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DLN: 93491316001823

OMB No 1545-0052

Department of the Treasury

Internal Revenue Service

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

Open to Public

								Inspection
For	cale	endar year 2012, or tax ye	ear beginning 01-	01-2012 , and	d end	ding 12-31-	2012	
		undation GIE FOUNDATION				A Employer id	entification numbe	er
111	E DUNG	SIE FOUNDATION				27-2313989		
Num	ber and	street (or P O box number if mail is no	t delivered to street address	s) Room/suite		B Telephone nu	ımber (see ınstructioi	าร)
55	0 106TH	H AVE NE SUITE 207				(425) 440-6862	2	
Cıtv	or town	n, state, and ZIP code				C If exemption	application is pendin	a. check here ▶ Г
		VA 98004				a in one implies.	арриования по ренани	g, ccoxe.c
	h l	all that apply		£ - £		l		_
GC	песка	all that apply Initial return Final return	A mended return o	f a former public cha rn	rity	· -	rganızatıons, check h	•
		Address chang	_				rganizations meeting e and attach comput	
H C h	eck ty	ype of organization		ate foundation				
Γ_{S}	ection	1 4947(a)(1) nonexempt charitab						
			J Accounting method	Cash 🗸 Acc	rual		undation status was t n 507(b)(1)(A), ched	
		from Part II, col. (c), \$ 1,276,205	Other (specify) (Part I, column (d) must	_ t he on cash hasis)			ation is in a 60-mont	
	rt I	Analysis of Revenue ar		<u> </u>		under sectio	n 507(b)(1)(B), ched	k here • (d) Disbursements
Гa		total of amounts in columns (b), (c), necessarily equal the amounts in columnstructions)	, and (d) may not	(a) Revenue and expenses per books	(b) I	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
Reveilue	1	Contributions, gifts, grants, etc., receive	ed (attach schedule)	41,917				,,
	2	Check ► ☐ If the foundation is not re						
	3	Interest on savings and tempora		4,299		4,299		
	4	Dividends and interest from sec	urities					
	5a	Gross rents						
	ь	Net rental income or (loss)						
	6a	Net gain or (loss) from sale of as	ssets not on line 10					
	ь	Gross sales price for all assets on line 6	a					
	7	Capital gain net income (from Pa	art IV, line 2)			0		
~	8	Net short-term capital gain .						
	9	Income modifications						
	10a	Gross sales less returns and allowances						
	Ь	Less Cost of goods sold						
	c	Gross profit or (loss) (attach sc						
	11	Other income (attach schedule)				4 200		
	12	Total. Add lines 1 through 11		46,216		4,299		
	13	Compensation of officers, direct Other employee salaries and wa						<u>'</u>
å	14 15	Pension plans, employee benefit						
ž.	16a	Legal fees (attach schedule).				0		3,68
Expenses	ь	Accounting fees (attach schedu				0		3,86
	_ c	Other professional fees (attach				0		3
Administrative	17	Interest	,			·		_
stra	18	Taxes (attach schedule) (see instruction		95 41		0		
₫	19	Depreciation (attach schedule)	· ·	H <u> </u>		0		
틛	20	Occupancy						
A A	21	Travel, conferences, and meetin						
and	22	Printing and publications						
	23	Other expenses (attach schedu	le)	95 88,842		0		90,40
rati	24	Total operating and administrat	ive expenses.					
Operating		Add lines 13 through 23		97,994		0		97,98
0	25	Contributions, gifts, grants paid		160,069				160,06
	26	Total expenses and disbursements	. Add lines 24 and 25	258,063		0		258,05
	27	Subtract line 26 from line 12				·		
	a	Excess of revenue over expense		-211,847				
	Ь	Net investment income (if negat				4,299		
	С	Adjusted net income (if negative	e, enter -0 -)					

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year (a) Book Value	(b) Book		(c) Fair Market Value
_	1	Cash—non-interest-bearing	(a) book value	(b) book	value	(c) Fall Market Value
	2	Savings and temporary cash investments	1,498,789	1	1,247,249	1,247,249
	3	Accounts receivable • 42	2,.30,.03		-,,	2,2.1.,2.13
		Less allowance for doubtful accounts -	625		42	,
	4	Pledges receivable -				
	-	Less allowance for doubtful accounts -				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see page 15 of the				
		Instructions)				
	7	Other notes and loans receivable (attach schedule)				
2		Less allowance for doubtful accounts 🟲				
sets	8	Inventories for sale or use				
А	9	Prepaid expenses and deferred charges				
		Investments—U S and state government obligations (attach schedule)				
		Investments—corporate stock (attach schedule)				
		Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment basis - 30,480	0	宛	28,956	28,956
	4.5	Less accumulated depreciation (attach schedule) 1,524		(29)		20,330
	15 16	Other assets (describe) Total assets (to be completed by all filers—see the				
	16	Instructions Also, see page 1, item I)	1,499,414		1,276,247	1,276,205
	17	Accounts payable and accrued expenses	1,559		-,270,217	1,2,0,203
	18	Grants payable	40,824		31,063	<u>-</u> 3
,n	19	Deferred revenue	, , , , , , , , , , , , , , , , , , , ,			†
₽	20	Loans from officers, directors, trustees, and other disqualified persons				†
Liabili	21	Mortgages and other notes payable (attach schedule)				†
Ë	22	Other liabilities (describe				†
						-
	23	Total liabilities (add lines 17 through 22)	42,383		31,063	3
		Foundations that follow SFAS 117, check here 🕨 🦵				
.n		and complete lines 24 through 26 and lines 30 and 31.				
Balances	24	Unrestricted				
밀	25	Temporarily restricted				
8	26	Permanently restricted				
Fund		Foundations that do not follow SFAS 117, check here 🕨 🔽				
昰		and complete lines 27 through 31.				
9	27	Capital stock, trust principal, or current funds	0			<u>}</u>
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0			2
8	29	Retained earnings, accumulated income, endowment, or other funds	1,457,031	1	1,245,184	
	30	Total net assets or fund balances (see page 17 of the	1 457 021		1 245 10	
Š	l	instructions)	1,457,031		1,245,184	<u> </u>
	31	Total liabilities and net assets/fund balances (see page 17 of	1 400 414		1 276 24	7
_		the instructions)	1,499,414	-	1,276,247	<u></u>
Pa	rt II	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 a	gree		
		with end-of-year figure reported on prior year's return)		- 1	1	1,457,031
2		Enter amount from Part I, line 27a			2	-211,847
3		Other increases not included in line 2 (itemize) 🟲			3	0
4		Add lines 1, 2, and 3			4	1,245,184
5		Decreases not included in line 2 (itemize) 🟲		_ [5	0
6		Total net assets or fund balances at end of year (line 4 minus line 5)—P	art II, column (b), l	ine 30 .	6	1,245,184

Form 990-PF (2012)					Page 3
Part IV Capital Gain	s and Losses for Tax on Inve	stment Incom		T	
	be the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs N		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
(e) Gross sales price	(f) Depreciation allowe	1 107	t or other basıs		or (loss)
——————————————————————————————————————	(or allowable)	plus ex	xpense of sale	(e) plus (f) mınus (g)
a					
b					
С					
d					
е					
Complete only for asset	s showing gain in column (h) and owne	ed by the foundatio	n on 12/31/69	(I) Gains (Col	(h) gaın mınus
(i) F M V as of 12/31/6	(j) Adjusted basis		cess of col (1)		less than -0-) or
	as of 12/31/69	over	col (j), ıf any	Losses (fr	om col (h))
a					
b					
С					
d					
e					
		If gaın, also enter			
2 Capital gain net ind	come or (net capital loss)	If (loss), enter -0	- in Part I, line 7	2	
3 Net short-term cap	- oital gain or (loss) as defined in sectio	ns 1222(5) and (6)		
-	n Part I, line 8, column (c) (see instru				
			· · ·	3	
Dort V. Ovolification	Under Section 4040(a) for F	aduced Tax as	Not Investmen	1 - 1	
_	Under Section 4940(e) for F				
(For optional use by domesti	c private foundations subject to the se	ection 4940(a) tax	on net investment	income)	
If section 4940(d)(2) applies	s, leave this part blank				
	the section 4942 tax on the distribut	able amount of any	vear in the base no	ariod?	┌ Yes No
	not qualify under section 4940(e) Do			enour	i res it ino
	nount in each column for each year, s			making any entries	
	T	T	I Structions before		
(a) Base period years Calendar	(b) Adjusted qualifying distributions	(c) Net value of noncha)	(d) Distribution	
year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncha	iritable-use assets	(col (b) divided	by col (c))
2011	168,986		914,723		0 184740
2010	59,226		985,289		0 060110
2009					
2008					
2007				<u> </u>	
2 Total of line 1, colu	ımn (d)			2	0 244850
	on ratio for the 5-year base period—di				
the number of year	s the foundation has been in existenc	e ıf less than 5 yea	rs	3	0 122425
			_	_	
4 Enter the net value	e of noncharitable-use assets for 2013	2 from Part X, line	5	4	1,376,996
5 Multiply line 4 by l	ine 3			5	168,579
6 Enter 1% of net inv	vestment income (1% of Part I, line 2	7b)		6	4 3
7 Add lines 5 and 6.				7	168,622
			Γ		
8 Enter qualifying dis	stributions from Part XII, line 4			8	288,537
If line 8 is equal to	or greater than line 7, check the box $% \left(1\right) =\left(1\right) \left(1\right) \left$	ın Part VI, lıne 1b,	and complete that	part using a 1% tax	rate See
the Part VI Instruc	tions				

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Pai	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the	instru	ctio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here T and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary–see instructions)				
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check				43
	here F and enter 1% of Part I, line 27b				
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, 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				43
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				43
6	C redits/P ayments				
a	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 42				
b	Exempt foreign organizations—tax withheld at source 6b				
c	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d				42
8	Enter any penalty for underpayment of estimated tax. Check here T if Form 2220 is attached.				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				1
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10				
11	Enter the amount of line 10 to be Credited to 2013 estimated tax Refunded Refunded 11				
Pai	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	_		Yes	No
	it participate or intervene in any political campaign?	·	1a		No
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)?	• ‡	1b		No
	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.		4 -		NI -
С.	Did the foundation file Form 1120-POL for this year?		1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
•	(1) On the foundation \$\bigs\\$ 0 (2) On foundation managers \$\bigs\\$ 0 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
e	on foundation managers \blacktriangleright \$0				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		No
_	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		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	<u> </u>	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	—	5		No
	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	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	<u> </u>				
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 🎜	L	8b		No
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 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)?				
4.0	If "Yes," complete Part XIV	· †	9	V -	No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10	Yes	

Pai	rt VII-A Statements Regarding Activities (continued)			age -
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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►N/A			
14	The books are in care of ►SHAWN TAYLOR Telephone no ►(425	1440-	6862	
	Located at \$\inspec\$550 106TH AVENUE NE SUITE 207 BELLEVUE WA ZIP+4 \$\inspec\$98004) + + 0	0002	
	· · · · · · · · · · · · · · · · · · ·			. –
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	• •		P
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over			
10	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the foreign country			
Par	rt 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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)? 🔽 Yes 🔽 No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	ıf the foundatıon agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days) Γ Yes \overline{r} 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 page 20 of the instructions)?	1b		No
	Organizations relying on a current notice regarding disaster assistance check here			
С	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 2012?	1 c		No
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))			
а	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2012?			
	If "Yes," list the years 🕨 20			
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)	2b		
С	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			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2012 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 2012.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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 2012?	4b		No

5a	During the year did the foundation	pay or incur any amour	nt to							
	(1) Carry on propaganda, or otherw	vise attempt to influenc	e leg	ıslatıon (section 49	45(e))?	· No			
	(2) Influence the outcome of any s	·	_	•	-					
	on, directly or indirectly, any vo						- No			
	(3) Provide a grant to an individual	-			-	☐ Yes ि				
	(4) Provide a grant to an organizati				scrib	, ,				
	in section 509(a)(1), (2), or (3)						- No			
	(5) Provide for any purpose other t				•					
	educational purposes, or for the					□ vos □	- No			
L	If any answer is "Yes" to 5a(1)-(5)						140			
U	Regulations section 53 4945 or in							5b		No
	•	-	-		•	_	_	30		110
_	Organizations relying on a current									
С	If the answer is "Yes" to question 5			· ·						
	tax because it maintained expendit				•	Yes	NO			
_	If "Yes," attach the statement require	· -								
6a	Did the foundation, during the year,									
	a personal benefit contract?					· ·				
b	Did the foundation, during the year,	, pay premiums, directi	y or i	ndirectly, on a perso	onali	penefit contract?	•	6b		No
	If "Yes" to 6b, file Form 8870.						_			
	At any time during the tax year, wa									
b	If yes, did the foundation receive a							7b		
Pa	rt VIII and Contractors	Officers, Director	s, Tı	rustees, Founda	itioi	n Managers, Highly	Paid	Emp	loyee	es,
	and Contractors List all officers, directors, trustees,	foundation managers	and t	hair componention (soo i	net ruetions)				
		(b) Title, and average	1	c) Compensation ((d) Contributions to				
	(a) Name and address	hours per week		If not paid, enter		mployee benefit plans			еассо	
		devoted to position		-0-)	and	deferred compensation	OLI	er and	owance	<u> </u>
See	Additional Data Table									
2	Compensation of five highest-paid e	employees (other than	thos	e included on line 1–		instructions). If none, e	nter"N	ONF."	,	
	compensation of Tive highest para				300	(d) Contributions to		OIIL.		
(a)) Name and address of each employe	ee (b) Title, and ave		(c) Compensation	'n	employee benefit			еассо	
	paid more than \$50,000	devoted to posit		(c) Compensation	'''	plans and deferred	oth	er all	owance	!S
	I.E.	•				compensation				
10 N	N C									
rot a	I number of other employees hald ov	var ¢ 50 000				· · · · · · · · · · · · · · · · · · ·				

Part VIII Information About Officers, Directors, Transcription and Contractors (continued)	ustees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional servi	ices (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		
Total number of others receiving over \$50,000 for professional servi	ces	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Including organizations and other beneficiaries served, conferences convened, research papers		Expenses
1 IPADS FOR KIDS PROGRAM AT SEATTLE CHILDREN'S HOSP OUTPATIENT DIALYSIS, INPATIENT REHAB AND INPATIEN APPROXIMATELY 150 PATIENTS IN 2012		62,417
2THE BUNGIE FOUNDATION PURCHASED A PONTOON BOAT CHILDREN'S CAMPS AFFILIATED WITH CHILDREN'S HOSPIZO12 IT WAS USED AT THE STANLEY STAMM SUMMER CAMP THROUGH SEATTLE CHILDREN'S HOSPITAL AND SERVED A	FAL AND ASSOCIATED FOUNDATIONS IN P FOR DISABLED AND SICK KIDS RUN	50,145
3		
4		
Part IX-B Summary of Program-Related Investmen	Ata (coo instructions)	
Describe the two largest program-related investments made by the foundation d	-	A mount
1	aring the tax year on integral and 2	Amount
2		
All other program-related investments See page 24 of the instruc	tions	
3		
Total. Add lines 1 through 3.		0

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Fo see instructions.)	reign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	0
b	A verage of monthly cash balances	1b	1,397,965
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	1,397,965
e	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	1,397,965
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	20,969
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,376,996
6	Minimum investment return. Enter 5% of line 5	6	68,850
Pai	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operation	atıng	foundations and
	certain foreign organizations check here 🕨 📗 and do not complete this part.)		T
1	Minimum investment return from Part X, line 6	1	68,850
2a	Tax on investment income for 2012 from Part VI, line 5 2a 43	4	
b	Income tax for 2012 (This does not include the tax from Part VI) 2b	4	
С	Add lines 2a and 2b	2c	43
3	Distributable amount before adjustments Subtract line 2c from line 1	3	68,807
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	68,807
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	68,807
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	258,057
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	30,480
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	За	
ь	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	288,537
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	43
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	288,494
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth	her the	foundation qualifies for

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

	olidistributed fricollie (see liistri	uctions)			
		(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
	Distributable amount for 2012 from Bort VI line 7	Corpus	rears prior to 2011	2011	68,807
	Distributable amount for 2012 from Part XI, line 7				00,007
	Undistributed income, if any, as of the end of 2012			0	
	Enter amount for 2011 only		0	U	
	Total for prior years 20, 20, 20		0		
	Excess distributions carryover, if any, to 2012				
	From 2007				
	From 2008				
C	From 2009				
d	From 2010				
е	From 2011				
f	Total of lines 3a through e	177,171			
4	Qualifying distributions for 2012 from Part				
	XII, line 4 🕨 \$ 288,537				
а	Applied to 2011, but not more than line 2a			0	
	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 2012 distributable amount				68,807
е	Remaining amount distributed out of corpus	219,730			
	Excess distributions carryover applied to 2012	0			(
_	(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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	396,901			
	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)		0		
	tax has been previously assessed		٩		
d	Subtract line 6c from line 6b Taxable amount		0		
	—see instructions		, , ,		
е	Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount—see				
	instructions			0	
f	Undistributed income for 2012 Subtract				
•	lines 4d and 5 from line 1 This amount must				
	be distributed in 2013				(
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see	0			
	instructions)				
8	Excess distributions carryover from 2007 not	0			
_	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2013.	396,901			
10	Subtract lines 7 and 8 from line 6a	233/301			
	Analysis of line 9				
a	Excess from 2008				
b	Excess from 2010				
	Excess from 2011 123,332				
е	Excess from 2012 219,730		1		

1a	If the foundation has received a ruling or d foundation, and the ruling is effective for 2		•			
ь	Check box to indicate whether the organiz	•	_		1942(J)(3) o	r Г 4942(<u>J</u>)(5)
	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(c) locul
	year listed					
	85% of line 2a					
	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					
	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					
Рa	(4) Gross investment income ort XV Supplementary Information	l on (Complete tl	l nis part only if		n had \$5.000 o	or more in
	assets at any time during	the year—see				
1 a	Information Regarding Foundation Manage List any managers of the foundation who has		re than 2% of the to	otal contributions re	ceived by the found	dation
	before the close of any tax year (but only I					
_						
b	List any managers of the foundation who overship of a partnership or other entity)				y large portion of th	ne
<u></u>	Information Regarding Contribution, Grant	. Gift, Loan, Schola	rship, etc., Program	 ns:		
	Check here 🕶 if the foundation only ma				and does not accep	ot
	unsolicited requests for funds If the found	atıon makes gıfts, q	grants, etc (see ins	structions) to individ	duals or organizatio	ns under
	other conditions, complete items 2a, b, c,	and d				
a	The name, address, and telephone numbe	r of the person to w	hom applications sl	hould be addressed		
b	The form in which applications should be s	submitted and infori	mation and materia	ls they should inclu	de	
c	Any submission deadlines					
d	Any restrictions or limitations on awards, factors	such as by geograp	phical areas, charit	able fields, kinds of	institutions, or othe	er

3 Grants and Contributions Paid		proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year See Additional Data Table	or substantial contributor			
Total				160,069
b Approved for future payment				
			<u> </u>	

	PF (2012)					Page 1 2
	I-A Analysis of Income-Products amounts unless otherwise indicated		usiness income	Excluded by section	1 512 513 or 514	(e)
	m service revenue	(a) Business code	(b)	(c) Exclusion code	(d) A mount	Related or exemp function income (See
a	and contracts from government agencies ership dues and assessments		Amount	14	4,299	instructions)
c d e 12 Subtot 13 Total. (See v	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify T-B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation's instructions)	calculations) the Accom ich income is re	plishment of I	Exempt Purpos (e) of Part XVI-A c	ontributed importa	4,299 ntly to

Part XVI	Information Re					actions and	l Relationships V	With			5
1 Did the org	anization directly or indirectly					nızatıon described	I in section			Yes	No
501(c) of t	he Code (other than section	501(c)(3) o	rganızatı	ions) or in se	ection 527, relating	to political organiz	ations?				
a Transfers	from the reporting four	dation to	a nonc	:harıtable (exempt organiza	ition of					
(1) Casi	h							. 1	a(1)		No
(2) Othe	erassets							1	a(2)		No
b O ther tra	nsactions										
(1) Sale	s of assets to a noncha	rıtable exe	empt o	rganızatıoı	n			1	b(1)		No
(2) Purc	(2) Purchases of assets from a noncharitable exempt organization										No
(3) Rent	al of facilities, equipme	nt, or othe	erasse	ts				1	b(3)		No
(4) Rein	nbursement arrangemen	ts						1	b(4)		No
(5) Loar	ns or loan guarantees.							1	b(5)		No
(6) Perfo	rmance of services or m	nembershi	p or fu	ndraising s	solicitations			11	b(6)		No
c Sharing o	of facilities, equipment, i	maılıng lıs	ts, oth	er assets,	or paid employe	ees			1c		No
of the go	swer to any of the above ods, other assets, or se insaction or sharing arra (b) Amount involved	rvices giv angement	en by t , show	the reporti in column	ng foundation I	f the foundatio the goods, oth	n received less than f	fair market v s received	value		nts
(a) Line ite	(D) / Insult involved	(c) Hame	01 1101101	namable exe	pe organization	(a) bescripe.	on or transfers, transaction	no, and onam	gana	igeiriei	
-											
describe	undation directly or indii d in section 501(c) of the complete the following s (a) Name of organization	ne Code (d schedule		nan sectioi		in section 527	?	on of relations		s F	No
the	der penalties of perjury, best of my knowledge a ed on all information of ****** Signature of officer or ti	nd belief, which pre	ıt ıs trı	ue, correct	t, and complete				r fidu discuss	ciary)	IS urn
			l _			Date		PTIN			
	Print/Type preparer's KATHRYN J ONG	name		arer's Sıgn THRYN J (2013-11-1	Check if self- employed ►		7465	98	
Paid						2013-11-1	<u> </u>				
Preparer Use Only	Firm's name ►		K NUB		ET SUITE 1700		Firm's EIN ▶ 91-	1194016			_
~ y							Phone no (425)	454-4919			
	Firm's address ▶	BELLE	EVUE,	WA 9800	14						

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Schedule B		Schedule of Contributors		OMB No 1545-0047			
(Form 990, 990-EZ, or 990-PF) Department of the Treasury reternal Revenue Service			2012				
Name of the organization	ion		Employer id	dentification number			
— CONDATION			27-231398	89			
Organization type (ch	neck one)						
Filers of:							
Form 990 or 990-EZ	5 01(c)() (enter number) organization					
	F 4947(a)(1)) nonexempt charitable trust not treated as a pri	ıvate foundation				
	□ 527 political	al organization					
Form 990-PF	5 01(c)(3)	exempt private foundation					
	4947(a)(1)	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	5 01(c)(3)	taxable private foundation					
property) from a	ntion filing Form 990, 99 any one contributor Co	90-EZ, or 990-PF that received, during the year, somplete Parts I and II	\$5,000 or more (in money or				
Special Rules							
under sections	509(a)(1) and 170(b)(iling Form 990 or 990-EZ that met the 33 ¹ /3% sup 1)(A)(vi) and received from any one contributor amount on (i) Form 990, Part VIII, line 1h, or (ii) F	, during the year, a contribut				
during the year,	total contributions of i	rganization filing Form 990 or 990-EZ that receive more than \$1,000 for use <i>exclusively</i> for religiou oses, or the prevention of cruelty to children or a	us, charitable,	•			
during the year, not total to more the year for an applies to this o	contributions for use than \$1,000 If this bo exclusively religious, or ganization because it	rganization filing Form 990 or 990-EZ that receive exclusively for religious, charitable, etc., purpose it is checked, enter here the total contributions to charitable, etc., purpose. Do not complete any of received nonexclusively religious, charitable, etc.	ses, but these contributions of that were received during f the parts unless the Gener to, contributions of \$5,000 o	did ral Rule			
990-EZ, or 990-PF), but	ıt must answer "No"	by the General Rule and/or the Special Rules do on Part IV, line 2 of its Form 990, or check the b D-PF, to certify that it does not meet the filing req	oox on line H of its				

Name of organization THE BUNGIE FOUNDATION

Employer identification number

27-2313989

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed	27	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHILD'S PLAY CHARITY 8040 161ST AVE NE PMB 418 REDMOND, WA 98052	\$ <u>37,436</u>	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total 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) Total 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) Total 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) Total 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) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization
THE BUNGIE FOUNDATION

Employer identification number
27-2313989

Partll Nonc	ash Property (see instructions) Use duplicate copies of Part II if additional space is ne	eded	
a) 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
		*	
) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

lame of o	rganization FOUNDATION			Employer identification number
	LOGIDALION			27-2313989
Part III	Exclusively religious, charitable, etc., in that total more than \$1,000 for the year For organizations completing Part III, enter the contributions of \$1,000 or less for the year Use duplicate copies of Part III if additional s	. Complete colline total of <i>excl</i> or r (Enter this in	umns (a) through (e) and <i>usīvely</i> religious, charitab formation once See insti	the following line entry ble, etc.,
(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, an			nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_	Transferee's name, address, an	•	e) Transfer of gift Relatio	nship 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	e) Transfer of gift	
	Transferee's name, address, an	d ZIP 4	Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-				
	Transferee's name, address, an		e) Transfer of gift Relatio	nship of transferor to transferee

TY 2012 Accounting Fees Schedule

Name: THE BUNGIE FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	3,865	0		3,865

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Note: To capture the full content of this document, please select landscape mode (11" \times 8.5") when printing.

TY 2012 Depreciation Schedule

Name: THE BUNGIE FOUNDATION

EIN: 27-2313989

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
PONTOON BOAT	2012-07-01	30,480		SL	10 000000000000	1,524	0		

DLN: 93491316001823

TY 2012 Explanation of Non-Filing with Attorney General Statement

Name: THE BUNGIE FOUNDATION

EIN: 27-2313989

Statement: WASHINGTON STATE REQUIRES FILING FOR PRIVATE

FOUNDATIONS WHEN INVESTMENT ASSETS ARE \$250,000 OR GREATER. SINCE THE BUNGIE FOUNDATION ONLY HOLDS CASH

AND ACCOUNTS RECEIVABLE, IT IS BELOW THIS FILING

THRESHOLD. AS A RESULT, NO FILING IS REQUIRED WITH THE

STATE THIS YEAR.

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TY 2012 Land, Etc. Schedule

Name: THE BUNGIE FOUNDATION

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
PONTOON BOAT	30,480	1,524	28,956	28,956

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TY 2012 Legal Fees Schedule

Name: THE BUNGIE FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	3,687	0		3,687

TY 2012 Other Expenses Schedule

Name: THE BUNGIE FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROGRAM ACTIVITIES	41,279	0		41,279
CONTRACT LABOR	26,892	0		26,892
ALLOCATED STAFFING	9,732	0		11,291
INSURANCE	8,889	0		8,889
MISCELLANEOUS	2,050	0		2,050

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TY 2012 Other Professional Fees Schedule

Name: THE BUNGIE FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OTHER PROFESSIONAL FEES	35	0		35

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TY 2012 Substantial Contributors Schedule

Name: THE BUNGIE FOUNDATION

Name	Address
	8040 161ST AVENUE NE PMB 418 REDMOND,WA 98052

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TY 2012 Taxes Schedule

Name: THE BUNGIE FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	41	0		0

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(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
HAROLD RYAN	PRESIDENT	0	0	0
550 106TH AVENUE NE SUITE 207 BELLEVUE, WA 98004	0 50			
BRENT ABRAHAMSEN	SECRETARY	0	0	0
550 106TH AVENUE NE SUITE 207 BELLEVUE, WA 98004	0 50			
ONDRAUS JENKINS	DIRECTOR	0	0	0
550 106TH AVENUE NE SUITE 207 BELLEVUE, WA 98004	0 50			
PETE PARSONS	DIRECTOR	0	0	0
550 106TH AVENUE NE SUITE 207 BELLEVUE, WA 98004	0 50			
ZACH RUSSELL	DIRECTOR	0	0	0
550 106TH AVENUE NE SUITE 207 BELLEVUE, WA 98004	0 50			

	ı		,	<u>-</u>
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	A mount
a Paid during the year				
911 MEDIA ARTS 909 NE 43RD STREET STE 206 SEATTLE,WA 98105	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	100
ALS 1275 K STREET WASHINGTON,DC 20005	NONE	509(A)(1)OR (A)(2)	PROGRAM SUPPORT	250
AMERICAN CANCER SOCIETY 11701 STONEHOLLOW DRIVE AUSTIN,TX 78758	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	275
AMERICAN HEART ASSOCIATION 7272 GREENVILLE AVE DALLAS,TX 75231	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	15
ANNA SCHINDLER FOUNDATION 6700 S STATELINE RD POST FALLS,ID 83854	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	5,000
ARCHDIOCESE OF SEATTLE 710- 9TH AVE SEATTLE,WA 98104	NONE	170(B)(1)(A) (I)	PROGRAM SUPPORT	300
ARTS WEST PO BOX 16152 SEATTLE, WA 98166	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	1,140
ASPCA 424 E 92ND ST NEW YORK, NY 10128	NONE	509(A)(1)OR (A)(2)	PROGRAM SUPPORT	290
BEN FRANKLIN PTA 12434 NE 60TH STREET KIRKLAND, WA 98033	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	150
BENNETT PTSA 17900 NE 16TH STREET BELLEVUE, WA 98008	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	250
BOSTON BRAIN TUMOR WALK 55 CHAPEL STREET STE 200 NEWTON,MA 02458	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	100
BOYS & GIRLS CLUB OF BELLEVUE 209 100TH AVENUE NE BELLEVUE, WA 98004	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	300
BREAST CANCER RESEARCH FOUNDATION 60 EAST 56TH ST 8TH FLOOR NEW YORK, NY 10022	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	300
BUCKY BEAVER PRESCHOOL 13803 115TH AVE NE KIRKLAND, WA 98034	NONE	170(B)(1)(A) (II)	PROGRAM SUPPORT	500
CARL SANDBURG DCS PTSA 12801 84TH AVE NE KIRKLAND, WA 98034	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	125

Recipient	If recipient is an individual,	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	recipient		
a Paid during the year				
CHARITY WATER 200 VARICK ST SUITE 201 NY,NY 10014	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	237
CHILD'S PLAY 123 NW 36TH STREET STE 210 SEATTLE,WA 98107	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	15,500
CHILD'S PLAY 123 NW 36TH STREET STE 210 SEATTLE,WA 98107	NONE	509(A)(1) OR (A)(2)	AUCTION ITEMS	663
CHILDREN'S HOSPITAL OF CINCINNATI 3333 BURNET AVENUE CINCINNATI,OH 45229	NONE	170(B)(1)(A) (III)	PROGRAM SUPPORT	1,086
CHILDREN'S HOSPITAL PO BOX 5371 SEATTLE,WA 98145	NONE	170(B)(1)(A) (III)	PROGRAM SUPPORT	5,000
CHILDREN'S MIRACLE NETWORK HOSPITALS 205 WEST 700 SOUTH SALT LAKE CITY,UT 84101	NONE	170(B)(1)(A) (III)	PROGRAM SUPPORT	100
CHILDSPLAY 123 NW 36TH STREET STE 210 SEATTLE,WA 98107	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	1,750
COMMUNICATION INTEGRATION 2601 NW 26TH STREET MIAMI,FL 33142	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	500
COMPASS HOUSING ALLIANCE 77 S WASHINGTON ST SEATTLE,WA 98104	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	500
COMPASSION INTERNATIONAL 12290 VOYAGER PARKWAY COLORADO SPRINGS,CO 80921	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	578
CONSERVATION NW 2011 CRYSTAL DRIVE STE 500 ARLINGTON,VA 22202	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	500
CRISIS SERVICES 2969 MAIN STREET BUFFALO,NY 14214	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	200
DEMOCRACY NOW 207 W 25TH STREET 11TH FLOOR NEW YORK,NY 10001	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	500
DOCTORS WITHOUT BORDERS 333 SEVENTH AVE 2ND FLOOR NY,NY 10001	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	125
DONORSCHOOSEORG 213 W 35TH ST STE 2E NEW YORK,NY 10001	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	288

FUI III 990PF PAIT AV LINE 3 - GI		-	, a.eea. epp. e.ee	
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	A mount
a Paid during the year				
EARTHJUSTICE 426 17TH STREET 6TH FLOOR OAKLAND,CA 94612	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	500
EASTSIDE BABY CORNER PO BOX 712 ISSAQUAH,WA 98027	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	450
EASTSIDE PREPARATORY SCHOOL 10635 NE 38TH PLACE KIRKLAND, WA 98033	NONE	170(B)(1)(A) (II)	PROGRAM SUPPORT	1,989
EFF 454 SHOTWELL STREET SAN FRANCISCO, CA 94110	NONE	509(A)(1)OR (A)(2)	PROGRAM SUPPORT	250
EMERALD CITY GYMNASTICS BOOSTER CLUB 17969 NE 65TH STREET REDMOND, WA 98052	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	200
EVERGREEN HEALTHCARE FOUNDATION 12333 NE 130TH LANE STE 300 KIRKLAND, WA 98034	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	150
EXTRA LIFE - CHILDREN'S MIRACLE NETWORK 205 WEST 700 SOUTH SALT LAKE CITY, UT 84101	NONE	170(B)(1)(A) (III)	PROGRAM SUPPORT	25
FAIR 104 W 27TH ST SUITE 10B NEW YORK,NY 10001	NONE	509(A)(1)OR (A)(2)	PROGRAM SUPPORT	500
FARESTART 700 VIRGINIA ST SEATTLE,WA 98101	NONE	509(A)(1)OR (A)(2)	PROGRAM SUPPORT	300
FLAG TOURNAMENT - SUSAN G KOMEN BREAST CANCER FOUNDATION 5005 LBJ FREEWAY STE 250 DALLAS,TX 75244	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	50
FOSTER KINSHIP 5030 SOUTH PARADISE ROAD STE A118 LAS VEGAS, NV 89119	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	7,600
FRED HUTCHINSON CANCER RESEARCH CENTER 1100 FAIRVIEW AVE N SEATTLE,WA 98109	NONE	170(B)(1)(A) (III)	PROGRAM SUPPORT	100
GEORGIA TECH ALUMNI ASSOCIATION 190 NORTH AVENUE ATLANTA,GA 30313	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	150
GRAND RIDGE PTSA 1739 NE PARK DRIVE ISSAQUAH,WA 98029	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	600
GREENPEACE FUND 702 H STREET NW SUITE 300 WASHINGTON, DC 20001	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	100

Recipient	If recipient is an individual,	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	recipient		
a Paid during the year				
HABITAT FOR HUMANITY 121 HABITAT STREET AMERICUS,GA 31709	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	35
HENRY ART GALLERY - UNIVERSITY OF WASHINGTON BOX 351410 SEATTLE,WA 98195	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	170
HOLY FAMILY PARISH SCHOOL 7300 120TH AVE NE KIRKLAND, WA 98033	NONE	170(B)(1)(A) (II)	PROGRAM SUPPORT	2,430
HOPELINK 10675 WILLOWS RD NE SUITE 275 REDMOND, WA 98052	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	250
INTERLAKE CHILD CARE 4927 GREEN LAKE WAY N SEATTLE,WA 98103	NONE	170(B)(1)(A) (II)	PROGRAM SUPPORT	285
INTERNATIONAL COMMUNITY SCHOOL PARENT TEACHER STUDENT ASSOCIATION 11133 NE 65TH STREET KIRKLAND, WA 98033	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	200
ISSAQUAH FOOD BANK PO BOX 652 ISSAQUAH,WA 98027	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	300
ISSAQUAH SCHOOLS FOUNDATION PO BOX 835 ISSAQUAH,WA 98027	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	600
JDRF 26 BROADWAY FL 14 NEW YORK, NY 10004	NONE	509(A)(1)OR (A)(2)	PROGRAM SUPPORT	500
KEXPORG 113 DEXTER AVE N SEATTLE,WA 98109	NONE	509(A)(1)OR (A)(2)	PROGRAM SUPPORT	1,295
KINDERING CENTER 16120 NE EIGHTH STREET BELLEVUE,WA 98008	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	100
KINGFMORG 10 HARRISON STREET STE 100 SEATTLE,WA 98109	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	120
KUOW 4518 UNIVERSITY WAY NE STE 310 SEATTLE,WA 98105	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	1,175
LAMBERT HOUSE PO BOX 23111 SEATTLE,WA 98102	NONE	509(A)(1)OR (A)(2)	PROGRAM SUPPORT	210
LEUKEMIA & LYMPHOMA SOCIETY 530 DEXTER AVE NORTH STE 300 SEATTLE,WA 98109	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	2,610

Recipient	If recipient is an individual,	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	recipient		
a Paid during the year				
LISTEN AND TALK 8610 8TH AVE NE SEATTLE,WA 98115	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	50
MAKE A WISH FOUNDATION 4742 N 24TH ST STE 400 PHOENIX,AZ 85016	NONE	509(A)(1) OR (A)(2)	HOSTING SICK CHILDREN AND PROVIDE AUCTION ITEMS	3,432
MAKE A WISH 811 FIRST AVE STE 520 SEATTLE,WA 98104	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	1,600
MAKE A WISH 811 FIRST AVE STE 520 SEATTLE,WA 98104	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	1,875
MARS HILL CHURCH 1411 NW 50TH STREET SEATTLE,WA 98107	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	4,650
MERCY CORP 45 SWANKENY STREET PORTLAND,OR 97204	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	550
MIRROR STAGE 2212 QUEEN AVE N 294 SEATTLE, WA 98109	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	250
NATIONAL MS SOCIETY 733 THIRD AVE NEW YORK, NY 10017	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	460
NEW CENTURY THEATER CO 1122 E PIKE ST 598 SEATTLE, WA 98122	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	255
NORTHWEST HARVEST PO BOX 12272 SEATTLE,WA 98102	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	924
NORTHWEST SCHOONER SOCIETY PO BOX 75421 SEATTLE,WA 98175	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	250
NOTHING BUT NETSUNITED NATIONS FOUNDATION 1800 MASSACHUSETTS AVE NW STE 400 WASHINGTON, DC 20036	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	50
OLYMPIC VIEW PTA 551 NE 104TH ST SEATTLE,WA 98125	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	504
ON THE BOARDS PO BOX 19515 SEATTLE,WA 98109	NONE	509(A)(1)OR (A)(2)	PROGRAM SUPPORT	103
OPEN ARMS PERINATAL SERVICES 2524 16TH AVE S 207A SEATTLE,WA 98144	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	250

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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	A mount
a Paid during the year				
OXFAM 226 CAUSEWAY ST 5TH FLOOR BOSTON,MA 02114	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	50
PACIFIC SCIENCE CENTER 2000 SECOND AVE N SEATTLE,WA 98109	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	2,200
PANTHERA 8 WEST 40TH STREET 18TH FLOOR NEW YORK,NY 10018	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	1,500
PCC FARMLAND TRUST 1917 FIRST AVE LEVEL A STE 100 SEATTLE,WA 98101	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	150
PCMS PTSA 24635 SE ISSAQUAH FALL CITY RD ISSAQUAH,WA 98029	NONE	509(A)(1)OR (A)(2)	PROGRAM SUPPORT	100
PLANNED PARENTHOOD 434 WEST 33RD STREET NEW YORK,NY 10001	NONE	509(A)(1)OR (A)(2)	PROGRAM SUPPORT	5,667
PNA VILLAGE 6532 PHINNEY AVE N SEATTLE,WA 98013	NONE	509(A)(1)OR (A)(2)	PROGRAM SUPPORT	50
RED CROSS PO BOX 4002018 DES MOINES,IA 50340	NONE	509(A)(1)OR (A)(2)	PROGRAM SUPPORT	1,950
RHS JAZZ BOOSTERS 1037 NE 65TH ST PMB 205 SEATTLE,WA 98115	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	290
RIVERVIEW EDUCATION FOUNDATION PO BOX 62 CARNATION, WA 98014	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	1,055
RONALD MCDONALD HOUSE OF SEATTLE 5130 40TH AVE NE SEATTLE,WA 98105	NONE	509(A)(1)OR (A)(2)	PROGRAM SUPPORT	1,700
RONALD MCDONALD HOUSE OF SEATTLE 5130 40TH AVE NE SEATTLE,WA 98105	NONE	509(A)(1)OR (A)(2)	PROGRAM SUPPORT	29,000
SEATTLE CHILDREN'S HOSPITAL - STANLEY STAMM SUMMER CAMP PO BOX 5371 SEATTLE,WA 98145	NONE	170(B)(1)(A) (III)	AUDIO EQUIPMENT DONATION TO CAMP	5,962
SEATTLE CHILDREN'S HOSPITAL PO BOX 5371 SEATTLE,WA 98145	NONE	170(B)(1)(A) (III)	PROGRAM SUPPORT	10,700
SEATTLE CHILDREN'S HOSPITAL PO BOX 5371 SEATTLE,WA 98145	NONE	170(B)(1)(A) (III)	PROGRAM SUPPORT	200

Recipient	If recipient is an	Foundation	Purpose of grant or	A mount
Name and address (home or business)	individual, show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
SEATTLE NEIGHBORHOOD GROUP 1810 EAST YESLER WAY SEATTLE,WA 98122	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	150
SEATTLE PUBLIC THEATER 7312 W GREEN LAKE DR N SEATTLE,WA 98103	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	1,045
SEATTLE UNION GOSPEL MISSION PO BOX 202 SEATTLE,WA 98111	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	1,700
SHARE OUR STRENGTHNO KID HUNGRY 1730 M STREET NW STE 700 WASHINGTON, DC 20036	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	50
SKYLINE BOOSTER CLUB 3020 ISSAQUAH PINE LAKE ROAD 573 SAMMAMISH, WA 98075	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	535
SMILE TRAIN 41 MADISON AVE 28TH FLOOR NEW YORK,NY 10010	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	30
SOCIAL VENTURE PARTNERS 220 SECOND AVE S 3RD FLOOR SEATTLE, WA 98104	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	6,000
SOLID GROUND 1501 N 45TH ST SEATTLE, WA 98103	NONE	509(A)(1)OR (A)(2)	PROGRAM SUPPORT	600
SOLID ROCK 4250 E CAMELBACK ROAD STE K260 PHOENIX,AZ 85018	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	400
ST JUDE CHILDREN'S HOSPITAL PO BOX 50 MEMPHIS,TN 38101	NONE	170(B)(1)(A) (III)	PROGRAM SUPPORT	300
STUDENTRND 25806 NE 4TH PLACE SAMMAMISH, WA 98074	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	600
SUSAN G KOMEN 5005 LBJ FREEWAY STE 250 DALLAS,TX 75244	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	200
SWEDISH MEDICAL CENTER FOUNDATION 747 BROADWAY SEATTLE,WA 98122	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	150
THE CONSERVATION FUND 1655 N FORT MYER DR STE 1300 ARLINGTON,VA 22209	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	40
THREE FEET OF SUNSHINE 3421 W LAURELHURST DRIVE NE SEATTLE,WA 98105	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	125

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Recipient Name and address (home or	If recipient is an individual, show any relationship to	Foundation status of recipient	Purpose of grant or contribution	A mount
business)	any foundation manager or substantial contributor			
a Paid during the year				
THREE FEET OF SUNSHINE 3421 W LAURELHURST DRIVE NE SEATTLE,WA 98105	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	500
TUMAINI DRCREEDS OF HOPE PO BOX 2 SLATERVILLE SPRINGS,NY 14881	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	500
UNICEF 125 MAIDEN LANE NEWYORK,NY 10038	NONE	509(A)(1)OR (A)(2)	PROGRAM SUPPORT	4,000
UNION OF CONCERNED SCIENTISTS TWO BRATTLE SQUARE CAMBRIDGE,MA 02138	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	550
UNITED NATIONS FOUNDATION 1800 MASSACHUSETTS AVE NW STE 400 WASHINGTON,DC 20036	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	40
UNITED WAY 701 NORTH FAIRFAX ST ALEXANDRIA,VA 22314	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	40
UNIVERSITY OF OREGON KEN KESEY FOUNDATION 1720 E 13TH AVE STE 410 EUGENE,OR 97403	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	100
UNIVERSITY OF WASHINGTON FOUNDATION 4333 BROOKLYN AVE NE SEATTLE,WA 98195	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	60
WASHINGTON TRAILS ASSOCIATION 705 SECOND AVE STE 300 SEATTLE,WA 98104	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	540
WASHINGTON WOMEN'S FOUNDATION 2100 24TH AVE S 330 SEATTLE,WA 98144	NONE	509(A)(1)OR (A)(2)	PROGRAM SUPPORT	2,500
WATER FOR PEOPLE 6666 WEST QUINCY AVE DENVER,CO 80235	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	50
WE ARE FAMILY FOUNDATION PO BOX 1352 MIDTOWN STATION NEW YORK,NY 10018	NONE	509(A)(1) OR (A)(2)	AUCTION ITEMS	216
WHITTIER ELEMENTARY PTA 1320 NW 75TH STREET SEATTLE,WA 98117	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	100
WIKIMEDIA PO BOX 98204 WASHINGTON,DC 20090	NONE	509(A)(1)OR (A)(2)	PROGRAM SUPPORT	380
WOODINVILLE FAMILY PRESCHOOL PO BOX 125 WOODINVILLE,WA 98072	NONE	170(B)(1)(A) (II)	PROGRAM SUPPORT	100

If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
any foundation manager or substantial contributor	recipient		
NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	2,235
NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	40
NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	100
NONE	509(A)(1)OR (A)(2)	PROGRAM SUPPORT	300
NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	150
	show any relationship to any foundation manager or substantial contributor NONE NONE NONE NONE	show any relationship to any foundation manager or substantial contributor status of recipient NONE 509(A)(1) OR (A)(2) NONE 509(A)(1) OR (A)(2)	show any relationship to any foundation manager or substantial contributor NONE Sog(A)(1) OR (A)(2) NONE Sog(A)(1) OR (A)(2) PROGRAM SUPPORT (A)(2) PROGRAM SUPPORT