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Form 990-PF

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

OMB No 1545-0052

2010

Department of the Treasury
Internal Revenue Service

Treated as a Private Foundation

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

For	calend	lar year 2010, or tax year beginning , a	and ending						
G	Check a		turn of a former public	char	-		Fı	nal return	
		Amended return Add	ress change		Name	change			
Na	me of fo	oundation					•	dentification nur 15144	nber
		N MAYERS GAMORAN FOUNDATION	· · · · · · · · · · · · · · · · · · ·					, , ,	10 of the instructions)
		nd street (or P O box number if mail is not delivered to street addre	ss) Ro	om/s	uite		-	20-8100	
		60TH AVENUE SE				1		application is pen-	. –
	•	m, state, and ZIP code	440			D 1. Fo	reign o	rganizations, chec	k here
		ER ISLAND WA 98040-2				1	-	rganizations meet	-
		type of organization X Section 501(c)(3) exempt private						check here and a	
		T T T T T T T T T T T T T T T T T T T	le private foundation	1				ndation status was b)(1)(A), check he	
		rket value of all assets at J Accounting method Other (assets)	Cash X Acc	ruai					
	•	ear (from Part II, col (c), Unter (specify)	ho en esch hacia \					tion is in a 60-mor n 507(b)(1)(B), che	~ 1
	ne 16) art 								(d) Disbursements
F	art :	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b)	Net in	vestment	(c)	Adjusted net	for chantable
		the amounts in column (a) (see page 11 of the instructions)	books		inco	ome		income	purposes
	1	Contributions, gifts, grants, etc., received (attach schedule)			•				(cash basis only)
	2	Check ► X if the foundation is not required to attach Sch B						,	
	3	Interest on savings and temporary cash investments	127			127			
	4	Dividends and interest from securities	22,834			22,834		REC	FIVER
70.II	5a	Gross rents							A Comment
\equiv	b	Net rental income or (loss)			············			N (1)/2	Ø
_ _	6a	Net gain or (loss) from sale of assets not on line 10	-215,161					O VCT 2	₩ Z011 19
e e	b	Gross sales price for all assets on line 6a 3,124,121							93
NIIV 19 II.	7	Capital gain net income (from Part IV, line 2)				0		OGD	ENI IIT
Z .	8	Net short-term capital gain						0	=14.01
Ω	9	Income modifications							
SCANNED	10a	Gross sales less returns & allowances							
Ž	Ь	Less. Cost of goods sold							
$\stackrel{\bullet}{\circ}$	С	Gross profit or (loss) (attach schedule)							
Š	11	Other income (attach schedule) STMT 1	2,456						
	12	Total. Add lines 1 through 11	-189,744			22,961		0	
S	13	Compensation of officers, directors, trustees, etc	0						
penses	14	Other employee salaries and wages							
ber	15	Pension plans, employee benefits	0.600					<u>-</u>	0.600
	16a	Legal fees (attach schedule) SEE STMT 2	8,609						8,609
ð	b	Accounting fees (attach schedule) STMT 3 Other professional fees (attach schedule) STMT 4	9,374 3,147			3,147			9,374
Operating and Administrative Ex	C		3,141	\vdash		3,141		 _	
str	17	Interest Tayor (attach cabadula) (con page 14 of the instructions)		\vdash					
Ë	18 19	Taxes (attach schedule) (see page 14 of the instructions) Depreciation (attach schedule) and depletion		 					
Ē	20	Occupancy		 					
ĕ	21	Travel, conferences, and meetings		<u> </u>				-	
Б	22	Printing and publications		T -					
e G	23	Other expenses (att. sch.) STMT 5	110	T					110
Ē	24	Total operating and administrative expenses.							
ī		Add lines 13 through 23	21,240	L		3,147		0	18,093
þe	25	Contributions, gifts, grants paid	59,305						159,800
0	26	Total expenses and disbursements. Add lines 24 and 25	80,545			3,147		0	177,893
	27	Subtract line 26 from line 12		Γ					
	a	Excess of revenue over expenses and disbursements	-270,289						
	ь	Net investment income (if negative, enter -0-)				19,814			
	<u>c</u>	Adjusted net income (if negative, enter -0-)						0	

Form 990-PF (2010) KAREN M	AYERS GAMORAN FOUND	ATION	20-0515144	<u> </u>	Page 3
Part IV Capital Gains a	nd Losses for Tax on Investm	ent Income			
	e the kınd(s) of property sold (e.g., real estate house, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a SEE WORKSHEET					
b					
С					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	1	or other basis pense of sale		or (loss)) minus (g)
а	· · · · · · · · · · · · · · · · · · ·				
b					
С					·
d					
e					
Complete only for assets showing	gain in column (h) and owned by the	foundation on 12/3	1/69	(I) Gains (Col	(h) gain minus
(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		col (k), but not	less than -0-) or om col (h))
а					
b					· · · · · · · · · · · · · · · · · · ·
С	,				<u> </u>
d					
е			,		
, ,	If (loss), enter -0- in s) as defined in sections 1222(5) and (Part I, line 7		2	-215,161
If (loss), enter -0- in Part I, line 8	column (c) (see pages 13 and 17 of th			3	
	der Section 4940(e) for Redu			ome	
(For optional use by domestic private	foundations subject to the section 494	0(a) tax on net inve	stment income)		
f section 4940(d)(2) applies, leave th	is part blank				N/A
Man the foundation liable for the cost	ion 4942 tax on the distributable amou	nt of any year in the	haaa massad?		
			e base period?		☐ Yes ☐ No
	ify under section 4940(e) Do not comp	· · · · -			
	each column for each year, see page 1	8 of the instructions	before making any en	itries	(4)
(a) Base penod years Calendar year (or tax year beginning	(b) Adjusted qualifying distribution	ons Net valu	(c) ue of nonchantable-use as:		(d) hbution ratio livided by col (c))
2009					
2008					
2007					
2006					
2005					
2 Total of line 1, column (d)				2	
3 Average distribution ratio for the	5-year base period—divide the total on	line 2 by 5, or by th	ne		
number of years the foundation h	as been in existence if less than 5 year	rs		3	-
4 Enter the net value of nonchantal	ple-use assets for 2010 from Part X, lin	e 5		4	
5 Multiply line 4 by line 3				5	-
5 Miditiply line 4 by line 5				3	· · ·
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)			6	
7 Add lines 5 and 6				7	
8 Enter qualifying distributions from	Part XII line 4			8	
	n line 7, check the box in Part VI, line 1	b, and complete tha	at part using a 1% tax i		
i art vi matidenona on page 10					Form 990-PF (2010)

<u>Form</u>	990-PF (2010) KAREN MAYERS GAMORAN FOUNDATION 20-0515144			P	age 4
Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instru	ictions)			
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					<u> 396</u>
	here ▶ ¹				
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-)				0
3	Add lines 1 and 2				396
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	,			<u> 396</u>
6	Credits/Payments:				
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 6a				
b	Exempt foreign organizations—tax withheld at source 6b				
С	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				
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				<u> 396</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	Enter the amount of line 10 to be Credited to 2011 estimated tax ▶ 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		<u> </u>
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19					
of the instructions for definition)?					
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		- 1		
	published or distributed by the foundation in connection with the activities		1		x
C	c Did the foundation file Form 1120-POL for this year?				
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				
е	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		X
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	,_	_4a		X
b		N/A	4b		7-
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			•	
	conflict with the state law remain in the governing instrument?		6	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	İ	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 990-PF to the Attorney General			. ,	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
	4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page				77
	27)? If "Yes," complete Part XIV		_ 9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		امدا		v
	names and addresses	111 Fo	10	0 DE	X
	10/15 INT 6 FTP 9 TOT 4	ETT FO	か サザ	ソーアド	(2010)

	990-PF (2010) KAREN MAYE			0515144			Pag	ge 6
	· ·	rding Activities for Which Fo	<u>rm 4720 May Be F</u>	Required (cont	tinued)		······································	
5a		e attempt to influence legislation (sect			res 🗓 No			
	• • • • • • • • • • • • • • • • • • • •	cific public election (see section 4955)), or to carry on,		(==)			
	directly or indirectly, any voter reg		_	 	res X No]	
	, ,	or travel, study, or other similar purpose		□ '	res 🗓 No			
	•	n other than a charitable, etc , organiza			. 🖼			
		ection 4940(d)(2)? (see page 22 of the	•	□ '	res X No		1	
		in religious, charitable, scientific, litera	ry, or educational	<u></u>	. 🔛			
_	purposes, or for the prevention of			لسسا	res X No			
b		d any of the transactions fail to qualify			37/3	1	1	
		urrent notice regarding disaster assista	· · · · · ·	ie instructions)?	N/A	5b		
	· ·	tice regarding disaster assistance chec			▶ ∐			
С	If the answer is "Yes" to question 5a(on from the tax	37/3 □ .	. 🗀			
	because it maintained expenditure re-	•		N/A 📗 Y	res No			
_	•	d by Regulations section 53 4945-5(d)						
6a	Did the foundation, during the year, re	eceive any funds, directly or indirectly,	to pay premiums	П.	. 🖼			
	on a personal benefit contract?			لسسا	res X No			37
b	- - · · ·	ay premiums, directly or indirectly, on a	a personal benefit conti	ract?		6b		X
	If "Yes" to 6b, file Form 8870				(T.)			
	At any time during the tax year, was t	, , , ,			res X No			
	If Yes, did the foundation receive any				N/A	7b		
Pa		Officers, Directors, Trustees,	Foundation Man	agers, Highly	Paid Employ	ees,		
	and Contractors			-5411441-				
1 1	ist all officers, directors, trustees, fo	undation managers and their compe	ensation (see page 22	of the instruction		T		
	(a) Name a	nd address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		ense acco allowance	
KA	REN MAYERS GAMORAN	MERCER ISLAND	PRESIDENT					
30	19 60TH AVENUE SE	WA 98040	5.00	o	o			0
JC	EL B GAMORAN	MERCER ISLAND	SECRETARY					
30	19 60TH AVENUE SE	WA 98040	1.00	О	0	<u> </u>		0
2	Compensation of five highest-paid	employees (other than those include	d on line 1 — see page	e 23 of the instru	ctions).			
	If none, enter "NONE."							
	(a) Name and address of each er	nployee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		ense acco allowance	
NC	NE							
							-	
								_
Tota	I number of other employees paid over	\$50,000				<u> </u>	Τ-	0
					Fo	m 990)-PF (2	2010)

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Part VIII Information About Officers, Directors, Trustees, Foundation - and Contractors (continued)	n Managers, Highly Paid Em	ployees,			
3 Five highest-paid independent contractors for professional services (see page 23 of the	ne instructions). If none, enter "NON	IE."			
(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 charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.					
1 N/A					
2					
3					
4					
Part IX-B Summary of Program-Related Investments (see page 24 or	of the instructions)	1			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and		Amount			
1 N/A					
2					
All other program-related investments See page 24 of the instructions 3					

Total. Add lines 1 through 3

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Part X see page 24 of the instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 1,172,619 1a Average monthly fair market value of securities 1,572,248 1b Average of monthly cash balances 54,696 1c Fair market value of all other assets (see page 25 of the instructions) 2,799,563 1d d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 0 1e | 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 2,799,563 3 Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 11/2 % of line 3 (for greater amount, see page 25 of <u>41,99</u>3 the instructions) 2,757,570 5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 5 137,879 Minimum investment return. Enter 5% of line 5 Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating Part XI foundations and certain foreign organizations check here 137,879 Minimum investment return from Part X, line 6 396 Tax on investment income for 2010 from Part VI, line 5 Income tax for 2010 (This does not include the tax from Part VI) b 396 2c Add lines 2a and 2b C 137,483 3 Distributable amount before adjustments Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions 137,483 5 5 Add lines 3 and 4 6 6 Deduction from distributable amount (see page 25 of the instructions) Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 137,483 line 1 Part XII Qualifying Distributions (see page 25 of the instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 177,893 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26 1a 1b Program-related investments-total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 purposes 3 Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) 3a 3b Cash distribution test (attach the required schedule) 177,893 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income 5 5 Enter 1% of Part I, line 27b (see page 26 of the instructions) 177,893 Adjusted qualifying distributions. Subtract line 5 from line 4 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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

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Pa	urt XIII Undistributed Income	see page 26 of	the instructions)			
1	Distributable amount for 2010 from Part	XI,	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
	line 7	,				137,483
2	Undistributed income, if any, as of the ei	nd of 2010				
а	Enter amount for 2009 only					
b	Total for prior years 20 , 20	. 20				
3	Excess distributions carryover, if any, to	li i				
а	From 2005		•			
	From 2006					
	From 2007					
d	From 2008					
-	From 2009					
	Total of lines 3a through e				l	
4	Qualifying distributions for 2010 from Pa	rt XII				
•	line 4 ▶ \$177,893	,				
а	Applied to 2009, but not more than line 2	'a				
	Applied to undistributed income of prior y					······································
	(Election required—see page 26 of the in			j		
_	Treated as distributions out of corpus (E	F				
·	required—see page 26 of the instruction				[
а	Applied to 2010 distributable amount	-, 				137,483
	Remaining amount distributed out of con	nue	40,410	,		
5	Excess distributions carryover applied to	·	20,220			·
5	(If an amount appears in column (d), the	F				
	amount must be shown in column (a))	Janic				
6	Enter the net total of each column as					
•	indicated below:					
2	Corpus Add lines 3f, 4c, and 4e Subtra	rt line 5	40,410			
	Prior years' undistributed income Subtra			- 		
	line 4b from line 2b					
_	Enter the amount of prior years' undistrib	uted		-		
·	income for which a notice of deficiency h	1				
	been issued, or on which the section 494				1	
	tax has been previously assessed	, <u>L</u> (u)				
d	Subtract line 6c from line 6b Taxable			- · · · · · · · · · · · · · · · · · · ·		······································
-	amount—see page 27 of the instructions					
e	Undistributed income for 2009 Subtract		······································		ľ	
	4a from line 2a Taxable amount—see p					
	27 of the instructions					
f	Undistributed income for 2010 Subtract	lines				
	4d and 5 from line 1. This amount must	be				
	distributed in 2011				ł	0
7	Amounts treated as distributions out of o	orpus				
	to satisfy requirements imposed by secti	on				
	170(b)(1)(F) or 4942(g)(3) (see page 27	of the				
	instructions)					
8	Excess distributions carryover from 2005	5 not				
	applied on line 5 or line 7 (see page 27 of	of the		İ		
	instructions)					
9	Excess distributions carryover to 2011	ı .				
	Subtract lines 7 and 8 from line 6a		40,410			
10	Analysis of line 9					
а	Excess from 2006		,			
b	Excess from 2007					
С	Excess from 2008					
d	Excess from 2009				1	
e	Excess from 2010	40,410]	

' Form	990-PF (2010) KAREN MAYERS	GAMORAN F	OUNDATION	20-0515	144	Page 10
Pa	art XIV Private Operating For	undations (see p	age 27 of the inst	ructions and Par	t VII-A, question 9	
1a	If the foundation has received a ruling or					
	foundation; and the ruling is effective for	2010, enter the date of	of the ruling	_		
b	Check box to indicate whether the found	ation is a private opera	ating foundation descri	bed in section 4	1942(j)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(6) 1041
	investment return from Part X for		ŀ			
	each year listed			·		
b	85% of line 2a					
С	Qualifying distributions from Part XII,				{	
	line 4 for each year listed				 	
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon			:		
а	"Assets" alternative test—enter					
	(1) Value of all assets					·
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in					
	Part X, line 6 for each year listed					
С	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest,					
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
Pi	art XV Supplementary Inform				nad \$5,000 or mor	e in assets at
	any time during the y		B of the instruction	ons.)		
1	Information Regarding Foundation Ma					
а	List any managers of the foundation who					
	before the close of any tax year (but only	if they have contribut	ted more than \$5,000)	(See section 507(d)(2	2))	
	N/A	400/	4b4b -6			
b	List any managers of the foundation who				e portion of the	
	ownership of a partnership or other entity $\mathbf{N/A}$	y) of which the founda	uon nas a 10% or grea	nei interest		
2	Information Regarding Contribution, G	rant Gift Loan Sch	olarchin etc. Program			
2	_		to preselected charital		does not accept	
	unsolicited requests for funds. If the four					
	organizations under other conditions, co					
	The name, address, and telephone num		•	ld be addressed		
-	KAREN GAMORAN 206-92		.,			
	3019 60TH AVENUE SE		AND WA 9804	.0		
b	The form in which applications should be	submitted and inform	nation and materials th	ey should include		
	INFORMATION ON ORGAL	NIZATION AN	D NEED			
С	Any submission deadlines.					
	NONE					
d	Any restrictions or limitations on awards	, such as by geograph	nical areas, charitable f	ields, kınds of ınstituti	ons, or other	
	factors					
	NONE			-	·	5 - 990 PE (2040)

Part XV Supplementary Information (c	ontinued)			
3 Grants and Contributions Paid During the	e Year or Approved for F	uture Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
Name and address (home or business) a Paid during the year SEE STATEMENT 8	any foundation manager		Purpose of grant or contribution	159,80
Total b Approved for future payment SEE STATEMENT 9			▶ 3a	159,80 19,50
Total			▶ 3b	19,50

DAA

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Part X	Analysis of Income-Producing Ac	tivities				
	s amounts unless otherwise indicated		d business income	Excluded t	by section 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion	(d) Amount	Related or exempt function income (See page 28 of
1 Progra	m service revenue			code		the instructions)
a						
c		.				
				 		
e				├		
f	es and contracts from government agencies			 		
_	es and contracts from government agencies ership dues and assessments			+ +		
	t on savings and temporary cash investments			14	127	
	nds and interest from securities			14	22,834	
	ntal income or (loss) from real estate				,	····
	bt-financed property					
b No	t debt-financed property					
6 Net re	ntal income or (loss) from personal property			<u> </u>		
7 Other	nvestment income			<u> </u>		
	r (loss) from sales of assets other than inventory			18	-215,161	
	come or (loss) from special events					
	profit or (loss) from sales of inventory			 		
	evenue a			16	2 456	
	ACIFIC SYSTEMS			10	2,456	
				1		
e					· · · · · · · · · · · · · · · · · · ·	
	al Add columns (b), (d), and (e)		C		-189,744	0
	Add line 12, columns (b), (d), and (e)	•			13	
(See work	sheet in line 13 instructions on page 29 to verify calculation					
Part X	/I-B Relationship of Activities to the A	ccomplishm	ent of Exempt P	urposes)	
Line No ▼	 Explain below how each activity for which income accomplishment of the foundation's exempt purp- instructions) 					of the
N/A			·			<u> </u>
N/B						
						
						-
						•

		U) RAREN MA				20-03.				Pag	ge 13
Part)		Information Reg Exempt Organization		ansfers To an	id Transactio	ns and Relation	ships Wi	th Nonch	aritable		
1 Did		inization directly or ind		ge in any of the fo	flowing with any o	other organization des	cribed			Yes	No
	_	01(c) of the Code (other		-		-					
org	anızatıor	ns?			·	-					
		om the reporting found	dation to a no	oncharitable exem	ipt organization o	f					
(1)	Cash								1a(1)		X
(2)	Other a	ssets							1a(2)		X
b Oth	er transa	actions									
(1)	Sales o	f assets to a noncharit	able exempt	organization					1b(1)		X
(2)	Purchas	ses of assets from a no	oncharitable	exempt organizat	ion				1b(2)		X
(3)	Rental	of facilities, equipment	, or other ass	sets			-		1b(3)		X
(4)	Reimbu	rsement arrangements	s						1b(4)		_X
(5)	Loans o	r Ioan guarantees							1b(5)		_X_
(6)	Perform	ance of services or me	embership o	r fundraising solic	itations				1b(6)		X
	_	acilities, equipment, m	•		, -				1c		X
		er to any of the above i		-	-						
		goods, other assets, o	-		-						
		transaction or sharing									
(a) Lin	e no	(b) Amount involved	(c) Name	of nonchantable exer	mpt organization	(d) Description of	transfers, tra	insactions, and	sharing arrang	ements	
N/A			 		·						
			 						·		.
			-	<u>.</u>					·		
		<u>-</u>	 								
			-								
-											
								, , , , , , , , , , , , , , , , , , , 			
									.		
-	-										
			 								
		 -	<u> </u>								
	-										
2a ls ti	ne found	ation directly or indirec	ctly affiliated	with, or related to	one or more tax	exempt organization	s			•	
		section 501(c) of the								es X	No
b If "\	es," cor	nplete the following so	hedule								
	(a)	Name of organization		(b) Type of	organization		(c) Descrip	tion of relations	ship		
N/2	<u> </u>	<u> </u>			- <u>-</u>						
	_										
		-7									
ł		naities of perury, I declare s true correct, and comple									
Sign	beller, it i	s use conject, and consoli	ele Deciaratio	ii oi preparei (oulei i	inan taxpayer or nut	Mary) is based on all line			ias any knowieu	ye	
Here	- /-	y INI II-						IDENT			
	· •	aure of officer or trustee			Date		Title	 ,			
	Pnnt/T	ype preparer's name			Preparer's signa	ture			Date	Check	
Paid -			~		44				10-10-4	setf-em	ployed
=		KELLY STERLING		amer c c	OMDANIA	n c			10-17-1	7000	-
Use Only		name STERI		KUDER & C		P.S.		PTIN	P00097 91-135		
	Firm's	address ► /525	OB 241	in of oth	TIO			Firm's EIN	<u> 172</u>	<u> 23/</u>	<u> </u>

MERCER ISLAND, WA 98040-2339

Phone no 206-275-4228

Capital Gains and Losses for Tax on Investment Income 990-PF 2010 Form For calendar year 2010, or tax year beginning and ending **Employer Identification Number** Name 20-0515144 KAREN MAYERS GAMORAN FOUNDATION (b) How acquired P-Purchase D-Donation (c) Date acquired (mo , day, yr) (d) Date sold (mo , day, yr) (a) List and describe the kind(s) of property sold, e.g., real estate 2-story brick warehouse, or common stock, 200 shs MLC Co 4000 SH STARBUCKS D 01/01/09 12/03/10 (1) 53.361.044 SH SEI P 01/01/09 05/18/10 CORE FIXED INCOME (2) 05/18/10 01/01/09 18656.73 SH SEI IMERGING MARKETS DEB P (3) 01/01/09 P 05/18/10 INST HIGH YIELD BON 41031.235 SH SEI (4) P 01/01/09 05/18/10 39611.863 SH SEI REAL RETURN PLUS FU (5) 01/01/09 05/18/10 25628.794 SH SEI SMALL/MIDCAP EQUITY P (6) P 01/01/09 05/18/10 79036.517 SH SEI LARGE CAP DISCIPLIN (7) 01/01/09 74795.32 SH SEI SIIT SCREENED WORLD P 05/18/10 (8) (9) (10)(11)(12)(13)(14)(15) (h) Gain or (loss) (e) plus (f) minus (g) (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale (e) Gross sales price 88,970 39,097 128,067 (1) 545,579 9,544 555,123 (2)196,172 190,103 6,069 (3)-13,895 291,339 305,234 (4) -17,937 432,396 414,459 (5)15,721 277,639 261,918 (6)723,703 817,625 -93,922 (7) -159,838 537,619 697,457 (8) (9) (10)(11)(12)(13)(14)(15)Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) (i) FMV as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col (i) over col (j), if any 39,097 (1) 9,544 (2)6,069 (3) -13,895 (4)-17,937 (5) 15,721 (6)-93,922 (7)-159,838 <u>(8)</u> (9)(10)(11)(12)(13)

(14) (15)

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ZU	ノーし	Э I;	ว เ	44

Statement 1 - Form 990-PF, Part I, Line 11 - Other Income

_			
Des	scr	iot	ion

	Revenue per Books	Net Investment Income	Adjusted Net Income
PACIFIC SYSTEMS			
	\$ 2,456	\$	\$
TOTAL	\$ 2,456	\$ 0	\$ 0

Statement 2 - Form 990-PF, Part I, Line 16a - Legal Fees

_			
Des	Crit	otto	n

		Total	_	Net Investment	_	Adjusted Net	_	Charitable Purpose
PERKINS COIE	¢	8,609	ċ		ė		¢	8,609
	→	0,009	٦_		٧		٧_	0,009
TOTAL	\$	8,609	\$	0	\$	0	\$_	8,609

Statement 3 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description

200011511011							
		Total	_	Net Investment	Adjusted Net		Charitable Purpose
CLARK NUBER							
STERLING KUDER & CO	Ş	8,980	Ş		\$	\$	8,980
		394					394
TOTAL	\$	9,374	\$_	0	\$	0 \$	9,374

Statement 4 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Description

			Total	_	Net Investment	 Adjusted Net	_	Charitable Purpose
INVESTMENT AND	TRUST MGMT	FEES						
		\$	3,147	\$_	3,147	\$	\$_	
TOTAL		\$	3,147	\$_	3,147	\$ 0	\$	0

Statement 5 - Form 990-PF, Part I, Line 23 - Other Expenses

Description

\$ \$	\$ \$	
	 Net Adju	Net Adjusted Charitable

15

BANK CHARGES - EK RILEY

15

Statement 5 - Form 990-PF, Part I, Line 23 - Other Expenses (continued)

Description				
	Total	Net Investment	Adjusted Net	Charitable Purpose
BANK CHARGES - SMITHBARNEY				

 \$
 95 \$
 \$
 95

 TOTAL
 \$
 110 \$
 0 \$
 0 \$

Statement 6 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description

	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
INVESTMENTS - PUBLICLY TRADED	SECURI			
	\$ 3,083,441	\$ 88,970	MARKET	\$ 128,520
TOTAL	\$ 3,083,441	\$ 88,970		\$ 128,520

Statement 7 - Form 990-PF, Part II, Line 13 - Other Investments

Description

Description							
		Beginning of Year	_	End of Year	Basis of Valuation	_	Fair Market Value
INVESTMENTS - OTHER SECURITES	S	57,970	s	54,696	СОСТ	Ś	54,696
	Υ_	917310	-	- 31,050	0001	Ψ_	017030
TOTAL	\$	57,970	\$_	54,696		\$_	54,696

Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

INFORMATION ON ORGANIZATION AND NEED

Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

NONE

Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

NONE

Statement 8 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Name		Address	Address	
Relationship	Status	Purp	oose A	mount
U W FOUNDATION	PO B	351210	SEATTLE WA 98195	
	501(C)(3)	HARBORVIEW MEDICAL	BURN CENTER	5,000
HILLEL FOUNDATION	4745	17TH AVENUE NE	SEATTLE WA 98105	
	501(C)(3)	CAPITAL CAMPAIGN		100,000
HILLEL FOUNDATION	4745	17TH AVENUE NE	SEATTLE WA 98105	
	501(C)(3)	MORTGAGE BURNING		2,500
JEWISH DAY SCHOOL		9 NE 4TH STREET	BELLEVUE WA 98008	
	501(C)(3)			10,000
JEWISH FAMILY SERVI	CE 1601	16TH AVENUE	SEATTLE WA 98122	
	501(C)(3)	GENERAL OPERATING		10,000
JEWISH FEDERATION		3RD AVENUE	SEATTLE WA 98121	
	501(C)(3)	ANNUAL COMMUNITY C		15,000
MULTIPLE SCLEROSIS		REEDSDALE ST STE 105	5 PITTSBURGH PA 15233	
	501(C)(3)	GENERAL OPERATING		4,000
AMERICAN JEWISH COM			NEW YORK NY 10022	1 000
	501(C)(3)	SEATTLE JEWISH FIL		1,000
NW YESHIVA HIGH SCH		90TH AVENUE SE	MERCER ISLAND WA 9804	
	501(C)(3)	RAISE THE PADDLE E		1,800
STROUM JEWISH CC		E MERCER WAY	MERCER ISLAND WA 9804	2,500
HOLD BOUNDARION	501(C)(3)	SPONSORSHIP OF CIR	LOS ANGELES CA 90095	2,300
UCLA FOUNDATION		HILGARD AVENUE OPERATION MEND	LOS ANGELES CA 90093	2,000
UNITED WAY OF KING	501(C)(3)		SEATTLE WA 98104	2,000
UNITED WAY OF KING	501(C)(3)	GENERAL OPERATING		2,500
MARSHA RIVKIN CENTE		BROADWAY	SEATTLE WA 98122	2,300
MANDIN KIVKIN CENIE	501(C)(3)			2,500
FULLER THEOLOGICAL			PASADENA CA 91184	2,000
TOLLEN THEOLOGICAL	501 (C) (3)	GENERAL OPERATING		1,000
mom	001(0)(0)			
TOTAL				159,800

Statement 9 - Form 990-PF, Part XV, Line 3b - Grants and Contributions Approved for Future Pmt

Name		Address	Address	
Relationship	Status	Purp	oose	Amount
HILLEL FOUNDATION	4745	17TH AVENUE NE	SEATTLE WA 98105	
	501(C)(3)	MORTGAGE BURNING		2,500
MULTIPLE SCLEROSIS	SOCIET 1501	REEDSDALE ST STE 105	FITTSBURGH PA 15233	
	501(C)(3)	GENERAL OPERATING	SUPPORT	8,000
UCLA FOUNDATION	405	HILGARD AVENUE	LOS ANGELES CA 90095	5
	501(C)(3)	OPERATION MEND		8,000
SEATTLE CANCER CARE	825	EASTLAKE AVE E	SEATTLE WA 98109	
	501(C)(3)	GENERAL OPERATING	SUPPORT	1,000
TOTAL				19,500

	20-	051	51	44
--	-----	-----	----	----

Taxable Interest on Investments

Description		Amount	Unrelated Business Code	Exclusion Code	Postal Code	US Obs (\$ or %)
E.K.RILEY INVESTMENTS PACIFIC SYSTEMS BLDG ASSC LLC	\$	73 54		14 14		
TOTAL	\$	127				

Taxable Dividends from Securities

Description	 Amount	Unrelated Business Code	Exclusion Code	Postal Code	US Obs (\$ or %)
MORGANSTANLEY SMITHBARNEY E.K.RILEY INVESTMENTS JEWISH FEDERATION	\$ 2,337 1,040 19,457		1 14 14		
TOTAL	\$ 22,834				

(Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

rtemal Revenue		► File a	a separate a	pplication for each return.			
		tomatic 3-Month Extension, complet	e only Part	I and check this box			•
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)							
	=			-month extension on a previously filed		8	
-							
Electronic filir	ng (e-file). Yo	u can electronically file Form 8868 if yo	ou need a 3-	month automatic extension of time to fi	ile (6 mon	ths for	
a corporation r	equired to file	Form 990-T), or an additional (not auto	omatic) 3-mi	onth extension of time. You can electro	nically file	Form	
3868 to reques	st an extension	of time to file any of the forms listed i	n Part I or P	art II with the exception of Form 8870,	Informatio	on	
Return for Tran	nsfers Associa	ted With Certain Personal Benefit Cor	itracts, which	h must be sent to the IRS in paper form	nat (see		
nstructions) F	or more detai	s on the electronic filing of this form, v	ısıt www ırs	gov/efile and click on e-file for Charities	s & Nonpr	ofits	
Part I	Automati	c 3-Month Extension of Time	. Only sub	omit original (no copies neede	d).		
A corporation r	equired to file	Form 990-T and requesting an automate	atic 6-month	extension-check this box and complet	е		
Part I only							▶∐
All other corpo	rations (includ	ing 1120-C filers), partnerships, REMI	Cs, and trus	ts must use Form 7004 to request an e	extension	of time	
o file income t	ax returns						
Гуре ог	Name of exe	empt organization			Employ	er identif	fication number
orint							
le by the	THE KA	REN MAYERS GAMORAN	FOUND	ATION	20-0	51514	14
lue date for	Number, stre	eet, and room or suite no If a P.O box	, see instruc	ctions			
iling your eturn See	3019 6	OTH AVENUE SE					
nstructions.	City, town or	post office, state, and ZIP code For a	foreign add	Iress, see instructions			
	MERCER	ISLAND WA	98040	-2442			
	1.6.4				-		
nter the Retui	m code for the	e return that this application is for (file a	a separate a	pplication for each return)			
Application			Return	Application	•		Return
ls For			Code	ls For			Code
orm 990			01	Form 990-T (corporation)			07
-i-om 990-BL			02	Form 1041-A			08
Form 990-E2	<u></u>		03	Form 4720			09
Form 990-PF	=		04	Form 5227			10
Form 990-T	(sec 401(a) o	r 408(a) trust)	05	Form 6069			11
Form 990-T	(trust other tha	an above)	06	Form 8870	-		12
 The books a 	re in the care of	>					
Telephone	No ▶	•	FAX No	•			
 If the organ 	nization does i	not have an office or place of business	in the Unite	d States, check this box			▶ 🗍
_		ırn, enter the organization's four digit 0			this is	•	→
or the whole g							
a list with the n	ames and Ell	Is of all members the extension is for.		_			
1 I request	an automatic	3-month (6 months for a corporation re	equired to fil	e Form 990-T) extension of time			
until				anization named above. The extension	ı ıs		
for the or	rganization's r	• •	_				
. —	calendar year	or					
	ax year begin	•					
_							
		in line 1 is for less than 12 months, ch	eck reason	Initial return Final return			
∐ Ch	iange in accou	inting period					
3a If this ap	plication is for	Form 990-BL, 990-PF, 990-T, 4720, o	r 6069. ente	r the tentative tax, less anv			
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.							
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and							
-	-		-		3b	 \$	
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 form, if required, by using EFTPS							
(Electronic Federal Tax Payment System). See instructions 3c \$							
	_		h this Form	8868, see Form 8453-EO and Form 88			
pavment instru		Sir Sississins Idila Millionalidi Mil		,			

Form 8868 (F	Rev. 1-2011)					Page 2	
 If you are 	filing for an Additional (Not Automatic) 3-Month E	xtension, co	emplete only Part II and check this box			▶ X	
	implete Part II if you have already been granted an						
• If you are	filing for an Automatic 3-Month Extension, compl	ete only Part	I (on page 1)				
art II	Additional (Not Automatic) 3-Month I	Extension	of Time. Only file the original (no cop	ies neede	d).	
Type or print	Name of exempt organization			ation number			
File by the	THE KAREN MAYERS GAMORAL	I FOIND	ATTON	20-6	0515144	Į	
extended	Number, street, and room or suite no. If a P.O. b		001014				
due date for	3019 60TH AVENUE SE	ox, occ 1115014	Olono.				
filing your return. See	g your						
instructions		A 98040					
Enter the Retu	urn code for the return that this application is for (file	e a separate a	application for each return)			04	
Application		Return	Application			Return	
ls For		Code	ls For			Code	
Form 990		01				1 2000	
Form 990-B		02	Form 1041-A			08	
Form 990-E	Z	03	Form 4720	09			
Form 990-P	·	04	Form 5227			10	
Form 990-T	(sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990-T	Form 990-T (trust other than above) 06 Form 8870					12	
STOP! Do not	complete Part II if you were not already granted	an automatic	3-month extension on a previously f	iled Form	n 8868.		
the whole glist with the na I request For cale If the tax	r a Group Return, enter the organization's four digit group, check this box If it is for particle rt of the group /15/11	p, check this box and and	s attach a				
AN A WAS	TTEMPT TO OBTAIN INFORMAT NOT FURNISHED IN SUFFICIE	NT TIM	E TO PERMIT TIMELY			FORMATION	
_	plication is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, ente	r the tentative tax, less any				
	idable credits. See instructions.			8a	\$	0	
	plication is for Form 990-PF, 990-T, 4720, or 6069,	_					
	d tax payments made Include any prior year overpa	ayment allowe	ed as a credit and any	ļ		_	
	paid previously with Form 8868.			8b	\$	0	
	Due. Subtract line 8b from line 8a. Include your par	yment with thi	is form, if required, by using EFTPS	- 1			
(Electron	ic Federal Tax Payment System). See instructions.		11/ :5 /:		\$	0	
Under penalties of true, correct, and	Sign of perjury, I declare that I have examined this form, including complete, and that I am authonzed to prepare this form	_	nd Verification schedules and statements, and to the best of	my knowl	edge and belief	, nt is	
۱۱							
Signature		—≛ Tiri	le ▶ CPA		Date >	8-15-1,	
- J V L		110		· · · ·		8868 (Rev. 1-2011)	
					romi C	7000 (Rev. 1-2011)	