

Form 99 Department of t Internal Revenue	BO the Treasury	UBLIC DISCLOSURE Return of Org Under section 501(c), 527, or Do not enter socia Go to www.irs.g	yanizati 4947(a)(1) of Il security nur	on Exem the Internal Re mbers on this f	pt evenue form a	From Ir e Code (exce is it may be	ICOME ept private f made public	Tax oundations)	OMB No. 1545-0047
A For the	2023 calend	ar year, or tax year beginning	JUL 1,	, 2023	and	lending J	UN 30,	2024	
B Check if applicable:		f organization ON ENERGY FUND					D Employ	er identificatio	on number
Name Doing business as					93-	1029893			
Initial return Final return/	Number	and street (or P.0. box if mail is r SW TAYLOR STREE		street address)		Room/suite 620	E Telephor (97)		2124
termin- ated	City or t	own, state or province, country,	and ZIP or for	reign postal coo	de		G Gross recei	ipts \$	3,026,892.

Amended return Applica-tion pending H(a) Is this a group return F Name and address of principal officer: VICTORIA BRYSON for subordinates? Yes X No SAME AS C ABOVE H(b) Are all subordinates included? No I Tax-exempt status: X 501(c)(3) 501(c) (527 (insert no.) 4947(a)(1) or If "No," attach a list. See instructions) J Website: HTTPS://WWW.OREGONENERGYFUND.ORG/ **H(c)** Group exemption number K Form of organization: X Corporation Trust Association Other L Year of formation: 1989 M State of legal domicile: OR Part I Summary Briefly describe the organization's mission or most significant activities: TO ASSIST NEIGHBORS IN FINANCIAL 1 CRISIS WITH THEIR ENERGY BILLS TO SUPPORT HOUSEHOLD STABILITY. 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

PORTLAND, OR 97205

overnance		CRISIS WITH THEIR ENERGY BILLS TO SUPPORT HOU	JSEHOLD STAB	LITY	•
rna	2	Check this box if the organization discontinued its operations or disposed of m	nore than 25% of its net	assets.	
ove	3	Number of voting members of the governing body (Part VI, line 1a)		3	15
G	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	15
s &	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)		5	5
ctivities	6	Total number of volunteers (estimate if necessary)		6	20
ctiv	7a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
◄	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.
			Prior Year		Current Year
ø	8	Contributions and grants (Part VIII, line 1h)	2,682,068	3.	2,934,692.
evenue	9	Program service revenue (Part VIII, line 2g)).	0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	93,037		41,991.
Я	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	15,149		22,424.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,790,254	•	2,999,107.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	480,426	5.	742,117.
	14	Benefits paid to or for members (Part IX, column (A), line 4)).	0.
ş	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	491,866	5.	618,493.
xpenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0).	0.
çpe	b	Total fundraising expenses (Part IX, column (D), line 25) 96,228.			
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	984,125		1,446,896.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,956,417	-	2,807,506.
	19	Revenue less expenses. Subtract line 18 from line 12	833,837		191,601.
or			Beginning of Current Yes		End of Year
sets alan	20	Total assets (Part X, line 16)	3,958,371		4,269,435.
t Assets or d Balances	21	Total liabilities (Part X, line 26)	239,825	5.	243,680.
-Ne	22	Net assets or fund balances. Subtract line 21 from line 20	3,718,546	5.	4,025,755.
Pa	rt II	Signature Block			

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer				Date
-	VICTORIA BRYSON, BOARD CH	AIR			
	Type or print name and title				
	Print/Type preparer's name	Preparer's signature		Date	Check PTIN
Paid	GERARD DEBLOIS				self-employed P01287653
Preparer	Firm's name MCDONALD JACOBS,	P.C.			Firm's EIN 93-0900579
Use Only	Firm's address 121 SW SALMON ST.	, STE 1100			
	PORTLAND, OR 9720	4			Phone no. (503) 227-0581
May the I	RS discuss this return with the preparer shown abo	ove? See instructions			X Yes No
LHA For	Paperwork Reduction Act Notice, see the separ	rate instructions.	332001 12-21-23		Form 990 (2023)

	n 990 (2023) OREGON ENERGY FUND 93-1029893 Page 2 rt III Statement of Program Service Accomplishments
гa	
_	
1	Briefly describe the organization's mission: TO ASSIST NEIGHBORS IN FINANCIAL CRISIS WITH THEIR ENERGY BILLS TO
	SUPPORT HOUSEHOLD STABILITY.
	SUPPORT HOUSEHOLD STABILITY.
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 \$1, 461, 015. including grants of \$742, 117.) (Revenue \$
	OREGON ENERGY FUND (THE ORGANIZATION) PARTNERED WITH LOCAL COMMUNITY
	AND SOCIAL SERVICE ORGANIZATIONS TO DELIVER ENERGY ASSISTANCE TO
	QUALIFYING HOUSEHOLDS. THE ORGANIZATION RAISES MONEY TO MAKE PAYMENTS
	DIRECTLY TO UTILITIES OR VENDORS ON BEHALF OF LOW-INCOME CUSTOMERS. THE
	ORGANIZATION ASSISTED APPROXIMATELY 2,155 HOUSEHOLDS; 4,941
	INDIVIDUALS, WHICH INCLUDES 1,585 CHILDREN, 2,527 ADULTS AND 829
	SENIORS. OF THESE INDIVIDUALS, 708 WERE DISABLED.
	THE ORGANIZATION'S FUNDS WILL BE SPENT IN ACCORDANCE WITH THEIR FISCAL
	POLICY DETAILED IN SCHEDULE O.
4b	(Code:) (Expenses \$1,097,819. including grants of \$) (Revenue \$)
	PARTNERED WITH NW NATURAL FOR AN ENERGY RETRO-FIT PROJECT INVOLVING
	UPGRADES TO HVAC, BUILDING MANAGEMENT SYSTEM, AND ROOFING.
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
14	Other program services (Describe on Schedule O)
4d	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 2,558,834.
	Form 990 (2023
32002	SEE SCHEDULE O FOR CONTINUATION(S)
	2
10	012 781409 7028 2023.04030 OREGON ENERGY FUND 7028

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 Form 990 (2023)
 OREGON
 ENERGY
 FUND

 Part IV
 Checklist of Required Schedules
 Fund
 F

			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	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		_X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			37
_	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			v
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		v
_	Schedule D, Part III	8		<u> </u>
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?	-		v
	If "Yes," complete Schedule D, Part IV	9		<u>X</u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10		v
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		x	
L	Part VI	11a	~	
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	446		х
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
C	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	11c		х
Ч	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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	110		- 23
u		11d		х
۵	Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i> Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e	x	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	x	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
124	Schedule D, Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
-	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		Х
	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? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	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		Х
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 OREGON
 ENERGY
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 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	Х	<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		37	
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		<u>x</u>
	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		
	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			v
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u>x</u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	0.51		- v
~~	Schedule L, Part I	25b		X X
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%			x
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
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	07		x
20	entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		
28				
~	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
a		28a		x
h	"Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		<u> </u>
Ŭ	"Yes," complete Schedule L, Part IV	28c		x
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? If "Yes," complete Schedule M	30		x
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? If "Yes," complete	-		
	Schedule N, Part II	32		x
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		X
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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
Dar	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 1			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	4-		
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Form	990 (2023) OREGON ENERGY FUND t V Statements Regarding Other IRS Filings and Tax Compliance (continued)	93-1029	893	P	age 5
				Yes	No
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			Tes	NO
Zu	filed for the calendar year ending with or within the year covered by this return	2a 5			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return		2b	х	
			3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a				
	financial account in a foreign country (such as a bank account, securities account, or other financial a		4a		Х
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	counts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transac		5b		Х
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				
		.	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribution				
	were not tax deductible?		6b		
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 ser	vices provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Х	
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa				
	to file Form 8282?		7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the			
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	1		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	4		
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b	-		
	Enter the amount of reserves on hand	13c			v
14a		-	14a		<u>X</u>
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner		45		v
	excess parachute payment(s) during the year?		15		X
40	If "Yes," see the instructions and file Form 4720, Schedule N.		10		v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		X
47	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any active two under costion 4051, 4052, or 40522		4-		
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
000000	If "Yes," complete Form 6069.		Eorm	990	(2022)
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Form 990	(2023)
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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	

Х	

Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	15			
	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 0.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	any other			
	officer, director, trustee, or key employee?			2		Х
3	Did the organization delegate control over management duties customarily performed by or under the	e direc	supervision			
	of officers, directors, trustees, or key employees to a management company or other person?			3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 99	90 wa	s filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's asse	ets?		5		Х
6	Did the organization have members or stockholders?			6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point	one or			
	more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ockho	lders, or			
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	-	0			
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read					
_	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)			
					Yes	No
	Did the organization have local chapters, branches, or affiliates?			10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such cha	apters	, affiliates,			
	· · · · · · · · ·			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	/ befor	e filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.				77	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	,			77	
	on Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	X X	
14	Did the organization have a written document retention and destruction policy?			14	~	
15	Did the process for determining compensation of the following persons include a review and approval	l by in	dependent			
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			45-	Х	
a	The organization's CEO, Executive Director, or top management official			158		Х
b	Other officers or key employees of the organization			15b		
40-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
Ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem			16-		х
۲	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat			16a		- 23
D		-	-			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ			16b		
Sec	exempt status with respect to such arrangements?			100		
<u>17</u>	List the states with which a copy of this Form 990 is required to be filed OR					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	nd 000	T (section 501(c)(3)s	only)	availat	
10	for public inspection. Indicate how you made these available. Check all that apply.	10 000	1 (3001011 301(0)(0)3	Offig)	avanak	510
	X Own website Another's website X Upon request Other (explain		hadula ()			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, col		,	finan	ial	
	statements available to the public during the tax year.		and policy, and	man		
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and	l records			
_0	MARIETTA DONEY - (971) 286-2124					
	1020 SW TAYLOR STREET, 620, PORTLAND, OR 97205					
332004	12-21-23			Form	990	(2023)
002000	ĥ			1 0111		(2020)

Form 990 (2023)	OREGON ENERGY FUND	93-1029893 Page	e 7						
Part VII Compens	ation of Officers, Directors, Trustees, Key Emplo	yees, Highest Compensated							
Employees, and Independent Contractors									
Check if Sch	edule O contains a response or note to any line in this Part VII								
Section A. Officers, Di	Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
•	or all persons required to be listed. Report compensation for the nization's current officers, directors, trustees (whether individual		ar.						

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.

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

(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	Position (do not check more than one					Reportable	Reportable	Estimated	
	hours per	box	box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week		cer an	id a d	irecto	r/trus [.]	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related	ustee	trust		e	bens		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tr	tional		n ploye	t com	_	1099-NEC)		and related organizations
	line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) JESSE B. ALLBRITTON	40.00	-	-	0	×	Ξœ	ш			
EXECUTIVE DIRECTOR				х				186,585.	Ο.	11,705.
(2) MARIETTA DONEY	40.00									
DEPUTY DIRECTOR						x		119,731.	Ο.	17,069.
(3) TORI BRYSON	0.50									
PRESIDENT		х		х				0.	0.	0.
(4) SARAH SIMMONS	0.50									
VICE PRESIDENT		х		x				0.	Ο.	0.
(5) ANNE WAHR	0.50									
SECRETARY		х		х				0.	Ο.	0.
(6) KATHERINE ESTRADA	0.50									
TREASURER (1/31/24 - CURRENT)		х		х				0.	Ο.	0.
(7) SAUL CHAVEZ-HERNANDEZ	0.30									
DIRECTOR (1/31/24 - CURRENT)		Х						0.	Ο.	0.
(8) MARISA DECRISTOFORO	0.30									
DIRECTOR		Х						0.	Ο.	0.
(9) DAVID DI MATTEO	0.30									
DIRECTOR		Х						0.	0.	0.
(10) BOB GRAVELY	0.30									
DIRECTOR		Х						0.	Ο.	0.
(11) PAUL KOEHLER	0.30									
DIRECTOR		Х						0.	Ο.	0.
(12) BILLI KOHLER	0.30									
DIRECTOR		Х						0.	Ο.	0.
(13) ELOISA MARISCAL	0.30									
DIRECTOR		Х						0.	Ο.	0.
(14) DARCY NOXON	0.30									
DIRECTOR		Х						0.	Ο.	0.
(15) CHUKWEMEKA "EMEKA" ONYIA	0.30									
DIRECTOR (12/1/23 - 4/22/24)		Х						0.	0.	0.
(16) TYLER RICHARDSON	0.30									
DIRECTOR (12/1/23 - 2/1/24)		Х						0.	0.	0.
(17) MIGUEL SANTOS	0.30									
TREASURER (12/1/23 - 7/26/23)		Х						0.	0.	0.
332007 12-21-23										Form 990 (2023)

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332007 12-21-23

Form **990** (2023)

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Form 990 (2023) OREGON ENERGY FUND 93-1029893 Page 8									Page 8			
Part VII Section A. Officers, Directors, True	stees, Key Emp	ploy	ees,			ghes	t C	ompensated Employee	s (continued)			
(A) Name and title	(B) Average hours per week	box	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			than o s both	an	(D) Reportable compensation	Reportable Reportable compensation			ated at of
	(list any by the			organizations (W-2/1099-MIS 1099-NEC)		othe compens from t organiza and rela organiza	sation the ation ated					
(18) JORDAN SCHOONOVER	0.30							0		_		
DIRECTOR	0.30	Х						0.		0.		0.
(19) CHARITY SPIRES DIRECTOR	0.30	х						0.		0.		0.
(20) ADAM LOWNEY	0.50											
IMMEDIATE PAST PRESIDENT		х						0.		0.		0.
1b Subtotal								306,316.		0.	28,	774.
c Total from continuation sheets to Part V	II, Section A							0.		0.		0.
d Total (add lines 1b and 1c)								306,316.		0.	28,	774.
2 Total number of individuals (including but i compensation from the organization	iot innited to th	ose	liste	u ac	ove	9 WH	ore	eceived more than \$100,	ooo or reportable			2
											Yes	s No
3 Did the organization list any former officer			•	•	-		Ŭ					x
line 1a? If "Yes," complete Schedule J for sFor any individual listed on line 1a, is the s											3	
and related organizations greater than \$15										[4 X	
5 Did any person listed on line 1a receive or	,		'									
rendered to the organization? <i>If "Yes." cor</i>	nplete Schedule	e J fo	or sl	ıch ı	oers	on .			<u></u>		5	X
Section B. Independent Contractors 1 Complete this table for your five highest contractors	-	-								ensat	ion from	
the organization. Report compensation for (A)	the calendar ye	ear e	enair	ig w	ith c	or wi	<u>nin</u>	i the organization's tax y	ear.		(C)	
Name and business	address							Description of s	ervices	С	ompensati	ion
BURCH ENERGY SERVICES LLCENERGY RETRO-FIT6130 NE 78TH CT, PORTLAND, OR 97218PROJECT1,034,004								004.				
2 Total number of independent contractors (•	ot lin	nitec	d to t	thos 1		ted	above) who received mo	ore than			
\$100,000 of compensation from the organ	IZATION				1	L					Form 990	(2023)

			OREGON ENERGY	FUND			93-1029	893 Page 9
Pa	rt V	111	Statement of Revenue					
			Check if Schedule O contains a response	or note to any lin	e 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
ις N	1	а	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	-		Membership dues 1b					
, G			Fundraising events 1c	26,350.				
àifts ar A			Related organizations 1d					
s, G milå			Government grants (contributions) 1e					
ion		f	All other contributions, gifts, grants, and					
but the			similar amounts not included above If 2,	908,342.				
d O		g	Noncash contributions included in lines 1a-1f	19,950.				
an Co		h	Total. Add lines 1a-1f		2,934,692.			
				Business Code				
e	2	а						
ervi Je		b						
n Sí		С						
jran Rev		d						
Program Service Revenue		e						
ш			All other program service revenue					
	3	g	Total. Add lines 2a-2f Investment income (including dividends, intere					
	3		other similar amounts)		41,991.			41,991.
	4		Income from investment of tax-exempt bond p					
	5		Royalties					
	Ŭ		(i) Real	(ii) Personal				
	6	а	Gross rents 6a					
			Less: rental expenses 6b					
		с	Rental income or (loss) 6c					
		d	Net rental income or (loss)					
	7	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a					
		b	Less: cost or other basis					
venue			and sales expenses 7b					
			Gain or (loss)					
r Re			Net gain or (loss)	1				
Other Re	8	a	Gross income from fundraising events (not including \$ 26,350. of contributions reported on line 1c). See					
			Part IV, line 18	50,209.				
		b	Less: direct expenses 8b					
			Net income or (loss) from fundraising events		22,424.			22,424.
	9		Gross income from gaming activities. See					
			Part IV, line 19 9a					
			Less: direct expenses9b					
		с	Net income or (loss) from gaming activities					
	10	а	Gross sales of inventory, less returns					
			and allowances 10a					
			Less: cost of goods sold10b					
		С	Net income or (loss) from sales of inventory					
sn		-		Business Code				
leoi	11							
evenue		b c						
Miscellaneous Revenue			All other revenue					
Σ			Total. Add lines 11a-11d					
	12	-	Total revenue. See instructions		2,999,107.	0.	0.	64,415.
33200		21-:			•	•	•	Form 990 (2023)

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OREGON ENERGY FUND

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Total expenses Program service expenses Management and general expenses 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 742,117. 742,117. 742,117. 3 Grants and other assistance to domestic individuals. See Part IV, line 21 742,117. 742,117. 742,117. 3 Grants and other assistance to domestic organizations individuals. See Part IV, line 21 742,117. 742,117. 742,117. 4 Benefits paid to or for members. 5 Compensation of unref officers, directors, trustees, and key employees 204,974. 145,532. 30,746. 6 Compensation ot included above to disgualified persons (as defined under section 4958(r(3)(8)) 328,095. 232,948. 49,214. 8 Pension plan accruals and contributions (include section 4958(r(3)(8)) 30,312. 21,521. 4,547. 9 Other employee benefits 30,312. 21,521. 4,547. 9 Anagement 9 9 6,105. 1,290. 9 Accounting 16,200. 11,502. 2,430. 1 Legal 16,200. 11,502. 2,430. 1 Lobolying 19,571. 19,571. 19,571. 9				4.4.3	Check if Schedule O contains a respon
and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, trustees, and key employees 6 Compensation of current officers, trustees, and key employees 7 Other salaries and wages 9 Other salaries and wages 9 Other employee benefits 9 Other employee benefits 9 Aryoli taxes 4 Logal c Accounting 1 Lobbying 9 Other. (If line 11g amount exceeds 10% of line 25, ortum (A), amount, list line 11g expenses on Schol) 1 Advertising and promotion 1 Cocupancy 1 Office expenses 1 Order expenses 1 Order expenses 1 Office expenses 1 Ordige and promotion 1 Rey office and the advert of call and atter to penses 1 Ordige expenses 1 Ordi	(D) Fundraising expenses	Management and		(A) Total expenses	· · ·
2 Grants and other assistance to domestic individuals. See Part IV, line 22 742,117. 742,117. 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 742,117. 742,117. 4 Benefits paid to of or members 204,974. 145,532. 30,746. 5 Compensation on tinclude above to disguilfied persons (as defined under section 4958(r)(1)) and persons (as defined under section 4958(r)(3)(8) 328,095. 232,948. 49,214. 6 Compensation not included above to disguilfied persons (as defined under section 4958(r)(3)(8) 328,095. 232,948. 49,214. 7 Other salaries and wages 30,312. 21,521. 4,547. 9 Other salaries (nonemployees): a Management 30,312. 21,521. 4,547. 9 Other exploses (nonemployees): a Management fees 16,200. 11,502. 2,430. 10 Debyrig 16,200. 11,502. 2,430. 12 Advertising and promotion 126,198. 109,329. 23,097. 13 Office expenses 126,198. 109,329. 23,097. 14 Information techonlogy 126,198. 109,329					- -
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above to disqualified persons (as defined under section 4958()(11)) and persons described in section 4958()(3)(8) 7 Other salaries and wages 8 Pension plan acruals and contributions (include section 4958()(3)(8) 9 Other salaries (nonemployees): and Management b Legal c Accounting d Lobying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g anount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) 12 Advertising and promotion 13 Office expenses 14 Forestion technology 15 Reyments to farally on entirely expenses on tocvered above, (List mixelpanse) expenses on tocvered above, (List			742,117.	742,117.	Grants and other assistance to domestic
4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(8) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 40403(b) employee contributions) 9 Other employee benefits 10 Payrolit taxes 4 6, 513. 9 Other employee benefits 11 Fees for services (nonemployees): a Management b Legal c Accounting d Lobbying e Protessional fundraising services. See Part IV, line 17 f Investment management fees 9 Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) 12 Advertising and promotion 13 Occupancy 14 Information technology 15 Royaties 16 Action, appletion, and amortization 17 Travel 10 S28.					Grants and other assistance to foreign organizations, foreign governments, and foreign
5 Compensation of current officers, directors, trustees, and key employees 204,974. 145,532. 30,746. 6 Compensation not included above to disqualified persons (as defined under section 4958(c)(3)(B) 204,974. 145,532. 30,746. 7 Other salaries and wages 204,974. 145,532. 30,746. 8 Pension plan accruals and contributions (include section 4058(c)(3)(B) 328,095. 232,948. 49,214. 9 Other salaries and wages 30,312. 21,521. 4,547. 9 Other employee benefits 30,312. 21,521. 4,547. 10 Payroll taxes 46,513. 33,024. 6,977. 11 Fees for services (nonemployees): a Management 16,200. 11,502. 2,430. 11 Fees for services (nonemployees): a Management fees 19,571. 19,571. 12 Advertising and promotion 16,200. 11,459. 1,036. 219. 12 Advertising and promotion 26,583. 18,874. 3,987. 13 Otfice expenses 126,198. 109,329. 23,097. 14 Information technology <td></td> <td></td> <td></td> <td></td> <td></td>					
6 Compensation not included above to disqualified persons (as defined under section 4958(r)(1)) and persons described in section 4958(r)(1)) and persons described in section 4958(r)(3)(8) 328,095. 232,948. 49,214. 7 Other salaries and wages 328,095. 232,948. 49,214. 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 8,599. 6,105. 1,290. 9 Other employee benefits 30,312. 21,521. 4,547. 10 Payroll taxes 46,513. 33,024. 6,977. 11 Fees for services (nonemployees): a Management - - admanagement - - - - - b Legal - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -	28,696	30,746.	145,532.	204,974.	Compensation of current officers, directors,
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 8 5.99. 6 1.05. 1,290. 9 Other employee benefits 30,312. 21,521. 4,547. 10 Payroll taxes 46,513. 33,024. 6,977. 11 Fees for services (nonemployees): a 46,513. 33,024. 6,977. a Legal - - - - c Accounting 16,200. 11,502. 2,430. d Lobbying - - - - - g Other (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) 12,459. 1,036. 219. 126,198. 109,329. 23,097. 12 Advertising and promotion 126,198. 109,329. 23,097. 126,198. 109,329. 23,097. 14 Information technology - - - - - - - - - - - - - - - - - - - - -					Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and
section 401(k) and 403(b) employer contributions) 8,599. 6,105. 1,290. 9 Other employee benefits 30,312. 21,521. 4,547. 10 Payroll taxes 46,513. 33,024. 6,977. 11 Fees for services (nonemployees): 46,513. 33,024. 6,977. 11 Fees for services (nonemployees): 16,200. 11,502. 2,430. 12 Adcounting 16,200. 11,502. 2,430. 13 Office stpenses 19,571. 19,571. 19,571. 14 Information technology 126,198. 109,329. 23,097. 14 Information technology 47,384. 33,642. 7,108. 19 Conferences, conventions, and meetings 6,451. 4,580. 968. 19 Conferences, conventions, and meetings 20 124. 113. 2,920. 617. 21 Payments to affiliates 28. 588. 124. 123. 124. 113. 2,920. 617. 22 Depreciation, depletion, and amortization 828. 588. 124. 617. </td <td>45,933</td> <td>49,214.</td> <td>232,948.</td> <td>328,095.</td> <td>Other salaries and wages</td>	45,933	49,214.	232,948.	328,095.	Other salaries and wages
10 Payroll taxes 46,513. 33,024. 6,977. 11 Fees for services (nonemployees): a Management 1 b Legal 16,200. 11,502. 2,430. c Accounting 16,200. 11,502. 2,430. d Lobbying 16,200. 11,502. 2,430. e Professional fundraising services. See Part IV, line 17 19,571. 19,571. 19,571. g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) 1,459. 1,036. 219. 12 Advertising and promotion 26,583. 18,874. 3,987. 13 Office expenses 126,198. 109,329. 23,097. 14 Information technology 47,384. 33,642. 7,108. 15 Royalties 6,451. 4,580. 968. 16 Conferences, conventions, and meetings 6,451. 4,580. 968. 18 Payments to affiliates 828. 588. 124. 19 Other expenses not covered above. (List miscellaneous expenses on line 24. If line 24 emount e					
10 Payroll taxes 46,513. 33,024. 6,977. 11 Fees for services (nonemployees): a Management 1 b Legal 16,200. 11,502. 2,430. c Accounting 16,200. 11,502. 2,430. d Lobbying 16,200. 11,502. 2,430. e Professional fundraising services. See Part IV, line 17 19,571. 19,571. 19,571. g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) 1,459. 1,036. 219. 12 Advertising and promotion 26,583. 18,874. 3,987. 13 Office expenses 126,198. 109,329. 23,097. 14 Information technology 47,384. 33,642. 7,108. 15 Royalties 6,451. 4,580. 968. 16 Conferences, conventions, and meetings 6,451. 4,580. 968. 18 Payments to affiliates 828. 588. 124. 19 Other expenses not covered above. (List miscellaneous expenses on line 24. If line 24 emount e	1,204	1,290.	6,105.	8,599.	section 401(k) and 403(b) employer contributions)
11 Fees for services (nonemployees): a Management b Legal c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) 12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royalties 16 Occupancy 17 Travel 19 Conferences, conventions, and meetings 20 Interest 21 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses on line 24e. If ine 24 amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule (A	1,204 4,244 6,512	4,547.	21,521.	30,312.	Other employee benefits
a Management b Legal c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0L) 12 Advertising and promotion 13 Office expenses 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses on Schedule (L), amount, list line 24e expenses on Schedule (L), amount, list line 24e expenses on Schedule (L)	6,512	6,977.	33,024.	46,513.	Payroll taxes
b Legal 16,200.111,502.2,430. c Accounting 16,200.11,502.2,430. d Lobbying 19,571. e Professional fundraising services. See Part IV, line 17 19,571. f Investment management fees 19,571. g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) 1,459.1,036.219. 12 Advertising and promotion 26,583.18,874.3,987. 13 Office expenses 126,198.109,329.23,097. 14 Information technology 47,384.33,642.7,108. 15 Royalties 6,451.4,580.968. 16 Occupancy 47,384.33,642.7,108. 17 Travel 968. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 968. 19 Conferences, conventions, and meetings 1 10 Interest 2 21 Payments to affiliates 828.588.1244. 22 Depreciation, depletion, and amortization 828.588.1244. 23 Insurance 4,113.2,920.617. 24 Other expenses. Itemize expenses on Schedule 0.) 617.					
c Accounting 16,200. 11,502. 2,430. d Lobbying Professional fundraising services. See Part IV, line 17 19,571. 19,571. g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) 1,459. 1,036. 219. 12 Advertising and promotion 26,583. 18,874. 3,987. 126,198. 109,329. 23,097. 14 Information technology 1 126,198. 109,329. 23,097. 1.66,451. 4,580. 968. 17 Travel 47,384. 33,642. 7,108. 6,451. 4,580. 968. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 1 124,580. 968. 19 Conferences, conventions, and meetings 1 1 124,580. 968. 10 Interest 2 2 2 588. 124. 21 Payments to affiliates 2 2 617. 22 Depreciation, depletion, and amortization 828. 588. 124. 31 Insurance 4,113. 2,920. 617. 41 inite 24e expenses on Schedule 0.) 2 617.					Management
d Lobbying		- 422	11 500	1.6 000	
eProfessional fundraising services. See Part IV, line 17fInvestment management feesgOther. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.)12Advertising and promotion13Office expenses14Information technology15Royalties16Occupancy17Travel18Payments of travel or entertainment expenses for any federal, state, or local public officials19Conferences, conventions, and meetings10Interest11Payments to affiliates12Depreciation, depletion, and amortization13Insurance14Other expenses. Itemize expenses not covered above, (List miscellaneous expenses on Schedule 0.)12Advertising expenses on Schedule 0.)	2,268	2,430.	11,502.	16,200.	
f Investment management fees 19,571. 19,571. g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) 1,459. 1,036. 219. 12 Advertising and promotion 26,583. 18,874. 3,987. 13 Office expenses 126,198. 109,329. 23,097. 14 Information technology 47,384. 33,642. 7,108. 16 Occupancy 47,384. 33,642. 7,108. 17 Travel 6,451. 4,580. 968. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 124. 124. 19 Conferences, conventions, and meetings 124. 124. 19 Payments to affiliates 288. 588. 124. 19 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If ine 24e amount exceeds 10% of line 25, column (A), amount (ist line 24e expenses on Schedule 0.) 4,113. 2,920. 617.					
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) 1,459. 1,036. 219. 12 Advertising and promotion 26,583. 18,874. 3,987. 13 Office expenses 126,198. 109,329. 23,097. 14 Information technology 126,198. 109,329. 23,097. 14 Information technology 47,384. 33,642. 7,108. 16 Occupancy 47,384. 33,642. 7,108. 17 Travel 6,451. 4,580. 968. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 1 1 19 Conferences, conventions, and meetings 1 1 1 20 Interest 1 1 2,920. 617. 21 Payments to affiliates 828. 588. 124. 22 Depreciation, depletion, and amortization 828. 588. 124. 23 Insurance 4,113. 2,920. 617. 24 Other expenses. Itemize expenses on line 24 If above. (List miscellaneous expenses on li		10 551		10 551	
column (A), amount, list line 11g expenses on Sch 0.) 1,459. 1,036. 219. Advertising and promotion 26,583. 18,874. 3,987. 13 Office expenses 126,198. 109,329. 23,097. 14 Information technology 1 47,384. 33,642. 7,108. 16 Occupancy 47,384. 33,642. 7,108. 17 Travel 6,451. 4,580. 968. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 6 968. 19 Conferences, conventions, and meetings 1 1 11 Payments to affiliates 2 2 988. 124. 12 Payments to affiliates 4,113. 2,920. 617. 12 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 0.) 4,113. 2,920. 617.		19,571.		19,571.	
13 Office expenses 126,198. 109,329. 23,097. 14 Information technology 47,384. 33,642. 7,108. 15 Royalties 6,451. 4,580. 968. 16 Occupancy 47,384. 33,642. 7,108. 17 Travel 6,451. 4,580. 968. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 6,451. 4,580. 968. 19 Conferences, conventions, and meetings 10 10 124. 124. 20 Interest 20 Depreciation, depletion, and amortization 828. 588. 124. 21 Payments to affiliates 20. 617. 4,113. 2,920. 617. 22 Depreciation, depletion, and amortization 828. 588. 124. 23 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24. 4,113. 2,920. 617. 24 Other expenses on Schedule 0.) 0. 0. 0. 0.	204	21.0	1 020	1 450	
13 Office expenses 126,198. 109,329. 23,097. 14 Information technology 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	204	219.	10 074	1,459.	
14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e, If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)	204 3,722 -6,228		100 220	20,000	
15 Royalties 47,384.33,642.7,108. 16 Occupancy 6,451.4,580.968. 17 Travel 6,451.4,580.968. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 6 19 Conferences, conventions, and meetings 10 20 Interest 10 21 Payments to affiliates 10 22 Depreciation, depletion, and amortization 828.588.124. 23 Insurance 4,113.2,920.617. 24 Other expenses. Itemize expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) 10	-0,220	23,097.	109,329.	120,190.	
16 Occupancy 47,384. 33,642. 7,108. 17 Travel 6,451. 4,580. 968. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 6,451. 4,580. 968. 19 Conferences, conventions, and meetings 10 10 10 10 20 Interest 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10					
17 Travel 6,451. 4,580. 968. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 6 451. 4,580. 968. 19 Conferences, conventions, and meetings 0 0 0 0 20 Interest 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 </td <td>6,634</td> <td>7 108</td> <td>33 642</td> <td>17 381</td> <td></td>	6,634	7 108	33 642	17 381	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)	903	968	1 580	6 /51	
for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)	505		±,5001	0,451.	
19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)					
20 Interest					· · · · · · · · · · · · · · · · · · ·
Payments to affiliates 828. 588. 124. Depreciation, depletion, and amortization 828. 588. 124. Insurance 4,113. 2,920. 617. 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 0.) Image: Column (A) amount (A) amount (A) amount (A) amount (A) amount (A) amount (A)					-
22 Depreciation, depletion, and amortization 828. 588. 124. 23 Insurance 4,113. 2,920. 617. 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) 4.113. 2.4.					F
23 Insurance 4,113. 2,920. 617. 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) 4,113. 2,920. 617.	116	124.	588.	828.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)	576				
					Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),
b PROGRAM FEES 89,967. 89,967.			89,967.	89,967.	PROGRAM FEES
c					
d	-				
e All other expenses 10,323. 7,330. 1,549.	1,444	1,549.			All other expenses
25 Total functional expenses. Add lines 1 through 24e 2,807,506. 2,558,834. 152,444.	96,228	152,444.	2,558,834.	2,807,506.	Total functional expenses. Add lines 1 through 24e
26 Joint costs. Complete this line only if the organization					
reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.					

332010 12-21-23

Check here

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

7028___1

Form 990 (2023) OREGON ENERGY FUND Part X Balance Sheet

93-1029893 Page 11

		Check if Schedule O contains a response or note	to anv lin	e in this Part X			
					(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			2,159,356.	1	2,365,367.
	2	Savings and temporary cash investments	251,237.	2	254,968.		
	3	Pledges and grants receivable, net		19,652.	3	29,334.	
	4	Accounts receivable, net			4		
	5	Loans and other receivables from any current or for					
		trustee, key employee, creator or founder, substar					
		controlled entity or family member of any of these	persons			5	
	6	Loans and other receivables from other disqualifie					
		under section 4958(f)(1)), and persons described ir		6			
s	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9				26,770.	9	24,072.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	101,842.			
	b	Less: accumulated depreciation	10b	100,924.	996.	10c	918.
	11	Investments - publicly traded securities			1,378,724.	11	1,513,678.
	12	Investments - other securities. See Part IV, line 11				12	
	13	Investments - program-related. See Part IV, line 11	l			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			121,636.	15	81,098.
	16	Total assets. Add lines 1 through 15 (must equal			3,958,371.	16	4,269,435.
	17	Accounts payable and accrued expenses			99,041.	17	160,139.
	18	Grants payable		18			
	19	Deferred revenue			17,300.	19	0.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Pa				21	
es	22	Loans and other payables to any current or former					
Liabilities		trustee, key employee, creator or founder, substar		ibutor, or 35%			
lab.		controlled entity or family member of any of these				22	
-	23	Secured mortgages and notes payable to unrelate		·····		23	
	24	Unsecured notes and loans payable to unrelated t				24	
	25	Other liabilities (including federal income tax, paya					
		parties, and other liabilities not included on lines 1			123,484.	05	83,541.
	06	of Schedule D		·····	239,825.	25 26	243,680.
	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check	k horo	X	255,025.	20	245,000.
ŝ		and complete lines 27, 28, 32, and 33.	K nere				
nce	27	Net assets without donor restrictions			1,778,190.	27	2,022,643.
ala	28	Net assets with donor restrictions			1,940,356.	28	2,003,112.
Б	20	Organizations that do not follow FASB ASC 958			1,540,550.	20	2,003,112.
Fun		and complete lines 29 through 33.					
p	29	Capital stock or trust principal, or current funds			29		
ets	30	Paid-in or capital surplus, or land, building, or equi				30	
Åss	31	Retained earnings, endowment, accumulated inco				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			3,718,546.	32	4,025,755.
Z	33	Total liabilities and net assets/fund balances			3,958,371.	33	4,269,435.
							Form 990 (2023)

Form	1990 (2023) OREGON ENERGY FUND	93-	-1029893	Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,999),1	07.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,807	7,5	06.
3	Revenue less expenses. Subtract line 2 from line 1	3	191	.,6	01.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,718	3,5	46.
5	Net unrealized gains (losses) on investments	5	115	5,6	08.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	4,025	5,7	<u>55.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		<u>2</u> c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule C).		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			000	

Form **990** (2023)

332012 12-21-23

SCHEDULE A	١
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Department of the Treasury Internal Revenue Service

(Form 990)

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
2023
Open to Public Inspection

Name of the organization

Nam	Name of the organization Employer identification number										
D.			ON ENERGY I						3-1029893		
Par		Reason for Public (ee instruction	S.			
	organ	ization is not a private found	-		•						
1		A church, convention of chu				n 170(b)(1	l)(A)(i).				
2		A school described in section									
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4		A medical research organize	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,		
- (city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
5		•		lege or university owned	or operation	ed by a go	ivernmental u	nit describe	a in		
c		section 170(b)(1)(A)(iv). (C					()				
6 7	X	A federal, state, or local gov	-						while described is		
7	Δ	An organization that norma	•	mai part of its support in	ion a gove	ernmental		ie general p	Sublic described in		
8		section 170(b)(1)(A)(vi). (C A community trust describe		1)(A)(vi) (Complete Par	+ 11 \						
9		An agricultural research org				ad in coniu	inction with a	land-grant	college		
5		or university or a non-land-g				-		-	-		
		university:	fram conogo or agrici			lame, eny	, and otato of	che conoge			
10		An organization that norma	Ilv receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns. membersh	ip fees, and	d aross receipts from		
		activities related to its exem					-	•	•		
		income and unrelated busir							-		
		See section 509(a)(2). (Cor		. ,			, .				
11		An organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50)9(a)(4).				
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform tl	ne functio	ns of, or to ca	rry out the	purposes of one or		
		more publicly supported or	ganizations describe	d in section 509(a)(1) c	or section &	509(a)(2).	See section &	509(a)(3). (Check the box on		
		lines 12a through 12d that	describes the type of	f supporting organizatior	n and com	olete lines	12e, 12f, and	12g.			
а		Type I. A supporting orga	anization operated, su	upervised, or controlled	by its supp	orted org	anization(s), ty	pically by	giving		
		the supported organization	on(s) the power to reg	gularly appoint or elect a	majority o	f the direc	tors or trustee	es of the su	ipporting		
		organization. You must o	complete Part IV, Se	ctions A and B.							
b		Type II. A supporting org	anization supervised	or controlled in connect	tion with its	s supporte	ed organizatio	n(s), by hav	ring		
		control or management o			ame perso	ns that co	ntrol or manag	ge the supp	ported		
		organization(s). You mus	-								
с		Type III functionally inte						ly integrate	d with,		
	_	its supported organization	.,.,,	-							
d		J Type III non-functionally	•					°.			
		that is not functionally int			•		-	an attentiv	eness		
•		requirement (see instructi	-	-							
е		Check this box if the orga functionally integrated, or					турет, туре	п, туре п			
f	Ente	er the number of supported of		, , , , , , , , , , , , , , , , , , , ,	ng organiz	ation.					
a		vide the following information	•	d organization(s).							
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of	monetary	(vi) Amount of other		
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	structions)	support (see instructions)		
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.)

Sec	ction A. Public Support						-
Cale	ndar year (or fiscal year beginning 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.")	1428901.	1599958.	1608355.	2682068.	2934692.	10253974.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1428901.	1599958.	1608355.	2682068.	2934692.	10253974.
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)						
6	Public support. Subtract line 5 from line 4.						10253974.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	1428901.	1599958.	1608355.	2682068.	2934692.	10253974.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	27,201.	19,883.	25,004.	28,825.	41,991.	142,904.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on					22,424.	22,424.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	128,500.	228,268.	237,765.	223,786.	155,150.	973,469.
11	Total support. Add lines 7 through 10						11392771.
12	Gross receipts from related activities,	etc. (see instructio	ons)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third, t	fourth, or fifth tax y	vear as a section 5	01(c)(3)	
	organization, check this box and stop	phere					
Sec	ction C. Computation of Publi	ic Support Per	centage				
14	Public support percentage for 2023 (I	line 6, column (f), d	ivided by line 11, o	olumn (f))		14	90.00 %
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	98.16 %
1 6a	33 1/3% support test - 2023. If the o	organization did no	t check the box or	n line 13, and line ⁻	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				X
b	33 1/3% support test - 2022. If the o	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	lifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances test	t - 2023. If the org	anization did not o	heck a box on line	e 13, 16a, or 16b, a	nd line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop he	r e. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	est. The organizatio	n qualifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances test	t - 2022. If the org	anization did not o	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	he facts-and-circum	nstances test, cheo	ck this box and st	o p here. Explain ii	n Part VI how the	
	organization meets the facts-and-circl	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	ation	
18	Private foundation. If the organization	on did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instructions	s
						Schedule A	(Form 990) 2023

14591012 781409 7028

SCHEQUIE A (FUITH 330) 2020	Schedule A	(Form 990) 2023
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Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

qualify under the tests listed below, please complete Part II.)

26	ction A. Public Support			<u>.</u>			
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	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 per- formed, 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 bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
Ŭ	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.) ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	3 (f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	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.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section §	501(c)(3) orgai	nization,
_	check this box and stop here						
Se	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2023 (I	ine 8, column (f), d	livided by line 13,	column (f))		15	%
<u>16</u>	Public support percentage from 2022					16	%
	ction D. Computation of Inves		•			<u> </u>	
17	Investment income percentage for 20			ine 13, column (f))		17	%
18	Investment income percentage from					18	%
19a	a 33 1/3% support tests - 2023. If the	-					line 17 is not
	more than 33 1/3%, check this box a						
k	33 1/3% support tests - 2022. If the	-					
_	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see in		
3320	23 12-21-23		15			Schee	dule A (Form 990) 2023
			1	,			

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Schedule A (Form 990) 2023

Yes No

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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **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.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **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.
- **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.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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.**
- 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).
- 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).*
- **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.**
- **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.**
- c 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.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
- **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.)

332024 12-21-23

Part IV	Suppor	ting Orgar	nizations _{(con}	tinued)	
Schedule A				ENERGY	FUND

1

2

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	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		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported</i>			

	enectively operated, supervised, or controlled the organization's activities. If the organization had more than one supporte
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
2	Did the organization operate for the benefit of any supported organization other than the supported
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated.

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization

Section C.	Type II Supp	orting Orga	nižations

ē

 1
 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed

 1
 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or managed

 1
 1

Section D	. All Type II	I Supporting	Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	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			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the org	anization used to satisfy	the Integral Part Test durin	a the year (see instructions).
-				

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

c [The organization supported a governmental entity.	Describe in Part VI how you supported a governmental entity (see instruction <u>s).</u>
------------	--	---------------------------------------------------	------------------------------------------------------------------------------------------------

- 2 Activities Test. Answer lines 2a and 2b below.
- **a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" *provide details in* **Part VI.**

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.* 332025 12-21-23

3b | | Schedule A (Form 990) 2023

2a

2b

3a

14591012 781409 7028

17 2023.04030 OREGON ENERGY FUND Yes No

1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	ov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	st complete S	Sections A through E.	1
Section	n A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 N	let short-term capital gain	1		
2 F	Recoveries of prior-year distributions	2		
3 C	Other gross income (see instructions)	3		
4 A	dd lines 1 through 3.	4		
5 D	Depreciation and depletion	5		
6 P	Portion of operating expenses paid or incurred for production or			
с	ollection of gross income or for management, conservation, or			
n	naintenance of property held for production of income (see instructions)	6		
7 C	Other expenses (see instructions)	7		
8 A	djusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section	n B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 A	ggregate fair market value of all non-exempt-use assets (see			
ir	nstructions for short tax year or assets held for part of year):			
a A	verage monthly value of securities	1a		
b A	werage monthly cash balances	1b		
c F	air market value of other non-exempt-use assets	1c		
d T	otal (add lines 1a, 1b, and 1c)	1d		
e D	Discount claimed for blockage or other factors			
	explain in detail in Part VI):			
	cquisition indebtedness applicable to non-exempt-use assets	2		
3 S	Subtract line 2 from line 1d.	3		
4 C	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
s	ee instructions).	4		
5 N	let value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 N	fultiply line 5 by 0.035.	6		
7 R	Recoveries of prior-year distributions	7		
8 N	finimum Asset Amount (add line 7 to line 6)	8		
Section	n C - Distributable Amount			Current Year
1 A	djusted net income for prior year (from Section A, line 8, column A)	1		
	inter 0.85 of line 1.	2		
3 N	linimum asset amount for prior year (from Section B, line 8, column A)	3		
	inter greater of line 2 or line 3.	4		
	ncome tax imposed in prior year	5		
	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	mergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrated	d Type III supporting orga	nization (see

332026 12-21-23

instructions).

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023

 Schedule A (Form 990) 2023
 OREGON
 ENERGY
 FUND

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

Sche	dule A (Form 990) 2023 OREGON ENERGY			3-1029893 Page 7
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continued)	
Sect	on D - Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish exer	mpt purposes	1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	s <u>3</u>	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide 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	e 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	Γ	10	
Sect	on 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 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2023			
а	From 2018			
b	From 2019			
с	From 2020			
d	From 2021			
е	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: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2023 distributable amount			
с	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, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2023. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2024. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2019			
b	Excess from 2020			
с	Excess from 2021			
d	Excess from 2022			
е	Excess from 2023			

Schedule A (Form 990) 2023

Schedule A	(Form 990) 2023	OREGON	ENERGY	FUND			93-1029893	Page 8
Part VI	Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D, Section D, lines 5, 6, and	, 2, 3b, 3c, 4b, 4 lines 2 and 3; P	4c, 5a, 6, 9a, 9 Part IV, Sectior	9b, 9c, 11a, 1 ı E, lines 1c, 2	1b, and 11c; Part IV, Sect 2a, 2b, 3a, and 3b; Part V,	tion B, lines 1 a line 1; Part V,	17b; Part III, line 12; and 2; Part IV, Section Section B, line 1e; Pa	C,
	(See instructions.)	· · · · · · · · · · · · · · · · · · ·			· · ·			
332028 12-21-2	3			20			Schedule A (Form 9	90) 2023

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2023

Employer identification number

93-1029893

Schedule	В
(Form 990)	

Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):

OREGON ENERGY FUND

Filers of:	Section:
Form 990 or 990-EZ	\boxed{X} 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	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

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special 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 *exclusively* 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 *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set in the set of the parts unless to the set of the parts unless the set of the parts unless to the set of the parts unless the set of the pa

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)	
Name of organization	

Employer identification number

93-1029893

OREGON ENERGY FUND

Part I

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$1,180,544.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>146,114.</u>	PersonXPayrollImage: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$63,481.	PersonXPayrollImage: 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.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll 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.)

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

Schedule B (Form 990) (2023)

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Schedule E Name of or	8 (Form 990) (2023) ganization		Employ	Page yer identification number
	I ENERGY FUND			-1029893
Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is neede	d.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
2	DONATION ENVELOPES			
		\$8,3	00.	06/30/24
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
_	DONATION ENVELOPES			
3		\$11,1	.50.	06/30/24
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		 \$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
3453 12-26-		Ψ		Schedule B (Form 990) (20

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^{323453 12-26-23}

Name of or	rganization		Employer identification number
OREGON	N ENERGY FUND		93-1029893
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious,	a) through (e) and the following line entr charitable, etc., contributions of \$1,000 or le	tion 501(c)(7), (8), or (10) that total more than \$1,000 for the year y. For organizations
(a) No. from Part I	Use duplicate copies of Part III if additional (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
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	Turnefan als name address	(e) Transfer of gift	
	Transferee's name, address,		Relationship 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
(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
323454 12-26-	-23		Schedule B (Form 990) (2023
		24	

(Forr	HEDULE D n 990) ment of the Treasury I Revenue Service	Complete if the orga Part IV, line 6, 7, 8, 9, 10	al Financial Statements nization answered "Yes" on Form 990, 9, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ttach to Form 990. 0 for instructions and the latest information.		OMB No. 15 202 Open to Inspect	23 Public
	e of the organizati			Employe	r identificatio	
		OREGON ENERGY FUND			93-10298	
Pa		-	d Funds or Other Similar Funds or Ac	counts.	Complete if the	ıe
	organizatio	on answered "Yes" on Form 990, Part IV, lin				
			(a) Donor advised funds (b) Funds ar	nd other accou	ints
1		nd of year				
2		of contributions to (during year)				
3		of grants from (during year)				
4		t end of year				
5	-		writing that the assets held in donor advised fund			
6			exclusive legal control?		L Yes	└── No
6	•		dvisors in writing that grant funds can be used ou or donor advisor, or for any other purpose conferri			
	impermissible priv		i donor advisor, or for any other purpose comern	0	Yes	No
Pa			ganization answered "Yes" on Form 990, Part IV,			
1		servation easements held by the organizati				
		n of land for public use (for example, recrea		rically impo	ortant land area	a
		of natural habitat	Preservation of a certi			
	Preservation	n of open space				
2	Complete lines 2a	through 2d if the organization held a quali	fied conservation contribution in the form of a cor	servation e	easement on th	ne last
	day of the tax year	r.		Held	l at the End of th	e Tax Year
а	Total number of co	onservation easements		2a		
b	Total acreage rest	ricted by conservation easements		2b		
с	Number of conser	vation easements on a certified historic str	ucture included on line 2a	2c		
d	Number of conser	vation easements included on line 2c acqu	ired after July 25, 2006, and not			
	on a historic struc	ture listed in the National Register		2d		
3	Number of conser	vation easements modified, transferred, rel	eased, extinguished, or terminated by the organized	zation durin	ig the tax	
	year					
4		where property subject to conservation eas				
5		tion have a written policy regarding the per				
	,	forcement of the conservation easements if				No
6	Staff and voluntee	er hours devoted to monitoring, inspecting,	handling of violations, and enforcing conservatio	n easement	ts during the ye	ear
_		<u> </u>				
7	Amount of expens	ses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation eas	ements du	ring the year	
•						
8			e satisfy the requirements of section 170(h)(4)(B)(i)		Yes	No
9			on easements in its revenue and expense statem			
5		-	note to the organization's financial statements that		the	
		counting for conservation easements.				
Pa			f Art, Historical Treasures, or Other S	imilar As	sets.	
	Complete in	f the organization answered "Yes" on Form	1 990, Part IV, line 8.			
1a	If the organization	elected, as permitted under FASB ASC 95	i8, not to report in its revenue statement and bala	nce sheet v	works	
			blic exhibition, education, or research in furtheran			
			ncial statements that describes these items.			
b			i8, to report in its revenue statement and balance	sheet work	ks of	
	-		exhibition, education, or research in furtherance			
		ing amounts relating to these items.				
				\$		
2			asures, or other similar assets for financial gain, p			
	the following amou	unts required to be reported under FASB A	SC 958 relating to these items:			
а	Revenue included	on Form 990, Part VIII, line 1		\$		
h	Assets included in	Form 990 Part X		\$		

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332051 09-28-23	

Sche		ENERGY FUNI					93-10			ige 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Historic	al Treasures, o	r Othe	r Similar	Assets	(contin	ued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check any	of the following that	t make si	ignificant u	se of its			
	collection items (check all that apply).									
а	Public exhibition	d	I 🗌 Loar	n or exchange progr	am					
b	Scholarly research	e	Othe	er						
с	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explair	n how they fu	irther the organization	on's exer	npt purpos	e in Part	XIII.		
5	During the year, did the organization solicit of	or receive donations of	of art, historio	cal treasures, or othe	er similar	assets		_		
	to be sold to raise funds rather than to be ma							Yes		No
Par	t IV Escrow and Custodial Arran		te if the orga	nization answered "	Yes" on	Form 990,	Part IV, li	ne 9, or		
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod							-		1
	on Form 990, Part X?						L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table							
								Amount		
	Beginning balance									
	Additions during the year									
	Distributions during the year									
	•							7		1
	Did the organization include an amount on F					ity?	∟	Yes		No
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds Complete if					•				
1 41		(a) Current year	(b) Prior			(d) Three ye	ears hack	(e) Four	vears	hack
4.	Designing of year balance	(a) Ourient year			ITS DOCK			(e) i oui	yours	Jack
1a ⊾	Beginning of year balance									
u o	Contributions									
с d	Net investment earnings, gains, and losses Grants or scholarships									
	Other expenditures for facilities									
e										
f	Administrative expenses									
g										
2	Provide the estimated percentage of the curr	rent vear end balance	e (line 1a. co	umn (a)) held as:						
a	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
c		%								
-	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.								
3a	Are there endowment funds not in the posse		tion that are	held and administe	red for th	e				
	organization by:	0						ſ	Yes	No
	(i) Unrelated organizations?							3a(i)		
								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requir	ed on Schec	ule R?				3b		
4	Describe in Part XIII the intended uses of the	organization's endo	wment funds							
Par	t VI Land, Buildings, and Equipm	nent								
	Complete if the organization answere	d "Yes" on Form 990), Part IV, line	e 11a. See Form 990), Part X,	line 10.				
	Description of property	(a) Cost or o basis (investr		 b) Cost or other basis (other) 		ccumulate	d	(d) Bool	k value	9
1a	Land									
b	Buildings									
с	Leasehold improvements									
	Equipment			69,042.		68,12			91	.8.
	Other			32,800.		32,80	0.			0.
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X. line 10c.	column (B))					91	.8.

Schedule D (Form 990) 2023

Part VII	Investments -	 Other Securit 	ties	
	(Form 990) 2023		ENERGY	FUND

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Complete if the organization answered "Yes" c (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
	(2) 20011 10:00		
Closely held equity interests			
) Other			
(A)			
(A) (B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
tal. (Col. (b) must equal Form 990, Part X, line 12, col. (B)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Dtal. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) Part IX Other Assets Complete if the organization answered "Yes" of the organization and the organization	n Form 990 Part IV line	11d. See Form 990. Part X. line 15	
-	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	1
(a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) OPERATING LEASE LIABILITY			83,54
(2) OPERATING LEASE LIABILITY (3)			83,54
 (2) OPERATING LEASE LIABILITY (3) (4) 			83,54
 (2) OPERATING LEASE LIABILITY (3) (4) (5) 			83,54
(2) OPERATING LEASE LIABILITY (3) (4) (5) (6)			83,54
(2) OPERATING LEASE LIABILITY (3) (4) (5) (6) (6) (7) (7) (7)			83,54
 (2) OPERATING LEASE LIABILITY (3) (4) (5) (6) 			83,54
(2) OPERATING LEASE LIABILITY (3) (4) (5) (6) (6) (7) (7) (7)			83,54

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2023

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Sche	dule D (Form 990) 2023 OREGON ENERGY FUND			93-2	1029893 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statemer	nts With	Revenue per Re [.]	turn	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	3,095,144.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	115,608.		
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	115,608.
3	Subtract line 2e from line 1			3	2,979,536.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	19,571.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b	4c	19,571.		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	2,999,107.		
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme		Expenses per F	leturi	n
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	2,787,935.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses				
d	Other (Describe in Part XIII.)				-
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	2,787,935.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	19,571.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	19,571.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	2,807,506.
Pa	t XIII Supplemental Information				

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

PART X, LINE 2:

THE ORGANIZATION FOLLOWS THE PROVISIONS OF FASB ASC TOPIC 740 ACCOUNTING

FOR UNCERTAINTY IN INCOME TAXES. MANAGEMENT HAS EVALUATED THE

ORGANIZATION'S TAX POSITIONS AND CONCLUDED THAT THERE ARE NO UNCERTAIN TAX

POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY

WITH PROVISIONS OF THIS TOPIC.

332054 09-28-23

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ng or Gaming A	ctivi	ties	OMB No. 1545-0047
(Form 990)	Complete if the	or if the	2023					
	C		Open to Public					
Department of the Treasury Internal Revenue Service	Go t	Attach to Form 990 o o www.irs.gov/Form990 for instrue						Inspection
Name of the organization							Employer id	entification number
		ENERGY FUND					93-1029	
	complete this part	Complete if the organization answe	ered "Y	es" or	n Form 990, Part IV, lin	ne 17	'. Form 990-E	Z filers are not
 Indicate whether th a Mail solicitat b Internet and c Phone solici d In-person so 2 a Did the organization key employees list 	e organization rais ions email solicitations tations licitations on have a written o ed in Form 990, Pa highest paid indiv	ed funds through any of the followin e Solicita f Solicita g Special or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra (incluc rofessi	non-g gover aising o ling of onal fu	overnment grants nment grants events ficers, directors, trust undraising services?		Ye	
(i) Name and addres or entity (fund	s of individual	(ii) Activity	(iii) fundr have c or cor contribu	ustody itrol of	(iv) Gross receipts from activity	tò (o f	Amount paid r retained by) undraiser ed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No				
		1	1	1				
Total 3 List all states in whi or licensing.	ch the organizatio	n is registered or licensed to solicit o	contrib	utions	or has been notified i	it is e	exempt from r	egistration

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

Schedule G (Form 990) 2023

LHA 332081 09-13-23

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b, List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
10		(event type)	(event type)	(total number)	col. (c))
	Gross receipts	76,559.			76,559.
2	2 Less: Contributions	26,350.			26,350
3	Gross income (line 1 minus line 2)	50,209.			50,209
4	Cash prizes				
	Noncash prizes				
	Rent/facility costs				
	Food and beverages	21,085.			21,085.
8	B Entertainment				500
8 9	Other direct expenses	6,200.			500. 6,200.
8 9 10	Other direct expensesDirect expense summary. Add lines 4 throug	6 , 200 . h 9 in column (d)			27,785
8 9 10	 Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from 1 	6 , 200 . h 9 in column (d) line 3, column (d)			27,785
2 9 10 11 Part	 Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from Gaming. Complete if the organization 	6 , 200 . h 9 in column (d) line 3, column (d)			500 6,200 27,785 22,424 (d) Total gaming (add col. (a) through col. (c)
10 11	 Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from Gaming. Complete if the organization 	6 , 200 . h 9 in column (d) line 3, column (d) answered "Yes" on Form (a) Bingo	n 990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	27,785. 22,424 (d) Total gaming (add
	 Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from I Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. 	6 , 200 . h 9 in column (d) line 3, column (d) answered "Yes" on Form (a) Bingo	n 990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	27,785. 22,424 (d) Total gaming (add
	O Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue	6 , 200 . h 9 in column (d) answered "Yes" on Form (a) Bingo	n 990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	27,785 22,424 (d) Total gaming (add
	O Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Cash prizes	6 , 200 . h 9 in column (d) answered "Yes" on Form (a) Bingo	n 990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	27,785 22,424 (d) Total gaming (add
	 Other direct expenses	6 , 200 . h 9 in column (d) answered "Yes" on Form (a) Bingo	n 990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	27,785 22,424 (d) Total gaming (add
anilazar 2 2 2 2 3 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5	 Other direct expenses Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from 1 Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs 	6 , 200 . h 9 in column (d) answered "Yes" on Form (a) Bingo	n 990, Part IV, line 19, or r (b) Pull tabs/instant	eported more than	27,785 22,424 (d) Total gaming (add col. (a) through col. (c

9 Enter the state(s) in which the organization conducts gaming activities:

a Is the organization licensed to conduct gaming activities in each of these states? ______ Yes
b If "No," explain: ______

8 Net gaming income summary. Subtract line 7 from line 1, column (d)

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Schedule G (Form 990) 2023

No

No

Sche	edule G (Form 990) 2023	OREGON	ENERGY	FUND		93-1	029893	Page 3
11	Does the organization conduct ga	ming activities	with nonmer	bers?			Yes	No
					of a partnership or other entity formed			
	to administer charitable gaming?						Yes	No
13	Indicate the percentage of gaming	g activity condu	ucted in:					
а	The organization's facility						13a	%
							13b	%
					s gaming/special events books and reco			
	Name							
	Address							
							<u> </u>	—]
15a	Does the organization have a con-	tract with a thir	rd party from v	whom the or	ganization receives gaming revenue?		Yes	No No
					•			
b	If "Yes," enter the amount of gam				\$ and the ar	nount		
	of gaming revenue retained by the		\$					
с	If "Yes," enter name and address	of the third par	ty:					
	News							
	Name							
	Address							
	Address							
16	Coming manager information:							
16	Gaming manager information:							
	Nomo							
	Name							
	Gaming manager compensation	\$						
	Carning manager compensation	Ψ						
	Description of services provided							
	Director/officer	Employe	e		endent contractor			
17	Mandatory distributions:							
	Is the organization required under	state law to m	ake charitable	distribution	s from the gaming proceeds to			
	retain the state gaming license?				5 51		Yes	No
b					d to other exempt organizations or spent			
	organization's own exempt activit	ies during the t	ax year \$					
Pa	rt IV Supplemental Infor	mation. Prov			ired by Part I, line 2b, columns (iii) and (v); and Par	t III, lines 9,	9b, 10b,
					nformation. See instructions.			
33208	3 09-13-23			31		Schedu	ile G (Form	990) 2023

Part IV Supplemental Information	(continued)	
		Schedule G (Form 990)

332084 04-01-23

SCHEDU (Form 99		Go	Grants and Oth vernments, ar	nd Individua	ls in the Ŭni	ted States		OMB No. 1545-0047
Department	of the Treasury		-	Attach to Form				Open to Public
Internal Reve	enue Service		Go to www.irs	s.gov/Form990 for	r the latest inform	ation.		Inspection
Name of	the organization OREGON EI	NERGY FUND						Employer identification number 93-1029893
Part I	General Information on Grants	and Assistance						
	es the organization maintain records eria used to award the grants or ass							ion
2 Des	cribe in Part IV the organization's p	rocedures for monit	oring the use of grant	funds in the United	d States.			
Part II	Grants and Other Assistance to recipient that received more than	-				anization answered "Y	/es" on Form 990, Par	t IV, line 21, for any
1 (a)	Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
	er total number of section 501(c)(3) er total number of other organizatio			e line 1 table	 			<u> </u>

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Schedule I (Form 990) 2023

Schedule I (Form 990) 2023

OREGON ENERGY FUND

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
NERGY ASSISTANCE	2155	742,117.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

PROCEDURE FOR MONITORING THE USE OF GRANT FUNDS OREGON ENERGY FUND'S

PARTNER AGENCIES REPORT THEIR CUSTOMER COMMITMENTS (FUNDS COMMITTED) USING

AN ONLINE PORTAL AS THE COMMITMENTS ARE MADE. WEEKLY THOSE COMMITMENTS ARE

RECONCILED AND PAYMENTS ARE MADE ON BEHALF OF THE CUSTOMER TO THE

APPROPRIATE UTILITY.

SC	HEDULE J	Compensation Information	1	OMB No. 1	545-004	47
(Fo	Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest)
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		20	ZJ)
Dena	tment of the Treasury	Attach to Form 990.		Open to		
Intern	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe		
Nan	ne of the organization		Employer i			mber
		OREGON ENERGY FUND	93-1	02989	3	
Ра	rt I Question	s Regarding Compensation				
	o				Yes	No
1a		ate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or c					
	Travel for com					
		ation and gross-up payments Health or social club dues or initiation fee				
		pending account Personal services (such as maid, chauffer	ir, chet)			
b	If any of the bayes	an line to are checked, did the exception follow a written policy recording powerst or				
b		on line 1a are checked, did the organization follow a written policy regarding payment or		16		
2		rovision of all of the expenses described above? If "No," complete Part III to explain n require substantiation prior to reimbursing or allowing expenses incurred by all directors,		<u>1b</u>		
2	•	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
	inusiees, and onice					
3	Indicate which if ar	y, of the following the organization used to establish the compensation of the organization's				
•		ctor. Check all that apply. Do not check any boxes for methods used by a related organization				
		ation of the CEO/Executive Director, but explain in Part III.	511 10			
	Compensation					
	·	ompensation consultant X Compensation survey or study				
	·	ther organizations X Approval by the board or compensation c	ommittee			
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a re					
а	•	e payment or change-of-control payment?		4a		X
b	Participate in or rec	eive payment from a supplemental nonqualified retirement plan?				X
с	Participate in or rec	eive payment from an equity-based compensation arrangement?		4.		X
	If "Yes" to any of lir	es 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
	contingent on the r					
а	The organization?			5a		X
		ation?				X
		r 5b, describe in Part III.				
6	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
	contingent on the n	et earnings of:				
а	The organization?			<u>6a</u>		X
b	Any related organiz	ation?		6b		X
		r 6b, describe in Part III.				
7		n Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				
		es 5 and 6? If "Yes," describe in Part III		7		X
8	-	reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to th	ıe			
				8		X
9	If "Yes" on line 8, d	d the organization also follow the rebuttable presumption procedure described in				
	Regulations section					
For	Paperwork Reducti	on Act Notice, see the Instructions for Form 990.	Sched	ule J (Forn	n 990)) 2023

LHA 332111 11-06-23

Schedule J (Form 990) 2023

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Page **2**

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) JESSE B. ALLBRITTON	(i)	176,585.	10,000.	0.	10,360.	1,345.	198,290.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(i)							
	(i) (ii)							
	(i)							
	(i) (ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2023

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2023

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection Employer identification number 93-1029893

OMB No. 1545-0047

OREGON ENERGY FUND

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

OREGON ENERGY FUND'S CURRENT POLICY IS TO COLLECT FUNDS IN ONE FISCAL

YEAR AND RELEASE THEM FOR USE IN THE NEXT FISCAL YEAR, CALLED "SECOND

YEAR FUNDING." THE POLICY HAS BEEN LARGELY APPLIED TO SPENDING OF

RESTRICTED FUNDS DEDICATED TO ENERGY ASSISTANCE.

THE RESULTS OF THE CURRENT YEAR ACTIVITY CAN BE FOUND ON THE FORM 990, LINE 19. IT MAY APPEAR THAT THE ORGANIZATION IS SPENDING MORE THAN IT RAISES, BUT IN FACT ALL PROGRAM EXPENSES FROM LINE 13 ARE USING FUNDS RAISED IN PRIOR YEARS.

FORM 990, PART VI, SECTION B, LINE 11B:

ONCE THE DRAFT 990 HAS BEEN COMPLETED BY THE CPA, OREGON ENERGY FUND STAFF REVIEWS AND COMPARES THE DRAFT 990 TO THE FINANCIAL STATEMENTS AND OTHER SUPPORTING DOCUMENTS. ONCE THIS PROCESS IS COMPLETE, THE DRAFT 990 IS FORWARDED ON TO BOARD MEMBERS FOR THEIR REVIEW AND COMMENTS BEFORE OREGON ENERGY FUND STAFF NOTIFIES THE CPA FIRM THAT IT IS READY FOR FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

OREGON ENERGY FUND PROVIDES CONFLICT OF INTEREST DOCUMENT ANNUALLY TO ITS BOARD AND KEY EMPLOYEES FOR COMPLETION. THE DOCUMENT IS THEN KEPT ON FILE BY OREGON ENERGY FUND.

FORM 990, PART VI, SECTION B, LINE 15A:

THE ORGANIZATION USES AN OUTSIDE SALARY SURVEY. BEFORE THE EXECUTIVE

 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
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Name of the organization OREGON ENERGY FUND	Employer identification number 93-1029893
DIRECTOR WAS INITIALLY HIRED AN EXECUTIVE MEETING IS HELD	ANNUALLY WITHOUT

THE EXECUTIVE DIRECTOR PRESENT. IN THIS MEETING THE COMMITTEE EVALUATES THE

EXECUTIVE DIRECTORS PERFORMANCE. THE SALARY IS THEN PRESENTED TO THE

EXCEUTIVE DIRECTOR AT LATER DATE.

FORM 990, PART VI, SECTION C, LINE 19:

THESE DOCUMENTS ARE MADE AVAILABLE WHEN REQUESTED, DELIVERY OF WHICH IS

DETERMINED BY THE MOST EXPEDITIOUS METHOD OF CONVEYANCE.

PART XII, LINE 2C:

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

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