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Form 990-PF

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

OMB No 1545-0052

2009

Department of the Treasury Internal Revenue Service

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

		ar year 2009, or tax year beginning		, and ending	· · · · · · · · · · · · · · · · · · ·	
G Ci	neck a		ial Return of a former p			nal return
		Amended return Name of foundation	Address	change Nar	ne change A Employer identification no	ımher
Use IRS I	the abel	Foss Family Foundation			91-1967549	anibei
Other	wise,	Number and street (or P O box number if mail is no	t delivered to street address)	Room/suite	B Telephone number (see the	e instructions)
pri or ty	nt voe	3945 NE Surber Drive			(206) 523-64	70
See Sp	ecific		State	ZIP code	C If exemption application i	s pending, check here 🟲
Instru		Seattle		98105	D 1 Foreign organizations, chi	-
Н			1(c)(3) exempt private t		2 Foreign organizations me here and attach computat	eting the 85% test, check
		ection 4947(a)(1) nonexempt charitable	counting method X C		E If private foundation statu	
		arket value of all assets at end of year J Acceptat II, column (c), line 16)	Other (specify)	asii Acciuai	under section 507(b)(1)(A	
•	\$	155,706. (Part I	, column (d) must be or		F If the foundation is in a 6 under section 507(b)(1)(E	0-month termination B), check here
Part	T /	Analysis of Revenue and	(a) Revenue and	(b) Net investme		(d) Disbursements
	E	xpenses (The total of amounts in	expenses per books	income	income	for charitable
	S	olumns (b), (c), and (d) may not neces- arily equal the amounts in column (a)				purposes (cash basis only)
	(see the instructions))	35 000			(02000000000)
		Contributions, gifts, grants, etc, received (att sch) Ck if the foundn is not reg to att Sch B	75,000.			
,	3	Interest on savings and temporary				
2		cash investments				
.	4	Dividends and interest from securities a Gross rents	2,125.	2,12		
, -	1	b Net rental income or (loss)				
D	6	a Net gain/(loss) from sale of assets not on line 10				
E		b Gross sales price for all assets on line 6a				
E		Capital gain net income (from Part IV, line 2)		-11,36	55.	
NU	8 9	general series and ser				
N U E		a Gross sales less returns and				
		allowances b Less Cost of				
		goods sold				
	_ I	c Gross profit/(loss) (att sch) Other income (attach schedule)				
		Other meome (attach schedule)				
		Total. Add lines 1 through 11	77,125.	-9,24	0.	
		Compensation of officers, directors, trustees, etc				
	- 1	Other employee salaries and wages Pension plans, employee benefits	·		1	
	140	a Legal fees (attach schedule)		RECE	TVED	
A D N	i	b Accounting fees (attach sch)	2,415.	2.41	5. 70	
I.	i i	c Other prof fees (attach sch)			1 0010 101	
Ž 1	1 17	Interest		A MAY 1		
P S E T R R A A	18	Taxes (attach scheduleXsee instr.)		1 1 1	- I I E	
A A	19	Depreciation (attach sch) and depletion		OGD	EN, UT	
N G E	20	Occupancy				
_		Travel, conferences, and meetings Printing and publications				
A E	23	Other expenses (attach schedule)				
A E X X D P E N N S E S		Investment Mgmt Fees	598.	5.9	8.	
S	24	Total operating and administrative	2 012	2 01	2	
S		expenses. Add lines 13 through 23 Contributions, gifts, grants paid	3,013. 37,850.	3,01		37,850
		Total expenses and disbursements.				
		Add lines 24 and 25	40,863.	3,01	3.	37,850
	4	Subtract line 26 from line 12: a Excess of revenue over expenses				
		and disbursements	36,262.			
		b Net investment income (if negative, enter -0-)			0.	
<u> </u>	For D	C Adjusted net income (if negative, enter -0-) rivacy Act and Paperwork Reduction Ac	t Notice see the inch.	ections	TEE 0.0001 00/00/10	Form 990-PF (2009
DAA	rur P	rivacy Act and Paderwork Reduction At	, i Nouce, see the instri	にいいける。	TEEA0301 02/02/10	ronn 330-Pr (∠003

<u>Par</u>	t III Analysis of Changes in Net Assets or Fund Balances		,
1	Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	210,246
2	Enter amount from Part I, line 27a	2	36,262
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	246,508
5	Decreases not included in line 2 (itemize) ► See Other Decreases Stmt	5	33,047
6	Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30	6	213,461

(see the instructions)

<u>Fari</u>	(a) List and describe	the kind(s) of property sold (e.g., rese, or common stock, 200 shares ML	eal estate,	(b) How ac	hase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a Sale of Loomis Sayles Mutual Funds						07/29/08	04/20/00
	b Sale of Loomis Sayles Mutual Funds P P						04/28/09
	Sale of Loomis Sayı	es Mutual runds		P		03/25/08	04/28/09
<u>c</u>							
<u>u</u>							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bar plus expense of sa		,	(h) Gain or (e) plus (f) m	
a	2,915.			3,109.			-194.
b	30,257.			1,428.		· · · · · · · · · · · · · · · · · · ·	-11,171.
С							
d							
е							
	Complete only for assets showing	ng gain in column (h) and owned by	the foundation on 12/31/69			(I) Gains (Colu	ımn (h)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a			ain minus column (k an -0-) or Losses (fr	(), but not less
а							-194.
b							-11,171.
<u>c</u>							
d							
е							
3	, -	capital loss) — If (loss), en oss) as defined in sections 1222(5) 8, column (c) (see the instructions)	_		3		-11,365.
Part	V Qualification Under	Section 4940(e) for Reduced	Tax on Net Investme	nt Incon	16		
If 'Yes	s,' the foundation does not qualif	on 4942 tax on the distributable am fy under section 4940(e) Do not cor each column for each year, see the	nplete this part	·	es	Yes (d)	No No
	Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use ass	sets	(col	Distribution umn (b) divided	
	2008						
	2007						
	2006		_				
	2005	10. 1-10.					
	2004						
2	Total of line 1, column (d)				2		
3	Average distribution ratio for the number of years the foundation	5-year base period – divide the tot has been in existence if less than 5	al on line 2 by 5, or by the years		3		
4	Enter the net value of noncharit	able-use assets for 2009 from Part 3	X, line 5		4		
5	Multiply line 4 by line 3				5		
6	Enter 1% of net investment inco	ome (1% of Part I, line 27b)			6		
7	Add lines 5 and 6				7_		
8	Enter qualifying distributions fro	m Part XII, line 4			8		
	, , , , ,						
	If line 8 is equal to or greater the Part VI instructions	an line 7, check the box in Part VI,	line 1b, and complete that p	art using a	a 1% t	ax rate See the	

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Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e),	or 4948 — se	e the instruct	ions)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1		1 1			
	Date of ruling or determination letter: $01/04/01$ (attach copy of letter if necessary - see instr.)		1 1			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,		1	_		<u>0.</u>
	check here → ☐ 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, column (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable					_
_	foundations only Others enter -0-)		2			<u>0.</u>
3	Add lines 1 and 2		3			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others	s enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5			0.
6	Credits/Payments					
	2009 estimated tax pmts and 2008 overpayment credited to 2009		_			
	Exempt foreign organizations — tax withheld at source		-			
	Tax paid with application for extension of time to file (Form 8868)		-			
	Backup withholding erroneously withheld 6d		- _			
_	Total credits and payments Add lines 6a through 6d	•	7			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8 9			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		10			0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid .	nded	11			<u> </u>
11	Enter the amount of line 10 to be Credited to 2010 estimated tax Refu	nueu	1111			
					Yes	No
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislate participate or intervene in any political campaign?	ion or did it	:	1 a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?			1 b		х
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of an or distributed by the foundation in connection with the activities	y materials p	oublished			
c	Did the foundation file Form 1120-POL for this year?			1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				Ţ	
	(1) On the foundation of	· \$	d on			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure foundation managers	e tax impose	1 011			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS3	>		2		Х
_	If 'Yes,' attach a detailed description of the activities					
-		rumont artic	05			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrong incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the	ne changes	62	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		Х
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?			4b		
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 dii with the state law remain in the governing instrument? 	rections that	conflict	6	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Pa	irt XV		7	Х	
8 a	Enter the states to which the foundation reports or with which it is registered (see the instruction	ns) 🟲				
t	olf 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 <i>General Instruction G² If 'No,' attach explanation</i>			8b	х	
^		n 4042(-)(2)	or 1012(-\/E\			
9	Is the foundation claiming status as a private operating foundation within the meaning of section for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If	'Yes,' compl	ete Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedul and addresses	e listing theii	names	10	X	

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Forn	n 990-PF (2009) Foss Family Foundation	91-196	7549	_ F	age 5
Par	t 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)		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 Website address $N/A = 1$	application?	13	X	
14	The books are in care of ► Carol Jensen, CPA Located at ► 4616 25th Avenue NE, PMB 31 Seattle WA ZIP + 4 ►	no ► <u>(2</u> 98105	06) 523	<u>-64</u> 7	70
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	► 15		►	
Par	t 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.		-	Yes	No
1 a	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?	Yes X	No		
	(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		ŀ
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X	No		
	(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		
t	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 the instruction	ons)?	16	-	х
	Organizations relying on a current notice regarding disaster assistance check here	▶ []			
ď	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?		10		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))				
ā	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?	Yes X	No		
	If 'Yes,' list the years ► 20 , 20 , 20 , 20				
ŧ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(all years listed, answer 'No' and attach statement — see the instructions)	(a)(2) a)(2) to	215		x
,	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years being applied to any of the years listed in 2a, list the years being applied to any of the years listed in 2a, list the years being applied to any of the years listed in 2a, list the years being applied to any of the years listed in 2a, list the years being applied to any of the years listed in 2a, list the years being applied to any of the years listed in 2a, list the years being applied to any of the years listed in 2a, list the years being applied to any of the years listed in 2a, list the years being applied to any of the years listed in 2a, list the years listed	nere		-	
·	► 20, 20, 20	icic			
3 8	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X	No		
ł	o 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 approve 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)	d	3 15		x
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4 a		х
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?		AH		Y

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Part VII-B Statements Regarding Activiti	es for Which Form	1 4720 May Be Requ	uired (continued)		
5a During the year did the foundation pay or incu	r any amount to				ŀ
(1) Carry on propaganda, or otherwise attempt	ot to influence legislatio	n (section 4945(e))?	Yes X	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see sectionation drive?	1 4955), or to carry	☐ Yes X	No	
(3) Provide a grant to an individual for travel,	study, or other similar			No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, oi 4940(d)(2)? (see instru	rganization described uctions)	Yes X	No	
(5) Provide for any purpose other than religio educational purposes, or for the preventio	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the except ding disaster assistance	tions	. 5b	x
Organizations relying on a current notice rega	rding disaster assistand	ce check here	▶ 🗌		
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Region	sibility for the grant?		Yes X	No	
6a Did the foundation, during the year, receive ar on a personal benefit contract?	ny funds, directly or ind	irectly, to pay premiums	Yes X	No	
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	tly, on a personal benef	fit contract?	6b	X
7a At any time during the tax year, was the found				No	
b If yes, did the foundation receive any proceed				7b	X
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manag	jers, Highly Paid E	mployees,	
and Contractors 1 List all officers, directors, trustees, foundation	n managers and their	companyation (see inst	ructions)		
List all officers, directors, trustees, foundation	(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expense	account
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allow	
Clarence R. Foss					
3945 NE Surber Drive	Trustee				
Seattle WA 98105	1.00	0.	0.		0.
Judy T. Foss					
3945 NE Surber Drive	Trustee				_
Seattle WA 98105	1.00	0.	0.		0.
Lachlan Foss					
25807 SE 25th Way	Trustee		2		•
Issaquah WA	1.00	0.	0.		0.
See Information about Officers, Directors, Trustees, Etc.					
		0.	0.		0.
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1- see in	structions). If none, er	ter 'NONE.'	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allow	
<u>N/A</u>	-				
0		-			
0				<u> </u>	
0					
0	ļ. <u>.</u>				
<u></u>					
Total number of other employees paid over \$50,000	l)	<u>. </u>	•	-	N/A
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1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a
b Program-related investments — total from Part IX-B.	1 b
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

Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

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 instructions) 6 Adjusted qualifying distributions. Subtract line 5 from line 4

The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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4

5 6 37,850.

37,850.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only				
b Total for prior years 20, 20, 20				
3 Excess distributions carryover, if any, to 2009				
a From 2004				
b From 2005				
c From 2006				
d From 2007			[
e From 2008				
f Total of lines 3a through e				
4 Qualifying distributions for 2009 from Part				
XII, line 4 ► \$37,850.				
a Applied to 2008, but not more than line 2a				
b Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2009 distributable amount				
e Remaining amount distributed out of corpus	37,850.			
5 Excess distributions carryover applied to 2009				
(If an amount appears in column (d), the same amount must be shown in column (a))				
Same amount must be shown in column (a)				
6 Enter the net total of each column as				
indicated below:				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	37,850.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				
ed income for which a notice of deficiency has been issued, or on which the section				
4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2008 Subtract line 4a from				
line 2a Taxable amount — see instructions			0.	
(1)-4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1				
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be				
distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)				
(see instructions)				
8 Excess distributions carryover from 2004 not				
applied on line 5 or line 7 (see instructions)	0.			1-
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	37,850.			
10 Analysis of line 9				
a Excess from 2005 0.				
b Excess from 2006 0.				
c Excess from 2007 0.				
d Excess from 2008 0.				
e Excess from 2009 37,850.	<u> </u>	<u> </u>		Form 990-PE (2009

Form 990-PF (2009) Foss Family Found			(1)	91-196754	
Part XIV Private Operating Foundation					N/A
1 a If the foundation has received a ruling or c is effective for 2009, enter the date of the	ruling	·	-	_	
b Check box to indicate whether the foundat		erating foundation d		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	.	
investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
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					
3 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 listed					
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			organization ha	ad \$5,000 or moi	e in
assets at any time during the		structions.)			
1 Information Regarding Foundation Managers a List any managers of the foundation who have close of any tax year (but only if they have	ave contributed m	ore than 2% of the than \$5,000) (See	total contributions r section 507(d)(2))	eceived by the found	dation before the
b List any managers of the foundation who c a partnership or other entity) of which the	wn 10% or more of foundation has a 1	of the stock of a corp 0% or greater interes	poration (or an equi est	ally large portion of	the ownership of
2 Information Regarding Contribution, Gran Check here ► X if the foundation only m requests for funds If the foundation makes complete items 2a, b, c, and d	akes contributions	to preselected cha	ritable organization	s and does not acce anizations under oth	pt unsolicited er conditions,
a The name, address, and telephone numbe	r of the person to v	whom applications s	should be addressed	d	
b The form in which applications should be s	ubmitted and infor	mation and materia	ls they should inclu	de	
c Any submission deadlines					
d Any restrictions or limitations on awards, s	uch as by geograp	hical areas, charital	ble fields, kinds of i	nstitutions, or other	factors
BAA		EA0310 07/06/09		F	orm 990-PF (2009)

Form 990-PF (2009) Foss Family Foundation

Part XV | Supplementary Information (continued)

3 Grants and Contributions Paid During the Y	ear or Approved for Ful	ure Paymer	nt	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year		D	m	
Children's Hospital Foundation PO Box 50020, M/S S-200		Donee	To fund Endowment for	
Seattle WA 9814	5		Emergency Care	10,000.
University of Alaska		Donee	Contribution	,
3211 Providence Drive, Suite 23	6			
Anchorage AK 9950	3			1,000.
Hospice of Anchorage		Donee	Contributon	
500 W. International Airport Roa				100
Anchorage AK 9951 Salvation Army of Seattle	3	Donee	Contribution	100.
PO Box 9219		Donee	Contribution	
Seattle WA 9810	9			500.
Nordic Museum		Donee	Contribution	
3014 NW 67th Street				
Seattle WA 9811	7			1,000.
Salvation Army of Anchorage		Donee	Contribution	
No also and a No.				5,000.
Anchorage AK Medic One Foundation		Donee	Contributon	5,000.
325 Ninth Avenue, MS 359747		Donec	Concilbation	
Seattle WA 9810	4			2,000.
Alano Club of Eastside		Donee	Contribution	
12302 NE 8th Street				
Bellevue WA 9800	5			3,000.
Ryther Child Center		Donee	Contribution	
2400 NE 95th Seattle WA 9811	_			2,000.
See Line 3a statement	1			2,000.
				13,250.
Total			► 3a	37,850.
b Approved for future payment				
Total	<u> </u>	<u> </u>	<u> </u>	
10141				Farm 000 BE (2000)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	d business income	Excluded by	section 512, 513, or 514	
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
1 Program service revenue		· · · · · · · · · · · · · · · · · · ·	code		(See the instructions)
a		<u> </u>			
b	+ -+		 		
	-			·	
d e				 	1
f	1		-		
g Fees and contracts from government agencies	1			-	
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					
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					
8 Gain or (loss) from sales of assets other than inventory		-			
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
С					
d					
e					
			1 1		
12 Subtotal Add columns (b), (d), and (e)					
13 Total. Add line 12, columns (b), (d), and (e)		· -	·	13	
	alculations)			13	
13 Total. Add line 12, columns (b), (d), and (e)	·	hment of Exemp	t Purpose		
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify of Part XVI-B Relationship of Activities to the	e Accomplis	-		s	

Form 990-PF (2009) Foss Family Foundation 91-1967549

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Did the organization directly or indirect	othy anguage in any of the following w	uth any other organizat	ion		Yes	No
described in section 501(c) of the Coo	de (other than section 501(c)(3) orga	anizations) or in section	1 527,			
relating to political organizations? a Transfers from the reporting foundation	on to a noncharitable exempt organi	zation of				
(1) Cash	1 a (1)		Х			
(2) Other assets				1 a (2)		X
b Other transactions						
(1) Sales of assets to a noncharitable	e exempt organization			1 b (1)		_X
(2) Purchases of assets from a nonch	, ,	•		1 b (2)		_X
(3) Rental of facilities, equipment, or	other assets			1 b (3)		<u>X</u>
(4) Reimbursement arrangements				1 b (4)		X
(5) Loans or loan guarantees(6) Performance of services or members	perchip or fundraising solicitations	•		1 b (5) 1 b (6)		X
c Sharing of facilities, equipment, mailin	· · ·	vees		1c		X
			,			
d If the answer to any of the above is 'the goods, other assets, or services gany transaction or sharing arrangeme	iven by the reporting foundation. If	the foundation received	d less than fair marke	t value in	ie of	
	Name of noncharitable exempt organization		ransfers, transactions, and		gemen	ts
			_		_	
					_	
-						
						
				·		
2a Is the foundation directly or indirectly described in section 501(c) of the Coo	de (other than section 501(c)(3)) or	in section 527?	ilizations	Yes	X	No
b If 'Yes,' complete the following sched (a) Name of organization	(b) Type of organization	n	(c) Description of rela	ationshin		
(a) Name of organization	(b) Type of organization	<u></u>	(c) Bescription or real	attorioriip		
			 			
Under penalties of perjury, I declare that I have exami complete. Declaration of preparer (other than taxpaye	ined this return, including accompanying schedu r or fiduciary) is based on all information of whic	les and statements, and to the ch preparer has any knowledge	best of my knowledge and b	elief, it is true	, correc	A, and
5 X Clum R For	4		<u>ه × Tسب</u>	Tu		
S Signature of officer or trustee		Date	Title	ror's Idanii.	00.00	
	16 1	Date		arer's Identifyi Signature in I		
Paid Pre- Signature Preparer's Signature	La genow, CPA	05/04/10	employed ► X			
lice Firm's name (or Caloi E. O	Tenser, CPA PLLC		EIN ►			
Only employed), address and	Avenue NE, PMB 31	WA 00105	Phone no ► (20	6) 523·	-645	70
ZIP code Seattle		WA 98105	Phone no ► (20	Form 99		

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
Foss Family Foundation	91-1967549	
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not tro 527 political organization	eated as a private foundation
Form 990-PF	X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treate 501(c)(3) taxable private foundation	d as a private foundation
Check if your organization is covered by Note: Only a section 501(c)(7), (8), or (1)	the General Rule or a Special Rule 0) organization can check boxes for both the General R	ule and a Special Rule See instructions
General Rule — X For an organization filing Form 990, 9 contributor (Complete Parts I and II)	990-EZ, or 990-PF that received, during the year, \$5,000)	D or more (in money or property) from any one
Special Rules -		
509(a)(1)/170(b)(1)(A)(vi) and receive	filing Form 990 or 990-EZ, that met the 33-1/3% supported from any one contributor, during the year, a contribute 1h or (ii) Form 990-EZ, line 1 Complete Parts I and I	tion of the greater of (1) \$5,000 or (2) 2% of the
For a section 501(c)(7), (8), or (10) o aggregate contributions of more than prevention of cruelty to children or an	rganization filing Form 990 or 990-EZ, that received froi \$1,000 for use <i>exclusively</i> for religious, charitable, scienimals. Complete Parts I, II, and III	m any one contributor, during the year, entific, literary, or educational purposes, or the
contributions for use <i>exclusively</i> for rights box is checked, enter here the to purpose. Do not complete any of the	rganization filing Form 990 or 990-EZ, that received froi eligious, charitable, etc, purposes, but these contributio tal contributions that were received during the year for parts unless the General Rule applies to this organizati	ons did not aggregate to more than \$1,000 If an exclusively religious, charitable, etc.
religious, charitable, etc, contribution	s of \$5,000 or more during the year	► \$
990-PF) but it must answer 'No' on Part	ered by the General Rule and/or the Special Rules does IV, line 2 of their Form 990, or check the box on line H ne filing requirements of Schedule B (Form 990, 990-EZ	of its Form 990-EZ, or on line 2 of its Form
BAA For Privacy Act and Paperwork Refor Form 990, 990EZ, or 990-PF.	eduction Act Notice, see the Instructions So	chedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of org	Family Foundation	' '	967549
Part I	Contributors (see instructions.)	101 10	
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Barbara Foss Living Trust Marie Trueblood, Trustee Anchorage AK 99517	\$75,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2009)

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2009)

of Part I

Donee_

Contribution

500 W International Airport Road

Kayhi Alumni Association

400 L Street, Suite 100

Anchorage AK 99501

<u>Anchorage</u>

AK 99518

Х

2,000.

6,000.

Business

Person or

Business | X

Form 990-PF, Page 11, Part XV, line 3a

Continued

1	in	•	32	ctat	tom	ent
_		C	Ja	SIA	LEII	CIIL

Recipient	If recipient is an individual,	Foun- dation status	Purpose of grant or contribution	Person or Business Checkbox
Name and address	show any			Crieckbox
(home or business)	relationship to any foundation manager or substantial contributor	of re- cipient		Amount
a Paid during the year Lihui United Church Kauai HI		Donee_	Contribution	Person or Business X
Sand Point Community Church		Donee	Contribution	Person or
4710 NE 70th Street				Business X
Seattle WA 98115		<u> </u>	<u> </u>	50.

Total

13,250.

Form 990-PF, Page 2, Part II, Line 10b L-10b Stmt

	End of Year		
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value	
General Electric Common Stock	58,140.	22,483.	
Microsoft Corporation Common Stock	74,400.	48,768.	
Pimco FDS LW Dur Instl Funds	33,172.	36,706.	
Total	165,712.	107,957.	