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

OMB No. 1545-0052

**2012** 

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 2012, or tax year beginning , 2012, and ending Name of foundation Employer Identification number PROLIANCE SURGEONS FOUNDATION 45-2876067 Number and street (or P.O box number if mail is not delivered to street address) Room/suite Ŕ Telephone number (see the instructions) 805 MADISON STREET 901 (206) 838-2575 City or town ZIP code C If exemption application is pending, check here SEATTLE WA 98104 G Check all that apply: Initial Return of a former public charity Initial return Final return Amended return 2 Foreign organizations meeting the 85% test, check Address change Name change here and attach computation X Section 501(c)(3) exempt private foundation Ħ Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Ε If private foundation status was terminated under section 507(b)(1)(A), check here . . Fair market value of all assets at end of year J Accounting method: X Cash Accrual (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination column (d) must be on cash basis.) under section 507(b)(1)(B), check here . Part Analysis of Revenue and (a) Revenue and (d) Disbursements (b) Net investment (c) Adjusted net Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) expenses per books income income for charitable purposes (cash basis only) (see instructions).) 99,800. Contributions, gifts, grants, etc, received (att sch) 2014 if the foundn is not req to att Sch B Interest on savings and temporary cash investments ... .. .. Dividends and interest from securities. 0 5 a Gross rents . SCANNED DEC b Net rental income or (loss) LA MARKARIO IN TOLEM 6 a Net gain/(loss) from sale of assets not on line 10 Comp. 11 b Gross sales price for all assets on line 6a 通沙尔洛特的 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10 a Gross sales less returns and allowances . . . . b Less Cost of goods sold c Gross profit/(loss) (att sch) . . 11 Other income (attach schedule) Total. Add lines 1 through 11 99,800. ··教学 (13.15)。 / 70.15教 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages ...... 15 Pension plans, employee benefits . 16a Legal fees (attach schedule) .. . **b** Accounting fees (attach sch) . . c Other prof fees (attach sch) . L-1.6c. Stmt 54,172. 54,172 17 Interest 18 Taxes (attach scheduleYsee instrs) Depreciation (attach sch) and depletion . Travel, conferences, and meetings. 21 Printing and publications . 22 Other expenses (attach schedule) See Line 23 Stmt 2,674. 2,674. Total operating and administrative expenses. Add lines 13 through 23. 24 56,846. <u>56,846.</u> Contributions, gifts, grants paid 45,000. 45,000. Total expenses and disbursements. Add lines 24 and 25 . . . . . 101,846. 101,846 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements ... -2,046. b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) Ben Ben

Form 990-PF (2012)

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3

Other increases not included in line 2 (itemize) . .

Add lines 1, 2, and 3 . . . . . . . .

Decreases not included in line 2 (itemize) .

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

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915.

915.

3

4

5

6

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.

Enter qualifying distributions from Part XII, line 4.

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Form 990-PF (2012)

Pa	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		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified perso advisory privileges? If 'Yes,' attach statement (see instructions)	n had	12	 	x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application	on?	13	Х	
	Website address				
14		<u>(206)</u>		-257	15
16	Located at 805 MADISON STREET, SUITE 901 SEATTLE WA ZIP + 4 98 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	104-117	2		- [ -
13	, , , ,	15		•	Ш
16	· · · · · · · · · · · · · · · · · · ·			Yes	No
16	bank, securities, or other financial account in a foreign country?		16	Wa.i	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the name of the foreign country	;			
Pai	TEVIL BE Statements Regarding Activities for Which Form 4720 May Be Required		किस्टर्स्स	3. reports	ht comes
S. Marie	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		酒窯	Yes	No
1 a	a During the year did the foundation (either directly or indirectly):			3	3
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disgualified person?	⊥ ⊠No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes	$\vdash$			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			测速	
	for the benefit or use of a disqualified person)?	<b>⊠</b> 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	П.,			
	of government service, if terminating within 90 days.) Yes	Х Ио			
!	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)?		3521EE	<u>Popp</u>	e e e
	Organizations relying on a current notice regarding disaster assistance check here	- 📋			
(	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	_			建造
	that were not corrected before the first day of the tax year beginning in 2012?	•	1 c	संस्थातक स	X Tengen
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)):				
á	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d	ГП			
	and 6e, Part XIII) for tax year(s) beginning before 2012? Yes	X No			
	If 'Yes,' list the years 20 , 20 , 20 , 20				
ŧ	Are there any years listed in 2a for which the foundation is <b>not</b> 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.)				
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	• • • • • • • • • • • • • • • • • • • •	2 b	yy: 444*	<u>#</u>
	20 , 20 , 20 , 20 , 20				
3:	a Did the foundation hold more than a 2% direct or indirect interest in any business				
٠.	enterprise at any time during the year?	X No			
ŀ	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		1		
	(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4/20, to		200	THE PARTY OF THE P	,
			3 b		<b></b>
4 a	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		Х
		•		PORT I	A SECTION AND ADDRESS OF THE PARTY OF THE PA
i	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		<b>第</b>		
	the tax year beginning in 2012?		4 b		X
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Form 990-PF (2012) PROLIANCE SURGEON		4700 May Da Dan	45-28	76067 Page 6
Part VII-B Statements Regarding Activit		1 4/20 May Be Req	uirea (continuea)	Tracardo, araberasen
5 a During the year did the foundation pay or incur	=	40454.00	П. Г	1
(1) Carry on propaganda, or otherwise attempt	_		Yes X	No
(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registral	lion drive?		Yes X	No No
(3) Provide a grant to an individual for travel, s		•	····X	No No
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	an a charitable, etc, org 4940(d)(2)? (see instruc	anization described ctions)	Yes 🛛	]No
(5) Provide for any purpose other than religiou educational purposes, or for the prevention	n of cruelty to children of	r anımals?		]No
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in (see instructions)?	he transactions fail to quality a current notice regards	ualify under the exception ng disaster assistance	ons · · · · · · · · · · · · · · · · · · ·	. 5 b
Organizations relying on a current notice regar	ding disaster assistance	check here .	▶	
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure respons	ibility for the grant?		Yes	]No
If 'Yes,' attach the statement required by Regul		• •		
•				]No
<b>b</b> Did the foundation, during the year, pay premit If 'Yes' to 6b, file Form 8870.				. 6b X
7 a At any time during the tax year, was the foundable b If 'Yes,' did the foundation receive any proceed				No 7 b
PartVIII Information About Officers, D				
and Contractors	, ,	•	, , ,	
1 List all officers, directors, trustees, foundation		ompensation (see instri	uctions).	
(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
CHARLES A. PETERSON II, MD				
805 MADISON STREET, #901 SEATTLE WA 98104	PRESIDENT 1.00	0.	0.	0.
DAVID G. FITZGERALD				
805 MADISON STREET, #901	VICE PRES/SECRETARY			
SEATTLE WA 98104	1.00	0.	0.	0.
GARY B. MAYBERRY				
805 MADISON STREET, #901	TREASURER	•		_
SEATTLE WA 98104	1.00	0.	0.	0.
2 Compensation of five highest-paid employees	l	uded on line 1 – see ins	structions). If none, en	ler 'NONE.'
(a) Name and address of each employee	(b) Title, and average	(c) Compensation	(d)Contributions to	(e)Expense account,
paid more than \$50,000	hours per week devoted to position	(-,	employee benefit plans and deferred compensation	other allowances
NONE				
				1
		<del></del>		<del> </del>
Total number of other employees paid over \$50,000			<u> </u>	<del></del>
BAA	TEEA0306 12		····	None Form <b>990-PF</b> (2012)

# Form 990-PF (2012) PROLIANCE SURGEONS FOUNDATION 45-2876067 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five hi	ghest-paid independent contractors for professional services (see instructions). If none, ente	er 'NONE.'	
(a)	Name and address of each person paid more than \$50,000 (b) Type of ser	rvice (c) Comp	ensation
NONE			
	<del> </del>		
			<del></del>
			,
-			
Total numbe	r of others receiving over \$50,000 for professional services	🕨	None
Part IX-A9	Summary of Direct Charitable Activities		
Barren Carrie	Journal of British Charles 70 annual of San Charles		
List the foundati	on's four largest direct charitable activities during the tax year. Include relevant statistical information such as the numt d other beneficiaries served, conferences convened, research papers produced, etc	ber of Expe	nses
	d other beneficiaries served, conferences convened, research papers produced, etc		
1			
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see instructions)		
	two largest program-related investments made by the foundation during the tax year on lines in	1 and 2. Amo	bunt
N/A			
			0
2		<del></del>	0.
<b>2</b>			
All other pro	gram-related investments. See instructions.		
3 N/A			•
N/A			
			0.
Total. Add lin	nes 1 through 3	<u> </u>	None
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Form 990-PF (2012) PROLIANCE SURGEONS FOUNDATION 45-2876067 F

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	1 a	1,938.
	• Average of monthly cash balances	1 b	1,930.
	Fair market value of all other assets (see instructions)	1 c	
	Fotal (add lines 1a, b, and c)	1 d	1,938.
	Reduction claimed for blockage or other factors reported on lines 1a and 1c		1,930.
	(attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2 2	
3	Subtract line 2 from line 1d	3	1,938.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	29.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,909.
6	Minimum investment return. Enter 5% of line 5	6	95.
	tXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations		undations
5V: 32	and certain foreign organizations check here ► and do not complete this part.)	ing io	andationio
1	Minimum investment return from Part X, line 6	1	95.
2 8	Tax on investment income for 2012 from Part VI, line 5	72 3	
ŧ	Income tax for 2012. (This does not include the tax from Part VI.) 2b	10300 10300	
•	Add lines 2a and 2b	2 c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	95.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	95.
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	95.
Dai	TXII Qualifying Distributions (see instructions)	·	
(L <sup>®</sup> ài	Control Qualitying Distributions (See Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:  Expenses, contributions, gifts, etc – total from Part I, column (d), line 26		
		1 a	101,846.
ı	Program-related investments – total from Part IX-B	1 b	0.
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:  Suitability test (prior IRS approval required)	1	
		3 a	
A	Cash distribution test (attach the required schedule)	3 b	404 04 5
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	101,846.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	101,846.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the gradient of the section 4940(c) reduction of tax in those years.	e found	

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Form 990-PF (2012)

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

	(a) Corpus	(b) Years prior to 2011	<b>(c)</b> 2011	<b>(d)</b> 2012
1 Distributable amount for 2012 from Part XI, line 7		Berger Commence		95.
2 Undistributed income, if any, as of the end of 2012:			CHILL THE THE	THE SHEET WAS ASSESSED.
a Enter amount for 2011 only	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A Comment of the second	1,119.	
<b>b</b> Total for prior years: 20, 20, 20			LENE SPATTERS	to salar to the
3 Excess distributions carryover, if any, to 2012:				AT TO PART THE AREA
a From 2007	WAR THE STATE OF T			
<b>b</b> From 2008				
<b>c</b> From 2009				
<b>d</b> From 2010		Strain Control of the		
e From 2011 63,539.		製作 19 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
f Total of lines 3a through e	63,539.	\$22 1.4 - 1.2 5 1.	The second section is the second	
4 Qualifying distributions for 2012 from Part	10 Com 30			
XII, line 4: \$101,846.				
a Applied to 2011, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required – see instructions)				
<b>d</b> Applied to 2012 distributable amount	This first the second			32.05 N. 18 " Walt Water 12 18 18 18 18 18 18 18 18 18 18 18 18 18
e Remaining amount distributed out of corpus	101,846.		FINENCIATIONS	FOR A POST PORT THE LOSS OF THE
5 Excess distributions carryover applied to 2012 .	101/010.			enter and a superior of a second section of the
(If an amount appears in column (d), the	ETTS SAME TO ALST	\$1650,4000,000 400		FIT LETTE METETO
same amount must be shown in column (a).)				
6 Enter the net total of each column as				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	165,385.			
b Prior years' undistributed income. Subtract	CANCEL PART CASS	THE THE MALE STREET TO STREET	7 (45 8 1) (48 8 1)	
line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-	<b>建筑</b> 是1000000000000000000000000000000000000			
ed income for which a notice of deficiency has been issued, or on which the section				
4942(a) tax has been previously assessed		ľ		
d Subtract line 6c from line 6b. Taxable	TARREST AND			MUZG SZ JOHONG PE
amount - see instructions		0.		
e Undistributed income for 2011. Subtract line 4a from				
line 2a. Taxable amount — see instructions			1,119.	
f Hadadah tadan ayar 6 0010 O Ha		(内) 新达拉拉克(特别	<b>多名的是一种</b>	2 0 14 7 7 7 7 7 7
f Undistributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2013				95.
7 Amounts treated as distributions out of	,		等 12 大學 12 美国	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(q)(3)				
(see instructions)		ASSESSED FOR THE PARTY OF THE P		
8 Excess distributions carryover from 2007 not				智慧者是这样的
applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2013.			MICHAEL ST.	<b>经验的证据</b>
Subtract lines 7 and 8 from line 6a	165,385.			
10 Analysis of line 9:				
a Excess from 2008 0.	The state of the s	建设经验的代码的		
b Excess from 2009 0				<b>表语的数字图</b> 含
c Excess from 2010 0.		為自己的學術的問題		
d Excess from 2011 63,539.				AND CONTRACT STATES
e Excess from 2012 . 101,846.	1. 27. 14. 12. 14. 14. 14.	Little Land Co. Co.		<b>对社会是是特别是</b>

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Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A						
1 a If the foundation has received a ruling or de is effective for 2012, enter the date of the ru	ılıng			_ <u></u>		
<b>b</b> Check box to indicate whether the foundation		ating foundation de		4942(j)(3) or	4942()(5)	
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	·		
investment return from Part X for each year listed	(a) 2012	<b>(b)</b> 2011	(c) 2010	(d) 2009	(e) Total	
<b>b</b> 85% of line 2a						
c Qualifying distributions from Part XII, line 4 for each year listed						
d Amounts included in line 2c not used directly for active conduct of exempt activities						
e 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:						
a '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						
c 'Support' alternative test — enter:						
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)						
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)						
(3) Largest amount of support from an exempt organization						
(4) Gross investment income						
Supplementary Information (assets at any time during the	(Complete this e year – see in	part only if the structions.)	foundation had	\$5,000 or more	in	
Information Regarding Foundation Manage     a List any managers of the foundation who had close of any tax year (but only if they have a NONE	ve contributed mo	re than 2% of the to nan \$5,000). (See s	otal contributions receetion 507(d)(2).)	eived by the foundation	on before the	
b List any managers of the foundation who ow	in 10% or more of	the stock of a corp	oration (or an equal)	/ large pertion of the	ownership of	
a partnership or other entity) of which the fo	oundation has a 10	% or greater interes	st	y large portion of the	ownership of	
NONE						
2 Information Regarding Contribution, Grant Check here  If the foundation only marequests for funds. If the foundation makes complete items 2a, b, c, and d.	akes contributions	to preselected char	itable organizations	and does not accept zations under other c	unsolicited onditions,	
a The name, address, and telephone number	or e-mail of the pe	erson to whom appli	ications should be ac	ldressed:		
N/A						
N/A						
N/A	WA 9810					
b The form in which applications should be su N/A	omitted and inforn	nation and materials	s tney should include	:		
c Any submission deadlines:			<del></del> -			
N/A						
d Any restrictions or limitations on awards, su	ich as by geograph	ncal areas, charitat	ole fields, kinds of ins	stitutions, or other fac	tors:	
N/A						

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment f recipient is an individual, show any relationship to any foundation manager or substantial contributor oundation Recipient Purpose of grant or contribution status of Amount recipient Name and address (home or business) a Paid during the year HEARTBEAT SERVING WOUNDED WARRIORS PO BOX 704 WA 98291 SNOHOMISH PC 45,000. ASSISTANCE TO SERVICEMEN 45,000. b Approved for future payment Total 3 b

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

Enter gross	s amounts unless otherwise indicated.	Unrelate	ed business income	Exclude	d by section 512, 513, or 514	(e)
1 Progr	ram service revenue.	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions.)
a a	ram service revenue.			code	<u> </u>	
ь ——	<del></del>	-		<del> </del>		
		<del> </del>		<del>                                     </del>		
d				<u> </u>		<del> </del>
e				-		
f		-		<u> </u>		
g Fees	and contracts from government agencies .		· · · · · · · · · · · · · · · · · · ·	<del> </del>		
-	bership dues and assessments					
	et on savings and temporary cash investments					
	ends and interest from securities					
5 Net r	ental income or (loss) from real estate:	34.35.4		7.4.72.1-89	以下15000000000000000000000000000000000000	
	financed property	1 1 10 N/M	GIL VALLE S 524 355 1 1 100 2	1 13.2 F70 C	St. A. St. St. St. St. St. St. St. St. St. St	2 x 36 0 25
	lebt-financed property			<del>                                     </del>		
	ntal income or (loss) from personal property			<del></del>		-
	r investment income					
	r (loss) from sales of assets other than inventory .					
	ncome or (loss) from special events					
	s profit or (loss) from sales of inventory				<del></del>	
	r revenue:	100000000000000000000000000000000000000		Water Chara	<b>医型子宫内部 基础器 并为检查</b>	
a	Tovolius.	CHAP FAPLY (up 1 "T" }	man to the configuration with the same of the property of the	2027,885,374	Para San San San San San San San San San Sa	BBO BURNA, STILLING LANGER
ь		-			· · · · · · · · · · · · · · · · · · ·	
c						
d						
e		<u> </u>				
12 Subto	otal. Add columns (b), (d), and (e)	[3] 47 J.S. 71		LEC 3		
	. Add line 12, columns (b), (d), and (e)	1 2 Charles of Services of				
	sheet in line 13 instructions to verify calculation					
			inhunant of Evenes	4 D		<del></del>
<u>rariyyı</u>	Relationship of Activities to the	Accomp	isnment of Exemp	t Purp	oses	
Line No.	Explain below how each activity for which ind accomplishment of the foundation's exempt	come is repo	orted in column (e) of P	art XVI-A	A contributed importantly	y to the
<b>T</b>	accomplishment of the foundation's exempt	purposes (ot	ther than by providing fu	inds for	such purposes). (See in	structions.)
					·	
· · · - · ·			<del>-</del> .			
			- ··			
			<u> </u>			
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## Form 990-PF (2012) PROLIANCE SURGEONS FOUNDATION 45-2876067 Part XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		<del></del>									
do re a To (1 (2 b O (1 (2 (3 (4 (5	escribed ransfers ) Cash ) Othe ther trail ) Sales ) Purol ) Rent ) Reim ) Loan ) Perfo	rganization directly d in section 501(c) o political organiza from the reporting r assets s of assets to a noi hases of assets fro al of facilities, equi bursement arrang s or loan guarante ormance of service of facilities, equipm	of the Code (other tions?  groundation to a control  nucharitable exemple a noncharitable pment, or other a ements es	pt organization e exempt organization or fundraising so	on (c)(3) organization	ations) or in	section 527,		1 a (1) 1 a (2) 1 b (1) 1 b (2) 1 b (3) 1 b (4) 1 b (5) 1 b (6)	Yes	X X X X X X X X
th	e aoods	wer to any of the a s, other assets, or action or sharing a	services aiven by	the reporting fou	indation. If the fo	oundation r	eceived less tha	an fair market va	et value of lue in	<u> </u>	
(a) Line	no.	(b) Amount involved	(c) Name	of noncharitable exer	npt organization	(d)	Description of trans	sfers, transactions, a	and sharing arran	gements	
de	escribed	ndation directly or	of the Code (othe	d with, or related or than section 50	to, one or more 1(c)(3)) or in se	tax-exemp	it organizations		· · · · · · Yes	× ×	
b If		omplete the followi	<u> </u>			· · · · · · · · ·					
<del></del>	(a)	Name of organizat	tion	(b) Type	of organization		(c)	Description of re	elationship		
Sign Here	correct, a	inalties of perjury, I declar and complete Declaration	ire that I have examine in of preparer (other tha	d this return, including in taxpayer) is based or	accompanying sched all information of wi	nich preparer h	nas any knowledge	st of my knowledge ar	May the I this return preparer (see instr	RS discus with the shown be uctions)?	low
Paid Prepa	rer	Pnnt/Type preparer's na DANA HOWELI Firm's name Firm's address	OSBORNE RO	Preparer's SUBBINS & BUILDING EAST	THER, PLL	C CPAS	Date 06/13/14	self-employed	PTIN P00742	Yes	No I
Jse C	nıy	1 1111 3 0001633	SALT LAKE				17-4490	Phone no (8	01) 200 (	1220	
BAA		<u> </u>	SALI LAKE	CIII	· · · · · ·	UT 841	17-4480	radie io (8	01) 308-0 Form 990		012\
									EOHH 330	,-F I (Z)	U161

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

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

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

OMB No 1545-0047

2012

Name of the organization		Employer Identification number
PROLIANCE SURGEONS FOUNDATION	NN	45-2876067
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated a	as a private foundation
	527 political organization	
Form 990-PF	X 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 G	eneral Rule or a Special Rule	
, ,	ganization can check boxes for both the General Rule and	a Special Rule. See instructions
	garilization can check boxes for both the deficial Nuie and	a Special Rule See Instituctions.
General Rule		
For an organization filing Form 990, 990-E contributor. (Complete Parts I and II.)	Z, or 990-PF that received, during the year, \$5,000 or mo	re (in money or property) from any one
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 receive	d from any one contributor, during the year, a contribution t VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts	of the greater of (1) \$5,000 or
For a section 501(c)(7), (8), or (10) organi	zation filing Form 990 or 990-EZ that received from any or	ne contributor, during the year,
total contributions of more than \$1,000 for the prevention of cruelty to children or anii	use exclusively for religious, charitable, scientific, literary mals. Complete Parts I, II, and III.	, or educational purposes, or
For a section 501(c)(7), (8), or (10) organi	zation filing Form 990 or 990-EZ that received from any or	ne contributor, during the year,
contributions for use exclusively for religio	us, charitable, etc, purposes, but these contributions did n contributions that were received during the year for an <i>ex</i> o	ot total to more than \$1,000.
purpose. Do not complete any of the parts	unless the General Rule applies to this organization beca	use 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 <b>must</b>
answer 'No' on Part IV, line 2, of its Form 990; or cl meet the filing requirements of Schedule B (Fo	heck the box on line H of its Form 990-EZ or on Part I, line 2, of i	ts Form 990-PF, to certify that it does not
BAA For Paperwork Reduction Act Notice, se	ee the Instructions for Form 990, 990FZ. Schedule	e <b>B</b> (Form 990, 990-EZ, or 990-PF) (2012)
or 990-PF.	Outloading	( 5 550, 550, 0, 550 11) (2012)

	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2012)	Page	1 of 1 of Part1
Name of org	ANCE SURGEONS FOUNDATION	' '	r identification number 876067
Part le	Contributors (see instructions). Use duplicate copies of Part I if additional space is need	eded.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PROLIANCE SURGEONS, INC.  805 MADISON STREET SUITE 901  SEATTLE WA 98104	\$3 <u>6</u> ,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total	(d) Type of contribution
2	BPI MEDICAL  4813 PACIFIC HWY E  TACOMA WA 98424	contributions	Person X Payroll
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	US BANK PRIVATE CLIENT GROUP PO BOX 1800 SAINT PAUL MN 55101	\$ <u>5,000.</u>	Person X Payroll Noncash  (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 Payroll 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 Payroll Noncash  (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 Payroll Noncash

(Complete Part II if there is a noncash contribution.)

Form 990-PF, Page 1, Part I, Line 23

	Li	ne	23	Stmt
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Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
BANK FEES	1,201.			1,201.
ADVERTISING	1,473.			1,473.

2,674. Total 2,674.

Form 990-PF, Page 1, Part I Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
GOLF CORPORATE SOLUT	ORGANIZED GOLF TOURNAM	54,172.			54,172.

Total 54,172. 54,172.