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

2011

Department of the Treasury  
Internal Revenue Service

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

For calendar year 2011, or tax year beginning

, 2011, and ending

RILEY & NANCY PLEAS FAMILY FOUNDATION  
2410 BOYER AVENUE E. STE#1  
SEATTLE, WA 98112

**G** Check all that apply:  Initial return  Initial Return of a former public charity  
 Final return  Amended return  
 Address change  Name change

**H** Check type of organization:  Section 501(c)(3) exempt private foundation  
 Section 4947(a)(1) nonexempt charitable trust  Other taxable private foundation

**I** Fair market value of all assets at end of year (from Part II, column (c), line 16) **J** Accounting method:  Cash  Accrual  
 Other (specify) *(Part I, column (d) must be on cash basis)*

► \$ 235, 945.

	<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>REVENUE</b>	1 Contributions, gifts, grants, etc., received (attach schedule)	132,000.			
	2 Ck ► <input type="checkbox"/> if the foundn is not req to att Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities . . .	2,949.	2,949.	2,949.	
	5a Gross rents . . .				
	b Net rental income or (loss)				
	6a Net gain/(loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a . . .				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain . . .				
	9 Income modifications . . .				
	10a Gross sales less returns and allowances . . .				
	b Less Cost of goods sold				
	c Gross profit/(loss) (att sch) . . .				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11 .	134,949.	2,949.	2,949.	124,072.
<b>ADMINISTRATIVE EXPENSES</b>	13 Compensation of officers, directors, trustees, etc	0.			
	14 Other employee salaries and wages . . .				
	15 Pension plans, employee benefits . . .				
	16a Legal fees (attach schedule) See St 1	256.	256.		
	b Accounting fees (attach sch) See St 2	2,500.	2,500.		
	c Other prof fees (attach sch)				
	17 Interest . . .				
	18 Taxes (attach schedule)(see instrs)				
	19 Depreciation (attach sch) and depletion				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) See Statement 3	288.	288.		
	24 Total operating and administrative expenses. Add lines 13 through 23 .	3,044.	3,044.		
	25 Contributions, gifts, grants paid Part XV	124,072.			124,072.
	26 Total expenses and disbursements. Add lines 24 and 25 . . .	127,116.	3,044.	0.	124,072.
	27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements . . .	7,833.			
	b Net investment income (if negative, enter -0-)		0.		
	c Adjusted net income (if negative, enter -0-)			2,949.	

8P

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year
			(a) Book Value	(b) Book Value
<b>ASSETS</b>	1	13,037.	27,809.	27,809.
	2	18,501.	11,390.	11,390.
	3			
	4			
	5			
	6			
	7			
	8			
	9			
	10a			
	b	202,729.	202,729.	196,668.
	c			
	11			
	12			
	13			
	14			
15				
16	234,345.	242,006.	235,945.	
<b>LIABILITIES</b>	17			
	18			
	19			
	20			
	21			
	22	172.		
	23	172.	0.	
<b>NET ASSETS</b>	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input type="checkbox"/>			
	24			
	25			
	26			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input checked="" type="checkbox"/>			
	27			
	28			
	29	234,173.	242,006.	
	30	234,173.	242,006.	
	31	234,345.	242,006.	

**Part III Analysis of Changes in Net Assets or Fund Balances**

1	Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	234,173.
2	Enter amount from Part I, line 27a	2	7,833.
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3.	4	242,006.
5	Decreases not included in line 2 (itemize)	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	242,006.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)			(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a N/A					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				(i) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))	
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any			
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss). <span style="border: 1px solid black; padding: 2px;">If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7</span>			2		
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):  If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8			3		

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

N/A

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

 Yes No

If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2010			
2009			
2008			
2007			
2006			

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 the number of years the foundation has been in existence if less than 5 years

3

4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5

4

5 Multiply line 4 by line 3

5

6 Enter 1% of net investment income (1% of Part I, line 27b)

6

7 Add lines 5 and 6

7

8 Enter qualifying distributions from Part XII, line 4

8

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter 'N/A' on line 1.	
Date of ruling or determination letter: _____ (attach copy of letter if necessary – see instrs)		
1b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input type="checkbox"/> and enter 1% of Part I, line 27b	1 0.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2 0.
3	Add lines 1 and 2	3 0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4 0.
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-	5 0.
6 Credits/Payments:		
a	2011 estimated tax pmts and 2010 overpayment credited to 2011	6a 78.
b	Exempt foreign organizations – tax withheld at source	6b
c	Tax paid with application for extension of time to file (Form 8868)	6c
d	Backup withholding erroneously withheld	6d
7	Total credits and payments. Add lines 6a through 6d.	7 78.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	9 0.
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	10 78.
11	Enter the amount of line 10 to be: <b>Credited to 2012 estimated tax</b> ► 78. <b>Refunded</b> ► 11 0.	

**Part 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 participate or intervene in any political campaign?

	Yes	No
1a		X

b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?

1b		X
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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

c Did the foundation file **Form 1120-POL** for this year?

1c		X
----	--	---

d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:

(1) On the foundation ► \$ 0. (2) On foundation managers ► \$ 0.

e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ 0.

2 Has the foundation engaged in any activities that have not previously been reported to the IRS?

If 'Yes,' attach a detailed description of the activities

2		X
---	--	---

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 If 'Yes,' has it filed a tax return on **Form 990-T** for this year?

4b		N/A
----	--	-----

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?

5		X
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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, column (c), and Part XV.

7		X
---	--	---

8a Enter the states to which the foundation reports or with which it is registered (see instructions) ►

WA

8b		X
----	--	---

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.

9		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 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If 'Yes,' complete Part XIV

10		X
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Form 990-PF (2011)

**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	X
14	The books are in care of ► TONK INC. Located at ► 2410 BOYER AVENUE E, SUITE 1 SEATTLE WA ZIP + 4 ► 98112	Telephone no. ► (206) 329-9718	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here and enter the amount of tax-exempt interest received or accrued during the year... ► 15	N/A ► 15	N/A
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the name of the foreign country ►	Yes	No
		16	X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	Yes	No
1a	During the year did the foundation (either directly or indirectly):		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here ► <input type="checkbox"/>	1b	N/A
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011? ► <input type="checkbox"/>	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011? ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes,' list the years ► 20__, 20__, 20__, 20__.	2a	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement – see instructions.) ► <input type="checkbox"/>	2b	N/A
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► 20__, 20__, 20__, 20__.	2c	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ► <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	3a	
b	If 'Yes,' did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011.) ► <input type="checkbox"/>	3b	N/A
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? ► <input type="checkbox"/>	4a	X
b	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 2011? ► <input type="checkbox"/>	4b	X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

5a During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

 Yes  No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? . . . . .

 Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes? . . . . .

 Yes  No

(4) Provide a grant to an organization other than a charitable, etc, organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions) . . . . .

 Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

 Yes  No

b If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b N/A

Organizations relying on a current notice regarding disaster assistance check here ► 

c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A  Yes  No

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .

 Yes  No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .

6b X

If 'Yes' to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

 Yes  No

b If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and 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	(e) Expense account, other allowances
MAUREEN P. BROTHERTON 2900 BLAKELEY AVE. NE, SUITE B SEATTLE, WA 98105	PRES./DIRECT 3.00	0.	0.	0.
NANCY A. PLEAS 2410 BOYER AVE. E., SUITE 1 SEATTLE, WA 98112	VP/DIRECTOR 2.00	0.	0.	0.
THERESA A. JAMES 2410 BOYER AVE. E., SUITE 1 SEATTLE, WA 98112	SEC./DIRECTO 3.00	0.	0.	0.
COLLEEN P. RAYMOND 2410 BOYER AVE. E., SUITE 1 SEATTLE, WA 98112	TREAS./DIREC 3.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.'

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
None				
-----				
-----				
-----				
-----				
-----				

Total number of other employees paid over \$50,000

►

0

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None		

## 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.

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 instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1	N/A	
2		

All other program-related investments. See instructions.

**3** \_\_\_\_\_  
\_\_\_\_\_

**Total.** Add lines 1 through 3. ▶ 0

**BAA**

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**Form 990-PF (2011)**

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes:  
**a** Average monthly fair market value of securities . . . . .  
**b** Average of monthly cash balances . . . . .  
**c** Fair market value of all other assets (see instructions) . . . . .  
**d Total** (add lines 1a, b, and c) . . . . .  
**e** Reduction claimed for blockage or other factors reported on lines 1a and 1c  
(attach detailed explanation) . . . . .  
**1e** 0.

2 Acquisition indebtedness applicable to line 1 assets . . . . .  
**2** 0.

3 Subtract line 2 from line 1d . . . . .  
**3** 247,423.

4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3  
(for greater amount, see instructions) . . . . .  
**4** 3,711.

5 **Net value of noncharitable-use assets.** Subtract line 4 from line 3. Enter here and on Part V, line 4  
**5** 243,712.

6 **Minimum investment return.** Enter 5% of line 5 . . . . .  
**6** 12,186.

<b>1a</b>	223,689.
<b>1b</b>	23,734.
<b>1c</b>	
<b>1d</b>	247,423.
<b>1e</b>	0.
<b>2</b>	0.
<b>3</b>	247,423.
<b>4</b>	3,711.
<b>5</b>	243,712.
<b>6</b>	12,186.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ►  and do not complete this part.)

1 Minimum investment return from Part X, line 6 . . . . .  
**1** 12,186.

2a Tax on investment income for 2011 from Part VI, line 5 . . . . .  
**2a**

b Income tax for 2011. (This does not include the tax from Part VI.)  
**2b**

2c Add lines 2a and 2b . . . . .  
**2c**

3 Distributable amount before adjustments. Subtract line 2c from line 1  
**3** 12,186.

4 Recoveries of amounts treated as qualifying distributions .  
**4**

5 Add lines 3 and 4 . . . . .  
**5** 12,186.

6 Deduction from distributable amount (see instructions)  
**6**

7 **Distributable amount as adjusted.** Subtract line 6 from line 5. Enter here and on Part XIII, line 1  
**7** 12,186.

**Part XII Qualifying Distributions** (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:  
**a** Expenses, contributions, gifts, etc – total from Part I, column (d), line 26 . . . . .  
**1a** 124,072.

**b** Program-related investments – total from Part IX-B . . . . .  
**1b**

2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes . . . . .  
**2**

3 Amounts set aside for specific charitable projects that satisfy the:  
**a** Suitability test (prior IRS approval required) . . . . .  
**3a**  
**b** Cash distribution test (attach the required schedule) . . . . .  
**3b**

4 **Qualifying distributions.** Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 . . . . .  
**4** 124,072.

5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.  
Enter 1% of Part I, line 27b (see instructions) . . . . .  
**5**

6 **Adjusted qualifying distributions.** Subtract line 5 from line 4 . . . . .  
**6** 124,072.

**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.

**Part XIII Undistributed Income (see instructions)**

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7 . . . . .				12,186.
2 Undistributed income, if any, as of the end of 2011:				
a Enter amount for 2010 only			0.	
b Total for prior years: 20____, 20____, 20____		0.		
3 Excess distributions carryover, if any, to 2011:				
a From 2006 . . . . .	180,796.			
b From 2007 . . . . .	153,977.			
c From 2008 . . . . .	137,426.			
d From 2009 . . . . .	119,540.			
e From 2010 . . . . .	84,905.			
f Total of lines 3a through e	676,644.			
4 Qualifying distributions for 2011 from Part XII, line 4: ► \$ 124,072.				
a Applied to 2010, but not more than line 2a . . . . .			0.	
b Applied to undistributed income of prior years (Election required – see instructions)		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			
d Applied to 2011 distributable amount				12,186.
e Remaining amount distributed out of corpus	111,886.			
5 Excess distributions carryover applied to 2011 . . . . . (If an amount appears in column (d), the same amount must be shown in column (a) )	0.			0.
6 Enter the net total of each column as indicated below:	788,530.			
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5 . . . . .		0.		
b Prior years' undistributed income. Subtract line 4b from line 2b . . . . .		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount – see instructions . . . . .		0.		
e Undistributed income for 2010. Subtract line 4a from line 2a. Taxable amount – see instructions . . . . .			0.	
f Undistributed income for 2011. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012 . . . . .				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) . . . . .	0.			
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	180,796.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	607,734.			
10 Analysis of line 9:				
a Excess from 2007 . . . . .	153,977.			
b Excess from 2008 . . . . .	137,426.			
c Excess from 2009 . . . . .	119,540.			
d Excess from 2010 . . . . .	84,905.			
e Excess from 2011 . . . . .	111,886.			

BAA

Form 990-PF (2011)

**Part XIV** **Private Operating Foundations** (see instructions and Part VII-A, question 9)

N/A

**Part XV** **Supplementary Information** (Complete this part only if the organization had \$5,000 or more in assets at any time during the year — see instructions.)

## 1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NANCY A. PLEAS

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

None

## **2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc. Programs:**

Check here ►  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

**a** The name, address, and telephone number of the person to whom applications should be addressed:

b. The form in which applications should be submitted and information and materials they should include:

### 6 Any submission deadlines:

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

**Part XV | Supplementary Information (continued)****3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<i>a Paid during the year</i> See Statement 4				
<b>Total</b>				► 3a 124,072.
<i>b Approved for future payment</i>				
<b>Total</b>				► 3b

## Part XVI-A Analysis of Income-Producing Activities

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1 Program service revenue:					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies.					
2 Membership dues and assessments . . . . .					
3 Interest on savings and temporary cash investments . . . . .			1		
4 Dividends and interest from securities. . . . .			1	2,949.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property. . . . .					
b Not debt-financed property. . . . .					
6 Net rental income or (loss) from personal property					
7 Other investment income . . . . .					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e) . . . . .				2,949.	
13 Total. Add line 12, columns (b), (d), and (e) . . . . .				13	2,949.

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

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

	Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
a Transfers from the reporting foundation to a noncharitable exempt organization of:		
(1) Cash	1a (1)	X
(2) Other assets	1a (2)	X
b Other transactions:		
(1) Sales of assets to a noncharitable exempt organization	1b (1)	X
(2) Purchases of assets from a noncharitable exempt organization	1b (2)	X
(3) Rental of facilities, equipment, or other assets	1b (3)	X
(4) Reimbursement arrangements	1b (4)	X
(5) Loans or loan guarantees	1b (5)	X
(6) Performance of services or membership or fundraising solicitations	1b (6)	X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c	X

d If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
N/A			

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . .

Yes  No

**b** If 'Yes,' complete the following schedule.

<b>(a) Name of organization</b>	<b>(b) Type of organization</b>	<b>(c) Description of relationship</b>
N/A		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

**Sign  
Here**

► Teresa Turner | 5-10-2012 SEC./DIRECTOR

May the IRS discuss  
this return with the  
preparer shown below  
(see instructions)?

Signature of filer or trustee		Date	Date	△ Yes	No	
<b>Paid Preparer Use Only</b>	Print/Type preparer's name		Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	KIM STEVEN BARNES		<i>Kim S. Barnes</i>	5/10/12	P00131405	
	Firm's name	► TONK INC.		Firm's EIN	► 91-0616349	
Firm's address	► 2410 BOYER AVENUE E., SUITE 1 SEATTLE, WA 98112		Phone no	(206) 329-9718		

**BAA**

**Form 990-PF (2011)**

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service

OMB No. 1545-0047

**Schedule of Contributors**

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

**2011**

Name of the organization

**RILEY & NANCY PLEAS FAMILY FOUNDATION**

Employer identification number

**91-1663829**

Organization type (check one):

Filers of:

Form 990 or 990-EZ

**Section:**

501(c)(\_\_\_\_\_) (enter number) organization  
 4947(a)(1) nonexempt charitable trust not treated as a private foundation  
 527 political organization

Form 990-PF

501(c)(3) exempt private foundation  
 4947(a)(1) nonexempt charitable trust treated as a private foundation  
 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

**Special Rules**

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of (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, total 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 total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc, purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year. ► \$ \_\_\_\_\_

**Caution:** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it **must** answer 'No' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, 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).

**BAA** For Paperwork Reduction Act Notice, see the Instructions for Form 990,  
990EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization

RILEY &amp; NANCY PLEAS FAMILY FOUNDATION

Employer identification number

91-1663829

**Part I** **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NANCY A. PLEAS 5020 NE 45TH STREET SEATTLE, WA 98105	\$ 125,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	—	\$ —	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	—	\$ —	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	—	\$ —	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	—	\$ —	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	—	\$ —	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

**Name of organization**

RILEY & NANCY PLEAS FAMILY FOUNDATION

**Employer identification number**

91-1663829

**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A	\$	
(a) 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
		\$	
(a) 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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

**BAA**

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**Schedule B (Form 990, 990-EZ, or 990-PF) (2011)**

Name of organization

RILEY &amp; NANCY PLEAS FAMILY FOUNDATION

Employer identification number

91-1663829

**Part III** Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete cols (a) through (e) and the following line entry.

For organizations completing Part III, enter total of exclusively religious, charitable, etc, contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)

► \$ N/A

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
N/A			
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

RILEY &amp; NANCY PLEAS FAMILY FOUNDATION

91-1663829

**Statement 1**  
**Form 990-PF, Part I, Line 16a**  
**Legal Fees**

	(a) Expenses Per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
LEGAL FEES	\$ 256.	\$ 256.	\$ 0.	\$ 0.
Total	<u>\$ 256.</u>	<u>\$ 256.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>

**Statement 2**  
**Form 990-PF, Part I, Line 16b**  
**Accounting Fees**

	(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
ACCOUNTING FEES	\$ 2,500.	\$ 2,500.	\$ 0.	\$ 0.
Total	<u>\$ 2,500.</u>	<u>\$ 2,500.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>

**Statement 3**  
**Form 990-PF, Part I, Line 23**  
**Other Expenses**

	(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
BANK CHARGES	\$ 253.	\$ 253.	\$ 0.	\$ 0.
BUSINESS LICENSES	35.	35.		
Total	<u>\$ 288.</u>	<u>\$ 288.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>

**Statement 4**  
**Form 990-PF, Part XV, Line 3a**  
**Recipient Paid During the Year**

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
AMARA PARENTING & ADOPTION 3300 E. UNION ST. SEATTLE, WA 98122	NONE	N/A	CONTRIBUTIONS TO IRC SEC 501(c) (3) & 509(a) (1) ORGANIZATIONS TO FURTHER THEIR CHARITABLE GIVING TO PERSONS IN NEED AND FOR SCHOOLS/COLLEGES TO BE ABLE TO SUSTAIN A SOUND CURRICULUM FOR THEIR STUDENTS.	\$ 900.
CHRIST HOSP. SCHOOL OF NURSING 2139 AUBURN AVENUE CINCINNATI, OH 45219	NONE	N/A	SAME	1,500.
FARE START 1902 2ND AVENUE SEATTLE, WA 98101	NONE	N/A	SAME	1,850.
BOYS & GIRLS CLUB OF SANTA MONICA 1220 Lincoln Blvd. Santa Monica, CA 90401	NONE	N/A	SAME	25.
BRIDGES OF GREATER NEW YORK 759 Winova Blvd. Rochester, NY 14617	NONE	N/A	SAME	350.
CANCER LIFE LINE 6522 Fremont Ave. N. Seattle, WA 98103	NONE	N/A	SAME	500.
ATTORNEY CPA FOUNDATION 3921 OLD LEE HIGHWAY, STE 71A FAIRFAX, VA 22030	NONE	N/A	SAME	3,200.
BAINBRIDGE SCHOOLS FOUNDATION 8489 MADISON AVE. E. BAINBRIDGE ISLAND, WA 98110	NONE	N/A	SAME	4,000.
SEATTLE UNIVERSITY 900 BROADWAY ST. SEATTLE, WA 98122	NONE	N/A	SAME	10,750.

## RILEY &amp; NANCY PLEAS FAMILY FOUNDATION

91-1663829

**Statement 4 (continued)**  
**Form 990-PF, Part XV, Line 3a**  
**Recipient Paid During the Year**

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
SAINT BRIDGET'S CHURCH 4900 NE 50TH ST SEATTLE, WA 98105	NONE	N/A	SAME	\$ 15,000.
BERTSCHI SCHOOL ANNUAL FUND 2227 10TH AVE E. SEATTLE, WA 98102	NONE	N/A	SAME	1,000.
SAN JUAN PRESERVATION TRUST PO BOX 327 LOPEZ ISLAND, WA 98261	NONE	N/A	SAME	100.
TEENS IN PUBLIC SERVICE 4530 UNION BAY PLACE NE SEATTLE, WA 98105	NONE	N/A	SAME	10,350.
VILLA ACADEMY 5001 NE 50TH SEATTLE, WA 98105	NONE	N/A	SAME	7,000.
EDMONDS CENTER FOR THE ARTS 410 4th Ave N. EDMONDS, WA 98020	NONE	N/A	SAME	500.
RECOVERY CAFE 2301 2ND AVENUE SEATTLE, WA 98121	NONE	N/A	SAME	350.
CYSTIC FIBROSIS FOUNDATION 520 PIKE ST. #1075 SEATTLE, WA 98101	NONE	N/A	SAME	125.
EDUCATION ACROSS BORDERS 3822 So. Findlay St. Seattle, WA 98118	NONE	N/A	SAME	150.
CAMP NORWESTER PO BOX 668 LOPEZ ISLAND, WA 98261	NONE	N/A	SAME	1,750.
FIRST BOOK 1319 F. ST., NW Ste # 1000 Washington , DC 20004	NONE	N/A	SAME	50.
CORNISH COLLEGE OF THE ARTS 1000 LENORA ST. SEATTLE, WA 98121	NONE	N/A	SAME	3,200.
DISCOVERY INSTITUTE 208 COLUMBIA ST. SEATTLE, WA 98104	NONE	N/A	SAME	500.

**Statement 4 (continued)**  
**Form 990-PF, Part XV, Line 3a**  
**Recipient Paid During the Year**

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
DUKE UNIVERSITY PO BOX 90581 DURHAM, NC 27708	NONE	N/A	SAME	\$ 50.
CLAREMONT MCKENNA 500 E 9TH ST. CLAREMONT, CA 91711	NONE	N/A	SAME	25.
COLGATE UNIVERSITY SOCIETY OF FAMILIES 13 OAK DRIVE HAMILTON, NY 13346	NONE	N/A	SAME	1,000.
HARVARD UNIVERSITY 124 MOUNT AUBURN ST. CAMBRIDGE, MA 02138	NONE	N/A	SAME	50.
FRED HUTCHINSON CANCER CENTER 1100 Fairview Ave., N Seattle, WA 98109	NONE	N/A	SAME	250.
GOALS HAITI 1201 Tree Bay Lane Sarasota, FL 34242	NONE	N/A	SAME	500.
MULTIPLE SCLEROSIS FOUNDATION PO BOX 21360 KEIZER, OR 97307	NONE	N/A	SAME	50.
HIGHLINE COMMUNITY COLLEGE FD. P. O. Box 98000 MS 99-248 Des Moines, WA	NONE	N/A	SAME	200.
JUVENILE DIABETES RESEARCH FD. 3525 Piedmont Rd. N.E., Bldg6#300 Atlanta, GA 30305	NONE	N/A	SAME	5,000.
NURSE FAMILY PARTNERSHIP 1900 Grant St., Ste 400 Denver, CO 80203,	NONE	N/A	SAME	50.
CHILDHAVEN 316 BROADWAY SEATTLE, WA 98122	NONE	N/A	SAME	100.

## RILEY &amp; NANCY PLEAS FAMILY FOUNDATION

91-1663829

**Statement 4 (continued)**  
**Form 990-PF, Part XV, Line 3a**  
**Recipient Paid During the Year**

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
SEATTLE PREPATORY SCHOOL 2400 11TH AVENUE E. SEATTLE, WA 98102	NONE	N/A	SAME	\$ 1,050.
SEATTLE ROTARY SERVICE FOUNDATION 1215 4TH AVE., SUITE 1215 SEATTLE, WA 98161	NONE	N/A	SAME	1,700.
OUTDOORS FOR ALL FOUNDATION 2 Nickerson ST., Ste # 101 Seattle, WA 98109	NONE	N/A	SAME	200.
PERONTEAU CLUB 6551 NE North Shore RD Belfair, WA 98528	NONE	N/A	SAME	100.
NETWORK FOR GOOD 7920 Norfolk Ave., Ste 520 Bethesda, MD 20814	NONE	N/A	SAME	210.
POST PRISON EDUCATION CELEBRATE KIDS 810 Third Ave., Ste 180 Seattle, WA 98104	NONE	N/A	SAME	250.
YMCA 909 4TH AVNEUE SEATTLE, WA 98104	NONE	N/A	SAME	200.
CHROHN'S & COLITIS FOUNDATION 386 PARK AVE. S., 17TH FL NY, NY 10016	NONE	N/A	SAME	1,275.
HOPE WORLDWIDE 353 WEST LANCASTER AVE., STE 200 WAYNE, PA 19087	NONE	N/A	SAME	1,004.
SAINT MARY'S COLLEGE 110 LeMans Hall Notre Dame, ID 46556	NONE	N/A	SAME	500.
SEATTLE CHILDREN'S HOSPITAL 4800 Sand Point Way NE Seattle, WA 98105	NONE	N/A	SAME	150.
NORTH HAWAII COMMUNITY HOSPITAL 67-1125 MAMALAHOA HWY. KAMUELA, HI 96743	NONE	N/A	SAME	1,000.

## RILEY &amp; NANCY PLEAS FAMILY FOUNDATION

91-1663829

**Statement 4 (continued)**  
**Form 990-PF, Part XV, Line 3a**  
**Recipient Paid During the Year**

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
SUSAN G. KOMEN 3 DAY FOR THE CURE 205 N. Michigan Ave. Ste # 2630 Chicago, IL 60601	NONE	N/A	SAME	\$ 700.
PRINCETON UNIVERSITY ANNUAL GIVING PO BOX 35 PRINCETON, NJ 08544	NONE	N/A	SAME	1,000.
RONALD McDONALD HOUSE CHARITIES ONE KROC DR. OAK BROOK, IL 60523	NONE	N/A	SAME	20.
SALVATION ARMY 1000 4th Avenue SEATTLE, WA 98134	NONE	N/A	SAME	2,050.
PROSTHETICS OUTREACH FOUNDATION 400 E. PINE ST , STE 225 SEATTLE, WA 98122	NONE	N/A	SAME	1,000.
UNIVERSITY BEYOND BARS P.O. Box 1267 Poulbo, WA 98370	NONE	N/A	SAME	500.
SANTA CLARA UNIVERSITY PO BOX 60000, FILE 72688 SAN FRANCISCO, CA 94120	NONE	N/A	SAME	500.
U of WASH ACCTG DEVELOPMENT FD. 4333 BROOKLYN AVE SEATTLE, WA 98195	NONE	N/A	SAME	2,500.
U of WASH MEN'S TENNIS 4333 BROOKLYN AVENUE SEATTLE, WA 98195	NONE	N/A	SAME	100.
EDMONDS COMMUNITY COLLEGE FOUNDATION 20000 68TH AVE. W. LYNNWOOD, WA 98036	NONE	N/A	SAME	500.
EVERGREEN FREEDOM FOUNDATION PO BOX 552 OLYMPIA, WA 98507	NONE	N/A	SAME	140.

## RILEY &amp; NANCY PLEAS FAMILY FOUNDATION

91-1663829

**Statement 4 (continued)**  
**Form 990-PF, Part XV, Line 3a**  
**Recipient Paid During the Year**

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
U of WASH EVANS SCH OF PUB ADMIN PO BOX 353055 SEATTLE, WA 98195	NONE	N/A	SAME	\$ 100.
HERITAGE FOUNDATION 214 MASSACHUSETTS AVE NE WASHINGTON, DC 20002	NONE	N/A	SAME	200.
UNICEF 125 MAIDEN LANE NEW YORK, NY 10038	NONE	N/A	SAME	73.
UNION GOSPEL MISSION PO BOX 202 SEATTLE, WA 98111	NONE	N/A	SAME	250.
U of WASHINGTON SCHOOL OF LAW PO BOX 353020 SEATTLE, WA 98195	NONE	N/A	SAME	1,750.
VASHON ISLAND ROTARY CFCW P.O. Box 2392 Vashon Island, WA 98070	NONE	N/A	SAME	2,095.
WAKE FOREST UNIVERSITY PO BOX 7227 WINSTON-SALEM, NC 27109	NONE	N/A	SAME	1,000.
WOMEN'S FUNDING ALLIANCE 500 STEWARD ST # 1000 SEATTLE, WA 98101	NONE	N/A	SAME	250.
WILLIAM KECK OBSERVATORY 65-1120 MAMALAHOA HWY KAMUELA, HI 96743	NONE	N/A	SAME	1,000.
YOUTH CARE 2500 N.E. 54th St. Seattle, WA 98105	NONE	N/A	SAME	500.
UNITED WAY of KING COUNTY 720 2ND AVENUE SEATTLE, WA 98104	NONE	N/A	SAME	100.
WASHINGTON TRAILS ASSOCIATION 705 2ND AVENUE, STE 300 SEATTLE, WA 98104	NONE	N/A	SAME	100.

## RILEY &amp; NANCY PLEAS FAMILY FOUNDATION

91-1663829

**Statement 4 (continued)**  
**Form 990-PF, Part XV, Line 3a**  
**Recipient Paid During the Year**

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
WOODLAND PARK ZOO 601 N. 59TH ST. SEATTLE, WA 8102	NONE	N/A	SAME	\$ 300.
SMILES FOREVER PO BOX 217 RENTON, WA 98057	NONE	N/A	SAME	100.
AMERICAN RED CROSS PO BOX 4002018 DES MOINES, IA 50340	NONE	N/A	SAME	200.
WASHINGTON POLICY CENTER PO BOX 3643 SEATTLE, WA 98124	NONE	N/A	SAME	500.
SWEDISH MEDICAL CENTER FOUNDATION 747 BROADWAT ST. SEATTLE, WA 98122	NONE	N/A	SAME AS ABOVE	28,230.
NEW LIFE MINISTRY 4900 Donovan St. Orlando, FL 32808	NONE	N/A	SAME AS ABOVE	250.

Total \$ 124,072.

2011

**Federal Supporting Detail**

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**RILEY & NANCY PLEAS FAMILY FOUNDATION**

91-1663829

**Balance Sheet**  
**Savings and temporary cash investments**

CHARLES SCHWAB MONEY MKT. ACCOUNT

Total \$ 11,390.  
\$ 11,390.

**Balance Sheet**  
**Prepaid expenses and deferred charges**

PREPAID FEDERAL EXCISE TAX

Total \$ 78.  
\$ 78.