

## Report of Organizational Actions Affecting Basis of Securities

▶ See separate instructions.

**Part I Reporting Issuer**

1 Issuer's name  <b>Willamette Community Bank</b>		2 Issuer's employer identification number (EIN)  <b>16-1638052</b>	
3 Name of contact for additional information  <b>OTR, Inc. / Robert E. Roach</b>	4 Telephone No. of contact  <b>(503) 225-0375</b>	5 Email address of contact  <b>bobr@otrtransfer.com</b>	
6 Number and street (or P.O. box if mail is not delivered to street address) of contact  <b>1001 SW Fifth Avenue, Suite 1550</b>		7 City, town, or post office, state, and Zip code of contact  <b>Portland, Oregon 97204</b>	
8 Date of action  <b>May 31, 2017</b>		9 Classification and description  <b>Common Stock</b>	
10 CUSIP number  <b>969130103</b>	11 Serial number(s)	12 Ticker symbol  <b>WMCB</b>	13 Account number(s)

**Part II Organizational Action** Attach additional statements if needed. See back of form for additional questions.

14 Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for the action ▶ On April 19, 2017 the Board of Directors of Willamette Community Bank adopted a resolution whereby a 2% common stock dividend was to be paid to all shareholders of record as of May 5, 2017 and payable on May 31, 2017.

15 Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustment per share or as a percentage of old basis ▶ The basis on the original shares of Willamette Community Bank common stock held by the shareholders who received said dividend would be reduced by 2%.

16 Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates ▶ \_\_\_\_\_

**Part II Organizational Action** (continued)

17 List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶ \_\_\_\_\_

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18 Can any resulting loss be recognized? ▶ \_\_\_\_\_

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19 Provide any other information necessary to implement the adjustment, such as the reportable tax year ▶ The reportable tax year is 2017.

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**Sign Here**

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

Signature ▶  Date ▶ 5/1/17

Print your name ▶ Robert Moore Title ▶ Chief Financial Officer

**Paid Preparer Use Only**

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
<u>Robert E. Roach</u>				
Firm's name ▶ <u>OTR, Inc.</u>	Firm's EIN ▶ <u>93-0867668</u>			
Firm's address ▶ <u>1001 SW Fifth Ave., Ste. 1550, Portland OR 97204</u>	Phone no. <u>(503) 225-0375</u>			