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Form 990-PF

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

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

OMB No 1545-0052

2009

			and ending						
G	heck a		turn of a former public	chanty		Final return			
	_	Amended return Add	Iress change	Name	change				
Use	the IR	S Name of foundation				loyer identification num	ber		
	abel.					-2171978	·		
	erwise	•	· · · · · · · · · · · · · · · · · · ·		-1 '	hone number (see page 1	0 of the instructions)		
•	orint	Number and street (or P O box number if mail is not delivered	to street address)	Room/suite		6-232-8244			
	type. Specifi	7703 S.E. 78TH STREET			7	emption application is pend			
	uction	Oily of town, state, and an ood	00040		D 1. Fo	preign organizations, check	here •		
		THERCER IDIAND WA	98040		1	preign organizations meeti	-		
\Box	•	ype of organization X Section 501(c)(3) exempt private			j	6% test, check here and at			
			le private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here				
			X Cash Acc	ruai			_		
	year (ii e 16) ▶	rom Part II, col. (c), > \$ 1,516,631 (Part I, column (d) must I	ho an agab basis \			foundation is in a 60-month r section 507(b)(1)(B), che			
	ert i	Analysis of Revenue and Expenses (The			4	COCCON CONTRACTOR CINC	T		
1.4	47 % X	total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Netin	vestment	(c) Adjusted net	(d) Disbursements for charitable		
		the amounts in column (a) (see page 11 of the instructions))	books	inco	ome	ıncome	purposes		
	1	Contributions, gifts, grants, etc., received (attach schedule)	350,000	-			(cash basis only)		
	2	Check ► If the foundation is not required to attach Sch B	330,000						
	3	Interest on savings and temporary cash investments	2,792		2,792				
	4	Dividends and interest from securities	3,532		3,532				
	5a	Gross rents	3,332		3,33 <u>L</u>				
-	Ь	Net rental income or (loss)					· · · · · · · · · · · · · · · · · · ·		
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	3,385						
	ь	Gross sales price for all assets on line 6a 49,805	3,333			-11:1			
	7	Capital gain net income (from Part IV, line 2)		·	3,385				
_	8	Net short-term capital gain				0	······································		
	9	Income modifications CEIVED							
	10a	Gross sales less returns & allowances							
	ь	Less Cost of goods sold = 200			,				
	С	Gross proning (loss) (attach schedule)							
	11	Other income (attach schedule)					.,,		
	12	Total. Add lines 100000 E.N.	359,709		9,709	0			
S	13	Compensation of officers, directors, trustees, etc				<u> </u>			
cpenses	14	Other employee salanes and wages							
e	15	Pension plans, employee benefits					<u>,</u>		
	16a	Legal fees (attach schedule) SEE STMT 1	1,070				1,070		
<u>C</u>]	Accounting fees (attach schedule) STMT 2	757				757		
Ę	C	Other professional fees (attach schedule)							
Opgranna and Administrative B		Interest	20 297		20				
Į,		Taxes (attach schedule) (see page 14 of the instructions) STMT 3	297						
E	19 20	Depreciation (attach schedule) and depletion Occupancy					<u> </u>		
Ą	i	Travel, conferences, and meetings	<u> </u>						
(3)	22	Printing and publications							
	1	Other expenses (att. sch.) STMT 4	1,292		1,292				
ij	24	Total operating and administrative expenses.							
<u>(a)</u>	l	Add lines 13 through 23	3,436		1,312		1,827		
9		Contributions, gifts, grants paid	134,000				134,000		
0		Total expenses and disbursements.Add lines 24 and 25	137,436	***************************************	1,312	0	135,827		
	27	Subtract line 26 from line 12							
	l	Excess of revenue over expenses and disbursements	222,273						
		Net investment income (if negative, enter -0-)			8,397				
	_ c	Adjusted net income (if negative, enter -0-)				0			
_									

DAA

	Part I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	End of year		
_	· ****	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					
	2	Savings and temporary cash investments	1,245,839	167,757	167,757		
	3	Accounts receivable ▶					
		Less allowance for doubtful accounts ▶					
	4	Pledges receivable ▶					
		Less: allowance for doubtful accounts ▶					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see page 16 of the					
		instructions)					
	7	Other notes and loans receivable (att. schedule)					
		Less allowance for doubtful accounts ▶					
ţ	8	Inventones for sale or use					
Assets	9	Prepaid expenses and deferred charges					
As	10a	Investments—U S and state government obligations (attach schedule)					
	ь	Investments—corporate stock (attach schedule) SEE STMT 5		98,780	117,635		
	င	Investments—corporate bonds (attach schedule) SEE STMT 6		97,800	98,908		
	11	Investments—land, buildings, and equipment, basis					
		Less accumulated deprecation (attach sch.)		1			
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule) SEE STATEMENT 7		1,103,775	1,132,331		
	14	Land, buildings, and equipment basis		, , , , , , , , , , , , , , , , , , , ,			
		Less accumulated deprecation (attach sch.)		Ť			
	15	Other assets (describe ▶)	· ·				
	16	Total assets (to be completed by all filers—see the					
		instructions Also, see page 1, item I)	1,245,839	1,468,112	1,516,631		
_	17	Accounts payable and accrued expenses					
	18	Grants payable					
ë	19	Deferred revenue			*		
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
ap	21	Mortgages and other notes payable (attach schedule)		"			
_	22	Other liabilities (describe ►)	-				
	23	Total liabilities (add lines 17 through 22)	0	0			
_		Foundations that follow SFAS 117, check here ▶					
S		and complete lines 24 through 26 and lines 30 and 31.		ĺ			
ces	24	Unrestricted	1				
Net Assets or Fund Balan	25	Temporaniy restricted					
Ва	26	Permanently restricted					
פַ		Foundations that do not follow SFAS 117, check here ▶ X					
Ë		and complete lines 27 through 31.					
ř	27	Capital stock, trust principal, or current funds	1,245,839	1,468,112			
S	28	Paid-in or capital surplus, or land, bldg, and equipment fund					
šet	29	Retained earnings, accumulated income, endowment, or other funds					
ŝ	30	Total net assets or fund balances (see page 17 of the					
it /		instructions)	1,245,839	1,468,112			
ž	31	Total liabilities and net assets/fund balances (see page 17		/			
Ì	•	of the instructions)	1,245,839	1,468,112			
	Part II	····	1/243/035	1,400,111	<u></u>		
	************	net assets or fund balances at beginning of year—Part II, column (a), line 30 (must a	aree with				
		f-year figure reported on prior year's return)	g. oo mar	1	1,245,839		
2		amount from Part I, line 27a		2	222,273		
		increases not included in line 2 (itemize)		3			
		nes 1, 2, and 3		4	1,468,112		
		ases not included in line 2 (itemize)		5			
		net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), I	ine 30	6	1,468,112		
_		Things into of Tark it, column (b), I			5 990 PE (2000)		

· · · · · · · · · · · · · · · · · · ·	nd Losses for Tax on Investment be the kind(s) of property sold (e.g., real estate		ne	(b) How acquired	(c) Date	e acquired	(d) Date sold
2-story brick war	P—Purchase D—Donation		day, yr)	(mo , day, yr)			
1a SEE WORKSHEET							
b							
ď					 		
0				-			
(e) Gross sales price	(f) Depreciation allowed (or allowable)	other basis nse of sale			or (loss)) minus (g)		
а							
b	 	_					
<u>c</u>		+	<u>. </u>			·	-
d e		 	-				
	gain in column (h) and owned by the fo	undation on	12/31/69			N Gaine (Col	(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	T	(k) Excess	s of col (ı) (ı), ıf any		(k), but not	less than -0-) or om col (h))
a					_		
b							
С				··			
		+			<u>[</u>		
Capital gain net income or (net ca	2		3,385				
3 Net short-term capital gain or (los	If (loss), enter -0- in s) as defined in sections 1222(5) and (6		, ,				
	column (c) (see pages 13 and 17 of the	instructions)]				
If (loss), enter -0- in Part I, line 8 Part V Qualification Un	nder Section 4940(e) for Reduc				3		3,182
	on 4942 tax on the distributable amount fy under section 4940(e) Do not comple		ın the base	e period? Ye	es 🗓 N	lo	
1 Enter the appropriate amount in e	ach column for each year, see page 18	of the instru	ctions befo	re making any entries	<u>s</u>		-
(a) Base penod years Calendar year (or tax year beginning			Net value	(с) of nonchaпtable-use ass			(d) ibution ratio ivided by col (c))
2008		4,256		1,083,			0.123914
2007	10:	2,562		750,			0.136589
2006		2,508 5,496		168,			0.241301 0.685160
2005 2004		8,134		176,			0.443029
2 Total of line 1, column (d)					_2		1.629993
=	i-year base period—divide the total on lii as been in existence if less than 5 years		by the		3		0.325999
4 Enter the net value of noncharitab	ele-use assets for 2009 from Part X, line	5			4		1,348,826
5 Multiply line 4 by line 3	·				5		439,716
	o (49/ of Doct I loo 275)						
6 Enter 1% of net investment incom	ट (1 % 01 Fait I, IIIle 270)				6		430, 800
7 Add lines 5 and 6					7	-	439,800
8 Enter qualifying distributions from If line 8 is equal to or greater than	Part XII, line 4 line 7, check the box in Part VI, line 1b,	and comple	te that part	using a 1% tax rate.	See the		135,827
Part VI instructions on page 18							

Form	1990-PF (2009) FRAZIER FAMILY FOUNDATION 91-2171978			Page 4
P	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instruction	ns)		
1a	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			168
	here ▶ and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b)			
2				С
3				168
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			1.00
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			168
6	Credits/Payments			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 524			
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 6d			
7	Total credits and payments Add lines 6a through 6d			524
8	Enter any penalty for underpayment of estimated tax. Check here			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			356
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 356 Refunded ▶ 11			
Pa	rt VII-A Statements Regarding Activities			
1a	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	1.00	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	<u> </u>	1	+
_	of the instructions for definition)?	1ь		x
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	15	+	 **
	published or distributed by the foundation in connection with the activities			I
_	Did the foundation file Form 1120-POL for this year?		1	₹
C	•	<u>1c</u>	 	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.			ŧ
_	(1) On the foundation. \$			
0	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			1
_	on foundation managers \$!
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	ļ	X
	If "Yes," attach a detailed description of the activities.			İ
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			1
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	<u> </u>	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	<u> </u>	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	A 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			1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			1
	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	X	I
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 XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) ▶ WA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 950 PF to the Attorney General	l		I
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	x	Ť
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	80	 *	
•	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page	ŀ	1	ŧ
	· · · · · · · · · · · · · · · · · · ·		1	.
10	27)? If "Yes," complete Part XIV	9	├	<u> </u>
.0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		₹.	
	names and addresses STMT 8	10	X	<u> </u>
		Form 99	リリーピト	(2009)

Fom	1 990-PF (2009) FRAZIER FAMILY FOUNDATION 91-2171	.978			Р	age 5
_	art VII-A Statements Regarding Activities (continued)	. .			<u>·</u>	ugo e
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	· · · · · · · · · · · · · · · · · · ·				Γ
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)			11		x
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before					
	August 17, 2008?			12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applic	ation?		13	X	
	Website address ► N/A					
14		Telephone no 🕨				
	7703 SE 78TH ST					
	Located at ► MERCER ISLAND, WA	ZIP+4 ▶	98040)		
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			
_ <u>P</u> :	art VII-B Statements Regarding Activities for Which Form 4720 May Be Require	<u>d</u>				·—
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	Dunng 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 X No X No			
	(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	□ v	₩			
	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	Yes	X No			
b	termination of government service, if terminating within 90 days.) If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regula	_	NO NO			
D	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	IIIO115	N/A	1ь	İ	
	Organizations relying on a current notice regarding disaster assistance check here			10		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that				1	`
•	were not corrected before the first day of the tax year beginning in 2009?		N/A	1c	1	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		,	- i		,
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))				1	
а	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		ı	
	If "Yes," list the years ▶ 20 , 20 , 20 , 20				-	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)				1	
	(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)		N/A	2b		
C	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 , 20				1	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise				1	
	at any time during the year?	Yes	X No		I	
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or				ı	
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the				I	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of	f			I	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		/-		ŧ	
	foundation had excess business holdings in 2009)		N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpose			4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its				ŧ	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2	2009?		4b		\mathbf{x}

		FAMILY FOUNDATION		2171978			Page
_P:		garding Activities for Which For	<u>m 4720 May Be Re</u>	quired (conti	nued)	······	······································
5a	• ,	• •					
		rwise attempt to influence legislation (section	,	□ ,	Yes X No		
	•	specific public election (see section 4955), o	or to carry on,				
	directly or indirectly, any voter	G	_	\vdash	Yes X No		
		al for travel, study, or other similar purposes		□ '	Yes X No		
	_	ation other than a chantable, etc , organization		П.	. 👽		
		or section 4940(d)(2)? (see page 22 of the in	·	□ '	Yes X No		
	• • • • • • • • • • • • • • • • • • • •	than religious, chantable, scientific, literary,	, or educational		. 59		. 🛔
		n of cruelty to children or animals?		_	res X No		
b	•	, did any of the transactions fail to qualify ur	•		37 / 3	_	.
		a current notice regarding disaster assistan	· · · ·	nstructions)?	N/A	5b	
	• •	notice regarding disaster assistance check			▶ □		.
С	·	5a(4), does the foundation claim exemption	from the tax	37/3 🗍 .			
	because it maintained expenditure	•		N/A 📙	res U No		1
e -	•	ured by Regulations section 53 4945-5(d).					I
6a	• •	r, receive any funds, directly or indirectly, to	pay premiums	п.	res X No		1
_	on a personal benefit contract?			_	res X No		
b		r, pay premiums, directly or indirectly, on a p	personal benefit contract	•		6b	<u> </u>
70	If "Yes" to 6b, file Form 8870	as the foundation a next to a next hited to	abaltas transaction 2		res X No		
_	• • • •	as the foundation a party to a prohibited tax			es X No N/A	7b	
_ <u>b</u>		ny proceeds or have any net income attributure of the proceeds or have any net income attributure of the proceeds or have any net income attributure of the proceeds or have any net income attributure of the proceeds or have any net income attributure of the proceeds or have any net income attributure of the proceeds or have any net income attributure of the proceeds or have any net income attributure of the proceeds or have any net income attributure of the proceeds or have any net income attributure of the proceeds or have any net income attributure of the proceeds o					
r.e	and Contractors		roundation manay	jers, mignily Pa	alu Employee	5,	
1 1		s, foundation managers and their compe	nsation (see page 22 of	f the instructions	<u> </u>		
		s, realization intringgero and their compo			(d) Contributions to	1	
	(a) Na	me and address	(b) Title, and average hours per week	(c) Compensation (if not paid, enter	employee benefit	(e) Exp	pense account,
	(4)		devoted to position	-0-)	plans and deferred compensation	other	r allowances
—AI	AN D. FRAZIER	MERCER ISLAND	DIRECTOR				
	03 SE 78TH STREET	WA 98040	1.00	o			c
	RY D. FRAZIER	MERCER ISLAND	DIRECTOR				
	03 SE 78TH STREET	WA 98040	1.00	o	١		c
			1				
2	Compensation of five highest-p	aid employees (other than those include	d on line 1—see page 2	3 of the instructi	ons).	•	
	If none, enter "NONE."		. •		•		
	-		(b) Title, and average		(d) Contributions to		
	(a) Name and address of each	ch employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		oense account, r allowances
			devoted to position		compensation	Outer	allowalices
NO	NE						
		<u> </u>	_ 1				
						1	

Form 990-PF (2009) FRAZIER FAMILY FOUNDATION	91-2171978	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundaries (continued)	ındation Managers, Highly Paid Empl	oyees,
3 Five highest-paid independent contractors for professional services (see pa	ge 23 of the instructions). If none, enter "NONI	i."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		<u> </u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statis organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 N/A		
2		-
3		
4		
Part iX-B Summary of Program-Related Investments (see page 2)	age 24 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on		A
1 N/A	Times Fama 2	Amount
2		
All other program-related investments See page 24 of the instructions		
3		

Form **990-PF** (2009)

Total. Add lines 1 through 3

qualifies for the section 4940(e) reduction of tax in those years

_	1990-FF (2009) LIEBLE LITTLE LOOKERLING STEELING		Page 8
P	Minimum Investment Return (All domestic foundations must complete this part. Foreign	ign foui	ndations,
	see page 24 of the instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		200 501
a	Average monthly fair market value of securities	1a	329,791
b	Average of monthly cash balances	1b	1,039,576
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	1,369,367
8	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0	1 1	_
2	Acquisition indebtedness applicable to line 1 assets	2	C
3	Subtract line 2 from line 1d	3	1,369,367
4	Cash deemed held for chantable activities Enter 1½ % of line 3 (for greater amount, see page 25 of	1 1	
	the instructions)	4	20,541
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,348,826
6	Minimum investment return. Enter 5% of line 5	6	67,441
P	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operations	erating	
	foundations and certain foreign organizations check here ▶ and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	67,441
2a	Tax on investment income for 2009 from Part VI, line 5]]	
b	Income tax for 2009 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	168
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	67,273
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	67,273
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	67,273
P	Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	_1a	135,827
b	Program-related investments—total from Part IX-B	1b	
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 chantable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	<u> </u>
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	135,827
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	135,827
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	1	····

Form **990-PF** (2009)

P	ert XIII Undistributed Incom	e (see page 26 of	the instructions)			
1	Distributable amount for 2009 from Part	XI,	(a) Corpus	(b) Years pпоr to 2008	(c) 2008	(d) 2009
	line 7					67,273
2	Undistributed income, if any, as of the er	nd of 2009				
а	Enter amount for 2008 only					
b	Total for prior years 20 , 20	. 20				
3	Excess distributions carryover, if any, to					
а	From 2004	69,331				
b	From 2005	107,105	1			•
С	From 2006	82,557	1 :			•
d	From 2007	67,602	1			i e
9	From 2008	80,606	•			
f	Total of lines 3a through e		407,201			
4	Qualifying distributions for 2009 from Par	rt YII	407,201			
•	line 4 ▶ \$135,827	it XIII,				
а	Applied to 2008, but not more than line 2	'a				
	Applied to undistributed income of prior y					
	(Election required—see page 26 of the in					
_	Treated as distributions out of corpus (El					
v	required—see page 26 of the instructions					
	_	5)				67 272
	Applied to 2009 distributable amount		68,554			67,273
	Remaining amount distributed out of corp		00,354			
5	Excess distributions carryover applied to					
	(If an amount appears in column (d), the	same				
•	amount must be shown in column (a))					
6	Enter the net total of each column as					
_	indicated below:	-4 lu <i>E</i>	475 755			
a	Corpus Add lines 3f, 4c, and 4e Subtrac		475,755			
þ	Prior years' undistributed income Subtra	ct				
	line 4b from line 2b					
С	Enter the amount of prior years' undistrib					
	income for which a notice of deficiency h					
	been issued, or on which the section 494	2(a)				
_	tax has been previously assessed				·	
d	Subtract line 6c from line 6b Taxable					
	amount—see page 27 of the instructions				,	
0	Undistributed income for 2008 Subtract					
	4a from line 2a Taxable amount—see pa	age				
	27 of the instructions					
f	Undistributed income for 2009 Subtract I					
	4d and 5 from line 1. This amount must b	е				
	distributed in 2010					0
7	Amounts treated as distributions out of co	· ·				
	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 o	f the				<i>-</i> 5
	instructions)		69,331			······
9	Excess distributions carryover to 2010).				
	Subtract lines 7 and 8 from line 6a		406,424			
10	Analysis of line 9					
а	Excess from 2005	107,105				
b	Excess from 2006	82,557	1	1		
С	Excess from 2007	67,602	1			
d	Excess from 2008	80,606		1		
0	Excess from 2009	68,554				

Form 990-PF (2009) FRAZIER FAMILY FOUNDATION

91-2171978

Page 10

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment										
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								
a Paid during the year AMARA PARENTING & ADOPTIO 3300 EAST UNION SEATTLE WA 98122	NONE PARENTIN	501(C)3 G & ADOPTION	SERVICES	62,000						
CATHOLIC COMMUNITY SERVIC 100 23RD AVE S SEATTLE WA 98144	NONE SUPPORT	501(C)3 SERVICES TO	THE POOR	5,000						
CHILDREN'S HOSPITAL FOUND MS S-200, PO BOX 50020 SEATTLE WA 98145	NONE MEDICAL RESEARC	501 (C) 3 H HEALTH GENE	RAL & RE	10,000						
KINDERING 16120 NE 8TH STREET BELLEVUE WA 98008	NONE FUNDING	501(C)3 OF CHILDCARE	SERVICES	10,000						
LOYOLA MARYMOUNT UNIVERSI 1 LMU DRIVE MS 8135 LOS ANGELES CA 045259	NONE	501(C)3 SCIENCE E	DUCATION	2,500						
NATIONAL MULTIPLE SCLEROS 192 NICKERSON ST, SUITE 1 SEATTLE WA 98109	NONE MEDICAL F	501(C)3 ESEARCH & DEV	ELOPMENT	2,000						
SEATTLE BIOMEDICAL RESEAR 307 WESTLAKE AVE N, SUITE SEATTLE WA 98109	NONE MEDIC	501(C)3 AL RESEARCH I	NSTITUTE	5,000						
SEATTLE WEST ALKI CHURCH 4742 42ND AVENUE SEATTLE WA 98225	NONE	501 (C) 3 YOUTH	MINISTRY	2,500						
WESTERN WASH UNIV FOUND 516 HIGH STREET BELLINGHAM WA 98225		501(C)3 UCATIONAL SCH	OLARSHIP	20,000						
YOUNG LIFE PO BOX 2920 COLORADO SPRINGS CO 80901		501(C)3 ITARY CAMPERS	HIP FUND	15,000						
Total			▶ 3a	134,000						
b Approved for future payment			Ţ							
N/A										
·										
Total			▶ 3b							

Part XVI-A Enter gross amo	Analysis of Income-Producing Agreements unless otherwise indicated		d business income	Exclude	d by section 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 se		<u> </u>		 		the instructions)
a		_				
ь	· · · · · · · · · · · · · · · · · · ·	_		+		
°			<u> </u>	+		
		-		+		
		_				
f		_ 		+	_	
	nd contracts from government agencies		-			
	dues and assessments			+		
	savings and temporary cash investments			14	2,792	
	nd interest from securities			14	3,532	
	come or (loss) from real estate.					
	anced property					
	t-financed property				-	<u> </u>
	come or (loss) from personal property	<u> </u>				
7 Other invest				-		
•	s) from sales of assets other than inventory			14	3,385	
	or (loss) from special events			4		
	or (loss) from sales of inventory					
11 Other reven	ue a	_		+		
ь		_		+ -		-
				1		
		_ 				<u>-</u> .
		_			0.700	
	d columns (b), (d), and (e)			اار	9,709	
	ne 12, columns (b), (d), and (e)				13	9,709
Part XVI-B	in line 13 instructions on page 28 to venfy calculation. Relationship of Activities to the A		nt of Evomet Du			
	<u> </u>					
Line No. ▼	Explain below how each activity for which income accomplishment of the foundation's exempt purp instructions.)					ne
N/A						
•			· · · · · · · · · · · · · · · · · · ·			_
					<u>.</u>	
						· .
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	7.2.7.					<u> </u>
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	<u> </u>					
<u>-</u>	-	-			· · · · · · · · · · · · · · · · · · ·	-
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		_				
			·			

orm	1 990-PF (2	2009) F	RAZIER	FAMI]	LY F	OUNDATI	ON			91-217	1978			Pa	ge 1
	art XVII .							action	s and	Relationshi	ps With No	nchari	table		
			npt Organ											_	
1										inization describe				Yes	No
	ın sectior	1 501(c) o	f the Code (of	ther than se	ection 50	01(c)(3) organ	izations) i	or in secti	on 527	, relating to politi	cal		1		ĺ
	organizat														
а	Transfers	s from the	reporting fou	ndation to a	a nonch	antable exemp	ot organiz	ation of					į.		
	(1) Cash	1											1a(1)		X
	(2) Othe	r assets											1a(2)		X
b	Other tra	nsactions											ŀ		ŧ
	(1) Sale:	s of asset	s to a noncha	ıntable exer	mpt orga	anızatıon							1b(1)		X
	(2) Purc	hases of a	assets from a	nonchanta	ble exer	mpt organization	on						1b(2)		X
	(3) Rent	al of facilit	lies, equipme	nt, or other	assets								<u>1b(3)</u>		X
	(4) Reim	nburseme	nt arrangeme	nts									1b(4)		X
	(5) Loan	s or loan	guarantees										1b(5)		X
	(6) Perfo	ormance o	of services or	membersh	ıp or fun	draising solicit	tations						1b(6)		X
	•			_		assets, or paid							_ <u>1c</u> _		X
d										ould always sho					
	value of	he goods	, other assets	, or service	es given	by the reportir	ng founda	tion. If the	found	lation received le	ss than fair ma	irket			
	value in a	any transa	iction or shari	ıng arrange	ment, sl	now in column	(d) the v	alue of the	e good	s, other assets, o					
	(a) Line no	(b) /	Amount involve	d (c) i	Name of r	nonchantable ex	empt orgar	ization		(d) Description of	transfers, transac	tions, and	shanng arrange	ments	
<u> </u>	<u> </u>														
									L						
									ļ						
									<u> </u>						
			·						ļ						
								_	<u> </u>						
				i					<u> </u>		 				
															
		į													
2a	Is the fou	ındatıon d	rectly or indir	rectly affilia	ted with	, or related to,	one or m	ore tax-ex	cempt o	organizations				_	ם
	describe	d in sectio	n 501(c) of th	ne Code (ot	her than	section 501(c	c)(3)) or in	section f	527?				∐ Y₁	es X	No
b	If "Yes,"	complete	the following:	schedule											
		(a) Name	of organization		 -	(b) Type o	of organizat	ion	<u> </u>		(c) Description (of relations	ship		
	N/A								ļ <u> </u>		•				
									 						
									L				·		
									<u> </u>						
					l_				<u> </u>						
	Under per	alties of pe	nury, I declare	that I have ex	xamined t	thus return, includ	ding accom	panying sc	hedules	and statements, a fon all information	nd to the best of	ny knowle	edge and		
	belief, it is	true, corre	ct, and complet	e Declaration	n or prepa	arer (other than t	taxpayer or	riduciary) i	spased	on all information		_	/ /		
	<u> </u>	<u>1 (ll</u>	4	80	<u> </u>			510)//C	<u>)</u>	Tras	W			
9	Signa	ture of offic	of dr trustee					Dato	<u> </u>		Title		r		
운			()							Date	Check if	_	Preparer's identifi number (see Sig		อก
Sign Here	ر م	Preparer								5-10-18	self-employed	ا 🔲 🕨 د	page 30 of the in		
ِ نق	Paid Preparer's Use Only	signature	► NA-2										<u> </u>		
	Pa Se Se	Firm's na	me (or yours if	L		G, KUDE				P.S.					
	<u>, , , , , , , , , , , , , , , , , , , </u>	self-empl	oyed), address	, <u>752</u> .	5 SE			E 110				EIN ▶	200		
	<u> </u>	and ZIP	code	ME	RCER	ISLAND), WA	<u>980</u>	40-	2339		Phone no	<u>, 206–27</u>	<u>5-4</u>	<u> 22</u>

Form **990-PF** (2009)

Phone no 206-275-4228

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

FRAZIER FAMIL	Y FOUNDATION	91-2171978
Organization type (check one		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt chantable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt chantable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note. Only a section 501(c)(7) instructions	overed by the General Rule or a Special Rule .), (8), or (10) organization can check boxes for both the General Rule and a Special	Rule See
General Rule		
	ing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in recontributor. Complete Parts I and II	money or
Special Rules		
sections 509(a)(1) and	b) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg d 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribut 6 of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Comple	tion of the greater
the year, aggregate co	(), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions of more than \$1,000 for use exclusively for religious, charitable, scientific or the prevention of cruelty to children or animals. Complete Parts I, II, and III	_
the year, contributions aggregate to more tha year for an exclusively	(2), (8), or (10) organization filing Form 990 or 990-EZ that received from any one consistor use exclusively for religious, chantable, etc., purposes, but these contributions of an \$1,000. If this box is checked, enter here the total contributions that were received or religious, chantable, etc., purpose. Do not complete any of the parts unless the Geration because it received nonexclusively religious, chantable, etc., contributions of \$1.	did not diduring the neral Rule
990-EZ, or 990-PF), but it mus	is not covered by the General Rule and/or the Special Rules does not file Schedule to st answer "No" on Part IV, line 2 of its Form 990, or check the box in the heading of its 1990-PF, to certify that it does not meet the filing requirements of Schedule B (Form	ts Form

Name of organization FRAZIER FAMILY FOUNDATION Employer identification number 91-2171978

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	FRAZIER & COMPANY, INC. 7703 S.E. 78TH STREET MERCER ISLAND WA 98040	\$ 350,000	Person X 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
		\$	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
	ivano, address, and En V 4	\$	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
, rec.	ivanie, dudicos, dila En	\$	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
		\$	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
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Form 990-PF	apital Gains and Losses	TOT TAX ON INVE		ome 	2009
For calend	lar year 2009, or tax year beginning		, and ending	Employer Idea	ntification Number
FRAZIER FAMILY FO	UNDATION	= +		91-2171	978
(a) List and descri 2-story brick w	be the kind(s) of property sold, e.g., real estat arehouse, or common stock, 200 shs MLC C	te, o	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
) SHORT TERM GAIN		מי	P	VARIOUS	VARIOUS
	INTER MUN BD FD		P	VARIOUS	08/20/09
	G MARKETS		<u> P</u>	VARIOUS	10/22/09
BNY MELLON LARG			P	VARIOUS	10/28/09
DREYFUS DIVERSI DREYFUS SELECT					-
) DREYFUS SELECT	PANAGERS - CGD			<u> </u>	
)	- 1-7 -7-7				<u> </u>
)					
(0)					
1)					
2)					
3)					
4)					
5)				<u> </u>	<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other	er basis of sale	(h) Gair (e) plus (n or (loss) f) minus (g)
2,513		· · · · · · · · · · · · · · · · · · ·			2,513
45,489		4	5,000		489
600			509		91
1,000			911		89
199					199
) 4					4
)					
)					
0)					
1)			,		
2)	-				
3)					
4)					
5)					
	gain in column (h) and owned by the fo			(I) Gains (Co	ol (h) gain minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of over col (j),	if any	Losses (froi	ol (h) gain minus ess than -0-) or m col (h))
)					2,513
)					489
)				· · · · · · · ·	91
)	-				89 199
)					<u>199</u>
		1			
		1			
0)					
1)					
2)					
3)				-	
4)	· · · · · · · · · · · · · · · · · · ·				
5)		1			

91-2171978		Federal S	Sta	tements				
. State	ement 1	- Form 990-PF	. Pa	art I. Line 16a -	Le	gal Fees		
Statement 1 - Form 990-PF, Part I, Line 16a - Legal Fees Description								
		Total						
LEGAL			_		_			
	`				\$_		-	
TOTAL	\$ <u></u>	1,070	\$ <u></u>	0	\$_	0	\$ =	1,070
Stateme	ent 2 - Fo	orm 990-PF, P	art l	, Line 16b - Ac	coı	ınting Fees		*
Description								
		Total						
TAX FORM PREPARATION		Total	_	IIIVestillelit	_	Net	. –	i dipose
	\$	757	· —		\$_		-	_
TOTAL	\$	757	\$_	0	\$	0	\$ <u></u>	75
<u></u>	tatemen	t 3 - Form 990	-PF	Part I, Line 18	3 - T	axes		
Description								
		Total						
FEDERAL TAXES	_		_		_		_	•
	· 		·-		\$ <u></u>		· —	
TOTAL	\$ <u>—</u>	297	\$ <u></u>	0	\$	0	;	(
Statem	<u>nent 4 - F</u>	orm 990-PF, I	Part	I, Line 23 - Ot	her	<u>Expenses</u>		·
Description								
	_	Total		Net Investment	_	Adjusted Net	. <u> </u>	Charitable Purpose
	\$		\$		Ś		Ś	

	\$	5	\$	\$	\$
EXPENSES	·				·
INVESTMENT EXPENSES		1 005	1 005		
PORTFOLIO EXPENSES	- CPC HEAL	1,005	1,005		
		287	287		
TOTAL	\$	1,292	1,292	\$0	\$ 0

91-2171978		Fed	leral State	eme	ents			
. <u>Sta</u>	<u>itement 5 - Form 9</u>	990-PF,	Part II, Line 1	0b -	Corporate Sto	ck investme	ents	6
	Description			-			_	
, , , , , , , , , , , , , , , , , , , 	Decomplian		Beginning of Year	. <u>-</u>	End of Year	Basis of Valuation	_	Fair Market Value
BNY MELLON		\$		\$	98,780	COST	\$	117,635
TOTAL		\$ \$	0		98,780	0001	*_ \$_	117,635
Sta	atement 6 - Form	990-PF,	Part II, Line 1	0c -	Corporate Bor	nd Investme	nts	
	Description							
	•	_	Beginning of Year	_	End of Year	Basis of Valuation	_	Fair Market Value
BNY MELLON		\$		\$	97,800	COST	\$	98,908
TOTAL		\$	0	\$	97,800	CO51	\$_ \$_	98,908
	Statement 7 - I	Form 99	0-PF, Part II, I	_ine	13 - Other Inve	estments		
	Description							
			Beginning of Year		End of Year	Basis of Valuation	_	Fair Market Value
CPC HEALTHCARE	FUND	s		\$	102,216	СОЅТ	\$	102,827
STEELHEAD PATH	FINDER	J		۲			٧	
BNY MELLON					1,000,000			1,027,754
mo ma r				_	1,559	COST	_	1,750
TOTAL		\$	0	\$	1,103,775		\$_	1,132,331
St	atement 8 - Form	990-PF	, Part VII-A, Li	ne 1	0 - Substantia	l Contributo	o <u>r</u> s	····
	Name				Address			_

Name	Address
	City, State, Zip
FRAZIER & COMPANY	7703 S.E. 78TH STREET

MERCER ISLAND WA 98040

91-2171978	Federal Stateme	ents		
•	Taxable Interest on Inves	tments		
Description GOLDMAN SACHS BNY MELLON TOTAL	Amount \$ 2,779	Unrelated Business Code	Exclusion Code 14 14	Posta Code
	Taxable Dividends from Se	ecurities		
Description GOLDMAN SACHS CPC HEALTHCARE FUND, LP BNY MELLON TOTAL	Amount \$ 64 10 3,458 \$ 3,532	Unrelated Business Code	Exclusion Code 14 14 14	Posta Code
		•		

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