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-Form 990-PF

Department of the Treasury Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

2008

For	calen	lar year 2008, or tax yea	r beginning	_	1, 2008		, and e	nding	MAY	31	, 2009			
G C	heck		nitial return	<u></u>	Final return		Amended retu	rn L		ss cha	 		e chang	је
Use	the I	RS Name of foundation				_			A Emp	loyer i	dentification	number		
label. THOMAS V. GIDDENS, JR. CHARITABLE							44 0045544							
Otherwise, FOUNDATION							41-2047741							
	print	· '		not de	elivered to street address)		İ	Room/suite	B Telep					
	r type Spec	6 000 IV 3011						326	20	6-9	905-14	50		
	ructio	ns City or town, state, a							C If exer	nption a	pplication is p	ending, check he	ere 🕨	· <u> </u>
		SEATTLE, V							D 1. Fo	reign o	organizations	s, check here		\sqsubseteq
H C	_			<u></u>	empt private foundation				Z. Fo	reign org eck here	ganizations me and attach co	eting the 85% te imputation	est,	
<u>L</u>		tion 4947(a)(1) nonexem			Other taxable private for		ation		E If pro	vate fo	undation sta	tus was termir	nated	
		ket value of all assets at (end of year J Acc	_	ng method: 🔼 Cas	sh	Accr	Jal	unde	r section	on 507(b)(1)	(A), check her	re 🕨	-
		art II, col (c), line 16)	L		her (specify)				F If the	found	ation is in a	60-month tern	nınatıon	
_				colu	mn (d) must be on ca	sh .	basis.)		unde	r sectio	on 507(b)(1)	(B), check her	re 🕨	<u></u>
Pa	rt I	Analysis of Revenue an (The total of amounts in colu- necessarily equal the amoun	mns (b), (c), and (d) may	not	(a) Revenue and expenses per book	s	(b) Net into		(c)	Adjus Incor	ted net ne	(d) Disbu for charitab (cash ba	le purpos	ses
	1	Contributions, gifts, gran	ts, etc., received		550,000	Ĵ.				N/Z	I			
	2	Check 🕨 🔛 if the foundatio	n is not required to attach Sch	В										
	3	Interest on savings and tempo cash investments	orary			5.		5.				STATEM	ENT	1
	l	Dividends and interest fro	om securities		358,269	9.	35	8,269.				STATEM	ENT	2
	5a	Gross rents									-			$\overline{}$
	b	Net rental income or (loss)									DEC	LIVED	. 1	
ө		Net gain or (loss) from sale of	assets not on line 10		50,90	7.					NEC	LIVED	}	1
nue	b i	Gross sales price for all	50,907	<u>. </u>					<i></i>				သွ	
Revenue	7	Capital gain net income (from	Part IV, line 2)				5	0,907.		=	MAR 2	3 2010	Š	
-	8	Net short-term capital gai	n									- 2010		1
		ncome modifications Gross sales less returns											J <u>E</u>	
	10a	and allowances									ועטט	N, UT		
	b	ess Cost of goods sold									·			
	C	Gross profit or (loss)										<u> </u>		
		Other income			<600			<600.	>			STATEM	ENT	3
_	12	Total. Add lines 1 throug	h 11		958,581			8,581.						
		Compensation of officers, dire			302,250	١.	4.	2,412.				25	9,8	<u> 38.</u>
		Other employee salaries a	J			_								
တ္သ		Pension plans, employee			11 75/	_		1 (50					<u>^ 1 /</u>	~
Expenses		_egal fees	STMT 4		11,756			1,650.				1	0,10	76.
ĝ		Accounting fees	STMT 5	_	20,692			2,904.				<u></u>	7,78	_
e E		Other professional fees	STMT 6)	23,097	<u>' -</u>	∠.	3,097.						0.
		nterest Taxes	STMT 7	,	31,845	\vdash	. ,	3,346.				2	0,49	<u>a a -</u>
str		raxes Depreciation and depletio		'	31,043	-		7, 340.					U , 4.	
nin.		Depreciation and depletto Decupancy			10,120	7.		1,420.		_			8,70	00 -
Adı		Fravel, conferences, and a	meetings		100		•	0.						00.
Pu		Printing and publications				1								
ga		Other expenses	STMT 8	3	2,763	3.		319.					2,44	44.
Operating and Administrati		Fotal operating and adm									 -		.,-	
per		expenses. Add lines 13 t			402,623	ا. د	7	5,148.				31	9,47	76.
Ō		Contributions, gifts, grant	=		595,700	٠.						59	5,70	50.
		Total expenses and disb				\neg							•	
		Add lines 24 and 25			998,323	3.	7 !	5,148.				91	5,17	76.
	27	Subtract line 26 from line	12:				- -							
	a (Excess of revenue over expen	ses and disbursements		<39,742	2.	>							
	b	Net investment income (r	f negative, enter -0-)				33:	3,433.						
	C ,	Adjusted net income (if no	egative, enter -0-)							N/A	\			

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

FOUNDATION

41-2047741

Page 2

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only			Beginning of year	End	of year
L	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		1.	
	2	Savings and temporary cash investments	535,558.	217,507	217,507.
	1	Accounts receivable ▶	,		227,3076
		Less; allowance for doubtful accounts	A	ere tan	
	4	Pledges receivable			-
	•	Less; allowance for doubtful accounts	10 M A State Control of the company of the State Control of the State Control of the Control of	mank Language and an area	
	5	Grants receivable	_		
	1 -	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and toans receivable	, , , , , , , , , , , , , , , , , , ,	y 4 1	* *
	'	Less: allowance for doubtful accounts	¥ <u>`</u>	4	· · · · · · · · · · · · · · · · · · ·
w	Q	Inventories for sale or use	· · · · · · · · · · · · · · · · · · ·		<u> </u>
Assets	١	Prepaid expenses and deferred charges			
As	100	Investments - U.S. and state government obligations			
	ı		11 222 500		
	l	Investments - corporate stock	11,223,580.		
	l	Investments - corporate bonds	2,000,000.	<i>Se</i>	
	111	Investments - land, buildings, and equipment basis			·
	۱.,	Less accumulated depreciation			
		Investments - mortgage loans		12 501 506	40.005.500
	13	Investments - other STMT 9	0.	13,501,726	10,027,530.
	14	Land, buildings, and equipment: basis ► 8,350.		<u></u>	
	Ì	Less accumulated depreciation	8,188.	8,350.	8,350.
	15	Other assets (describe ► DEPOSITS)	820.	820.	820.
	l		40 -60 446		
_	_	Total assets (to be completed by all filers)	13,768,146.	13,728,404.	10,254,208.
	17	, ,			
	18	Grants payable			
ies	19	Deferred revenue			
ij	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable		<u></u>	`
_	22	Other liabilities (describe)]
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			1
w		and complete lines 24 through 26 and lines 30 and 31.			
nces	24	Unrestricted			
<u>a</u>	25	Temporarily restricted			
or Fund Bala	26	Permanently restricted			1
Ĕ		Foundations that do not follow SFAS 117, check here			· ·
Ē		and complete lines 27 through 31.			
ıs	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets	28	Paid-ın or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ϋ́	29	Retained earnings, accumulated income, endowment, or other funds	13,768,146.	13,728,404.	1
Ne	30	Total net assets or fund balances	13,768,146.	13,728,404.	
				-	
	31	Total liabilities and net assets/fund balances	13,768,146.	13,728,404.	
同	art	Analysis of Changes in Net Assets or Fund Ba	alances		
	art		41G110G3		
		net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
	(mus	t agree with end-of-year figure reported on prior year's return)		1	13,768,146.
2	Enter	amount from Part I, line 27a		2	<39,742.>
3	Othe	increases not included in line 2 (itemize)		3	0.
4	Add I	ines 1, 2, and 3		4	13,728,404.
5	Decr	eases not included in line 2 (itemize)		5	0.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II. col	lumn (b) line 30		13.728.404.

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	MAS V. GIDDENS, NDATION	JR. CH	ARITABLE	2			4	1-204	7711	Dogo 2
	and Losses for Tax on In	vestmen	t Income					1-204	//41	Page 3
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (b) How acquired P - Purchase D - Donation (n)							(c) Date (mo., c	acquired lay, yr.)	(d) Date (mo., da	sold y, yr.)
18 CAPITAL GAINS	DIVIDENDS	· · · · ·		╁┷	00111	atton				
b			-							
C			-							
<u>d</u>										
<u>e</u>	44.5			Ц,						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					iain or (loss) s (f) minus (
a 50,907.		F		\dashv			(-/	- (.,		907.
b										
С										
d						<u>-</u> .				
<u>e</u>			1010 1100							
Complete only for assets showin	g gain in column (h) and owned by t							Col. (h) gain i not less than		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any					(from col. (h	1)) ΄	
_a				_					50,	907.
<u>b</u>				_						
d										
e				-						
	If gain, also enter			7	•					,907.
2 Capital gain net income or (net ca	((())		/	<i>!</i>	2				50,	307.
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,		d (6):		٦١						
If (loss), enter -0- in Part I, line 8						N/A				
Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Inv	estn	nent Inc	ome			
(For optional use by domestic private	foundations subject to the section 4	1940(a) tax on	net investment in	come	.)					
If section 4940(d)(2) applies, leave th	ış part blank.									
Was the foundation liable for the sect	·	ount of any	one in the base nex						v _{aa} _ í	X No
If "Yes," the foundation does not quali				lour					162 I	AL NO
1 Enter the appropriate amount in e				es.						
(a) Base period years	(b)			(c)			1	Dietribi	(d) ution ratio	
Calendar year (or tax year beginnir			Net value of no					(col. (b) divi	ded by col. (
2007		5,523.				1,235				37092
2006	23	9,959.				5,729				8695
2005 2004		0.		4 /	, 4 /	8,207 0				0000
2003		0.	· - ·				+-		• • • •	10000
										
2 Total of line 1, column (d)							2		.10	5787
3 Average distribution ratio for the 5	i-year base period - divide the total o	ın line 2 by 5,	or by the number	of yea	ars					
the foundation has been in existen	ice if less than 5 years						3		.02	<u> 26447</u>
		_						1,		460
4 Enter the net value of noncharitab	ie-use assets for 2008 from Part X, ii	ine 5					4	1.0),501,	409.
5 Multiply line 4 by line 3							5		277,	732.
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)						6		3,	334.
-									004	0.00
7 Add lines 5 and 6							7		Z8⊥,	066.
8 Enter qualifying distributions from	Part XII, line 4						8		915,	176.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	1b, and comp	lete that part using	g a 1%	6 tax r	ate.				

THOMAS V. GIDDENS, JR. CHARITABLE

Form 990-PF (2008) FOUNDATION		41-204	7741		Page 4
Part VI Excise Tax Based on Investment Income (Section 4)	940(a), 4940(b), 4940(e), or 4	948 - sec	instru		
1a Exempt operating foundations described in section 4940(d)(2), check here an	d enter "N/A" on line 1				
Date of ruling letter: (attach copy of ruling letter if necessar	ry-see instructions)	- leap n- n			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► X and enter 1%	1		3,3	34.
of Part I, line 27b					-
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter	4% of Part I, line 12, col. (b)				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only	. Others enter -0-)	2		_	0.
3 Add lines 1 and 2		3		3,3	34.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	/. Others enter -0-)	4	_		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		3,3	34.
6 Credits/Payments:					
a 2008 estimated tax payments and 2007 overpayment credited to 2008	6a 3,018.		**		
b Exempt foreign organizations - tax withheld at source	6b				
c Tax paid with application for extension of time to file (Form 8868)	6c 9,000.	:	,		
d Backup withholding erroneously withheld	6d	å		· .	1
7 Total credits and payments. Add lines 6a through 6d		7	1	2,0	18.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is a	nttached [8			5.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ [9			
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10		8,6	79.
11 Enter the amount of line 10 to be: Credited to 2009 estimated tax	8,679. Refunded ▶	11			0.
Part VII-A Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or local le	gislation or did it participate or intervene	ın	.3	Yes	
any political campaign?			1a		Х
b Did it spend more than \$100 during the year (either directly or indirectly) for political pur			1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities a	and copies of any materials published	d or		* .	,
distributed by the foundation in connection with the activities.			, &_	13 .	
c Did the foundation file Form 1120-POL for this year?			10		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during					
(1) On the foundation. ► \$ O . (2) On foundation manag				Ì.	
e Enter the reimbursement (if any) paid by the foundation during the year for political expe	nditure tax imposed on foundation		, .		١.
managers. ▶ \$0 .					l `
2 Has the foundation engaged in any activities that have not previously been reported to the	e IRS?		2		X
If "Yes," attach a detailed description of the activities.			, ,		,
3 Has the foundation made any changes, not previously reported to the IRS, in its governing			, 's		<u></u>
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the char	•		3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the y	/ear'/	37/3	4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		177
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year	ary		5		X
If "Yes," attach the statement required by General Instruction T.			1 1		
Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	i either:				
By language in the governing instrument, or District legislation that iffertually amond at the appropriate instrument as that are a decided in the control of the	to a discourse of the state of	•			
By state legislation that effectively amends the governing instrument so that no mandal section is the second of the second	tory directions that conflict with the state	law			
remain in the governing instrument?			6	X	—
7 Did the foundation have at least \$5,000 in assets at any time during the year?			7	<u> </u>	
If "Yes," complete Part II, col. (c), and Part XV.	tions) N				Ì
8a Enter the states to which the foundation reports or with which it is registered (see instruc WA	mons) >				
	Attorney Consultant de de la consultant				- Carrier
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	: Autorney General (or designate)			X.	
of each state as required by General Instruction G? If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of	anation 4040(a)(0) as 4040(a)(5) 4-	4	86	Λ	
g .		uar			v
year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV)? If "Yes, 10 Did any persons become substantial contributors during the tax year? H "Yes," attach a sche			9		X
any persons decome substantial contributors during the tax year? if "Yes," attach a sche	equie listing their names and addresses		10		Λ

Part VII-A Statements Regarding Activities (continued)	11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) 12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A 14 The books are in care of ▶ THE FOUNDATION Telephone no. ▶ 206 – 905 – 2 P+4 ▶ 9810 15 Section 4947(a)(1) nonexempt charitable trusts filling Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year ▶ 15 Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person) (or make any of either available for the benefit or use of a disqualified person)? Yes X No	X	х
section 512(b)(13)*If Yes, attach sobedule (see instructions) 2 bid the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? 3 bid the foundation only with the public inspection requirements for its annual returns and exemption application? Webste address > N/A 14 The books are in care of IP THE FOUNDATION Tolephone no. > 20.6-905-1.450 Located at > 60.0 N 36TH AVENUE, SEATTLE, WA Tolephone no. > 20.6-905-1.450 Tolephone no. > 20.6-905-1.45	section 512(b)(13)? If "Yes," attach schedule (see instructions) 11 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? 12 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A 14 The books are in care of THE FOUNDATION Located at > 600 N 36TH AVENUE, SEATTLE, WA 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person)? Yes X No (6) Transfer any income or assets to a disqualified person)? Yes X No	X	х
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? 13 Did the coundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A 14 The books are in care of ► THE FOUNDATION Located al ► 6.00 N 36TH AVENUE, SEATTLE, WA Located al ► 6.00 N 36TH AVENUE, SEATTLE, WA Located al ► 6.00 N 36TH AVENUE, SEATTLE, WA Located al ► 6.00 N 36TH AVENUE, SEATTLE, WA Seaton address the amount of tax-exempt interest received or accrued during the year Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720' any item is checked in the "Yes" column, unless an exception applies. 15 Darrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person or lend on the "Yes" Like No (3) Furmish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualided person or lend to the benefit or use of a disqualided person or lend to the benefit or use of a disqualided person or lend to the benefit or use of a disqualided person or lend to the benefit or use of a disqualided person or lend to the benefit or use of a disqualided person or lend to the benefit or use of a disqualided person or lend to the benefit or use of a disqualided person or lend to the benefit or use of a disqualided person or lend to the benefit or use of a disqualided person or lend to the benefit or use of a disqualided person or lend to the benefit or use of a disqualided person or lend to the benefit or use of a disqualided person or lend to the benefit or use of a disqualided person or lend to the benefit or use of a disqualided person or lend to the benefit or use of a disqualided per	12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? 12 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A 14 The books are in care of ▶ THE FOUNDATION Located at ▶ 600 N 36TH AVENUE, SEATTLE, WA 2IP+4 ▶9810 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person)? Yes X No (6) Transfer any income or assets to a disqualified person)? Yes X No	X	х
August 17, 2008? 12	August 17, 2008? 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A 14 The books are in care of NA Located at 600 N 36TH AVENUE, SEATTLE, WA Section 4947(a)(1) nonexempt charitable trusts filling Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person)? 12 Telephone no. 206-905- ZIP+4 >9810 ZIP+4 >981	Х	1
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Form 990-PF (2008)			ı X

Form **990-PF** (2008)

Total number of other employees paid over \$50,000

FOUNDATION		U4//41 Tager
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	IONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	_	
	-	_
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce	information such as the d, etc.	Expenses
1 N/A		
2		
		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines	s 1 and 2.	Amount
1 N/A		
2		
	· ··· · ·	
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	•	0.
		Form QQO-PF (2008)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndation	ns, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	10,557,711.
b	Average of monthly cash balances	1b	10,557,711. 103,679.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	10,661,390.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	10,661,390.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	159,921.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	10,501,469.
6	Minimum investment return. Enter 5% of line 5	6	525,073.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	d certai	
1	Mınimum ınvestment return from Part X, line 6	1	525,073.
2a	Tax on investment income for 2008 from Part VI, line 5		
b	Income tax for 2008. (This does not include the tax from Part VI.)	*	
C	Add lines 2a and 2b	2c	3,334.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	521,739.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	521,739.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	521,739.
P	art XII Qualifying Distributions (see instructions)		. "
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а			915,176. 0.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	915,176.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		· · ·
	income. Enter 1% of Part I, line 27b	5	3,334.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,334. 911,842.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	jualifies	

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2007	(c) 2007	(d) 2008
1 Distributable amount for 2008 from Part XI,				
line 7				521,739.
2 Undistributed income, if any, as of the end of 2007		,	4	*
a Enter amount for 2007 only		*	319,012.	
b Total for prior years:		the second contract of the second contract of		
 ,,		0.		
3 Excess distributions carryover, if any, to 2008:	, , , , , , , , , , , , , , , , , , , ,	, ,	54	
a From 2003	, ,	w .,	, ,	
b From 2004		*. : * * * * * * * * * * * * * * * * * *	`, 1% > 1 \ 2 \	*
c From 2005		1	, <u>, , , , , , , , , , , , , , , , , , </u>	
d From 2006			, , ,	
e From 2007	a si si si si sa ana ana ana ana ana ana ana ana ana			•
f Total of lines 3a through e	0.		^ ^ ^ ^	
4 Qualifying distributions for 2008 from	4			* 31
Part XII, line 4: ►\$ 915,176.			210 010	
a Applied to 2007, but not more than line 2a	* ', '		319,012.	3%
b Applied to undistributed income of prior				, · · · ·
years (Election required - see instructions)	7 t ' V ' '	0.	***	* ·
c Treated as distributions out of corpus	0	* * * * * * * * * * * * * * * * * * * *	* ,	` ` `
(Election required - see instructions)	0.	<u>'</u>		E01 F00
d Applied to 2008 distributable amount	74 405		*	521,739.
e Remaining amount distributed out of corpus	74,425.	, , ,	31 31	
5 Excess distributions carryover applied to 2008 (If an amount appears in column (d), the same amount	0.	, x , k 🐒	***	0.
must be shown in column (a)) 6 Enter the net total of each column as indicated below:		,		
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	74,425.			*
b Prior years' undistributed income. Subtract	* * * * *		, , , , , ,	
line 4b from line 2b	ું જું ત્ ^{રુ} ત	0.	•	•
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	, , , , , , , , , , , , , , , , , , ,	0.	To the second se	
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2007. Subtract line				
4a from line 2a. Taxable amount - see ınstr.	*		0.	
f Undistributed income for 2008. Subtract	• " ' " "		`	
lines 4d and 5 from line 1. This amount must				
be distributed in 2009				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	_			
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2003				
not applied on line 5 or line 7	0.			<u>.</u>
9 Excess distributions carryover to 2009.	E 4 40-			
Subtract lines 7 and 8 from line 6a	74,425.			
10 Analysis of line 9:				
a Excess from 2004			ļ	
b Excess from 2005			ļ	
c Excess from 2006				
d Excess from 2007				
e Excess from 2008 74,425.				

.1 THOMAS V. GIDDENS, JR. CHARITABLE Form 990-PF (2008) FOUNDATION 41-2047741 Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2008, enter the date of the ruling 4942(j)(3) or b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(5) Prior 3 years 2 a Enter the lesser of the adjusted net Tax year (a) 2008 (b) 2007 (d) 2005 (e) Total (c) 2006 income from Part I or the minimum investment return from Part X for each vear listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year c "Support" alternative test - enter: (1) Total support other than gross investment income (interest. dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV | Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here 🕨 🗶 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number of the person to whom applications should be addressed: b The form in which applications should be submitted and information and materials they should include:

Form **990-PF** (2008)

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors;

c Any submission deadlines:

FOUNDATION

41-2047741 Page 11

Part XV | Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of recipient Purpose of grant or contribution Amount Name and address (home or business) a Paid during the year SEE STATEMENT 10 595,700. Total b Approved for future payment NONE 0. Total

Form **990-PF** (2008)

823611 01-02-09

41-2047741 Page 12

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	d business income		ded by section 512, 513, or 514	(e)		
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income		
1 Program service revenue:	code		code				
a	-		- 		-		
<u> </u>			1 1				
c			_				
e	_						
f	-		1 1				
g Fees and contracts from government agencies							
2 Membership dues and assessments		-					
3 Interest on savings and temporary cash		.					
investments			14	5.			
4 Dividends and interest from securities			14	358,269.			
5 Net rental income or (loss) from real estate:							
a Debt-financed property							
b Not debt-financed property			_				
6 Net rental income or (loss) from personal property							
7 Other investment income			14	<600.	•		
8 Gain or (loss) from sales of assets other than inventory			14	50,907.			
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory							
11 Other revenue:							
a							
b							
C							
d	_ \	·-·-·					
e							
12 Subtotal. Add columns (b), (d), and (e)		0	•	408,581.			
13 Total. Add line 12, columns (b), (d), and (e)		_		13	408,58		

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).								
	· · · · · · · · · · · · · · · · · · ·								
823621 01-02-09	Form 990-PF (20)								

Form 990-I		DATION	UK. CHARITAB	ΠE	41	-2047741	Page 13	
Part X		egarding Transfers To	and Transactions	and Relation	onships With N	loncharitable	е	
	Exempt Organ					· · · · · · · · · · · · · · · · · · ·	G	
		rectly engage in any of the follow			section 501(c) of		Yes No	
	•	c)(3) organizations) or in section	, , ,	anizations?			, , ,	
Transfers from the reporting foundation to a noncharitable exempt organization of:								
(1) (1a(1)	X						
(2) (1a(2)	X						
b Other								
(1) 5	1b(1)	X						
(2) F	1b(2)	X						
	Rental of facilities, equipment,					1b(3)	X	
	Reimbursement arrangements	5				1b(4)	$\frac{\Lambda}{X}$	
	oans or loan guarantees	embership or fundraising solicital	tions			1b(5)	X	
		ailing lists, other assets, or paid e				1b(6)	$\frac{\Lambda}{X}$	
		s "Yes," complete the following sci		alwave chow the	fair market value of th			
		foundation. If the foundation rece					ets,	
		other assets, or services received		noo m any a anoa	ionon or onaring arran	goment snow m		
(a)Line no	(b) Amount involved	(c) Name of noncharitat		(d) Descr	ription of transfers, transac	ctions, and sharing ar	rangements	
		N/A		1 ' '				
	<u> </u>			1				
								
 -			·					
			<u> </u>					
							•	
						-		
ın sec		etly affiliated with, or related to, or er than section 501(c)(3)) or in se nedule.	, -	nizations describ	ed	Yes	X No	
	(a) Name of org		(b) Type of organization	1	(c) Description of	relationship		
-	N/A			1	<u> </u>	<u> </u>		
		· · · · · · · · · · · · · · · · · · ·		1				
		nave examined this return, including ac- er than taxpayer or fiduciary) is based o				belief, it is true, corre	ct,	
	1 Tolk	Throng 3	3/15/10	- Hu	10,00			
Si Si	gnature of officer or trustee		Date	Title	180			
Sign Here	Preparer's signature	w alvey		Date 217/10	Check if self- employed >	Preparer's identify	ying number	

MOSS ADAMS LLP

SEATTLE, WA 98104

999 THIRD AVENUE, SUITE 2800

EIN 🕨

Phone no.

206-302-6500

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, and 990-PF.

OMB No 1545-0047

Employer identification number

2008

	THOMAS V. GIDDENS, JR. CHARITABLE	41 2047741
Organization type (chec	FOUNDATIONk one):	41-2047741
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt chantable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt chantable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
for both the General Rule	in is covered by the General Rule or a Special Rule . (Note. Only a section 501(c)(7), (8), a and a Special Rule. See instructions.)	or (10) organization can check boxes
General Rule		
•	ns filing Form 990, 990·EZ, or 990·PF that received, during the year, \$5,000 or more (in maplete Parts I and II.	oney or property) from any one
Special Rules		
509(a)(1)/170(b)	01(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of (1)(A)(vi), and received from any one contributor, during the year, a contribution of the granger Parts I and Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1 Complete Parts I and	eater of (1) \$5,000 or (2) 2% of the
aggregate conti	01(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any onbutions or bequests of more than \$1,000 for use <i>exclusively</i> for religious, charitable, so e prevention of cruelty to children or animals. Complete Parts I, II, and III.	
some contributi \$1,000. (If this betc., purpose. D	01(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any organization filing Form 990, or Form 990-EZ, that received from any organizations disposed in the second process of the second	d not aggregate to more than n exclusively religious, chantable,
Caution. Organizations	that are not covered by the General Rule and/or the Special Rules do not file Schedule B	(Form 990, 990-F7 or 990-PF) but
they must answer "No" o	on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, neet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	
LHA For Privacy Act ar	nd Paperwork Reduction Act Notice, see the Instructions Schedule	B (Form 990, 990-EZ, or 990-PF) (2008)

for Form 990. These instructions will be issued separately.

THOMAS V. GIDDENS, JR. CHARITABLE FOUNDATION

41-2047741

ESTATE OF THOMAS V. GIDDENS JR. 2400 NW 80TH STREET, STE 139 S 550,000. Complete Part II if there is a noncest contribution Complete Part II if there is a noncest contribution Person Payrol Noncest No. Name, address, and ZIP + 4 Aggregate contributions Person Payrol Noncest No. Name, address, and ZIP + 4 Aggregate contributions Person Payrol Noncest No. Name, address, and ZIP + 4 Aggregate contributions Person Payrol Noncest No. Name, address, and ZIP + 4 Aggregate contributions Person Payrol Noncest No. Name, address, and ZIP + 4 Aggregate contributions Person Payrol Noncest No. Name, address, and ZIP + 4 Aggregate contributions Person Payrol Noncest Noncest No. Name, address, and ZIP + 4 Aggregate contributions Person Payrol Noncest Nonce	Part I	Contributors (see instructions)		
2400 NW 80TH STREET, STE 139 S S50,000.		• •	, , ,	(d) Type of contribution
No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution	1	2400 NW 80TH STREET, STE 139	\$\$	Payroll
\$ Payroll Noncash		· ·	• • • • • • • • • • • • • • • • • • •	(d) Type of contribution
No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person Payroll Noncash Complete Part II of there is a noncash contribution Person Payroll Type of contribution Person Payroll Noncash			\$	Payroll
Person Payroll Noncash Complete Part II if there is a noncash contribution Payroll Type of contribution Person Payroll Type of contribution Person Payroll Noncash Complete Part II if there is a noncash contribution Person Payroll Noncash Complete Part II if there is a noncash contribution Person Payroll Type of contribution Person Payroll Noncash Complete Part II if there is a noncash contribution Person Payroll Noncash Noncash Complete Part II if there is a noncash contribution Person Payroll Noncash Complete Part II if there is a noncash contribution Person Payroll Payroll Payroll Payroll Payroll Payroll Payroll Payroll Noncash Payroll Payroll Payroll Payroll Noncash Payroll Payroll Payroll Noncash Payroll Payroll Payroll Payroll Payroll Payroll Payroll				
No. Name, address, and ZIP + 4 Aggregate contributions Person			\$	Payroll
\$ Payroll Noncash Complete Part II if there is a noncash contribution Person Payroll Type of contribution Person Payroll Noncash Complete Part II if there is a noncash contribution Person Payroll Noncash Complete Part II if there is a noncash contribution Person Payroll Noncash Nonca		• • •		(d) Type of contribution
No. Name, address, and ZIP + 4 Aggregate contributions Person Payroll Noncash (Complete Part II if there is a noncash contribution payroll Aggregate contributions (a) No. Name, address, and ZIP + 4 Aggregate contributions Person Payroll Type of contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash Contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash contribution payroll Noncash (Complete Part II if there is a noncash co			\$	Payroll
\$ Payroll Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Person Payroll Noncash (Complete Part II if there is a noncash contribution)				(d) Type of contribution
No. Name, address, and ZIP + 4 Aggregate contributions Person Payroll Noncash (Complete Part II if there			_	Payroll Noncash (Complete Part II if there is a noncash contribution.)
\$ Payroll Noncash (Complete Part II if there				(d) Type of contribution
823452 12-18-08 Schedule B (Form 990, 990-EZ, or 990-PF) (20				Payroll Noncash (Complete Part II if there is a noncash contribution.)

<u></u>							
FORM 990-PF INTEREST ON SAV	INGS A	ND TEM	PORARY C	ASH :	INVESTMENTS	STATEMENT	
SOURCE						AMOUNT	
CHARLES SCHWAB					-		5
TOTAL TO FORM 990-PF, PART I	, LINE	3, CO	LUMN A		-		5
FORM 990-PF DIVIDEN	DS AND	INTER	EST FROM	SEC	JRITIES	STATEMENT	
SOURCE		GROSS	AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A	.)
CHARLES SCHWAB LAIRD NORTON TYEE LAIRD NORTON TYEE	-		280,738. 120,963. 7,475.	•	50,907. 0. 0.	229,8 120,9 7,4	63
TOTAL TO FM 990-PF, PART I,	LN 4 =		409,176.		50,907.	358,2	69
FORM 990-PF	O'.	THER I	NCOME			STATEMENT	-
DESCRIPTION			(A) REVENUE PER BOOKS	s	(B) NET INVEST- MENT INCOME	(C) ADJUSTE NET INCO	
MISC INVESTMENT INCOME			<(600.>	<600	.>	
TOTAL TO FORM 990-PF, PART I	, LINE	11	<(600.>	<600	·>	
FORM 990-PF		LEGAL	FEES			STATEMENT	4
DESCRIPTION	(/ EXPEI PER I		(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM	(D) CHARITA E PURPOS	
LEGAL	11	1,756.	1,	,650.	-	10,1	06.
TO FM 990-PF, PG 1, LN 16A	11	L,756.	1,	,650.	 	10,1	06

FORM 990-PF	ACCOUNTI	NG FEES	S'	TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
ACCOUNTING	20,692.	2,904.		17,789.
TO FORM 990-PF, PG 1, LN 16B	20,692.	2,904.		17,789.
FORM 990-PF (OTHER PROFES	SIONAL FEES	S'	TATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEES	23,097.	23,097.		0.
TO FORM 990-PF, PG 1, LN 16C	23,097.	23,097.		0.
FORM 990-PF	ТАХ	ES	S'	TATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAXES PAYROLL TAXES	8,000. 23,845.			20,499.
TO FORM 990-PF, PG 1, LN 18	31,845.	3,346.		20,499.
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BUSINESS REGISTRATION FEE OPERATIONS EXPENSE MEMBERSHIP DUES	125. 2,143. 495.	18. 301. 0.		107. 1,842. 495.
TO FORM 990-PF, PG 1, LN 23	2,763.	319.		2,444.
				

FORM 990-PF OT	HER INVESTMENTS			STATEM	ENT !
DESCRIPTION	VALUATION METHOD	BOOK VA	ALUE	FAIR M VAL	
EATON VANCE TAX MANAGED EMERG MKT	S COST			- -	
FD			7,164.		08,287
HARBOR INTERNATIONAL FD	COST		3,744.		98,635
LONGLEAF PARTNERS SMALL CAP FD NORTHERN GBL REAL ESTATE FD	COST		7,813.		92,261
PIMCO TOTAL RETURN FUND	COST COST		2,867. 1,163.		10,253. 33,472.
UMB SCOUT INTL FUND	COST		761.		15,894
VANGUARD EMERGING MKTS STK INDX F			949.		08,071
VANGUARD EURO STK INDX SIGNAL	COST		2,707.		03,437
VANGUARD PACIFIC STK INDX FD	COST		1,745.		73,308
VANGUARD TOTAL BD MARKET INDX FD	COST		3,945.		14,350
VANGUARD TOTAL STOCK MKT INDX FD	COST	6,661	.,868.	4,6	69,562
TOTAL TO FORM 990-PF, PART II, LI	NE 13	13,501	.,726.	10,0	27,530
RECIPIENT NAME AND ADDRESS	RECIPIENT RELA AND PURPOSE O		RECIP STA		AMOUNT
AMARA PARENTING AND ADOPTION SERVICES	NONE		509(A)		35,000
3300 E. UNION ST, SEATTLE, WA 98122	SUPPORT ADOPTION SERVICES AND FOUR PARENT PROGRAMS				·
THE ARC OF KING COUNTY 233 6TH AVENUE N., SEATTLE, WA 98109	NONE PARENT TRAINING SUPPORT SVCS FO	R	509(A)	(1)	20,000
BOYS & GIRLS CLUBS OF KING COUNTY 603 STEWARD #300, SEATTLE, WA 98101			509(A)	(1)	30,000
CARRIE LYNN CHILDREN'S CENTER 826 N. MAIN STREET, ROCKFORD, IL 91103	NONE TRAINING & SUPPOURT APPOINTED		509(A)	(1)	75,000

THOMAS V. GIDDENS, UK. CHARITAD	————		
CHILDHAVEN 316 BROADWAY, SEATTLE, WA 98122-5325	NONE PROTECT & TREAT ABUSED CHILDREN 1 MOS - 5 YRS OF AGE	509(A)(1)	35,000.
COLUMBIA LEGAL SERVICES 101 YESLER WAY, SUITE 300, SEATTLE, WA 98104	NONE LEGAL SERVICES & ADVOCACY, FOR HOMELESS & FOSTER YOUTH	509(A)(1)	35,000.
FAMILY SERVICES OF KING COUNTY 615 SECOND AVENUE, SUITE 150, SEATTLE, WA 98104	NONE CHILDCARE FOR HOMELESS FAMILIES	509(A)(1)	35,000.
FIRST PLACE P.O. BOX 22536, SEATTLE, WA 98122	NONE EDUCATION & SERVICES FOR HOMELESS OR AT RISK CHILDREN	509(A)(1)	25,000.
NEIGHBORCARE HEALTH (FKA PUGET SOUND NEIGHBORHOOD HEALTH CENTER) 905 SPRUCE ST., SUITE 300, SEATTLE, WA 98104	NONE HEALTH CARE SVCS, CASE MGMT & OUTREACH TO HOMELESS YOUTH	509(A)(1)	25,000.
RYTHER CHILD CENTER 2400 NE 95TH STREET, SEATTLE, WA 98115-2426	NONE EARLY MENTAL HEALTH ASSESSMENT OF CHILDREN	509(A)(1)	50,000.
SANCTUARY ART CENTER 1604 NE 50TH ST, SEATTLE, WA 98105	NONE WORKFORCE TRAINING FOR HOMELESS & AT RISK YOUTH	509(A)(1)	15,000.
WASHINGTON STATE CASA 603 STEWART ST, #206, SEATTLE, WA 98101	NONE TRAINING & SUPPORT FOR COURT APPOINTED CHILD ADVOCATES	509(A)(1)	10,000.
YMCA OF GREATER SEATTLE 909 FOURTH AVENUE, SEATTLE, WA 98104	NONE SUPPORT OF AFTER SCHOOL PROGRAMS FOR FOSTER & AT RISK CHILDREN	509(A)(1)	50,000.

			
YOUTHCARE 2400 NE 54TH ST, SEATTLE, WA 98105	NONE SUPPORT FOR ADOLESCENT EMERG SHELTER & IND'T LIVING PROGRAM	509(A)(1)	65,000.
SOCIAL VENTURE PARTNERS 1601 SECOND AVENUE, SEATTLE, WA 98101		509(A)(1)	5,700.
KINDERING CENTER 16120 NE EIGHTH STREET, BELLEVUE, WA 98008	NONE SUPPORT/EDUCATION FOR FOSTER/KINSHIP PARENTS	509(A)(1)	35,000.
TREEHOUSE 2100 24TH AVENUE S. STE. 200, SEATTLE, WA 98144	NONE SUPPORT FOR FOSTER CHILDREN PROGRAMS	509(A)(1)	25,000.
THE MOCKINGBIRD SOCIETY 2100 24TH AVENUE S. STE. 240, SEATTLE, WA 98144		509(A)(1)	25,000.
TOTAL TO FORM 990-PF, PART XV, LII	NE 3A		595,700.

FORM 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

ame(s) THOMAS V. G	IDDENS, JR. C	HARITABLE		Identifying Nun	nber
FOUNDATION	222210, 0111			41-204	7741
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
	-	-0-			
10/15/08	834.	834.			
10/15/08	<3,018.>	<2,184.>			
1/15/08	833.	<1,351.>			
2/15/09	834.	<517.>			
05/15/09	833.	316.	153	.000109589	
					
	-				
					
					· · · · · · · · · · · · · · · · · · ·
					-
			, 		
alty Due (Sum of Colum				<u> </u>	

^{*} Date of estimated tax payment, withholding credit date or installment due date.

812511 04-25-08 Form 8868 (Rev. April 2009) Department of the Tressury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

cempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

•	re filing for an Automatic 3-Month Extension, complete only Part I and check this box			▶ 🛣						
-	re filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this									
Do not or	emplete Part II unless you have already been granted an automatic 3-month extension on a previously t	led Fo	m 8868.							
Part	Automatic 3-Month Extension of Time. Only submit original (no copies needed).	-								
A corpora	tion required to file Form 990-T and requesting an automatic 6-month extension - check this box and cor	nplete								
art I only				▶ 🗔						
VI other o	Il other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time									
	ome tax returns.			-						
noted bel not autor you must	c Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group raturns, or a composite or consult the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic for form 6868.	ically it	(1) you wated Form	ant the additional 990-T. instead,						
Гуре ог	Name of Exempt Organization	Emp	loyer iden	tification number						
rint	THOMAS V. GIDDENS, JR. CHARITABLE									
	FOUNDATION	4	1-204	7741						
ie by the se date for ing your	Number, street, and room or suite no. If a P.O. box, see Instructions.		•							
itum. See structions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions.									
	SEATTLE, WA 98103									
	k type of return to be filed (file a separate application for each return):									
neck (y	pe of return to be meditive a separate appacation for each return):									
Fon	orm 990 Form 990-T (corporation) Form 4720									
Fon	m 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5227									
	m 990-EZ Form 990-T (trust other than above) Form 6069									
X Fon	m 990-PF L Form 1041-A L Form 8	870								
	RICHARD WATKINS			·						
The bo	oks are in the care of > 2400 NW 80TH STREET, STE 139 - SEATTLE,	WA	9811	7-4449						
Teleph	one No. ► 206-276-5090 FAX No. ►									
-	rganization does not have an office or place of business in the United States, check this box			` ▶ □						
	s for a Group Return, enter the organization's four digit Group Exemption Number (GEN), if the									
	. If it is for part of the group, check this box and attach a list with the names and EtNs of all									

i request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until JANUARY 15, 2010 , to file the exempt organization return for the organization named above. The extension										
is fo	or the organization's return for:									
_	Calendar year or									
▶ Î	X tax year beginning JUN 1, 2008 , and ending MAY 31, 2009									
		_	<u> </u>							
2 If th	is tax year is for less than 12 months, check reason: Initial return Final return		Change in	accounting period						
la If th	is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any									
non	refundable credits. See instructions.	3a	\$	12,018.						
b If th	is application is for Form 990-PF or 990-T, enter any refundable credits and estimated									
	payments made. Include any prior year overpayment allowed as a credit.	3ь	\$	3,018.						
	ance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,									
	osit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).									
	instructions.	30	\$	9,000.						
aution.	f you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-	tO for pay	ment instructions.						
HA F	or Privacy Act and Paperwork Reduction Act Notice, see Instructions.		For	m 8868 (Rev. 4-2009)						

	Form I	8868 (Rev 4-2009)				Page 2			
• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box									
7		Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed		8868.					
If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).									
८	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).								
37	Name of Exempt Organization Type or THOMAS V. GIDDENS, JR. CHARITABLE								
7	print	FOUNDATION	4	1-2047	741				
	File by extended due date filing the	Number, street, and room of suite no. If a P.O. box, see instructions.	For IRS use only						
_	retum.	see City, town or post office, state, and ZIP code. For a foreign address, see instructions.				Fig.			
U)	Chec	k type of return to be filed (File a separate application for each return):							
237		Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720		orm 5227 orm 6069	Form	8870			
ಬ ()	STOP	Pl Do not complete Part II if you were not already granted an automatic 3-month extension on a previou	ısiy file	d Form 886	88.				
4		THE FOUNDATION							
JO V	. Th	e books are in the care of > 600 N 36TH AVENUE, NO. 326 - SEATTLE, V	VA 9	8103					
יי היי	_	lephone No. ► 206-905-1450 FAX No. ►							
 		the organization does not have an office or place of business in the United States, check this box			▶ □	7			
マ	. 16	this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)				— :k this			
0	hov i								
C	4	I request an additional 3-month extension of time until APRIL 15, 2010 .	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
		For calendar year, or other tax year beginning JUN 1, 2008, and ending _	MAY	31, 2	2009				
C	8	If this tax year is for less than 12 months, check reason: Initial return			accounting p	perlod			
4	4 7	State in detail why you need the extension							
_	4	ADDITIONAL TIME IS NEEDED TO FILE A COMPLETE AND ACCUR	RATE	RETUR	RN.				
,	4			·					
α) 8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any							
	>	nonrefundable credits. See instructions.	8a	\$	12,0)18.			
_	ЪЬ	If this application is for Form 990-PF, 990-T, 4720, or 6089, enter any refundable credits and estimated	132						
1		tax payments made, include any prior year overpayment allowed as a credit and any amount paid	772.8		12 0	110			
		previously with Form 8868.	86	\$	12,0	110.			
	C	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit	_	١.		0.			
		with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	. Bc	1.5					
	11.4.	Signature and Verification	a baat -		las and half-4				
	ıt is tn	penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to th ue, correct, and complete, and that I am authorized to prepare this form		•	•	,			
	Signal	ture Druke a Dacy Title > CPS	Date	<u>►1/14</u>	/2010				
		σ		Earm.	DOGG /Day	4.2000			