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, SEE SCH 0 stockholders, or persons other than the governing body? Χ 7h Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: SEE SCHEDULE O Χ a The governing body?..... 8a 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O..... Χ 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a Χ b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. Χ 12a Did the organization have a written conflict of interest policy? If "No," go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Χ 12b to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done. SEE SCHEDULE O. Χ 13 Χ Χ 14 Did the organization have a written document retention and destruction policy?..... 14 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? Χ a The organization's CEO, Executive Director, or top management official ... SEE .SCHEDULE . Q 15a Χ 15h If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year?..... 16a 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?..... Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed <u>OR</u> Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain on Schedule O) 19 Describe on 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. SEE SCHEDULE O

State the name, address, and telephone number of the person who possesses the organization's books and records. EDWARD KAYE 221 NW 2ND AVE #213 PORTLAND OR 97209-3958 503-228-7231

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

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 this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

 \overline{X} Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

			(C)							
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office	unless er and	s per	nore t son is rector	than or both Highest compensated	an	(D) Reportable compensation from the organization (W-2/1099- MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099- MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) MARK STEPHAN	77								_	
PRESIDENT	0	Χ		Χ				0.	0.	0.
	$-\frac{2}{0}$	Х		Χ				0.	0.	0.
(3) TED KAYE	17									
TREASURER	0	Х		Χ				0.	0.	0.
(4) JON STRIDE	7									_
SECRETARY	0	Х		Χ				0.	0.	0.
(5) ROB BROSTOFF	0.5									_
GOVERNOR	0	Х						0.	0.	0.
(6) JORDAN COX	2.5									
GOVERNOR	0	Х						0.	0.	0.
(7) CHRIS HOWARD	6									_
GOVERNOR	0	Х						0.	0.	0.
(8) PROMISE KING	0.5									_
GOVERNOR	0	Χ						0.	0.	0.
(9) JONATHAN KONKOL	5									
GOVERNOR	0	Х						0.	0.	0.
(10) SAM METZ	10									
GOVERNOR	0	Х						0.	0.	0.
(11) MOANA NEWMAN	0.25									
GOVERNOR	0	X						0.	0.	0.
(12) MARY NICHOLS	1									
GOVERNOR	0	Χ						0.	0.	0.
(13) BOBBIE REGAN	_ 12 _]								
GOVERNOR	0	Χ						0.	0.	0.
(14) COLLEEN SHOEMAKER	16_]								
GOVERNOR	0	Χ						0.	0.	0.

Part VII Section A. Officers, Directors, 11	ustees,	ney	/ C I	_		ees,	an	a nignest Cor	npensated Emp	лоуеє	S (con	tinuea)
	-		(C) Position			-		-				
(A) Name and title	(B)			heck i	more	than o s both		(D) Reportable	(E) Reportable	Cotion	(F)	
	Average hours	offic	er an	dad	irecto	r/truste	ee)	compensation from	compensation from	C	ated amo of other nsation t	
	per week (list any hours for	Indiv or di	Insti	Officer	Key	High emp	Former	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC)	the o	rganizati d related	ion
	related organiza-	/idua	tutio	ĕ	emp	est o	ner				anization	
	tions below	얼	nal t		Key employee	e						
	dotted line)	Individual trustee or director	uste		Ф	Highest compensated employee						
			Ж			ated						
(15) PADDY TILLETT	4.5											
GOVERNOR	0	Х						0.	0.			0.
(16) WYNNE WAKKILA	8	v						0	0			0
GOVERNOR (17)	U	Х						0.	0.			0.
		•										
(18)												
(19)												
100												
(20)		-										
(21)												
<u></u>		•										
(22)												
(23)		-										
(24)												
(24)		-										
(25)												
		-										
1b Subtotal								0.	0.			0.
c Total from continuation sheets to Part VII, Section								0.	0.			0.
d Total (add lines 1b and 1c)								0.	0.	o comp	oncati	0.
from the organization	ted to tho.	36 113	sicu	abo	ve)	WIIO I		erved more than \$	100,000 of reportable	e comp	ciisati	OH
· · · · · · · · · · · · · · · · · · ·											Yes	No
3 Did the organization list any former officer, directed	or, trustee	, ke	√ em	olar	vee.	or hi	ghe	st compensated e	mployee			
on line 1a? If "Yes,"complete Schedule J for such	individua	İ								. 3		X
4 For any individual listed on line 1a, is the sum of the organization and related organizations greater	reportable	con	nper	nsati	ion a	and o	ther	r compensation from	om			
such individual								· · · · · · · · · · · · · · · · · · ·		. 4		X
5 Did any person listed on line 1a receive or accrue	compens	ation	n fro	m a	ny u	nrela	ited	organization or in	ıdividual	_		
for services rendered to the organization? If "Yes Section B. Independent Contractors	," comple	te So	chea	iuie .	J foi	SUCI	1 ре	erson		. 5		X
1 Complete this table for your five highest compens	ated indep	pend	ent	cont	tract	ors th	nat	received more tha	n \$100,000 of			
compensation from the organization. Report comp	ensation	for th	ne c	alen	ıdar	year	enc	_	-	_		
(A) Name and business address (B) Description of services Cor										Compe	C) nsatio	n
								-				
-												
O Talahamahan Cirila da Araba		10				li a i i i						
2 Total number of independent contractors (includin \$100,000 of compensation from the organization	-	ıımıt	ed t	o the	ose	ıısted	ab	ove) who received	more than			
	0											

		Check if Schedule O contains a	respo	nse or note to any	line in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants, and Other Similar Amounts	1a b c d e f	Federated campaigns	1a 1b 1c 1d 1e	52,692.				
dibt.	g	Noncash contributions included in lines 1a-1f	1g	20,049.				
	h	Total. Add lines 1a-1f			73,341.			
nue	•			Business Code	1 1 - 2			
Program Service Revenue	2a b c	FRIDAY FORUMS		900099	1,173.	1,173.		
Serv	d							
æ	e	All other program convice revenue						
rog .	q	All other program service revenue Total. Add lines 2a-2f			1,173.			
	3	Investment income (including divi	dends,	interest, and				
	4	other similar amounts)			9,245.			9,245.
	5	Royalties	•					
		(i) Re		(ii) Personal				
		Gross rents 6a						
		Less: rental expenses 6b Rental income or (loss) 6c						
		Net rental income or (loss)						
		Gross amount from (i) Secu		(ii) Other				
		sales of assets other than inventory 7a 8,	580.					
	b	Less: cost or other basis and sales expenses 7b						
	С		580.					
		Net gain or (loss)			8,580.			8,580.
Other Revenue	8a	Gross income from fundraising events (not including \$	_					
E E	h	See Part IV, line 18	8a 8b	_				
Ě		Net income or (loss) from fundrais						
<u> </u>		Gross income from gaming activities. See Part IV, line 19	9a					
		Less: direct expenses	9b					
		Net income or (loss) from gaming	activit	ies				
		Gross sales of inventory, less returns and allowances	10a 10b					
		Net income or (loss) from sales or						
δ		· ,		Business Code				
g 9	11a b c d		-					
scellaneous Revenue	b							
Re Re	c d	All other revenue						
Σ		Total. Add lines 11a-11d	<u> </u>					
	12	Total revenue. See instructions			92,339.	1,173.	0.	17,825.

campaign and fundraising solicitation.

if following SOP 98-2 (ASC 958-720).....

Check here

Statement of Functional Expenses Part IX Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX. (D) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Total expenses Management and Fundraising Program service expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21..... Grants and other assistance to domestic individuals. See Part IV, line 22..... Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. Benefits paid to or for members..... Compensation of current officers, directors, trustees, and key employees..... 0. 0. 0. 0. Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)..... 0 0 0 0. 7 Other salaries and wages..... 28,625 28,625 Pension plan accruals and contributions (include section 401(k) and 403(b) 1,719 1,719 Payroll taxes..... 3,193 3,193 Fees for services (nonemployees): a Management..... **b** Legal..... c Accounting..... 1,200. 1,200 400 400 e Professional fundraising services. See Part IV, line 17. . . . Investment management fees..... 10,426 10,426. Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.).... 12 Advertising and promotion..... 1,405 1,405. 5,502 550 275. 13 4,677 Information technology..... 4,484. 14 5,276. 528. 264. 15 9,997. 8,497 1,000. 500. 17 Payments of travel or entertainment expenses for any federal, state, or local 19 Conferences, conventions, and meetings..... Interest...... 1,737 1,737 Payments to affiliates..... 21 Depreciation, depletion, and amortization 861. 732. 86. 43. 23 Insurance..... 5,218. 4,435 522. 261. Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)..... BROADCAST FEES 2,035 2,035 b 1,600 1,600 С d e All other expenses..... **25** Total functional expenses. Add lines 1 through 24e . . . 79,194. 60,397 17,454 1,343 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational

		Check if Schedule O contains a response or note to	any lin	e in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			22,126.	1	9,221.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net		4			
	5	Loans and other receivables from any current or forme	er office	r. director.			
		Loans and other receivables from any current or forme trustee, key employee, creator or founder, substantial controlled entity or family member of any of these pers	contrib	utor, or 35%		-	
						5	
	6	Loans and other receivables from other disqualified pe	•	F		6	
	_	section 4958(f)(1)), and persons described in section 4		· · · · ·		_	
(A)	7	Notes and loans receivable, net		<u> </u>		7	
ě	8	Inventories for sale or use		<u> </u>	0.004	8	40.4
Assets	9	Prepaid expenses and deferred charges	l I		2,024.	9	424.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	100	20 525			
		Less: accumulated depreciation		39,535. 36,090.	4 206	10c	2 445
		Investments — publicly traded securities			4,306.	11	3,445.
	11 12	Investments – other securities. See Part IV, line 11		<u> </u>		12	
	13	Investments – other securities. See Part IV, line 11		<u> </u>		13	
	14	Intangible assets		<u> </u>		14	
	15	Other assets. See Part IV, line 11.	1,125,016.	15	1,243,383.		
	16	Total assets. Add lines 1 through 15 (must equal line 3	1,153,472.	16	1,256,473.		
		Total according to a modern to	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1,100,172.		1,200,170.
	17	Accounts payable and accrued expenses	185.	17	1,645.		
	18	Grants payable				18	
	19	Deferred revenue		 -		19	10,000.
	20	Tax-exempt bond liabilities.		 -		20	
ië.	21	Escrow or custodial account liability. Complete Part IV				21	
Liabilities	22	Loans and other payables to any current or former offickey employee, creator or founder, substantial contribute	cer, air tor, or 3	ector, trustee, 35%			
La		controlled entity or family member of any of these pers	sons			22	
	23	Secured mortgages and notes payable to unrelated thi		<u> </u>		23	
	24	Unsecured notes and loans payable to unrelated third				24	
	25	Other liabilities (including federal income tax, payables and other liabilities not included on lines 17-24). Comp	s to rela plete Pa	ated third parties, art X of Schedule D.	50,000.	25	
	26	Total liabilities. Add lines 17 through 25		-	50,185.	26	11,645.
Ø		Organizations that follow FASB ASC 958, check here		X			
ဦ		and complete lines 27, 28, 32, and 33.					
<u>=</u>	27	Net assets without donor restrictions			-26,749.	27	-3,575.
m	28	Net assets with donor restrictions		<u></u>	1,130,036.	28	1,248,403.
<u>E</u>		Organizations that do not follow FASB ASC 958, chec	k here				
Ĭ.		and complete lines 29 through 33.		1			
0 0	29	Capital stock or trust principal, or current funds		<u> </u>		29	
Set	30	Paid-in or capital surplus, or land, building, or equipme				30	
As	31	Retained earnings, endowment, accumulated income,			1 100 007	31	1 044 000
Net Assets or Fund Balance	32	Total net assets or fund balances			1,103,287.	32	1,244,828.
_	33			11L 08/23/23	1,153,472.	33	1,256,473.

Form 9	990 (2023) CITY CLUB OF PORTLAND 93-	0140220	ı	Page	12
Part					
	Check if Schedule O contains a response or note to any line in this Part XI				
1 T	Total revenue (must equal Part VIII, column (A), line 12).	1	(92,33	9.
	Total expenses (must equal Part IX, column (A), line 25)	2	•	79,19	4.
3 F	Revenue less expenses. Subtract line 2 from line 1	3		13,14	5.
4 N	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,10	03,28	7.
-	Net unrealized gains (losses) on investments	5	12	28,39	6.
	Donated services and use of facilities	6			
	nvestment expenses	7			
	Prior period adjustments	8			
9 (Other changes in net assets or fund balances (explain on Schedule O)	9			0.
С	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)).	10	1,2	44,82	8.
Part	XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII.				П
				Yes N	lo
1 A	Accounting method used to prepare the Form 990: Cash X Accrual Other				
l1 0	f the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.				
2a V	Nere the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
lt s	f "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both. Separate basis Consolidated basis Both consolidated and separate basis	d on a			
ь V	Ш		2b		X
l1	f "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat pasis, consolidated basis, or both. Separate basis Consolidated basis Both consolidated and separate basis				
	f "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?		2c		
0	f the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
3a A	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the U Guidance, 2 C.F.R. Part 200, Subpart F?	niform	3a		Χ
	f "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requor audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
BAA	TEEA0112L 08/23/23		Form	990 (20	23)

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name o	Name of the organization Employer identification number											
CIT	Y	CLUB OF PORTLAND					93-014022					
Par		Reason for Public Char						ns.				
	rga	inization is not a private founda	•			-	•					
1		A church, convention of church				170(b)((1)(A)(i).					
2		A school described in section		•								
3		A hospital or a cooperative ho	,				• •					
4		A medical research organizat	ion operated in conjur	nction with a hospital de	escribed	in sect i	ion 170(b)(1)(A)(iii). Ent	ter the hospital's				
_		name, city, and state:										
5		An organization operated for section 170(b)(1)(A)(iv). (Cor		e or university owned o	r operat	ed by a	governmental unit desc	cribed in				
6	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
7	X	X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)										
8		A community trust described	in section 170(b)(1)(A	A)(vi). (Complete Part II.)							
9	An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or											
		1										
10	An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)											
11		An organization organized an	d operated exclusively	y to test for public safet	y. See s	section	509(a)(4).					
12	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) . See section 509(a)(3) . Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.											
а		Type I. A supporting organization(s) the power to a complete Part IV, Sections A	tion operated, supervegularly appoint or el	ised, or controlled by its	roggus a	ted oraz	anization(s), typically by	aiving the supported				
b		Type II. A supporting organize management of the supportin must complete Part IV, Section	g organization vested	ntrolled in connection v in the same persons th	vith its s nat contr	upported of or ma	d organization(s), by ha anage the supported org	aving control or ganization(s). You				
С		Type III functionally integrate organization(s) (see instruction					d functionally integrate	d with, its supported				
d		Type III non-functionally inte functionally integrated. The o instructions). You must comp	rganization generally	must satisfy a distributi	connection requi	tion with rement	n its supported organiza and an attentiveness re	ation(s) that is not equirement (see				
е		Check this box if the organiza integrated, or Type III non-fur	nctionally integrated s	upporting organization.				-				
f		nter the number of supported o										
		rovide the following information ame of supported organization					(A) A					
(I) IN	arne of supported organization	(II) EIIN	(described on lines 1-10 above (see instructions))	organizat in your g docur		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)				
					Yes	No						
(A)												
(B)												
` /												
(C)												
(D)												
(E)												
Total												

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support											
	ndar year (or fiscal year nning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total				
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	229,613.	231,577.	225,230.	104,672.	73,341.	864,433.				
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.				
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.				
4	Total. Add lines 1 through 3	229,613.	231,577.	225,230.	104,672.	73,341.	864,433.				
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.				
6	Public support. Subtract line 5 from line 4.						864,433.				
Sec	tion B. Total Support										
	ndar year (or fiscal year nning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total				
7	Amounts from line 4	229,613.	231,577.	225,230.	104,672.	73,341.	864,433.				
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	6,347.	5,040.	7,158.	6,893.	9,245.	34,683.				
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0,021	3,3231	.,,2001	0,000	3,230	0.				
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						0.				
	Total support. Add lines 7 through 10						899,116.				
12	Gross receipts from related activi	ties, etc. (see inst	ructions)			12	52,524.				
13	First 5 years. If the Form 990 is f organization, check this box and	or the organization stop here	n's first, second, th	nird, fourth, or fift	h tax year as a se	ction 501(c)(3)					
Sec	tion C. Computation of Pu	blic Support P	ercentage								
	Public support percentage for 20						96.14%				
	Public support percentage from 2						91.09%				
	33-1/3% support test—2023. If the and stop here. The organization of	qualifies as a publ	icly supported org	anization			X				
b	33-1/3% support test—2022. If the and stop here. The organization	e organization did qualifies as a pub	not check a box o licly supported org	n line 13 or 16a, a ganization	and line 15 is 33-1	/3% or more, che	ck this box				
17a	10%-facts-and-circumstances te or more, and if the organization r the organization meets the facts-	neets the facts-an	d-circumstances to	est, check this bo	x and stop here.	Explain in Part VI	how				
	10%-facts-and-circumstances te or more, and if the organization r organization meets the facts-and	neets the facts-an -circumstances tes	d-circumstances to st. The organization	est, check this bo on qualifies as a p	x and stop here. ublicly supported	Explain in Part VI organization	how the				
18	Private foundation. If the organiz	ation did not chec	k a box on line 13	, 16a, 16b, 17a, c	or 17b, check this	box and see instru	uctions				

Part III

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support							
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 202	3	(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							
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
С	Add lines 7a and 7b							
	Public support. (Subtract line 7c from line 6.)							
Sec	tion B. Total Support		1	1	1			
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 202	3	(f) Total
-	Amounts from line 6							
	similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b							
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).							
	Total support. (Add lines 9, 10c, 11, and 12.)							
	First 5 years. If the Form 990 is f organization, check this box and	stop here						
	tion C. Computation of Pu							
	Public support percentage for 202	•					15	%
	Public support percentage from 2						16	%
Sec	tion D. Computation of Inv			/				
17	Investment income percentage for	•		•			17	%
	Investment income percentage fr					J.	18	%
	33-1/3% support tests—2023. If the is not more than 33-1/3%, check	this box and stop	here. The organi	zation qualifies as	a publicly suppor	ted organiza	ation	
	33-1/3% support tests—2022. If the line 18 is not more than 33-1/3%	, check this box a	nd stop here. The	organization qual	lifies as a publicly	supported of	rganizatio	1
20	Private foundation. If the organiz	ation did not ched	ck a box on line 14	4, 19a, or 19b, che	eck this box and s	ee instructio	ns	

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

Section A. All Supporting Organizations

			res	NO
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 of the property of of the proper			
2	the designation. If historic and continuing relationship, explain. Did the organization have any supported organization that does not have an IRS determination of status under section	1		
	09(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was lescribed in section 509(a)(1) or (2).			
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
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		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
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) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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).			
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		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
6	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	_	_
7	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).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes,"	,		
•	complete Part I of Schedule L (Form 990).	8		_
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined on 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.	9с		
0a	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 line 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		

BAA TEEA0404L 08/14/23 Schedule A (Form 990) 2023

Sche	edule A (Form 990) 2023 CITY CLUB OF PORTLAND 93-	0140220	P	age 5
Pai	rt IV Supporting Organizations (continued)			
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c the governing body of a supported organization?	below,		
b	A family member of a person described on line 11a above?	11b	1	
c	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations		ı	
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership or more supported organizations have the power to regularly appoint or elect at least a majority of the organization officers, 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 than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustee were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powduring the tax year.	more s		
	that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing subenefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.			
Sec	tion C. Type II Supporting Organizations		1	
			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 during the tax year also a majority of the directors or trustees of the organization's supported organization(s)? If "No," describe in Part VI how control or management of supporting organization was vested in the same persons that controlled or managed the supported organization(s).	of the		
Sec	ction D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior ta 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?	x 1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a sic 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 play in this regard.			
Sec	ction E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instructions).		
á	The organization satisfied the Activities Test. Complete line 2 below.			
ŀ	b The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
(The organization supported a governmental entity. Describe in Part VI how you supported a governmental en	tity (see instruc	tions).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
ć	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supportantials 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.	5		
	substantially all of its activities.			
ŀ	b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
á	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees o each of the supported organizations? If "Yes" or "No," provide details in Part VI.	f 3 a		
ŀ	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	of its 3b		

Sch	edule A (Form 990) 2023 CITY CLUB OF PORTLAND		93-01	40220	Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ganiza	tions		
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization	on Nov s must	r. 20, 1970 (explain in F complete Sections A th	Part VI). See nrough E.	
Sec	tion A — Adjusted Net Income		(A) Prior Year	(B) Curre (option	
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			
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Curre (optio	
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):				
	Average monthly value of securities	1a			
	Average monthly cash balances	1b			
	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 0.015 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 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sec	tion C — Distributable Amount			Curren	t Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 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 integ (see instructions).	grated T	ype III supporting orga	nization	

BAA Schedule A (Form 990) 2023

Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)		
Sec	tion D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.	6	
7	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details		
	in Part VI). See instructions.	8	
9	Distributable amount for 2023 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required — <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

BAA Schedule A (Form 990) 2023

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.)

Schedule B (Form 990)

PUBLIC DISCLOSURE COPY
Schedule of Contributors

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. 2023

OMB No. 1545-0047

	CLUB OF PORTLA	ND	93-0140220			
Organiza	tion type (check one):					
Filers of:		Section:				
Form 990	or 990-EZ	\overline{X} 501(c)(3) (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation	1			
		527 political organization				
Form 990)-PF	501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
	•	vered by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a Spe	cial Rule. See instructions.			
General I	Rule					
		ling Form 990, 990-EZ, or 990-PF that received, during the year, contributions property) from any one contributor. Complete Parts I and II. See instructions ontributions.				
Special F	Rules					
X	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.					
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions totaling \$5,000 or more during the year					
must ans	swer "Ño" on Part IV, li	n't covered by the General Rule and/or the Special Rules doesn't file Schedule ne 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its fithe filing requirements of Schedule B (Form 990).				

Name of organization Employer identification number

93-0140220 CITY CLUB OF PORTLAND Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (d) Type of contribution (c) Total contributions (a) No. Name, address, and ZIP + 4 Person Χ **Payroll** 5,000. Noncash (Complete Part II for noncash contributions.) (b) Name, address, and ZIP + 4 (d) Type of contribution (c)
Total contributions (a) No. Person 2__ **Payroll** 5,825. Noncash (Complete Part II for noncash contributions.) (a) No. (b) Name, address, and ZIP + 4 (c)
Total contributions (d) Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (b) Name, address, and ZIP + 4 (a) No. (c) Total contributions (d) Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) No. (c) Total contributions (d) Type of contribution (b) Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions.) (d) Type of contribution (a) No. (c)
Total contributions (b) Name, address, and ZIP + 4 Person **Payroll** Noncash

(Complete Part II for noncash contributions.)

CITY CLUB OF PORTLAND

Employer identification number

93-0140220

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.						
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions.)	(d) Date received			
	N/A	\$_					
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$_					
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$_					
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$_					
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$_					
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$_					
		1					

Name of organization
CITY CLUB OF PORTLAND

Employer identification number 93-0140220

Part III	or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of <i>exclusively</i> religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)						
(a) No. from	Use duplicate copies of Part III if additional s (b) Purpose of gift	c) Use of gift		(d) Description of how gift is held			
Part I	N/A						
	Tuamafawada mawa addwa	(e) Transfer of gi		alianahin af kumatanan ka kumatana			
	Transferee's name, addres	s, and ZIP + 4	Kei	ationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee			tionship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
		(e) Transfer of gift					
	Transferee's name, addres	s, and ZIP + 4	Rela	ationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	(e) Transfer of gift						
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee				

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

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

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

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

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

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

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

•	Section 501(c)(4), (5), or (6) or	rganizations: Complete Part III.			
Name	of organization			Employer identific	ation number
CI	TY CLUB OF PORTLAND)		93-014022	20
		ganization is exempt under section			on.
1		organization's direct and indirect political can of "political campaign activities."	ampaign activities in F	art IV.	
2		penditures. See instructions		غ	3
		campaign activities. See instructions			
	t I-B Complete if the o	rganization is exempt under secti	ion 501(c)(3).		
1	Enter the amount of any exci	se tax incurred by the organization under s	ection 4955	\$	0.
2	Enter the amount of any exci	ise tax incurred by organization managers ι	under section 4955	\$	0.
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for	this year?		Yes No
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
Par		rganization is exempt under secti			
1	Enter the amount directly exp	pended by the filing organization for section	527 exempt function	activities\$	5
2	Enter the amount of the filing 527 exempt function activities	g organization's funds contributed to other of s	organizations for section	on \$	<u> </u>
3	Total exempt function expendine 17b	ditures. Add lines 1 and 2. Enter here and d	on Form 1120-POL,	\$	S
4	Did the filing organization file	Form 1120-POL for this year?			Yes No
5	Enter the names, addresses, organization made payments amount of political contribution segregated fund or a political	and employer identification number (EIN) and employer identification number (EIN) and enter the amons received that were promptly and directly action committee (PAC). If additional spaces	of all section 527 polition of all section 527 polition of the filipy delivered to a separce is needed, provide	ical organizations to whing organization's funds ate political organization information in Part IV.	nich the filing . Also enter the n, such as a separate
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990) 2023

Octrica	ule 6 (1 01111 000) 2020	CITY CLUB O			93-0140	
Par	t II-A Complete if t section 501		s exempt under secti	on 501(c)(3) and file	d Form 5768 (election	on under
Α	Check if the filin	ng organization belor	ngs to an affiliated group (a	and list in Part IV each a	affiliated group member's	s name,
	address,	EIN, expenses, and	share of excess lobbying	expenditures).		
В	Check if the filing	ng organization checl	ked box A and "limited cor	ntrol" provisions apply.		
	(The term		ing Expenditures ns amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditu	ures to influence pub	lic opinion (grassroots lobb	oying)		
b	Total lobbying expenditu	ures to influence a le	gislative body (direct lobby	/ing)	484.	
С	Total lobbying expenditu	ures (add lines 1a an	d 1b)		484.	0.
d	Other exempt purpose of	expenditures			66,684.	
е	Total exempt purpose e	expenditures (add line	s 1c and 1d)		67,168.	0.
f			unt from the following tabl		13,434.	
	If the amount on line 1e, col	umn (a) or (b) is	The lobbying nontaxable	amount is		
	not over \$500,000,		20% of the amount on line 1e.			
L	over \$500,000 but not over \$1,	000,000,	\$100,000 plus 15% of the excess	over \$500,000.		
L	over \$1,000,000 but not over \$	1,500,000,	\$175,000 plus 10% of the excess	over \$1,000,000.		
	over \$1,500,000 but not over \$	17,000,000,	\$225,000 plus 5% of the excess o	ver \$1,500,000.		
L	over \$17,000,000,		\$1,000,000.			
g	Grassroots nontaxable a	amount (enter 25% o	f line 1f)		3,359.	0.
h			enter -0	La contraction de la contracti	0.	0.
i	Subtract line 1f from lin	e 1c. If zero or less,	enter -0		0.	0.
j			er line 1h or line 1i, did the			Yes No
	(So	me organizations that	4-Year Averaging Period I at made a section 501(h) e low. See the separate inst	lection do not have to c		
		Lobby	ving Expenditures During	4-Year Averaging Perio	d	
Cale	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a	Lobbying nontaxable amount	21,96	4. 35,519.	40,754.	13,434.	111,671.
b	Lobbying ceiling amount (150% of line 2a, column (e))					167,507.
С	Total lobbying expenditures	11	L.		484.	495.
d	Grassroots nontaxable amount	5,493	8,880.	10,189.	3,359.	27,919.
е	Grassroots ceiling amount (150% of line 2d, column (e))					41,879.
f	Grassroots lobbying					0

BAA Schedule C (Form 990) 2023

93-0140220

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

_		(a	a)	(b)	
For des	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed cription of the lobbying activity.	Yes	No	Am	ount	
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
	: Media advertisements?					
e	Publications, or published or broadcast statements?					
ç	, , , , , , , , , , , , , , , , , , , ,					
ł i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
j	Total. Add lines 1c through 1i					
	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501 section 501(c)(6).	(c)(5), or			
	Section 301(c)(o).				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the pri	or yea	ır?	3		

I answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year.	2b	
С	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?	4	
5	Taxable amount of lobbying and political expenditures. See instructions	5	

Part IV Supplemental Information

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

ADDITIONAL INFORMATION

CITY CLUB ENGAGES IN VOLUNTEER-DRIVEN RESEARCH INTO MATTERS OF COMMUNITY IMPORTANCE, AND THEN ADVOCATES ON BEHALF OF ITS POSITIONS. SOME OF THAT ADVOCACY INVOLVES PUBLISHING RESEARCH STUDY REPORTS, HOLDING PUBLIC FORUMS TO PRESENT RESULTS, AND OUTREACH TO POLICYMAKERS ON RECOMMENDATIONS. LOBBYING EXPENSES USUALLY COMPRISE A

PORTION OF THE COMPENSATION OF THE RESEARCH AND POLICY DIRECTOR, THE STAFF MEMBER

ADDITIONAL INFORMATION (CONTINUED)

COORDINATING THIS ACTIVITY, AND EXPENSES RELATED TO PUBLICIZING BALLOT MEASURE RECOMMENDATIONS IN THE STATE VOTERS PAMPHLET.

TEEA3204L 08/24/23

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection Employer identification number

CIT	TY CLUB OF PORTLAND			93-0140220	
Pai	rt I Organizations Maintaining Donor Advised F	unds or Oth	er Similar Fur	nds or Accounts	
	Complete if the organization answered "Yes'	" on Form 99	0, Part IV, line	e 6.	
	(a) Do	nor advised fund	ds	(b) Funds and other acco	ounts
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in writ are the organization's property, subject to the organization's exc	ing that the asse lusive legal cont	ets held in donor a	advised funds	No
6	Did the organization inform all grantees, donors, and donor advis for charitable purposes and not for the benefit of the donor or do impermissible private benefit?	sors in writing the	at grant funds car or any other purp	n be used only ose conferring	□ No
Pai	rt II Conservation Easements				
	Complete if the organization answered "Yes"	on Form 99	0, Part IV, line	e 7.	
1	Purpose(s) of conservation easements held by the organization				
	Preservation of land for public use (for example, recreation of	or education)	Preservation of	of a historically important land	d area
	Protection of natural habitat		Preservation of	of a certified historic structure	9
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualified	conservation co	ntribution in the fo	orm of a conservation easem	ent on the
	last day of the tax year.		Г		
	-			Held at the End of th	ie Tax Year
	a Total number of conservation easements.			2a	
	Total acreage restricted by conservation easements			2b	
	c Number of conservation easements on a certified historic structure.			2c	
(Number of conservation easements included on line 2c acquired a historic structure listed in the National Register	after July 25, 20	006, and not on	2d	
3	Number of conservation easements modified, transferred, releas				
Ū	tax year	ou, onto guiono	., 0. 10	, are organization daming are	
4	Number of states where property subject to conservation easeme	ent is located			
5	Does the organization have a written policy regarding the periodic	ic monitoring, in	spection, handling	g of violations,	
	and enforcement of the conservation easements it holds?			Yes	No
6	Staff and volunteer hours devoted to monitoring, inspecting, han	dling of violation	ns, and enforcing	conservation easements during	ng the year
7	Amount of expenses incurred in monitoring, inspecting, handling	of violations, a	nd enforcing cons	ervation easements during th	e year
_					
	Does each conservation easement reported on line 2d above sat and section 170(h)(4)(B)(ii)?			Yes	No
9	In Part XIII, describe how the organization reports conservation of include, if applicable, the text of the footnote to the organization conservation easements.	easements in its 's financial state	ments that describ	ense statement and balance bes the organization's accour	sheet, and nting for
Pai	Organizations Maintaining Collections of A Complete if the organization answered "Yes"	rt, Historical " on Form 99	Treasures, or 0, Part IV, line	Other Similar Assets e 8.	
1a	If the organization elected, as permitted under FASB ASC 958, r historical treasures, or other similar assets held for public exhibi- Part XIII the text of the footnote to its financial statements that d	tion, education,	or research in furt		
b	If the organization elected, as permitted under FASB ASC 958, thistorical treasures, or other similar assets held for public exhibit following amounts relating to these items.	tion, education,	or research in furt	therance of public service, pro	ort, ovide the
	(i) Revenue included on Form 990, Part VIII, line 1			\$	
	If the organization received or held works of art, historical treasu amounts required to be reported under FASB ASC 958 relating to	o these items.			wing
	Revenue included on Form 990, Part VIII, line 1				
b	Assets included in Form 990, Part X			\$	

Part III Organizations Maintain	ling Collections	of Art, Historica	i ireasures, or Ot	ner Similar Assets	s(contin	uea)	
3 Using the organization's acquisition, items (check all that apply).	accession, and oth	er records, check a	ny of the following tha	t make significant use	of its col	lection	า
a Public exhibition		d Loan or ex	change program				
b Scholarly research		e Other					
c Preservation for future generation							
4 Provide a description of the organization Part XIII.			ŭ		n		
5 During the year, did the organization to be sold to raise funds rather than	to be maintained as	s part of the organiz	orical treasures, or otheation's collection?	ner similar assets	Yes		No
Part IV Escrow and Custodia Complete if the organi Form 990, Part X, line	zation answere	d "Yes" on Forr	n 990, Part IV, Iir	ne 9, or reported a	an amoi	unt c	n
1a Is the organization an agent, trustee on Form 990, Part X?	, custodian, or othe			ssets not included	Yes		No
b If "Yes," explain the arrangement in	Part XIII and comp	lete the following ta	ble.				
					Amount		
c Beginning balance							
d Additions during the year							
e Distributions during the year				1e			
f Ending balance2a Did the organization include an amo					Yes		No
b If "Yes," explain the arrangement in				- L		_	No
b ii res, explain the arrangement in	Tart Am. Oncer ne	re ii tile explanation	i nas been provided ii	TI alt Alli		· · ·	J
Part V Endowment Funds							
Complete if the organi	zation answere	d "Yes" on Forr	n 990, Part IV, Iir	ne 10.			
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Fou	r voare	hack
1a Beginning of year balance	1,125,016.	1,156,732		878,517.			832.
b Contributions	1,123,010.	1,130,732	15,000.	070,317.	9	04,	032.
			15,000.				
c Net investment earnings, gains, and losses	146,220.	-13,504	8,655.	316,498.		20	272.
d Grants or scholarships	140,220.	13,304.	0,000.	310,490.		20,	<u> </u>
e Other expenditures for facilities							
and programs	17,427.	12,984.	12,449.	39,441.		38,	977.
f Administrative expenses	10,426.	5,228.	5,387.	4,661.		7,	610.
g End of year balance	1,243,383.	1,125,016.	1,156,732.		8		517.
2 Provide the estimated percentage of	the current year er	nd balance (line 1g,	column (a)) held as:				
a Board designated or quasi-endowme	ent 0	.08 %					
b Permanent endowment	59.58 %						
	34 [%]						
The percentages on lines 2a, 2b, an	d 2c should equal 1	00%.					
3a Are there endowment funds not in the	ne possession of the	e organization that a	re held and administe	red for the			
organization by:					Y	'es	No
(i) Unrelated organizations?					3a(i)	Χ	
(ii) Related organizations?					3a(ii)		X
b If "Yes" on line 3a(ii), are the related					3b		
4 Describe in Part XIII the intended us		on's endowment fur	nds. <u>SEE PART</u>	XIII			
Part VI Land, Buildings, and							
Complete if the organization	answered "Yes" on	Form 990, Part IV, I	ine 11a. See Form 990), Part X, line 10.			
Description of property	(a) Cost (inv	or other basis (estment)	b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Boo	ok val	ue
1a Land							
b Buildings							
c Leasehold improvements							
d Equipment			39,535.	36,090.		3,	445.
e Other							
Total. Add lines 1a through 1e. (Column (d) must equal Form	990, Part X, line 10	Ос, column (B))				445.
BAA					ule D (For		

Part VII	Investments — Other Securities Complete if the organization answered "Yes" (on Form 990 Part IV lir	N/A ne 11h See Form 990 Part X line 12	
(a) Descri	ption of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	
	Il derivatives			
(2) Closely	held equity interests			
(3) Other				
(A)				
(A) (B) (C) (D) (E)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(l)				
	n (b) must equal Form 990, Part X, line 12, column (B))			
Part VIII	Investments — Program Related Complete if the organization answered "Yes"	on Form 000 Part IV lin	N/A	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	nd-of-vear market value
(1)	(a) Beschiption of investment	(b) Book Value	(c) method of valuations cost of c	na or your market value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Colum	n (b) must equal Form 990, Part X, line 13, column (B))			
Part IX	Other Assets			
	Complete if the organization answered "Yes" (on Form 990, Part IV, III escription	<u>ne 11d. See Form 990, Part X, line 15</u>	(b) Book value
(1) BENE	FICIAL INTEREST ASSETS HELD			1,243,383.
(2)	HICHMINICI MOCLIC HELD	DI OIIIBIN		1,245,505
(3)				
(4)				
(5)				
(6)				
(7) (8)				
(9)				
(10)				
	mn (b) must equal Form 990, Part X, line 15, c	column (B))		1,243,383
Part X	Other Liabilities	,orann (2))		1,245,505
Turcx	Complete if the organization answered "Yes"	on Form 990, Part IV, lir	ne 11e or 11f. See Form 990, Part X, I	ne 25 .
1.	(a) Desc	cription of liability		(b) Book value
` ,	al income taxes			
(2)				
(3)				
(4)				
(4) (5)				
(4) (5) (6)				
(4) (5) (6) (7)				
(4) (5) (6) (7) (8)				
(4) (5) (6) (7)				
(4) (5) (6) (7) (8) (9)				
(4) (5) (6) (7) (8) (9) (10) (11)	mn (b) must equal Form 990, Part X, line 25, co	olumn (B))		

Part XI Reconciliation of Revenue per Audited Financial Statements With Reve	nue per Return N/A
Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.
1 Total revenue, gains, and other support per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a Net unrealized gains (losses) on investments	
b Donated services and use of facilities	
c Recoveries of prior year grants	
d Other (Describe in Part XIII.). 2d	
e Add lines 2a through 2d	2e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b	4c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses	N / A
Complete if the organization answered "Yes" on Form 990, Part IV, li	
	ne 12a.
Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.
Complete if the organization answered "Yes" on Form 990, Part IV, li 1 Total expenses and losses per audited financial statements	ne 12a.
Complete if the organization answered "Yes" on Form 990, Part IV, li 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	ne 12a.
Complete if the organization answered "Yes" on Form 990, Part IV, Ii 1 Total expenses and losses per audited financial statements	ne 12a.
Complete if the organization answered "Yes" on Form 990, Part IV, li 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. 2 La ne 12a.	
Complete if the organization answered "Yes" on Form 990, Part IV, li 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. 2 Donated Services and Use of facilities.	ne 12a.
Complete if the organization answered "Yes" on Form 990, Part IV, li 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments c Other losses d Other (Describe in Part XIII.).	ne 12a.
Complete if the organization answered "Yes" on Form 990, Part IV, li 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments c Other losses d Other (Describe in Part XIII.). e Add lines 2a through 2d.	ne 12a
Complete if the organization answered "Yes" on Form 990, Part IV, li 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities.	ne 12a
Complete if the organization answered "Yes" on Form 990, Part IV, li 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.). e Add lines 2a through 2d. 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4 Ab Other (Describe in Part XIII.).	ne 12a.
Complete if the organization answered "Yes" on Form 990, Part IV, li 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.). e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII.). c Add lines 4a and 4b.	ne 12a. 1 2e 3
Complete if the organization answered "Yes" on Form 990, Part IV, li 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.). e Add lines 2a through 2d. 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4 Ab Other (Describe in Part XIII.).	ne 12a. 1 2e 3

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 XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUND

THE OREGON COMMUNITY FOUNDATION HOLDS CITY CLUB'S GENERAL ENDOWMENT AND RESEACH ENDOWMENT, AND DISTRIBUTES TWO SEMI-ANNUAL PAYMENTS FROM EACH FUND DURING EACH FISCAL YEAR UNLESS SUSPENDED AT THE REQUEST OF THE BOARD OF GOVERNORS.

THE PURPOSE OF THE ENDOWMENTS IS TO PROVIDE A RELIABLE AND PERPETUAL ANNUAL INCOME STREAM IN SUPPORT OF CITY CLUB'S RESEARCH PROGRAM AND ITS GENERAL OPERATIONS.

BAA Schedule D (Form 990) 2023

SCHEDULE O (Form 990)

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 Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

CITY CLUB OF PORTLAND

Employer identification number

93-0140220

FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAREHOLDER

MEMBERS ARE VOTING MEMBERS.

FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY

ALL MEMBERS ARE EQUAL AND HAVE ONE VOTE.

FORM 990, PART VI, LINE 7B - DECISIONS OF GOVERNING BODY APPROVAL BY MEMBERS OR SHAREHOLDERS

ALL MEMBERS ARE EQUAL AND HAVE ONE VOTE. THE BYLAWS DICTATE DECISIONS THAT MUST BE APPROVED BY MEMBERS.

FORM 990, PART VI, LINE 8 - EXPLANATION OF NO CONTEMPORANEOUSLY DOCUMENTATION OF MEETINGS

THERE WAS NO COMMITTEE GRANTED THE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY IN THE CURRENT YEAR.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE TREASURER AND FINANCE COMMITTEE REVIEW THE 990 BEFORE FILING.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

ALL GOVERNORS OF THE BOARD ARE EXPECTED TO REPORT THEIR POTENTIAL CONFLICTS OF INTEREST. KNOWLEDGE OF SUCH CONFLICTS ARE REVIEWED BY THE EXECUTIVE COMMITTEE AS THEY ARISE.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT

THE BOARD OF GOVERNORS PERIODICALLY RECEIVES DATA FROM AN INDEPENDENT NON-PROFIT RESOURCE WITH REGARD TO COMPETITIVE PAY STRUCTURES FOR NON-PROFIT EXECUTIVE DIRECTORS IN OUR GEOGRAPHIC REGION. WHEN NEEDED, WE REVIEW AND UPDATE THE COMPENSATION PACKAGE FOR OUR EXECUTIVE DIRECTOR BY USING INDEPENDENT DATA AS A BENCHMARK.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.