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Form	9	9(0-	P	F
	_	_ ,	_	-	_

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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

OMB No 1545-0052 2009

Department of the Treasury Internal Revenue Service Note: The foundation may					: The foundation may	Treated as a Pri	vate Foundati	i on satisfy state re	eporting requirements	2009		
_					ax year beginning		/01 , 2009		09/30, 2010			
			hat apply	T	Initial return		of a former			Final return		
			,		Amended return		ess change		Name change	_		
_			Name of fo	unda	tion				A Employer identific	cation number		
ι	Jse th	e IRS										
	lab	el.	BRIDGE	OF	ALLEN FOUNDA	TION			13-	4148389		
(Other	wise,	Number an	d stre	et (or P O box number	if mail is not delivered to stre	et address)	Room/suit	B Telephone number (see	page 10 of the instructions)		
	pri	nt			ER SQUARE ADV		,					
_	or ty	•	1221 SE	CON	ND AVENUE	·		320	(20	6) 838-4880		
		ecific	City or towi	n. sta	ate, and ZIP code			I	C If exemption applica	tion is		
"	istruc	ctions.							pending, check here D 1 Foreign organizat	<u> </u>		
			SEATTLE	. W	VA 98101				2 Foreign organizat	· · · · · · · · · · · · · · · · · · ·		
н	Che	ck type				(c)(3) exempt private	foundation		85% test, check h	ere and attach		
Ϊ			_		empt charitable trust			ition	computation -			
1			et value of a			ounting method X		crual	E If private foundation			
•	_		m Part II, co			Other (specify)	5d3// /\0	or du i	· ·)(1)(A), check here		
	-	sai (#0 ▶ \$				I, column (d) must be c	on cash basis.	j		in a 60-month termination (1)(B), check here		
r.					and Expenses (The		T	<u>' </u>	ander section 507(b	(d) Disbursements		
ų		total o	f amounts in	colun	nns (b), (c), and (d)	(a) Revenue and	(b) Net inv		(c) Adjusted net	for charitable		
		may n	not necessaril	y equ	ual the amounts in 1 1 of the instructions))	expenses per books	incor	ne	income	purposes (cash basis only)		
٦					, ,	103,225	,]			(Cash Dasis Offly)		
	1		If the	found	received (attach schedule) , dation is not required to		+					
	2	Check I	attac		В					4		
	3		•		porary cash investments	14,890	,	14,890.		ATCH 1		
	1				rom securities				** * · · · · · · · · · · · · · · · · ·	711011 1		
							-		· · · · · · · · · · · · · · · · · · ·			
						435,048						
Revenue			n or (loss) fron sales price for a		of assets not on line 10 538,141		1					
Ve		assets o	on line 6a			·	4	35,048.	 			
æ	7	•	•		(from Part IV, line 2)		-	33,040.				
	8		•	_	ain		-					
	9 10 a		e modificatio ales less retum			•		-				
		and allo	wances • • •	٠.		· · · · · · · · · · · · · · · · · · ·		-		<u> </u>		
	ĺ		ost of goods so									
					ach schedule)		 	-				
					hedule)	1 663 163	3 4	49,938.				
_					gh 11	· · · · · · · · · · · · · · · · · · ·	-	10,000.				
	13				irectors, trustees, etc	· 1				ļ		
ŝ	14				and wages							
Expenses	15				e benefits	100	- 	0.	0.	0		
ĝ					lule)		'1					
ω					schedule)							
₹	C		-		(attach schedule)							
tra	17-	-Interes	CCENT	<u> </u>	page 14 of the instructions)	* 359	-	359.	0 .	0		
ä	1B						<u> </u>	- 333.				
Ē	19 _Q			h sch	hedule) and depletion	•	 		-			
Ad	20,3	Occup	ancy 1 1.7	N11 ⁻	. O	•	+					
힏	[2][다	Travěl	; conferences	, and	meetings	•	-					
c Other professional fees (attach schedule). 17 Interest 18 Taxes (attach schedule) 19 Depreciation (attach schedule) and depletion. 20 Occupancy 1 Occupancy 2						, 	+-					
Ħ	23		experses (at	_	• ,	·	- 1					
era	24				ministrative expenses	I 501	.	359.	0			
ğ	l_				3	• ———		333.	··	· · · · · · · ·		
_	25		_	-	nts paid	5.0	, 	359.	0	. 0		
_	26				ents Add lines 24 and 2	50.	- 	339.				
	27		ict line 26 fro			552,662	, [
	l				ses and disbursements	•		49,579.		-		
	1				(If negative, enter -0-		4	39, JIJ.	-0-	ļ		
	I C	Adius	ted net incor	ne (ıf	f negative, enter -0-).	. 1	1	1	- 3 -	1		

P	art II	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	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	42,487.	50,534.	50,534.
	3	Accounts receivable			
		Less allowance for doubtful accounts ▶			
		Pledges receivable			
		Less allowance for doubtful accounts ▶		İ	
		Grants receivable			
		Receivables due from officers, directors, trustees, and other			
		· · · ·			
		disqualified persons (attach schedule) (see page 16 of the instructions) Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶			
ts		Inventories for sale or use			
ssets		Prepaid expenses and deferred charges			
ä		Investments - U S and state government obligations (attach schedule) .	245 151	000 766	1 144 000
	b	Investments - corporate stock (attach schedule) ATCH 3 .	345,151.	889,766.	1,144,986.
	11 C	Investments - corporate bonds (attach schedule)			
		and equipment basis Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			<u>.</u>
	14	linvestments - other (attach schedule) Land, buildings, and equipment basis			
		equipment basis Less accumulated depreciation (attach schedule)			
	15	Other assets (describe			
		Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item I)	387,638.	940,300.	1,195,520.
_		Accounts payable and accrued expenses			
		Grants payable			
w	19	Deferred revenue	-		
Liabilities					
Ē	20	Loans from officers, directors, trustees, and other disqualified persons	· 		
Lia	21	Mortgages and other notes payable (attach schedule)		· · · · · · · · · · · · · · · · · · ·	
	22	Other liabilities (describe			
		Tatal linkilitian (add lines 17 through 22)			
_	23	Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
es	24				
ĕ	24	Unrestricted	· · · · · · · · · · · · · · · · · · ·		
Balance	25	Temporarily restricted			
8	26	Permanently restricted			
Fund		Foundations that do not follow SFAS 117,			
Ľ.		check here and complete lines 27 through 31. ▶ X			
Assets or	27	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	387,638.	940,300.	
\SS	29	Retained earnings, accumulated income, endowment, or other funds	301,030.	940,300.	
, t	30	Total net assets or fund balances (see page 17 of the	207 620	040 200	
Net		instructions)	387,638.	940,300.	
	31	Total liabilities and net assets/fund balances (see page 17			
_		of the instructions)	387,638.	940,300.	
E	art I	Analysis of Changes in Net Assets or Fund	Balances		
1	Tota	I net assets or fund balances at beginning of year - Part II	, column (a), line 30 (must	t agree with	
		of-year figure reported on prior year's return)		1 1	387,638.
2		r amount from Part I, line 27a			552,662.
3		the dead to be a O (dames and)		1 2 1	
		lines 1, 2, and 3			940,300.
5	Deci	reases not included in line 2 (itemize) ▶		5	
6	Tota	I net assets or fund balances at end of year (line 4 minus	line 5) - Part II. column (b)	, line 30 6	940,300.
~					

, (a) List and	describe the kind(s) of property sold (each warehouse, or common stack 200	e g , real estate,	(b) How acquired P-Purchase	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a SEE PART IV SCHE	ick warehouse, or common stock, 200 :	SIIS MLC CO)	D-Donation	(mo, day, y.)	
b				-	
C				<u> </u>	
d		-			
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (k (e) plus (f) min	
а					
b					<u> </u>
С					
d					<u>.</u>
e					
Complete only for assets sr		ned by the foundation on 12/31/69		Gains (Col (h) g	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	(k), but not less Losses (from co	
<u>a</u>					
b					
С					
d					
e		<u> </u>	<u> </u>		
2 Capital gain net income or	(not conital loce)	gain, also enter in Part I, line 7			435,036.
	(n	(loss), enter -0- in Part I, line 7	2		433,030.
	or (loss) as defined in sections 12				
	line 8, column (c) (see pages 13				
Part V Qualification II	ine 8	uced Tax on Net Investment Inc	3		
	the section 4942 tax on the distrib	outable amount of any year in the b	ase perio	od? [Yes X No
	not qualify under section 4940(e)		oforo mal	king any entries	
(a)		, see page 18 of the instructions be	Tiore mai	(d)	
Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution (col (b) divided b	
2008	186,703.	575,866.	 	(cor (b) divided b	0.324213
2008	135,000.	1,000,117.	-	-	0.134984
2006	78,500.	223,720.	1		0.350885
2005	1,545,363.	287,087.		· · · · · · · · · · · · · · · · · · ·	5.382908
2004	264,267.	196,614.			1.344090
200,					
2 Total of line 1, column (d)			2		7.537080
	for the 5-year base period - divide	e the total on line 2 by 5, or by the			
•	-	s than 5 years	3		1.507416
					-
4 Enter the net value of non	charitable-use assets for 2009 fro	om Part X, line 5	4		999,520.
5 Multiply line 4 by line 3			5	1	,506,692.
					, ,
6 Enter 1% of net investmen					
			6		4,496.
			6		4,496.
7 Add lines 5 and 6	nt income (1% of Part I, line 27b)			1	
	nt income (1% of Part I, line 27b)			1	4,496.

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of	f the ins	tructio	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 ruling letter if necessary - see instructions)			
	Domestic foundations that meet the section 4940(e) requirements in Part V, check		8,9	92.
	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	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2		8,9	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		8,9	92.
6	Credits/Payments			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 2,156.			
b	Exempt foreign organizations-tax withheld at source			
¢	Tax paid with application for extension of time to file (Form 8868) 6c 12,000.			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		14,1	56.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
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		5,1	64.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 5,164. Refunded ▶ 11			
Par	t 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	<u> </u>	Yes	No
	participate or intervene in any political campaign?	<u>1a</u>	 	X
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			.,
	of the instructions for definition)?	1b		X
	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.		İ	v
	Did the foundation file Form 1120-POL for this year?	1c	<u> </u>	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			ŀ
	(1) On the foundation ►\$ (2) On foundation managers ►\$ 0.			ļ
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		-	
	on foundation managers ►\$0.	ı		Х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	 	
	If "Yes," attach a detailed description of the activities	1	Ì	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			Х
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	 	X
4a	•	- 1	N	1.
b			18/	/A X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	·	
	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		1	
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		X	
	conflict with the state law remain in the governing instrument?		$\frac{1}{X}$	
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.		 	-
8a	instructions) > NY,			
b	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	<u>8b</u>	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			1
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			x
	27)? If "Yes," complete Part XIV	9	+	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			X
	names and addresses	10	1	1 ''

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?

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NONE

Part VIII*	and Contractors (continued)	Paid Employ	ees,
Five highe	est-paid independent contractors for professional services (see page 23 of the instruct		
	(a) Name and address of each person paid more than \$50,000 (b) Type of	f service	(c) Compensation
NONE			
			
otal numbe	er of others receiving over \$50,000 for professional services		▶ NONE
Part IX-A	Summary of Direct Charitable Activities		
	lation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the rins and other beneficianes served, conferences convened, research papers produced, etc.	number	Expenses
1_N/A			
2			,,,
			·
3			
4			
	Summary of Program-Related Investments (see page 23 of the instructions) two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 NONE	two largest program-related investments made by the loundation during the tax year on lines 1 and 2		Amount
2			
	gram-related investments. See page 24 of the instructions		
3 NONE			
Fotal. Add	ines 1 through 3	<u>. • </u>	

Pa	art X Minimum Investment Return (All domestic foundations must complete this passee page 24 of the instructions.)	rt Foreign foundat	ions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	968,184.
b	Average of monthly cash balances	1b	46,557.
С	Fair market value of all other assets (see page 24 of the instructions)	<u> 1c </u>	0.
d	Total (add lines 1a, b, and c)	1d	1,014,741.
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	0.
3	Subtract line 2 from line 1d	3	1,014,741.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page	25	
	of the instructions)		15,221.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4		999,520.
6	Minimum investment return. Enter 5% of line 5	6	49,976.
Pa	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(J)(3) and (foundations and certain foreign organizations check here ▶ and do not comp)(5) private operating lete this part.)	
1	Minimum investment return from Part X, line 6	1	49,976.
2 a		8,992.	
b	Income tax for 2009. (This does not include the tax from Part VI)2b		
С		2c	8,992.
3	Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1	3	40,984.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	1 - 1	40,984.
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	40,984.
Pa	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	- I	
' a		1a	0.
b			0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
2		2	0.
3	purposes Amounts set aside for specific charitable projects that satisfy the	• • • • • • • • • • • • • • • • • • • •	
э a		3a	0.
b		3b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4		0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
•	Enter 1% of Part I, line 27b (see page 26 of the instructions)		N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4		0.
U	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when cal	culating whether the	
	qualifies for the section 4940(e) reduction of tax in those years	odidting whether the	igandation

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1

Pa	rt XIII Undistributed Income (see page	26 of the instruction	ns)	·	
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7				40,984.
2	Undistributed income, if any, as of the end of 2009				
а	Enter amount for 2008 only				
b	Total for pnor years 20 07 ,20 06 ,20 05				<u> </u>
3	Excess distributions carryover, if any, to 2009				
а	From 2004 254,502. From 2005 1,533,029.				
b	From 2005 1,533,029.				
C	From 2006 67,486.				
d					
e	From 2008				
f	Total of lines 3a through e	2,098,593.			
4	Qualifying distributions for 2009 from Part XII,				
	line 4 ▶ \$				
а	Applied to 2008, but not more than line 2a				
b	Applied to undistributed income of prior years (Election				
	required - see page 26 of the instructions)				_
С	Treated as distributions out of corpus (Election				
	required - see page 26 of the instructions)				-
d	Applied to 2009 distributable amount				_
е	Remaining amount distributed out of corpus	0.			10.004
5	Excess distributions carryover applied to 2009	40,984.			40,984.
	(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:	2 057 600			
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,057,609.			
b	Prior years' undistributed income Subtract				
_	line 4b from line 2b				-
C	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				
e	amount - see page 27 of the instructions Undistributed income for 2008 Subtract line				
Ī	4a from line 2a Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2010.				
7	Amounts treated as distributions out of corpus	-			1
	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)	213,518.			
9	Excess distributions carryover to 2010.				
•	Subtract lines 7 and 8 from line 6a	1,844,091.			
10	Analysis of line 9	_			
	Excess from 2005 1,533,029.				
	Excess from 2006 67, 486.				
	Excess from 2007				
	Excess from 2008				
	Excess from 2009				

Pa	rt XIV Private Oper	rating Foundations	see page 27 of the	instructions and Pa	rt VII-A, question 9)	NOT APPLICABLE		
1 a	If the 'foundation has	received a ruling or d	etermination letter tha	t it is a private opera	ating			
	foundation, and the ruling	g is effective for 2009, e	nter the date of the ruling	·	>			
b		cate whether the foundation is a private operating foundation described in section 4942(j)(3) or 49						
2 -		Tax year		Prior 3 years				
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total		
	I or the minimum investment		· · · · · · · · · · · · · · · · · · ·	.,				
	return from Part X for each year listed							
b	85% of line 2a							
-								
U	Qualifying distributions from Part XII, line 4 for each year listed .							
d	Amounts included in line 2c not							
	used directly for active conduct							
e	of exempt activities							
·	Qualifying distributions made directly for active conduct of							
	exempt activities Subtract line							
3	2d from line 2c					 		
	alternative test relied upon							
а	"Assets" alternative test - enter							
	(1) Value of all assets(2) Value of assets qualifying			 				
	under section							
b	4942(j)(3)(B)(i) "Endowment" alternative test-							
_	enter 2/3 of minimum invest-							
	ment return shown in Part X,							
С	"Support" alternative test - enter							
	(1) Total support other than	1						
	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					İ		
	(j)(3)(B)(iii)							
	(3) Largest amount of sup- port from an exempt							
	organization							
	(4) Gross investment income	ory Information (C	omplete this part	only if the found	ation had \$5 000	or more in assets		
L' C		during the year - se			ation had \$0,000	or more in doods		
1	Information Regardin		<u> </u>	,				
·	List any managers of			e than 2% of the tota	al contributions receiv	ved by the foundation		
	before the close of any	y tax year (but only if t	hey have contributed	more than \$5,000). (S	ee section 507(d)(2))			
	ANNA MANN							
h	List any managers of	the foundation who	own 10% or more o	f the stock of a corp	oration (or an equally	v large portion of the		
_	ownership of a partne	rship or other entity) o	f which the foundation	n has a 10% or greate	r interest	, , ,		
	N/A							
2	Information Regardin	g Contribution, Gran	t, Gift, Loan, Scholars	hip, etc., Programs:				
						and does not accept		
					e 28 of the instruction	ons) to individuals or		
	organizations under of	ther conditions, compl	ete items 2a, b, c, and	l d		<u> </u>		
а	The name, address, a	ind telephone number	of the person to who	m applications should b	e addressed.			
b	The form in which app	olications should be su	ibmitted and informati	on and materials they	should include.			
_	NONE	-						
С	Any submission dead	ines						
	NONE							
d	Any restrictions or I	ımıtatıons on awards	s, such as by geogr	aphical areas, charita	able fields, kinds of	institutions, or other		
	factors							
	NONE							

Part XV Supplementary Information (co	Part XV Supplementary Information (continued)								
3 Grants and Contributions Paid Duri	ng the Year or Appr								
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount					
Name and address (home or business)	or substantial contributor	recipient	0011110111011						
a Paid during the year									
	1								
Total			▶ 3a						
b Approved for future payment									
.,			İ						
		1							
		Ì							
		1							
	1								
Total	<u> </u>								
rotal	<u> </u>	<u> </u>		<u> </u>					

Unrelated business amounts unless otherwise indicated by the property of the program service revenue a boundary of the propert	Part XVI	Analysis of Income-Produ	cing Activ	vities			
1 Program service revenue Baumss code Amount Exclusion code Amount See page 28 of the instructions and the contracts from government agences and contracts from government agences 2 Membership dues and assessments 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate a Debt-Inanced property 5 Net rental income or (loss) from real estate a Debt-Inanced property 6 Net rental income or (loss) from personal property 7 Other investment income (or (loss) from personal property 1 Net rental income or (loss) from sease of assets other than inventory 1 Net income or (loss) from sease of assets other than inventory 1 Net income or (loss) from sease of assets other than inventory 1 Net income or (loss) from sease of assets other than inventory 1 Net income or (loss) from sease of assets other than inventory 1 Net income or (loss) from sease of assets other than inventory 1 Net income or (loss) from sease of assets other than inventory 1 Net income or (loss) from sease of inventory 1 Net income 1					Excluded b	y section 512, 513, or 514	(e)
g Fees and contracts from government agencies g Fees and contracts from government agencies g Membership dues and assessments J Interest on seeings and temporary cash missiments d Dividends and interest from securities S Net rental income or (loss) from real estate a Debt-financed property Not rental income or (loss) from real estate a Debt-financed property Not rental income or (loss) from personal property Not rental income or (loss) from personal property Not income or (loss) from seles of assets other than investory Not income or (loss) from selestery Not income or (loss) from selestery Not income or (loss) from selestery Not income or (loss) from selestery Not income or (loss) from selestery Not income or (lo	•		(a)	(b)	(c)	(d)	function income (See page 28 of the instructions)
b c d d e e e e e e e e e e e e e e e e e	-	i service revenue			 		are manacaons)
g Fees and contracts from government agencies g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 Net rental income or (icss) from real estate a Debt-financed property b Not debt-financed property 7 Other investment income 8 Sam or (loss) from sales of assess other than inventory 9 Net income or (loss) from sales of assess other than inventory 18 Caros rolls of the sales of assess other than inventory 19 Net income or (loss) from sales of sees of inventory. 10 Cross profit or (loss) from sales of inventory. 11 Other revenue a b ATTACHMENT 5 c d a 12 Subrotal Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) 8 Relationship of Activities to the Accomplishment of Exempt Purposes 15 Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (Se page 29 of the instructions.)					†		
d e f g Fees and contracts from government agencies 2 Membership dues and assessments 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate a Deat-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 special events 9 Net income or (loss) from special events 10 Gross profit or (loss) from special events 11 Other revenue a b ATTACHMENT 5 c d d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) 1449, 938. Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. V The investment of the foundation's exempt purposes (other than by providing funds for such purposes) (Sepage 29 of the instructions.)							
g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on swings and temporary cash investments 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate a 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 sales of sees their than inventory 10 Gross profit or (loss) from sales of inventory. 11 Other revenue a b ATTACHMENT 5 c d d e 12 Subtotal Add columns (b), (d), and (e) 13 Total Add ine 12, columns (b), (d), and (e) 1449, 938. 13 Total Add ine 12, columns (b), (d), and (e) Part XVI-3 Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (Sepage 29 of the instructions.)							
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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 7 Other investment income 8 Gain or (loss) from special events 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue a b ATTACHMENT 5 c d 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 calculations) Part XVI—B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (Sepage 29 of the instructions.)							
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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 7. Other investment income 8. Gain or (loss) from sales of assets other than inventory 9. Net income or (loss) from sales of inventory. 11. Other revenue a b ATTACHMENT 5 c d d e 12. Subtotal Add columns (b), (d), and (e) 13. Total. Add line 12, columns (b), (d), and (e) 14. Total. Add line 12, columns (b), (d), and (e) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly the accomplishment of the instructions.)	_						
4 Dividends and interest from securities							
5 Net rental income or (loss) from real estate a Debt-financed property b Not debt-financed property 7 Other investment income 8 Gain or (loss) from special events 9 Net income or (loss) from special events 110 Gross profit or (loss) from special events 110 Gross profit or (loss) from special events 110 Other revenue a 111 Other revenue a 112 Subtotal Add columns (b), (d), and (e) 113 Total. Add line 12, columns (b), (d), and (e) 8 Relationship of Activities to the Accomplishment of Exempt Purposes 110 Line No. 111 Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (Section 1) and the providing funds for such purposes (Section					14	14,890.	
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 sales of inventory 11 Other revenue a b ATTACHMENT 5 c d d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) 15 Total. Add line 12, columns (b), (d), and (e) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See worksheet in line 10 instructions.)							
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 sales of inventory 11 Other revenue a b ATTACHMENT 5 c d d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) 15 Total. Add line 12, columns (b), (d), and (e) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See worksheet in line 10 instructions.)	a Deb	t-financed property					
8 Net rental income or (loss) from personal property 7 Other investment income 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue a b ATTACHMENT 5 c d 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 calculations) Part XVI-3 Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See worksheet in line 10 instructions.)							
8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from special events 110 Gross profit or (loss) from sales of inventory. 111 Other revenue a b ATTACHMENT 5 c d e 112 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) 1449, 938 (See worksheet in line 13 instructions on page 28 to verify calculations) Part XVI-3 Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See page 29 of the instructions.)							
9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue a	7 Other in	vestment income					
10 Gross profit or (loss) from sales of inventory. 11 Other revenue a b ATTACHMENT 5 c d e 12 Subtotal Add columns (b), (d), and (e)	8 Gain or (loss) from sales of assets other than inventory			18	435,048.	
11 Other revenue a b ATTACHMENT 5 c d e 12 Subtotal Add columns (b), (d), and (e)	9 Net inco	ome or (loss) from special events					
b ATTACHMENT 5 c d e 12 Subtotal Add columns (b), (d), and (e)	10 Gross p	rofit or (loss) from sales of inventory					
c d e Subtotal Add columns (b), (d), and (e)	11 Other re	evenue a					
d e 12 Subtotal Add columns (b), (d), and (e)	b	ATTACHMENT 5			<u> </u>		
e 12 Subtotal Add columns (b), (d), and (e)	С						
12 Subtotal Add columns (b), (d), and (e)	d						
13 Total. Add line 12, columns (b), (d), and (e)	e					140 020	· · ·
(See worksheet in line 13 instructions on page 28 to verify calculations.) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See page 29 of the instructions.)					<u> </u>		
Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See page 29 of the instructions.)						13	449,938.
Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See page 29 of the instructions.)							
NOT APPLICABLE	_	the accomplishment of the fo	oundation's	exempt purposes (o	o in column	by providing funds for	such purposes) (Se
NOT APPLICABLE NOT APPLICABLE							
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				NOT APPLICABL	E		
							
							
							
						· · · · · · · · · · · · · · · · · · ·	
							

JSA 9E1493 1 000

Pa	rt XVII	Information F Exempt Organ		ransfers To and	Transa	ctions	and Relation	onships With I	Nonc	harit	able
	ın se	he organization directly ction 501(c) of the Co zations? fers from the reporting fo	de (other than	section 501(c)(3) or	ganizations					Yes	No
		ash							1a(1)		X
		ther assets							1a(2)		X
b		transactions ales of assets to a nonch	aritable exempt o	iroanization					1b(1)		Х
		urchases of assets from a							1b(2)		X
	(3) R	ental of facilities, equipme	ent, or other asse	ts					1b(3)		X
		eimbursement arrangemei									X
		pans or loan guarantees erformance of services or								-	X
C		ng of facilities, equipment									Х
d		answer to any of the									
		of the goods, other a									
	value	in any transaction or	sharing arrang	gement, show in coli	umn (d) ti	ne value	of the goods	s, other assets, or	service	es rec	ceived
(a)	ine no	(b) Amount involved	(c) Name of r	noncharitable exempt organ	nization	(d) Des	cription of transfe	ers, transactions, and sha	ring arra	ngeme	nts
		N/A				N/A					
											
				 							
_											
				· · · · · · · · · · · · · · · · · · ·							
											
											
						<u> </u>					
		·						··			
	ls the	foundation directly or	indirectly affilia	ited with, or related to	o, one or i	more tax-e	exempt organiz	ations described in			
		n 501(c) of the Code (oth							Y	es 🗀	No
b	If "Ye	s," complete the following	schedule								
		(a) Name of organization		(b) Type of or	ganization			c) Description of relation	ship		
					 						
									, .		
	Under belief,	penalties of perjury, I declar	are that I have ex plete Declaration	amined this return, includ of preparer (other than ta:	ling accompa xpayer or fid	anying sche uciary) is ba	edules and staten asged on all inform	nents, and to the best mation of which prepar	or my k er has a	nowied ny kno	ige and wledge
Clua ludoch ham 3/8/2011 thistel											
ā	S	ignature of officer or trustee				Date	—	Title			
Sign Here	Paid Preparer's Use Only	Preparer's signature	<u> </u>	alel	Date 3 (3	:lu	Check if self-employe	Preparer's number (S page 30 of	ee Sign	ature o	
U)	Paid Preparer' Use Only	Firm's name (or yours if	PIONE			LLC		EIN ▶ 20-8379	993		
	د ت	self-employed), address,		SECOND AVENUE,	SUITE			222		000	_
		and ZIP code	SEATT	LE, WA		98	101	Phone no 206-8			(2000)

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

Employer identification number Name of the organization BRIDGE OF ALLEN FOUNDATION 13-4148389 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 501(c)(3) exempt private foundation Form 990-PF 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 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 331/3 % 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 II. 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 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) Schedule B (Form 990, 990-EZ, or 990-PF) (2009) For Privacy Act and Paperwork Reduction Act Notice, see the Instructions

for Form 990, 990-EZ, or 990-PF.

Sala and Julia 19.	/F	~~~ ==		
Schedule B	(Form 990,	990-EZ,	or 990-PF	(2009)

Page	of	of Part I

Name	of o	rażni	zation

BRIDGE OF ALLEN FOUNDATION

Employer identification number 13-4148389

Part Contributors	(see	instructions)
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(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ANNA M. MANN 1211 AVENUE OF AMERICAS, 2ND FLOOR	\$514,965.	Person X Payroll X Noncash
	NEW YORK, NY 10036		(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)
(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)
(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)

Page of Part II

BRIDGE OF ALLEN FOUNDATION Name of organization

Employer identification number

13-4148389

n) No. From Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1 51	EE STATEMENT D-2		
		\$	12/22/2009
n) No. From Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_			
n) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
n) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
 		\ \\$	
n) No. From Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		 \$	
a) No. From Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

ATTACHMENT 1

ATTACHMENT 1

PART I - DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PF,

NET INVESTMENT INCOME	7,234. -183. 7,839.	14,890.
REVENUE AND EXPENSES PER BOOKS	7,234. -183. 7,839.	14,890.
DESCRIPTION	CFT SECURITIES, LLC LESS: AMOUNT REPORTED ON 2008 RETURN CHARLES SCHWAB	TOTAL

ATTACHMENT 2

ATTACHMENT 2

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CHARITABLE PURPOSES	.0	• 0
ADJUSTED NET INCOME	0.	0
NET INVESTMENT INCOME	359.	359.
REVENUE AND EXPENSES PER BOOKS	359.	359.
		TOTALS
DESCRIPTION	FOREIGN TAXES PAID	

STOCK
CORPORATE
1
PART
990PE,

DESCRIPTION

CFT - VDMIX SCHWAB - ISHARES RUSSELL 3000

TOTALS

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ENDING BOOK VALUE ENDING

351,809. 537,957.

598,641. 546,345.

FMV

1,144,986.

889,766.

ATTACHMENT 4

FORM 990PF,

PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

ANNA MANN

C/O PIONEER SQUARE ADVISORS, LLC 1221 SECOND AVENUE, SUITE 320 SEATTLE, WA 98101

TRUSTEE

GRAND TOTALS

ATTACHMENT 4

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2009

Name of estate or trust **Employer identification number** BRIDGE OF ALLEN FOUNDATION 13-4148389 Note: Form 5227 filers need to complete only Parts I and II. Short-Term Capital Gains and Losses - Assets Held One Year or Less (f) Gain or (loss) for (e) Cost or other basis (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (c) Date sold the entire year Subtract (e) from (d) (see page 4 of the instructions) (d) Sales price (mo, day, yr) (mo, day, yr) 1a Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b 2 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 3 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Loss 4 Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back . . Long-Term Capital Gains and Losses - Assets Held More Than One Year Part II (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (c) Date sold (see page 4 of the instructions) the entire year Subtract (e) from (d) (d) Sales price (mo , day, yr) (mo, day, yr) 6a 435,036. **b** Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b........... 6b Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 Gain from Form 4797, Part I 10 10 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2008 Capital Loss Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, 435,036.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2009

$\overline{}$	t III Summary of Parts I and II		(1) Beneficia	ries'	(2) Esta	ate's	raye Z
	Caution: Read the instructions before completing this	part.	(see page		or trus		(3) Total
13	Net short-term gain or (loss)	13		-			
14	Net long-term gain or (loss):						
а	Total for year	14a					435,036.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht)						
C	28% rate gain	14c					125 026
	Total net gain or (loss). Combine lines 13 and 14a ▶						435,036.
	it If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Fort V, and <mark>do not</mark> complete Part IV. If line 15, column (3), is a net loss, complete F						
	t IV Capital Loss Limitation	CIT 77	and the equitable		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, l	Part I Ii	ne 4c if a trust)	the st	naller of		
	· · · · · · · · · · · · · · · · · · ·		•		I	16)
Note	The loss on line 15, column (3) or b \$3,000	je 1, lir	e 22 (or Form 9	90-T, I	ine 34), is a l	oss, con	nplete the Capital Loss
	t V Tax Computation Using Maximum Capital Gains Rate					-	
	Tax Computation Using Maximum Capital Gains Rate 1041 filers. Complete this part only if both lines 14a and 15 in colo		O) are gains or	20.20	mount is an	orad in	Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mo			all al	illouint is ein	erea iii	ir ait i oi i ait ii ailu
	tion: Skip this part and complete the worksheet on page 8 of the instru						
• E	ther line 14b, col (2) or line 14c, col (2) is more than zero, or						
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.						Dedd
Forn	n 990-T trusts. Complete this part only if both lines 14a and 15 al orm 990-T, and Form 990-T, line 34, is more than zero. Skip this pa	re gail	is, or qualified Loopplete the	divid	ends are in sheet on n	ciuded	In income in Part I
	er line 14b, col (2) or line 14c, col (2) is more than zero	art aric	complete the	WOIK	sheet on p	age o (or the matractions in
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line	34)	17	<u>-</u>			
18	Enter the smaller of line 14a or 15 in column (2)	., .					
	but not less than zero				i		
19	Enter the estate's or trust's qualified dividends						
-	from Form 1041, line 2b(2) (or enter the qualified						
	dividends included in income in Part I of Form 990-T) 19						
20	Add lines 18 and 19						
21	If the estate or trust is filing Form 4952, enter the						
	amount from line 4g, otherwise, enter -0 ▶ 21				·		
22	Subtract line 21 from line 20. If zero or less, enter -0		· · 				
23	Subtract line 22 from line 17 If zero or less, enter -0-		23				
	- · · · · · · · · · · · · · · · · · · ·						
24	Enter the smaller of the amount on line 17 or \$2,300		24				
25	Is the amount on line 23 equal to or more than the amount on line 2 Yes. Skip lines 25 and 26, go to line 27 and check the "No" bo						
	No. Enter the amount from line 23		25				
26	Subtract line 25 from line 24						
27	Are the amounts on lines 22 and 26 the same?						
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or	line 22	27				
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		. 28				
29	Subtract line 28 from line 27		29				
30	Multiply line 29 by 15% (15)					30	
31	Figure the tax on the amount on line 23. Use the 2009 Tax Ra						
	(see the Schedule Ginstructions in the instructions for Form 1041)					31	1. '7
32	Add lines 30 and 31		odulo for For		nd Teucto	32	
33	Figure the tax on the amount on line 17. Use the 2009 Tax Ra					33	
2.4	(see the Schedule Ginstructions in the instructions for Form 1041). Tax on all taxable income. Enter the smaller of line 32 or line 33	here	and on Form 1	 041	Schedule	33	
34	G, line 1a (or Form 990-T, line 36)					34	
	O, mio_ra (01 1 01111 330-1, mio 30)		<u> </u>		<u></u>		

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side Employer identification number 13-4148389 BRIDGE OF ALLEN FOUNDATION Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (d) Sales pnce (see page 4 of the instructions) (e) Cost or other basis (see page 4 of the instructions) (b) Date (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (f) Gain or (loss) Subtract (e) from (d) (c) Date sold acquired (mo, day, yr) (mo , day, yr 6a SCHWAB - 200 SHS 20,000 07/25/2002 5,314. 14,686. BURLINGTON NORTHERN SANTA 02/17/2010 97,791 420,350. SCHWAB - SEE STATEMENT D-1 **VARIOUS** 03/03/2010 518,141.

435,036.

420,349.60

518,141.00 97,791.40

13-4148389

		Date of	Date of		Cost	Short Term	Long Term
tion	Shares 200.00	Purchase 7/25/2002	Sale 3/3/2010	Proceeds 25,273.87	Basis 2,498.00	Gain (Loss)	Gain (Loss) 22,775.87
	1000	1/30/2002	3/3/2010	1,061.98	214 04		847.94
	300,00	3/1/2006	3/3/2010	8.160.79	1,338 00		59,316.06 6.822 79
HLDGS	100.00	8/27/2003	3/3/2010	4,203 04	772.73		3,430.31
C H ROBINSON WORLDWIDE	200.00	2/23/2001	3/3/2010	10,560.26	2,968 76		7,591 50
	335 00	12/16/2004	3/3/2010	20,616.64	4,633.05		15,983 59
	200.00	8/27/2003	3/3/2010	2,089 90	1,954.00		5,135.90
	200.00	7/17/2002	3/3/2010	3,550 15	824.00		2,726 15
	100.00	6/12/2002	3/3/2010	6,952 21	1,237.00		5,715 21
DRPORATION	835 00	2/23/2001	3/3/2010	29,075 17	7,039.97		22,035.20
CTOR	100 00	7/25/2006	3/3/2010	1,222.08	236 68		985.40
	640 00	10/24/2003	3/3/2010	22,067 49	1,250.94		20,816.55
	40 00	3/28/2002	3/3/2010	1,150.38	254 00		886 38
ENTERCOM COMMUNICATION	3,200.00	11/10/2008	3/3/2010	36,619.69	2,107.20		34,512.49
FACTSET RESH SYS INC	150 00	7/25/2002	3/3/2010	10,443 31	2,507.00		7,936.32
GILEAD SCIENCES INC	150.00	1/30/2002	3/3/2010	7,104 05	1,218.38		5,885.68
	500.00	5/24/2005	3/3/2010	6,745.41	1,918 00		4,827 41
₹.	200.00	8/27/2003	3/3/2010	10,996.46	2,552.00		8,444.46
	800.00	8/28/2002	3/3/2010	25,696.79	5,990 24		19,706 55
8	700.00	8/28/2002	3/3/2010	35,833.24	9,897 16		25,936.08
SCORP	20.00	1/5/2006	3/3/2010	2,128.47	•		2,128.47
NEW	64 00	10/24/2003	3/3/2010	3,312.59	199 31		3,113 28
	300.00	4/23/2003	3/3/2010	19,215 05	4,798.50		14,416.55
	2,000 00	11/10/2008	3/3/2010	10,503 46	1,652 00		8,851.46
MEDCO HEALTH SOLUTIONS	323 00	8/28/2002	3/3/2010	20,650 22	3,718.49		16,931.73
	400 00	2/23/2001	3/3/2010	13,709 02	3,547 52		10,161.50
	187.00	12/30/2005	3/3/2010	2,154 40	•		2,154.40
	200.00	4/23/2003	3/3/2010	1,264.18			1,264 18
	100 00	7/25/2002	3/3/2010	5,222.23	1,120 00		4,102.23
PNC FINL SVCS GROUP INC	00 69	1/27/2006	3/3/2010	3,719.05			3,719 05
	300 00	2/22/2001	3/3/2010	23,196.09	6,484 50		16,711.59
PROASSURANCE CORP	200 00	2/23/2001	3/3/2010	10,887 06	2,934.00		7,953 06
SKYWORKS SOLUTIONS INC	200 00	7/25/2002	3/3/2010	11,151.55	2,443.00		8,708.55
	400.00	4/23/2003	3/3/2010	12,068 24	2,324.68		9,743.56
TEVA PHARMACEUTICAL INC	221.00	7/25/2002	3/3/2010	13,434.41	2,540.01		10,894.40
	500.00	1/18/2005	3/3/2010	8,595.44	1,820.00		6,775.44
EUTICAL	200.00	7/25/2002	3/3/2010	7,762.10	1,730 00		6,032 10
	100.00	5/4/2004	3/3/2010	7,385.30	2,055.00		5,330.30
VERTEX PHARMACEUTICALS	200.00	12/16/2003	3/3/2010	8,404.09	1,810 00		6,594.09
	200.00	2/23/2001	3/3/2010	17,045.08	4,61125		12,433 83

BRIDGE OF ALLEN FOUNDATION SCHEDULE OF STOCK CONTRIBUTION

EIN: 13-4148389 FYE: 9/30/2010

			FMV	
Date	Security	# of Shares	Amount	
12/22/2009	J & J SNACK FOODS CORP	50.00	1,975.00	
12/22/2009	OLD REP INTL CORP	187.00	1,931.71	
12/22/2009	PNC FINL SVCS GROUP INC	69.00	3,739.46	
12/22/2009	PALM INC NEW	200.00	2,095.00	
12/22/2009	DIRECTV	640.00	21,638.40	
12/22/2009	LIBERTY MEDIA CORP NEW	64.00	3,046.08	
12/22/2009	APPLE INC	200.00	39,951.00	
12/22/2009	AMAZON COM INC	200.00	26,864.00	
12/22/2009	ENTERCOM COMMUNICATION	3,200.00	24,672.00	
12/22/2009	ASIAINFO HLDGS INC	300.00	9,133.50	
12/22/2009	GILEAD SCIENCES INC	150 00	6,515.25	
12/22/2009	TERADATA CORP DEL	400.00	12,300.00	
12/22/2009	MEDCO HEALTH SOLUTIONS	322 84	20,826.41	
12/22/2009	MEDCO HEALTH SOLUTIONS	0.16	10.32	
12/22/2009	MCG CAPITAL CORP	2,000.00	8,010.00	
12/22/2009	TEVA PHARMACEUTICAL INC	221.00	12,180.42	
12/22/2009	FACTSET RESH SYS INC	150.00	9,909.75	
12/22/2009	CYPRESS SEMICONDUCTOR	100.00	1,068.00	
12/22/2009	VERTEX PHARMACEUTICALS	200.00	8,504.00	
12/22/2009	APACHE CORP	10.00	1,030.60	
12/22/2009	CORNING INC	200.00	3,827.00	
12/22/2009	TW TELECOM INC	500.00	8,385.00	
12/22/2009	GREIF BROS CORP [A]	200.00	10,613.00	
12/22/2009	GRAFTECH INTL LTD	500.00	7,530.00	
12/22/2009	BRINKS HOME SEC HLDGS	100.00	3,275.50	
12/22/2009	CREE INC	100.00	5,430.00	
12/22/2009	NATL HEALTH INVS	400.00	14,468.00	
12/22/2009	SKYWORKS SOLUTIONS INC	700.00	9,964.50	
12/22/2009	VALMONT INDS INC	100.00	8,194.00	
12/22/2009	C H ROBINSON WORLDWIDE	200.00	11,724.00	
12/22/2009	CELGENE CORP	335.00	18,796.85	
12/22/2009	MCDONALDS CORP	300.00	18,862.50	
12/22/2009	PRAXAIR INC	300.00	24,046.50	
12/22/2009	HALLIBURTON CO	800.00	24,240.00	
12/22/2009	CVS CAREMARK CORPORATION	835.00	27,054.00	
12/22/2009	YUM BRANDS INC	500.00	17,552.50	
12/22/2009	VALEANT PHARMACEUTICAL	200.00	6,472.00	
12/22/2009	BURLINGTON NORTHN SANTA FE	200.00	19,673.00	
12/22/2009	ENPRO INDS INC	40.00	1,018.00	
12/22/2009	PROASSURANCE CORP	200.00	10,771.00	
12/22/2009	PERRIGO CO	100.00	3,909.00	
12/22/2009	COPART INC	200.00	7,179.00	
12/22/2009	HEWLETT PACKARD CO	700.00	36,578.50	
12/22/2003	TETTELL LAGINATO CO	700.00	00,07 0.00	
TOTAL STOCK	CONTRIBUTED	-	514,964.74	
		=		

FORM 990-PF - PART IV

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

` Kınd of F			Descr			P or	Date	Date sold
Gross sale price less	Depreciation allowed/	Cost or other	FMV as of	Adj basis as of	Excess of FMV over	D	acquired Gain or	
expenses of sale 20,000.	allowable		12/31/69 DO SHS BURLI YPE: SECURIT	12/31/69 NGTON NORT	<u>adı basıs</u> HERN SAN	D	(loss) 07/25/2002 14,686.	02/17/2010
518,141:		SCHWAB - SI	EE STATEMENT YPE: SECURIT			D	VARIOUS 420,350.	03/03/2010
OTAL GAIN(L	oss)						435,036.	
		:						

Form **8868**

(Rev. January 2011)

Application for Extension of Time To File an Exempt Organization Return

■ If you are filing for an Auttomatic 3-Month Extension, complete only Part I and check this box	Internal Revenu	e Service	► File a	separate ap	plication for each return.					
• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (for page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8888 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic axtension of time to file (6 months for a corporation required to file Form 990-1) or an additional (not automatic) 3-month extension of time You can electronically file Form 8868 for request an extension of time to file any of the forms is filed in Part I or Part II with the exception of Form 8870 information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the RS in apper formatiges instructions]. For more details on the electronic fling of this form, visit waw using governed and click one—file Por Charlers & Morpordits. Part I automatic 3-Month Extension of Time. Only submit Original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only. All other corporations (including 1120-0 filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income lax returns. BIOLINE OF ALLEN FOUNDATION BRIDGE OF ALL	 If you are 	filing for an	Automatic 3-Month Extension, o	complete o	nly Part I and check this box			> X		
Do not complete Part #umbess you have already been granted an automatic 3-month extension on a previously filed Form 8888										
a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time You can electronically file Form 8868 to request an extension of time to file any of the forms isseted in Part I or Part II with the exception of Form 4870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the FIS in paper format (see instructions). For more details on the electronic filing of this form, wist www.rs.gove/fele and click on -file for Chantles & Nonprofits. Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only. All other corporations (including 1120-C filers), partnerships, REMICS, and frusts must use Form 7004 to request an extension of time to file increme tax returns. Type or Remain Commission filership partnerships, REMICS, and frusts must use Form 7004 to request an extension of time to file increme tax returns. Type or Remain Commission filership partnerships, REMICS, and frusts must use Form 7004 to request an extension of time to file increme tax returns. Type or Remain Commission filership partnerships, REMICS, and frusts must use Form 7004 to request an extension of time to file increme tax returns. Type or Remain Commission filership partnerships, REMICS, and frusts must use Form 7004 to request an extension of time to file increme tax returns. Type or Remain Commission filership partnerships, REMICS, and frusts must use Form 7004 to request an extension of time to file increme tax returns the file increme tax returns the file increme tax returns the file increments for file as exparate application for space return for Code form 900-T (see 401(a) or 408(a) trust) Tent the Return code for the return that this application is for file as exparate application for gend return for file file from 900-T (see 401(a) or 408(a) trust) Telephone No P 206 838-4880 Form 900	Do not comp	olete Part II เ	<i>inless</i> you have already been gra	nted an aut	omatic 3-month extension on a prev	viously filed	l Form 886	8		
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns. BRIDGE OF ALLEN FOUNDATION BRIDGE OF ALLE	a corporation 8868 to reconstructions)	n required quest an ex Transfers A . For more	to file Form 990-T), or an addition tension of time to file any of the associated With Certain Personal details on the electronic filing of the second control of the contr	nal (not aut forms liste al Benefit (nis form, vis	omatic) 3-month extension of time d in Part I or Part II with the exception contracts, which must be sent to sit www.irs.gov/efile and click on e-file.	You can ention of Fo the IRS	electronica rm 8870, in paper	lly file Form Information format (see		
Part Ionly All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or Name of swarpt organization REMIDGE OF ALLEN FOUNDATION RIDGE OF ALLEN FOUNDATION Number, street, and room or suite no if a P D box, see instructions C/O PIONEER SQUARE ADVISORS, LLC 1221 SECOND AVENUE, SUITE 320 City, town or post office, state, and ZIP code For a foreign address, see instructions SEATTLE, WA 98101 Enter the Return code for the return that this application is for (file a separate application for each return) SEATTLE, WA 98101 Enter the Return code for the return that this application is for (file a separate application for each return) SEATTLE, WA 98101 Enter the Return code for the return that this application is for (file a separate application for each return) SEATTLE, WA 98101 Enter the Return code for the return that this application is for (file a separate application for each return) O			· · ·	<u> </u>						
Type or print pri	Part I only							▶ ☐		
BRIDGE OF ALLEN FOUNDATION Number, street, and room or suite no if a P O box, see instructions C/O PIONEER SQUARE ADVISORS, LLC due date for filling your critism See instructions SEATTLE, WA 98101 Enter the Return code for the return that this application is for (file a separate application for each return)	to file incom	e tax return	s							
Print BRIDGE OF ALLEN FOUNDATION 13-414389	Type or	Name of ex	kempt organization			Employer	identificatio	n number		
Mumber, street, and room or sule no. If a PO box, see instructions Code City, town or post office, state, and ZIP code For a foreign address, see instructions City, town or post office, state, and ZIP code For a foreign address, see instructions Code City, town or post office, state, and ZIP code For a foreign address, see instructions Code City, town or post office, state, and ZIP code For a foreign address, see instructions Code City, town or post office, state, and ZIP code For a foreign address, see instructions Code City, town or post office, state, and ZIP code For a foreign address, see instructions Code City, town or post office, state, and ZIP code For a foreign address, see instructions Code City, town or post office, state, and ZIP code For a foreign address, see instructions Code City, town or post office, state, and ZIP code For a foreign address, see instructions Code City, town or post office, state, and ZIP code For a foreign address, see instructions Code City, town or post office, state, and ZIP code For a foreign address, see instructions Code City, town or post office, state, and ZIP code For a foreign address, see instructions Code City, town or post office, state, and ZIP code For a foreign address, see instructions Code City, town or post office, state, and ZIP code City, town or post office, state, and ZIP code Code Code Code City, town or post office, state, and ZIP code Code Code Code City, town or post office, state, and ZIP code Code		rint BRIDGE OF ALLEN FOUNDATION 13-4148389								
due date for filling your return Sec 1221 SECOND AVENUE, SUITE 320		Number, street, and room or suite no If a PO box, see instructions C/O PIONEER SQUARE ADVISORS, LLC								
Enter the Return code for the return that this application is for (file a separate application for each return) Application Return Application Return Application Separate		1221 S	ECOND AVENUE, SUITE 32	0						
Enter the Return code for the return that this application is for (file a separate application for each return)	filing your return See	City, town	or post office, state, and ZIP code For	a foreign ad	dress, see instructions					
Application Is For Code SFor Code SFor Code Form 990		SEATTL	E, WA 98101							
SFor Scode SFor Scode SFor Code SFor Code SFor SForm 990-T (corporation) O7			for the return that this application	· · · · · ·	,)		· ——		
Form 990				1				ı		
Form 990-BL 02 Form 1041-A 08 Form 990-EZ 03 Form 4720 09 Form 990-EZ 04 Form 5227 10 Form 990-FF 04 Form 5069 11 Form 990-T (trust other than above) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 • The books are in the care of ▶ PIONEER SQUARE ADVISORS, LLC Telephone No ▶ 206 838-4880 FAX No ▶ • If the organization does not have an office or place of business in the United States, check this box				 						
Form 990-EZ 03 Form 4720 09 Form 990-FF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 • The books are in the care of ▶ PIONEER SQUARE ADVISORS, LLC Telephone No ▶ 206 838-4880 FAX No ▶ • If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) for the whole group, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) for the manes and ElNs of all members the extension is for. 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 05/15, 20 11, to file the exempt organization return for the organization named above The extension is for the organization's return for. □ Calendar year 20 or □ X tax year beginning 10/01, 20 09, and ending 09/30, 20 10 2 If the tax year entered in line 1 is for less than 12 months, check reason I initial return Final return □ Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a \$ 14,156. b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 5b Balance Due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions 3c \$ 12,000. Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for										
Form 990-PF				 						
Form 990-T (sec. 401(a) or 408(a) trust) Form 990-T (trust other than above) O6 Form 8870 11 The books are in the care of PIONEER SQUARE ADVISORS, LLC Telephone No 206 838-4880 FAX No FAX No If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If the group, check this box If this is for least of the group, check this box If the group, check this box If the group, check this box If the group, check this box If this is for least of the group, check this box If the group, check this box If this is automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until O5/15, 20 11, to file the exempt organization return for the organization named above The extension is for the organization's return for. If the average of the exempt organization return for the organization named above The extension is for the organization's return for. If the tax year entered in line 1 is for less than 12 months, check reason Initial return Final return Change in accounting period If this application is for Form 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance Due. Subtract line 3b from line 3a Include your payment with this for										
Form 990-T (trust other than above) 06 Form 8870 12 The books are in the care of PIONEER SQUARE ADVISORS, LLC Telephone No 206 838-4880 FAX No FAX NO F								 		
Telephone No ► 206 838-4880 FAX No ► If the organization does not have an office or place of business in the United States, check this box								-		
Telephone No ▶ 206 838-4880 FAX No ▶ If the organization does not have an office or place of business in the United States, check this box	Form 990-T	(trust other	r than above)	06	Form 8870			12		
nonrefundable credits. See instructions. b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. c Balance Due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for	Telephon If the org If this is f for the whole a list with the until for the X If the t	anization do or a Group le group, ch e names ar est an autor organizatio calendar y tax year be	206 838-4880 Does not have an office or place of Return, enter the organization's for eck this box	business in ur digit Groff it is for pation is for. reportion reexempt org	FAX No hand the United States, check this box on the United States, check this box on Exemption Number (GEN) art of the group, check this box or equired to file Form 990-T) extension ganization return for the organization ganization and ending	of time n named a	and and and bove The	tach		
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