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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

2009

OMB No 1545-0052

For	ca	endar :	year 2009, or tax	year begin	ning		, ar	nd ending				
G	Che	ck all ti	hat apply:	Initial re	eturn 🗍	Initial re	eturn of a for	mer public chai	rity	Final re	turn	
			****	Amend	led return		ress change	· —	•	nange		
U	se ti	ne IRS	Name of foundation						ΑE	mployer identification nu	mber	
•		el.	JAMES & CK CC	DLES FOUN	IDATION					26-1501		
O	the	wise,	Number and street (			livered to	street address)	Room/suite	ВТ	elephone number (see pag		ctions)
	-	nt	P O. BOX 3543	011 0 00x man			•,	1.00////02/10		206-933-		,
	or t	-	City or town, state, a	and ZIP code					C 15.	exemption application is pe		
		pecific ctions.	SEATTLE			WA		98124-3543		Foreign organizations, che	•	
			of organization:	Section					f	Foreign organizations med		ں -
Ü	Se	ction 49	947(a)(1) nonexer	mpt charitab	le trust C		able private			check here and attach cor	-	` ▶ □
	Ear	marka	t value of all asse	te at and	J Accounting r	nothod	X Cash	Accrual		private foundation status w		_
			m Part II, col (c),		Other (sp	ecify)		_	1	ider section 507(b)(1)(A), c the foundation is in a 60-m		
		16)		1.432.081	(Part I, column (c	l) must b	e on cash bas	ıs)		der section 507(b)(1)(B), o		▶ 🔲
Pa	rt I	Anal	ysis of Revenue				evenue and		•		(d) Disbursen	nents
		'	ts ın columns (b), (c), a	-			enses per	(b) Net investm	ent	(c) Adjusted net	for chantab	
		the am	ounts in column (a) (se	ee page 11 of th	ne instructions) )	·	books	income		income	purposes (cash basis o	
	1	Contri	outions, gifts, grants, et	tc , received (at	tach schedule)		28,000	····				
	2		If the foundatio	•	· •		, ,					
	3		st on savings and to				22		22			
	4		ends and interest fro				25,280	25	5,280			
	5	a Gross	rents						0			
a	ļ	<b>b</b> Net re	ental income or (los	s)	<u> </u>						,	
Ž	6	a Net g	aın or (loss) from sa	ale of assets i	not on line 10		16,895					
Revenue		<b>b</b> Gross	sales price for all asse	ets on line 6a	17,158							
Se.	7	Capit	al gain net income (	(from Part IV,	line 2)			16	3,895			
_	8	Net s	hort-term capital ga	in						0		
	9	Incon	ne modifications	·1				· <del></del>				
	10		sales less returns and		0							
~			Cost of goods sold	_	0						<u> </u>	
2030			s profit or (loss) (att		) .		0		0	0		
	11  12		income (attach sch . Add lines 1 throug					40			<del>                                     </del>	
<u>ਨ</u>	-		<del></del>				70,197 0	42	2 <u>,197</u>	0		
S S	13	•	pensation of officers		ustees, etc		U				<del> </del>	
	14 15		<sup>-</sup> employee salaries ion plans, employee	_							·····	
₹ X			l fees (attach sched				225		0	0		0
<b>س</b> ب		-	unting fees (attach	· ·			488		0			0
S ≥			r professional fees (		ule)		1,461		1,461	0	<del></del>	0
Administrative	17			(-111-011 001100	,		.,,		.,			
	18		(attach schedule) (see	page 14 of the	instructions)		187		0	0		0
(	19		eciation (attach sch	edule) and de	pletion .		0		0	0		
ᄼᇦ	20	Occu	pancy	R	ECEIVED							
		Trave	el, conferences, and	i meetings	- 4 C D	L_ n					Ļ	
and	22	Printi	ng and publications	NO MO	N/61~ -	) (3)						
		Othe	ng and publications r expenses (attach s	schedule)" <sup>∨©</sup>	V 0 5 2010	101	220		0	0	<u> </u>	0
Operating	24	TOLA	operating and au			188 J	<u>.</u> =-		:	_	ļ	_
era			ines 13 through 23	LUG	DEN, UT		2,581		1,461	0		0
ă	25		ributions, gifts, gran	ito paid .	-		82,000			<u> </u>	1	82,000
_	1		expenses and disbur		lines 24 and 25		84,581		1,461	0	1	82,000
	27		ract line 26 from line				44001					
			s of revenue over ex	•			-14,384		0.730		<del> </del>	
			nvestment income		<u>-</u>	-		41	0,736		<del> </del>	<del></del>
	1	¢ Adju	sted net income (if	i negative, en	ret -0-)					0		

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

Form **990-PF** (2009)

Page 2

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
u а —	بسحد	should be for end-of-year amounts only. (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	8,868	3,226	3,226
	2	Savings and temporary cash investments .		•	
	3	Accounts receivable   0			
		Less allowance for doubtful accounts	0	0	0
	4	Pledges receivable	<u> </u>		
	_		0		
	_	Less allowance for doubtful accounts  Grants receivable	- U	0	0
	5 6	Receivables due from officers, directors, trustees, and other		<del></del>	<del></del>
		disqualified persons (attach schedule) (see page 15 of the			
		instructions)	o	ol	0
	7	Other notes and loans receivable (attach schedule)	<u>-</u>	<u></u>	<u></u>
10			0		
Assets		Less allowance for doubtful accounts	U	<u> </u>	0
SS	8	Inventories for sale or use		-	<del></del>
⋖	9	Prepaid expenses and deferred charges .			
	_	Investments—U S and state government obligations (attach schedule)	0	0	0
		nvestments—corporate stock (attach schedule)	231,188	222,446	1,428,855
		Investments—corporate bonds (attach schedule)	0	0	0
	11	Investments—land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)	0	. 0	0
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	0	0	0
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)	0	o	0
	15	Other assets (describe  )	0	0	0
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	240,056	225,672	1,432,081
	17	Accounts payable and accrued expenses .			
40	18	Grants payable			_
Liabilities	19	Deferred revenue			
≝	20	Loans from officers, directors, trustees, and other disqualified persons	0	0	
ab	21	Mortgages and other notes payable (attach schedule)	0	0	
⊐	22	Other liabilities (describe  )	0	0	
	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here	1		
ý		and complete lines 24 through 26 and lines 30 and 31.			
nces	24	Unrestricted			
a	25				
3a	26	Temporarily restricted			
ᇴ	20	Permanently restricted			
5		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
<b>Assets or Fund Bala</b>	27				
ō	27	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	040.050	205.270	
SS	29	Retained earnings, accumulated income, endowment, or other funds	240,056	225,672	
4	30	Total net assets or fund balances (see page 17 of the instructions)	0.40.050		
Net		•	240,056	225,672	
_	31	Total liabilities and net assets/fund balances (see page 17			
		of the instructions)	240,056	225,672	
	t III	Analysis of Changes in Net Assets or Fund Balances	20 (must ===== ::::\t	<del></del>	
1		net assets or fund balances at beginning of year—Part II, column (a), line	So (must agree with		040.050
_		of-year figure reported on prior year's return)	•	1	240,056
_		amount from Part I, line 27a		2	-14,384
3		r increases not included in line 2 (itemize)		3	0
		ines 1, 2, and 3 .		4	225,672
		eases not included in line 2 (itemize)		5	0
	iotal	net assets or fund balances at end of year (line 4 minus line 5)—Part II, c	olumn (b), line 30 .	_ 6	225,672

(a) List and describe th	e kind(s) of property sold (e g , real est se, or common stock, 200 shs MLC C	tate,	nt incor	(b) How acquired P—Purchase D—Donation		Date acquired no , day, yr )	(d) Date sold (mo , day, yr )
1a See Attached Statement							
<u>b</u>				<u> </u>		•	
<u>c</u>							
<u>d</u>							•
	(A) Bassassian allowed	1	(a) Cook o	4b b		(h) Caus	or (loss)
(e) Gross sales price	(f) Depreciation allowed (or allowable)			r other basis ense of sale			) minus (g)
0		-		0		_	0
<u>b</u> 0		+	<del></del>	. 0	-		0
<b>c</b> 0		<del></del> -		<u>0</u> 0	<del></del>		0
<u>d</u> 0	0	+			+		0
<del></del>	wing gain in column (h) and owne		foundation			(I) Gains (Col	(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Exce	ss of col (i)		col (k), but not	less than -0-) or om col (h))
a 0	0			0			0
<b>b</b> 0	.0			. 0	+	<del></del>	0
с0				0	+		0
<u>d</u> 0		<u> </u>		0	+	<del></del>	0
<u>e</u> 0	<del>_</del>	<u> </u>	tor in Do	et Line 7	<del>'                                     </del>		0
2 Capital gain net income or				rt I, line 7 rt I, line 7	2		16,895
3 Net short-term capital gair	or (loss) as defined in section					· • •	
If gain, also enter in Part I,	, line 8, column (c) (see pages	s 13 an	d 17 of	the }			
	er -0- ın Part I, line 8				3		15,507
Part V Qualification Un	der Section 4940(e) for R	educe	d Tax c	n Net Investm	<u>ent Ir</u>	<u>icome</u>	
If section 4940(d)(2) applies, I Was the foundation liable for i If "Yes," the foundation does i	the section 4942 tax on the dinot qualify under section 4940	(e) Do	not com	plete this part.			
1 Enter the appropriate am	ount in each column for each	year;	see page	18 of the instru	ctions	before making	
(a) Base penod years	(b)			(c)	1	Dist	(d) nbution ratio
Calendar year (or tax year beginning	in) Adjusted qualifying distribution	ons	Net value	of noncharitable-use	assets		livided by col_(c))
2008		33,384			3,084		0.050748
2007	8	33,670		2,14	7,248		0 038966
2006	<del></del>					<u></u>	0 000000
<u>2005</u> 2004				<del></del>			0.000000 0.000000
2004	<b>L</b>	1				T	0.000000
2 Total of line 1, column (d)					.	2	0.089714
3 Average distribution ratio	for the 5-year base period—d oundation has been in existen	ivide th	e total o			3	0.044857
4 Enter the net value of non	charitable-use assets for 200	9 from	Part X, li	ne 5		4	1,277,245
5 Multiply line 4 by line 3 .						5	57,293
6 Enter 1% of net investmen	nt income (1% of Part I, line 2	7b)				6	407
7 Add lines 5 and 6						7	57,700
8 Enter qualifying distribution If line 8 is equal to or greathe Part VI instructions or	ater than line 7, check the box					8 part using a 1	82,000 % tax rate. See

Pa	int VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18	of the i	inst	ructi	ons)
1	a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1 ☐				
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
	b Domestic foundations that meet the section 4940(e) requirements in Part V, check				
	here X and enter 1% 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-)			0	
3	Add lines 1 and 2			407	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			407	
6	Credits/Payments				
	a 2009 estimated tax payments and 2008 overpayment credited to 2009  6a  0				
	b Exempt foreign organizations—tax withheld at source				
	c Tax paid with application for extension of time to file (Form 8868)				
	d Backup withholding erroneously withheld . 6d .			]	
7	Total credits and payments Add lines 6a through 6d . 7			0	
8	Enter any penalty for underpayment of estimated tax. Check here. If Form 2220 is attached.			0	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .   9			407	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			0	
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 0 Refunded ▶ 11			0	
Pa	rt VII-A Statements Regarding Activities				
	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
•	participate or intervene in any political campaign?	-	1a		
	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the	-	ıa		
	instructions for definition)?	1.	1b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities	i			
	C Did the foundation file Form 1120-POL for this year?		1c		Х
	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation $\blacktriangleright$ \$ 0 (2) On foundation managers. $\blacktriangleright$ \$	0		i	
	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	<u> </u>			
	on foundation managers > \$ 0			}	
2		-	2		Х
	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 instrument, articles				
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	[	3		Х
4	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		la l		X
	b If "Yes," has it filed a tax return on Form 990-T for this year?		₽p	-	X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	_	5		X
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions				
	that conflict with the state law remain in the governing instrument?		6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part >	_	7	X	
8	a Enter the states to which the foundation reports or with which it is registered (see page 19 of the				
	instructions) ► WA				
- 1	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney				
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation	<b>E</b>	3b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)				
	or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)?				
	If "Yes," complete Part XIV		9	į	X
10			1		<u> </u>
	their names and addresses .	1	10	х	
			. •		

ĮI.				
om	990-PF (2009) JAMES & CK COLES FOUNDATION 26-150	1605	Р	age 5
art	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 page 20 of the instructions)	11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
14 15	Website address ► N/A  The books are in care of ► Vernon C. Bennett, CPA Telephone no ► 206-933-91  Located at ► 4135 32nd Ave. SW Seattle WA ZIP+4 ► 98126  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here	45		
	and enter the amount of tax-exempt interest received or accrued during the year . ▶ 15		•	
Par	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
aı			Van	NI-
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
la	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?  Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X No			
	(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			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"  If the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)  Yes X No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?  Organizations relying on a current notice regarding disaster assistance check here	1b	N/A	
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?			
b	If "Yes," list the years 20 , 20 , 20 , 20 , 20 . Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see page 20 of the instructions )	2b	N/A	
c 3a	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here  20, 20, 20			
	enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	if the foundation had excess business holdings in 2009 )	3b	N/A	<u> </u>

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?

**b** Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable

4a

4b

Form	990-PF (2009)	JAMES & CK COLES FOUND	OITAC	Ν					26-1	501605	Page 6
Par	t VII-B Sta	tements Regarding Activitie	es for	Which Form	472	0 May Be Re	quired	(continued)	)		
5a	(1) Carry on p (2) Influence	did the foundation pay or incur any propaganda, or otherwise attempt to the outcome of any specific public	o influe electio	nce legislation (s				Yes	X No		
	(3) Provide a	y or indirectly, any voter registration grant to an individual for travel, stu- grant to an organization other than	dy, or	other similar purp				Yes Yes	X No		
	in section	509(a)(1), (2), or (3), or section 494	40(d)(2	?)? (see page 22	of the	instructions)		Yes	X No		
	education	or any purpose other than religious, al purposes, or for the prevention o	of cruel	ty to children or a	anıma	ls? .		Yes	X No		
	•	"Yes" to 5a(1)–(5), did any of the t								5b	N/A
	-	ction 53 4945 or in a current notice elying on a current notice regarding					ille illst	iuctions).	. 🗆	30	
									ш		
	tax because it r	"Yes" to question 5a(4), does the formal trained expenditure responsibility the statement required by Regulation.	ty for th	ne grant? .				Yes	X No		
	premiums on a	ion, during the year, receive any fur personal benefit contract?						Yes	X No		
	Did the foundat If "Yes" to 6b, f	ion, during the year, pay premiums, file Form 8870	, direct	ly or indirectly, o	n a pe	ersonal benefit c	ontract?	_		6b	X
7a	At any time dur	ing the tax year, was the foundation	n a par	ty to a prohibited	tax s	helter transactio	n?	Yes	X No		
b		oundation receive any proceeds or l		•						7b	i
Pa		nformation About Officers, and Contractors	, Dire	ctors, Truste	es, l	Foundation	Manage	ers, Highly	Paid E	mploye	es,
1		ers, directors, trustees, found	ation	managers and	d the	ir compensat	ion (see	page 22 of	the ins	tructions	 3).
		lame and address	(b) T	itle, and average ours per week oted to position	(c)	Compensation not paid, enter -0-)	(d) ( emplo	Contributions to yee benefit plan erred compensat	s	(e) Expense other allo	e account,
	nes E. Coles Lake Street S	s., #301N Kirkland WA 98033	Presi	dent 1.00		0			0		(
	Coles	,	Vice	President							
		5 , #401N Kirkland WA 98033		1 00		o			o		
Rob	ert Jaffe	00 Seattle WA 98104	Secre	etary 1 00		0			0		
	non C. Benne 5 32nd Ave ,	tt. CPA SW Seattle WA 98126	Treas	surer 2.00		0			0		
		on of five highest-paid emplo	yees (	other than the	ose i	ncluded on li	ne 1—se	ee page 23 c	of the in	structio	ns).
(a)		ss of each employee paid more than \$50,	,000	(b) Title, and avera hours per week devoted to position	:	(c) Compensation	,   '	d) Contributions employee benef lans and deferre compensation	it ed	(e) Expense other allo	
Ŋor	ne										
			•••								
						· · · · · · · · · · · · · · · · · · ·					
Tot	al number of	other employees paid over \$50,	,000							▶	1

orm 990-PF (2009) JAMES & CK COLES FOUNDATION		<u> 26-1501605</u>	Page 7
Part VIII Information About Officers, Directors, Trustees, Fand Contractors (continued)	oundation Managers, Highly Paid	l Employees	j,
3 Five highest-paid independent contractors for professional services (see p	page 23 of the instructions). If none, ente	r "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compens	ation
IONE			
			0
			0
			0
			0
			0
Total number of others receiving over \$50,000 for professional services		▶	
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant stathe number of organizations and other beneficiaries served, conferences convened, research papers.		Expense	s
1 N/A		<del></del>	
			··
2			
3			
		İ	
			_
4			
		1	
	24 6 11 - 12 - 12 - 12 - 12 - 12 - 12 - 12		_
Part IX-B Summary of Program-Related Investments (see page 2			
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2	Amount	t
l <u>N/A</u>			
•			
) ————————————————————————————————————			
••••••			
All other program-related investments See page 24 of the instructions			_
3			
		ĺ	^

Total. Add lines 1 through 3

Form **990-PF** (2009)

0

Par	Minimum Investment Return (All domestic foundations must complete this part. Foreign to see page 24 of the instructions )	oundat	ions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	Ą	
	purposes:		
а	Average monthly fair market value of securities	1a	1,288,294
b	Average of monthly cash balances .	1b	8,401
С	Fair market value of all other assets (see page 24 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	1,296,695
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d .	3	1,296,695
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25		
	of the instructions)	4	19,450
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,277,245
6	Minimum investment return. Enter 5% of line 5	6	63,862
Par	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of foundations and certain foreign organizations check here	perating	ı
1	Minimum investment return from Part X, line 6	1	63,862
2a	Tax on investment income for 2009 from Part VI, line 5	٠,	
b	Income tax for 2009 (This does not include the tax from Part VI) .	` '	
c	Add lines 2a and 2b	2c	407
3	Distributable amount before adjustments Subtract line 2c from line 1	3	63,455
4	Recoveries of amounts treated as qualifying distributions	4	•
5	Add lines 3 and 4	5	63,455
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
•	line 1	7	63,455
Par			
<del></del>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
·a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	82,000
b	Program-related investments—total from Part IX-B	1b	C
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		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	C
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	82,000
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 (see page 26 of the instructions)	5	407
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	81,593
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found		2.,000
	qualifies for the section 4940(e) reduction of tax in those years		

Part	XIII 'Undistributed Income (see page 26	of the	instructions)			
1	Distributable amount for 2009 from Part XI, line 7		(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
2	Undistributed income, if any, as of the end of 2009	-				63,45
a	Enter amount for 2008 only				8,287	
	Total for prior years 20 05 , 20 06 , 20 <u>07</u>	-		10,089	0,201	
ь 3	Excess distributions carryover, if any, to 2009	-		10,009		
	From 2004	o				
b	From 2005 .	<del>_</del>				
C	From 2006	<u> </u>			}	
d	From 2007	<u> </u>				
e	From 2008					
f	Total of lines 3a through e	╣	0			
4	<del>-</del>					
•	Qualifying distributions for 2009 from Part XII, line 4  \$ 82,000		}			
-	•				8,287	
	Applied to 2008, but not more than line 2a Applied to undistributed income of prior years	-			0,201	
D	(Election required—see page 26 of the instructions)			o		
_	Treated as distributions out of corpus (Election	$\vdash$	+	<u>U</u>		
·	required—see page 26 of the instructions)		o			
d	Applied to 2009 distributable amount			· · · · · · · · · · · · · · · · · · ·		63,455
e	Remaining amount distributed out of corpus		10,258			03,430
5	Excess distributions carryover applied to 2009	-	10,238		· · · · · · · · · · · · · · · · · · ·	
3	(If an amount appears in column (d), the	-	<del>-</del>			
	same amount must be shown in column (a) )					
6	Enter the net total of each column as indicated below:					
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	-	10,258			
	Prior years' undistributed income Subtract		10,236		· · · · · · · · · · · · · · · · · · ·	<del></del>
	line 4b from line 2b	Ì		10,089		
С	Enter the amount of prior years' undistributed			10,009		
·	income for which a notice of deficiency has					
	been issued, or on which the section 4942(a)					
	• •					
d	tax has been previously assessed					
u	Subtract line 6c from line 6b Taxable			10.000		
	amount—see page 27 of the instructions .			10,089		
е	Undistributed income for 2008 Subtract line	_				
	4a from line 2a Taxable amount—see page 27 of the	ie				
f	Instructions	-			0	
'						
	lines 4d and 5 from line 1. This amount must					,
7	be distributed in 2010					
•	Amounts treated as distributions out of					
	corpus to satisfy requirements imposed by					
	section 170(b)(1)(F) or 4942(g)(3) (see page 27 of					
	the instructions)	·				
8	Excess distributions carryover from 2004					
	not applied on line 5 or line 7 (see page 27 of the					
_	instructions)	·	0			
9	Excess distributions carryover to 2010.		40.05			
40	Subtract lines 7 and 8 from line 6a	<u> </u>	10,258			
10	Analysis of line 9					
a	Excess from 2005	_0				
b	Excess from 2006	0			İ	
C	Excess from 2007	0				
d	Excess from 2008	0				
е	Excess from 2009 10,	258		1	ı	

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

factors

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the		or Future Pa	yment	,
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	,	
Name and address (home or business)  a Paid during the year  Washington Policy Center P.O. Box 3643 Seattle WA 98124	or substantial contributor	501(c)(3)	Ongoing support	82,000
b Approved for future payment			3	a 82,000
Total		1	<u> </u>	

Third, old of modeling the					
Enter gross amounts unless otherwise indicated.	Unrelated bus	iness income	Excluded by section	n 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of
1 Program service revenue.	<u> </u>				the instructions )
a	<u> </u>	0		0	0
b		0		0	0
<u> </u>		0		0	0
d	<u> </u>	0		0	0
e	<u> </u>	0		0	0
f		0		0	0
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	22	
4 Dividends and interest from securities			14	25,280	
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	<u> </u>	· •;	<u> </u>	· <del>-</del>	
			18	16,895	
8 Gain or (loss) from sales of assets other than inventory		<u>.                                    </u>	10	10,093	
9 Net income or (loss) from special events	<b>-</b>	·	· · · · ·		
10 Gross profit or (loss) from sales of inventory					
4.4 =		0		0	0
11 Other revenue a	l l	0		0	0
b	· <del> </del>				
b		0		0	0
b		0		0	0
b		0		0	0
b c d e Subtotal Add columns (b), (d), and (e)		0		0 0 42,197	0 0 0
b c d e E Subtotal Add columns (b), (d), and (e)		0		0	0 0 0
b		0 0		0 0 42,197	0 0 0
b c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ac	complishment	of Exempt P	urposes	0 0 42,197 13	0
b c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ac Line No.  Explain below how each activity for which incom the accomplishment of the foundation's exempt	complishment e is reported in col	of Exempt P umn (e) of Part X'	urposes VI-A contributed in	0 0 42,197 13	0 0 0
b c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ac Line No. Explain below how each activity for which incom	complishment e is reported in col	of Exempt P umn (e) of Part X'	urposes VI-A contributed in	0 0 42,197 13	0 0 0
b c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ac Line No.  Explain below how each activity for which incom the accomplishment of the foundation's exempt	complishment e is reported in col	of Exempt P umn (e) of Part X'	urposes VI-A contributed in	0 0 42,197 13	0 0 0
b c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ac Line No.  Explain below how each activity for which incom the accomplishment of the foundation's exempt	complishment e is reported in col	of Exempt P umn (e) of Part X'	urposes VI-A contributed in	0 0 42,197 13	0 0 0
b c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ac Line No.  Explain below how each activity for which incom the accomplishment of the foundation's exempt	complishment e is reported in col	of Exempt P umn (e) of Part X'	urposes VI-A contributed in	0 0 42,197 13	0 0 0
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b c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ac Line No.  Explain below how each activity for which incom the accomplishment of the foundation's exempt	complishment e is reported in col	of Exempt P umn (e) of Part X'	urposes VI-A contributed in	0 0 42,197 13	0 0 0
b c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ac Line No.  Explain below how each activity for which incom the accomplishment of the foundation's exempt	complishment e is reported in col	of Exempt P umn (e) of Part X'	urposes VI-A contributed in	0 0 42,197 13	0 0 0
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b c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ac Line No.  Explain below how each activity for which incom the accomplishment of the foundation's exempt	complishment e is reported in col	of Exempt P umn (e) of Part X'	urposes VI-A contributed in	0 0 42,197 13	0 0 0
b c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ac Line No.  Explain below how each activity for which incom the accomplishment of the foundation's exempt	complishment e is reported in col	of Exempt P umn (e) of Part X'	urposes VI-A contributed in	0 0 42,197 13	0 0 0
b c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ac Line No.  Explain below how each activity for which incom the accomplishment of the foundation's exempt	complishment e is reported in col	of Exempt P umn (e) of Part X'	urposes VI-A contributed in	0 0 42,197 13	0 0 0
b c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ac Line No.  Explain below how each activity for which incom the accomplishment of the foundation's exempt	complishment e is reported in col	of Exempt P umn (e) of Part X'	urposes VI-A contributed in	0 0 42,197 13	0 0 0
b c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ac Line No.  Explain below how each activity for which incom the accomplishment of the foundation's exempt	complishment e is reported in col	of Exempt P umn (e) of Part X'	urposes VI-A contributed in	0 0 42,197 13	0 0 0
b c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ac Line No.  Explain below how each activity for which incom the accomplishment of the foundation's exempt	complishment e is reported in col	of Exempt P umn (e) of Part X'	urposes VI-A contributed in	0 0 42,197 13	0 0 0
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b c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ac Line No.  Explain below how each activity for which incom the accomplishment of the foundation's exempt	complishment e is reported in col	of Exempt P umn (e) of Part X'	urposes VI-A contributed in	0 0 42,197 13	0 0 0
b c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ac Line No.  Explain below how each activity for which incom the accomplishment of the foundation's exempt	complishment e is reported in col	of Exempt P umn (e) of Part X'	urposes VI-A contributed in	0 0 42,197 13	0 0 0
b c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ac Line No.  Explain below how each activity for which incom the accomplishment of the foundation's exempt	complishment e is reported in col	of Exempt P umn (e) of Part X'	urposes VI-A contributed in	0 0 42,197 13	0 0 0
b c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ac Line No.  Explain below how each activity for which incom the accomplishment of the foundation's exempt	complishment e is reported in col	of Exempt P umn (e) of Part X'	urposes VI-A contributed in	0 0 42,197 13	0 0 0
b c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ac Line No.  Explain below how each activity for which incom the accomplishment of the foundation's exempt	complishment e is reported in col	of Exempt P umn (e) of Part X'	urposes VI-A contributed in	0 0 42,197 13	0 0 0

orm 990-PF (20	OO9) JAMES & CK COLES FOUNDATION	26-1501605
Part XVII	Information Regarding Transfers To and Tr	ransactions and Relationships With Noncharitable
	Exempt Organizations	

4	Did the	organization directly of	a induspolit or	agage in any of the	- following with		nor organization	doscribod	T	Yes	No
1										162	, ido
		on 501(c) of the Code	(other than so	ection 501(c)(3) oi	rganizations) o	r in sect	tion 527, relating	to political	7, 5	1	- I
	organiz	ations?							:,	3 1	·- +
_	T	f Al		a nanaharitahla ay	t	diam of			1 1	٠.٠	i . 1
а		ers from the reporting f			tempt organiza	ilion or.			4 (4)		<del></del>
	(1) Ca	sh							1a(1)	$\vdash$	<u>X</u>
	(2) Oth	ner assets							1a(2)		X
b		ransactions:							,		7
_		les of assets to a nonc	haritahla eve	mnt organization					1b(1)	1	X
											X
		rchases of assets from							1b(2)	$\vdash$	
	(3) Re	ntal of facilities, equipr	ment, or other	assets					1b(3)		<u>X</u>
	(4) Re	ımbursement arranger	ments						1b(4)	l	<u> </u>
		ans or loan guarantees							1b(5)		Х
		rformance of services							1b(6)	į	X
_									1c		X
		g of facilities, equipme	_		· ·					<u>.                                    </u>	
d	If the a	nswer to any of the ab	ove is "Yes,"	complete the follo	wing schedule	. Colum	n (b) should alwa	ays show the	fair mai	ket	
	value o	of the goods, other ass	ets, or service	es given by the rep	porting foundat	tion. If th	ne foundation red	eived less th	an faır r	narket	t
	value i	n any transaction or sh	aring arrange	ement, show in col	umn (d) the va	alue of th	he goods, other a	assets, or ser	vices re	ceive	d.
<b>/-</b> \	1,50 50	(h) Amount involved		f nonchantable exempt	organization	(d) Dos	scription of transfers, t	ransactions and	channo ar	rannem	ente
(a)	Line no	(b) Amount involved	(c) Name o	i nonchantable exempt	organization	(u) Des	scription of transfers, t	iansacions, and	Silainiy ai	angen	- CINS
		0				<u> </u>					
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		<u> </u>				<u> </u>		<del></del>			
2a		foundation directly or in								٦	
		oed in section 501(c) o		ther than section t	501(c)(3)) or ın	section	5277	· · · <u>L</u>	Yes 🛚	] No	
b	If "Yes	," complete the following	ng schedule.								
		(a) Name of organization		(b) Type	of organization		(c) Des	cription of relation	ship		
				· · · · · · · · · · · · · · · · · · ·	<del></del>		<del></del>				
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	Linds	er penalties of perjury, I declar	re that I have eva-	mined this return inclus	ling accompanying	schedules	and statements, and	to the best of my	knowledd	e and	
		f, it is true, correct, and comp									
	Delle		/ /	o, proporor touror train t	and the second of	,,			,	50	
	1.	// **	<del></del>		1						
മ				7105		11/1/		RECTOR			
Here	Sig	nature of officer or trustee	<del></del>	- <del>,</del>	Da	ate	Tit	e			
Ĭ			<del>.</del>		Date		<u> </u>	Proported	dentifyin		
_		]			Date		Check if	number (s	-	-	
Sign	႓ૂઁ ≱	D 1	ヘン	/				<del></del>	of the instr		
S	[글품o	Preparer's	1	<u></u>	4		self-employed ▶		u.e ::150	ucuUNS)	
	Paid Preparer's Use Only	signature /	1)	V CPA	10/26/20	110	1				
	\$ 3	Firm's name (or yours if	Vernon C	. Bennett, CPA				EIN 🕨			
	1	self-employed), address,			N Cootto 144	1 00404			06) 022	0145	
	ــــــــــــــــــــــــــــــــــــــ	and ZIP code	<u>΄ /Ul Fiπh</u>	Avenuw, Suite 420	ου, Seattle, W	1 90 TU4		Phone no (2	00) 933	- <del>9</del> 140	

### Schedule B

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

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Name of the organization **Employer identification number JAMES & CK COLES FOUNDATION** 26-1501605 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 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 To For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization 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), and received from any one contributor, during the year, a contribution 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 For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to 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 Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year . Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), 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 line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or

990-PF).

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	(Form 990, 990-EZ, or 990-PF) (2009)	· · · · · · · · · · · · · · · · · · ·	Page 1 of 1 of Part I  Employer identification number
	CK COLES FOUNDATION		26-1501605
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	James E. & CK Coles  905 Lake Street S., #301N  Kirkland WA 98033  Foreign State or Province Foreign Country.	\$ 22,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	Colco, LLC  P.O Box 3543  Seattle WA 98124  Foreign State or Province: Foreign Country	\$6,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
. 3	Foreign State or Province Foreign Country	\$0_	Person Payroll Noncash (Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	Foreign State or Province Foreign Country	\$0_	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	Foreign State or Province. Foreign Country.	\$0	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution

. . 6

Foreign State or Province:

Foreign Country

(Complete Part II if there is a noncash contribution )

Person Payroll Noncash

### SCHEDULE O (Form 990)

## **Supplemental Information to Form 990**

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization	Employer identification number
JAMES & CK COLES FOUNDATION	26-1501605
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	***************************************
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Form	8868 (Rev	4-2009)	_	F	age 2
Note	e. Only o	filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check the complete Part II if you have already been granted an automatic 3-month extension on a previously find filing for an Automatic 3-Month Extension, complete only Part I (on page 1).			X
Pai	rt ((	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies i	neede	d).	
Тур	e or	Name of Exempt Organization Employe	r ident	fication num	ıber
prin	t	JAMES & CK COLES FOUNDATION 26-15016	305		
File by		Number, street, and room or suite no. If a P.O. box, see instructions	se only	'	_
extend due da		P.O. BOX 3543			
filing th		City, town or post office, state, and ZIP code. For a foreign address, see instructions			
instruc		SEATTLE WA 98124-3543			
Che	ck type	of return to be filed (File a separate application for each return):			
	Form 99	00 X Form 990-PF	Forn	n 6069	
同	Form 9	90-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 4720	Forn	n 8870	
=	Form 9		,		
		t complete Part II if you were not already granted an automatic 3-month extension on a previously filed F		<u>868.</u>	
		s are in the care of Vernon C Bennett, CPA 4135 32nd Ave SW Seattle WA Seattle WA 981	26		
	•	ie No. ▶ 206-933-9145 FAX No ▶			$\overline{}$
	_	anization does not have an office or place of business in the United States, check this box		🕨	· 🗀
		or a Group Return, enter the organization's four digit Group Exemption Number (GEN)		. If this is	
for the	he whol	e group, check this box .   .  .  ▶ If it is for part of the group, check this box .   .  .  ▶	ar	id attach a	
list v	vith the	names and EINs of all members the extension is for.	_		
4	l requ	est an additional 3-month extension of time until 11/15/2010 .			
5	For ca	alendar year 2009 , or other tax year beginning , and ending			
6	If this	tax year is for less than 12 months, check reason: Initial return Final return Change	in acc	ounting peri	od
7		in detail why you need the extension More time is requested to acquire all information needed to c			
		e an accurate return.			
	305421			• • • • • • • • • • • • • • • • • • • •	
8 a	If this	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,			
		ny nonrefundable credits. See instructions.	8a	s	
b		application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and			
		ated tax payments made. Include any prior year overpayment allowed as a credit and any			
		nt paid previously with Form 8868	8b	\$	
c		ce Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with	<u> </u>		
_		pupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c	s	0
		Signature and Verification		<u> </u>	<u> </u>
Unde		of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and that I am authorized to propose this form	wledge	and belief,	

Title ► CPA

Signature >

Date 8/15/2010

## JAMES & CK COLES FOUNDATION

# Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

ain	16,895	. 0			•	Depreciation										
Net Gain or Loss			Expense	or sale and Cost of	Improve-											_
Other Expenses	263	0			Valuation	Method										
Cost, Other Basis and Expenses					Cost or	Other Basis	263	0	0	0	0	0	0			
SS es	17,158	0			Gross Sales	Pnce	1,651	4,582	3,397	3,002	1,526	36	2,964			
Gross					Date	Sold	12/15/2008	10/17/2009	11/21/2009	11/21/2009	12/19/2009	12/19/2009	12/19/2009			
Totals	Securities	Other sales			Acquisition	Method	۵	۵	Д.	۵	۵	д	Ь			
					Date	Acquired	12/1/2007	8/31/2009	9/24/2009	9/3/2009	11/21/2009	10/20/2009	10/20/2009			
			3. "V" -110	Purchaser	15 a	Business										
						Purchaser										
Amount						CUSIP#	693718108									
	Long Term CG Distributions	Short Term CG Distributions				Description	45 shrs Paccar Stock	Expired Options	Expired Options	Expired Options	Expired Options	Expired Options	Expired Options			
				Check "X"	of Sale of		×	×	×	×	×	×	×			
						Index	1	7	က	4	2	9	7	8	6	10

## Line 16a (990-PF) - Legal Fees

		225	0	0	
		Revenue and			Disbursements for Charitable
	Name of Organization or Person Providing Service	Expenses per Books	Net Investment Income	Adjusted Net Income	Purposes (Cash Basis Only)
Π	K & L Gates	225			
I					

## Line 16b (990-PF) - Accounting Fees

0 0		int A	Income (Cash Basis Only)										
488	Revenue and		BOOKS	488									
		Name of Organization or		VCB Consutting & Accounting Services									
				_	2	3	4	5	9	7	8	6	10

## Line 16c (990-PF) - Other Fees

1,461 1,461 0	Disbursements Revenue and for Charitable	Expenses per Net Investment Adjusted Net	Books Income Income (C	nent Services 1,461 1,461						
		Name of Organization or	Person Providing Service	Goldman Sachs - Investment Se	3	2	9	8	6	10

Line 18 (990-PF) - Taxes

0 0 0	Disbursements or Charitable for Charitable Net Income Purposes	<u> </u>								
187	Revenue and Expenses Net Investment per Books Income		187							
	Description	Real estate tax not included in line 20	Tax on investment income	Income tax						
		1	2	3	4	2	9	 8	6	

- Other Expenses
خر
990-PF
~
2
Line
_

		220	0	0	0
		Revenue and			Disbursements
		Expenses	Net Investment	Adjusted Net	for Charitable
	Description	per Books	Income	Income	Purposes
Amortization See a	ee attached statement	0	0	0	0
Fund Raising					
Bank Fees		120			
State License		35			
Checks		65			

Part II, Line 10b (990-PF) - Investments - Corporate Stock

			231,188	222,446		
			Book Value	Book Value	FMV	FMV
	Description	Face Value	Beg. of Year	End of Year	Beg. of Year	End of Year
-	PACCAR, Inc Common Stock		231,188	230,925	1,133,650	1,431,033
7	Paccar Call Options	40		-920		
က	Paccar Call Options	62		-2,582		-1,580
4	Paccar Call Options	79		4,977		-198
2						
9						
7						
8						
6						
10					-	

## JAMES & CK COLES FOUNDATION

## Part IV (990-PF) - Capital Gains and Losses for Tax on Investment Income

		Amount											
	Long Term CG Distributions	S	[0]										•
Į	Short Term CG Distributions	8	0		Totals	17,158	0	263	16,895	0	0	0	16,895
						Gross		Cost or Other		FM V	Adjusted Basis		Gains Minus Excess
	-		₹	Date	Date	Sales	Depreciation	Basis Plus	Gain or	as of	as of	Excess of FMV	Excess of FMV   of FMV Over Adiusted
	Kind(s) of Property Sold	CUSIP #	Acquired	Acquired	Sold	Price	Allowed	Expense of Sale	Loss	12/31/69	12/31/69	Over Adj Basis	Basis or Losses
_	45 shrs Paccar Stock	693718108	٥	12/1/2007	12/1/2007   12/15/2008	1,651	ō	263	1,388			0	1.388
~	Expired Options		Ь	8/31/2009	10/17/2009	4,582	ō	0	4,582			0	4.582
ຕ	Expired Options		Ь	9/24/2009	9/24/2009 11/21/2009	3,397	0	0	3,397			0	3.397
4	Expired Options		Д	9/3/2009	11/21/2009	3,002	0	0	3,002			0	3,002
ص	Expired Options		Ь	11/21/2009	11/21/2009 12/19/2009	1,526	0	0	1,526			0	1.526
9	Expired Options		<u>a</u>	10/20/2009	0/20/2009 12/19/2009	36	o	0	98			0	36
7	Expired Options		Д	10/20/2009	10/20/2009 12/19/2009	2,964	ō	0	2,964			0	2.964
∞						0	ō	0	0			0	0
6						0	0	0	0			0	0
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Line
VII-A,
Part

		Check "X"					
	Name		Street	Cit	State	Zip Code	Foreign Country
1	James & CK Coles		905 Lake St S. #301	Kırkland	×	WA 98033	
7							
3							
4							
2							
9							
7							
8	:						
6							
10							

# Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

Check "X"				Foreign		Average
f Business Street	City	State	State   Zip Code	Country	Title	Hours
905 Lake Street S., #301N	Kirkland	۸۸	98033		President	Ψ-
905 Lake Street S., #401N	Kirkland	1	98033		Vice Presiden	-
925 4th Ave. #2900	Seattle	WA	98104		Secretary	
4135 32nd Ave., SW	Seattle		98126		Treasurer	2