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

2012

_			venue Service N dar year 2012 or tax year		to able to use a copy of this	return to satis and en		MAR 31, 2013	Open to public Inspection
_			foundation					A Employer identification	
	T	ΗE	SELINGER-SH	ONE FOUNDAT	ION				
	C	<u>/o</u>	DR. SAMUEL	SELINGER				91-6481161	
ı			•	if mail is not delivered to street	address)		Room/suite	B Telephone number	
_	5	44	1 S. QUAIL F	RIDGE RD.				(509) 624-	2805
(-		own, state, and ZIP code					C If exemption application is p	ending, check here
-			· · · · · · · · · · · · · · · · · · ·	9223					. —
G	C	heck	all that apply	Initial return	Initial return of a fo	rmer public cl	harity	D 1. Foreign organizations	, check here
•			لـــا	Final return	Amended return			Foreign organizations me check here and attach co	eting the 85% test,
-	_	.	.	Address change	Name change			1	
п [U	_	type of organization ction 4947(a)(1) nonexem	X Section 501(c)(3) ex	empt private roundation Other taxable private founda	ıtıan.		E If private foundation state	
_ <u>_</u> _	Fa		rket value of all assets at (Accru	ıal	under section 507(b)(1)	
'			Part II, col. (c), line 16)	· —	her (specify)	L ACCIO	101	F If the foundation is in a (under section 507(b)(1)	
	>				mn (d) must be on cash t	pasis.)		under section sor(b)(1)	(B), check held
П					(a) Revenue and	(b) Net inv	vestment	(c) Adjusted net	(d) Disbursements
			Analysis of Revenue and (The total of amounts in colu- necessarily equal the amount	imns (b), (c), and (d) may not its in column (a))	expenses per books	inco		income	for charitable purposes (cash basis only)
		1	Contributions, gifts, grant	_	139,699.				
		2		on is not required to attach Sch. B	,	,			
		3	Interest on savings and tempo cash investments	orary	34.		34.		STATEMENT 1
		4	Dividends and interest fro	om securities	49,457.	4	9,457.		STATEMENT 2
		5a	Gross rents			,			
~		b	Net rental income or (loss)		40.001	1 1'.1		······································	
6 2013	e	6a	Net gain or (loss) from sale of Gross sales price for all		49,301.			L REC	FIVED.
2	evenue	_b	assets on line 6a	733,161.		1	9,301.		MI Y hasher ()
9	Ŗ	_	Capital gain net income (from			4	9,301.	10-1	2 2013 9
		8	Net short-term capital gai	ın	. '		·······	₩UV	2 2013 9
MOV		9 10a	Income modifications Gross sales less returns and allowances	1				OGD	EN IIT
		_	Less Cost of goods sold		·····				
SCANNED			Gross profit or (loss)						
٤		11	Other income						
ड़्र₋		12	Total. Add lines 1 throug	th 11	238,491.	9	8,792.		
୪		13	Compensation of officers, dire	ectors, trustees, etc	0.		0.	0.	0.
		14	Other employee salaries a	=					
	S	15	Pension plans, employee		220		1.05	ļ	1.65
	nse		Legal fees	STMT 3	330.		165.		
	хре		Accounting fees	STMT 4	8,575.		4,287.		4,288.
	e E		Other professional fees Interest						
	aţi	18	Taxes	STMT 5	1,118.		1,118.	0.	0.
	Administrative Expenses	19	Depreciation and depletic		1,1100				
	Ē	20	Occupancy	,,,					
^	Adı	21	Travel, conferences, and	meetings	3,234.		1,617.	0.	1,617.
	and and	22	Printing and publications	•					
•	ŋg	23	Other expenses	STMT 6	9,910.		9,910.	0.	0.
	Operating and	24	Total operating and adm	ninistrative		_			
	þe		expenses. Add lines 13 t	•	23,167.	1	7 , 097.	0.	6,070. 49,205.
	J	25	Contributions, gifts, gran		49,205.				49,205.
		26	Total expenses and dish	oursements.	72 272		7 007	. 0.	55 275
_		07	Add lines 24 and 25	. 10	72,372.	<u>_</u>	7,097	V •	55,275.
			Subtract line 26 from line		166,119.				
			Excess of revenue over exper Net investment income (100/110	8	1,695.		
			Adjusted net income (if n					0.	
_									

LHA For Paperwork Reduction Act Notice, see instructions.

٠	000 00	(0040)	
·orm	990-PF	(2012)	

C/O DR. SAMUEL SELINGER

91-6481161

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п		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	20,986.	39,917.	39,917.
	3	Accounts receivable			
		Less allowance for doubtful accounts			
	4	Pledges receivable ►			
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other		, and the second	
		disqualified persons			
	7	Other notes and loans receivable			
•		Less allowance for doubtful accounts			
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ř	10a	Investments - U S and state government obligations			<u> </u>
	b	Investments - corporate stock STMT 7	37,670.	0.	0.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			· · · · · · · · · · · · · · · · · · ·
	13	Investments - other STMT 8	1,416,203.	1,601,061.	1,670,261.
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	15	Other assets (describe)			
			1 474 050	1 640 070	1 710 170
_	16		1,4/4,859.	1,640,978.	1,/10,1/8.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ies	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Lia	21	Mortgages and other notes payable			
	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
Š	24	Unrestricted			
au	25	Temporarily restricted		_	
Ba	26	Permanently restricted			
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds	0.	0.	
Set	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0.	0.	
I As	29	Retained earnings, accumulated income, endowment, or other funds	1,474,859.	1,640,978.	
-S	30	Total net assets or fund balances	1,474,859.	1,640,978.	
			1 474 050	1 640 070	
_	31	Total liabilities and net assets/fund balances	1,474,859.	1,640,978.	
F	art	III Analysis of Changes in Net Assets or Fund E	Balances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	e 30		
•		st agree with end-of-year figure reported on prior year's return)		1	1,474,859.
2	•	r amount from Part I, line 27a		2	166,119.
3		r increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3		4	1,640,978.
5		reases not included in line 2 (itemize)		5	0.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	column (b), line 30	6	1,640,978.

	d Losses for Tax on In		Income			1-040	1101	Page 3
	e the kind(s) of property sold (e g nouse, or common stock, 200 shs			(b) How acquired P - Purchase D - Donation	(c) Date a		(d) Date (mo., da	
1a								
b SEE ATTACHED S	STATEMENTS							
					,			
_d								
(e) Gross sales price	(1) Depreciation allowed (or allowable)		it or other basis xpense of sale	:		un or (loss) (f) minus (g)	
a	· · · · · · · · · · · · · · · · · · ·		·	-				
b	, ,							
С								
d			500 06				4.0	201
e 733,161.			683,86					,301
Complete only for assets showing of		r 				ol (h) gain i ot less than		
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (ı) col (į), if any			(from col (f		
<u>a</u>			-					
b								
d d							· · · · · —	
8							49	,301
	∫ If gain, also enter	ın Part I lina		7 7				
2 Capital gain net income or (net capit	al loss) { If (loss), enter -0-	- ın Part I, line	7) 2			49	,301
3 Net short-term capital gain or (loss) if gain, also enter in Part I, line 8, collif (loss), enter -0- in Part I, line 8		id (6)		} ,		N/A		
	der Section 4940(e) for	Reduced	Tax on Net	Investment Inc	come	21,722		
(For optional use by domestic private fo			-					
If section 4940(d)(2) applies, leave this				,				
Was the foundation liable for the section If "Yes," the foundation does not qualify Tenter the appropriate amount in eac	under section 4940(e) Do not co	mplete this pa	rt				Yes	X No
1 Enter the appropriate amount in each		istructions be	iore making any e				(d)	
Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying dis	tributions	Net value of no	(c) Incharitable-use assets	; ,	Dıstrıb (col (b) dıvı	(d) ution ratio	(c))
2011	111/	3,833.		1,062,433		(00. (5) 0		22432
2010		0,747.		508,845				4077
2009		0,263.		398,709).			50822
2008		1,570.		402,164				5363
2007	1	8,732.		441,342	2.		.04	4244
2 Total of line 1, column (d)					2		.2	1010
3 Average distribution ratio for the 5-y	ear base period - divide the total (on line 2 by 5,	or by the number	of years				
the foundation has been in existence	e if less than 5 years				3		.04	4202
4 Enter the net value of noncharitable-	use assets for 2012 from Part X,	line 5			4		1,591	,312
5 Multiply line 4 by line 3					5		66	, 869
6 Enter 1% of net investment income	(1% of Part I, line 27b)				6			817
7 Add lines 5 and 6					7		67	,686
8 Enter qualifying distributions from P	art XII, line 4				8		55	,275
If line 8 is equal to or greater than lin See the Part VI instructions		1b, and comp	plete that part usin	ng a 1% tax rate				

THE SELINGER-SHONE FOUNDATION

Forn	1 990-PF (2012) C/O DR. SAMUEL SELINGER 91-648	1161		Page 4
_	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	•••••••••••••••••••••••••••••••••••••••		
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	•	1,6	34.
	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		1,6	
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-		1,6	34.
6	Credits/Payments			
а	2012 estimated tax payments and 2011 overpayment credited to 2012 <u>6a</u> 1,000 •			
t	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c 2,500.			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		3,5	00.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			<u>2.</u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1,8	64.
11				0.
	art VII-A Statements Regarding Activities			
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	
	any political campaign?	1a		X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b	,	<u> </u>
	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.			v
	Did the foundation file Form 1120-POL for this year?	1c		X
0	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 •			
ε	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers > \$:	Х
Z	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		
•	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		:	Х
4.	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3 4a		X
	of the roundation have difference dusiness gross income of \$1,000 or findle during the year? N/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
•	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
٠	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?	7	X	
•	If "Yes," complete Part II, col. (c), and Part XV.			
88	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	WA			
t	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	.		
	of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses STMT 9	10	X	

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THE SELINGER-SHONE FOUNDATION

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	rt 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?	13	X	
	Website address ► N/A			
14	The books are in care of ► DR. SAMUEL L. SELINGER Telephone no ► (509)	624	<u>-28</u>	05
	Located at ► 5441 S. QUAIL RIDGE RD., SPOKANE, WA ZIP+4 ► 95	1223		
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	N	/A	
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank,	.	Yes	No
	securities, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign			
	country	<u> </u>		
Pε	art 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
1 a	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? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes 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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	ıf 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)			
t	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)?	1b	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u>X</u>
	Organizations relying on a current notice regarding disaster assistance check here			
0	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?	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))			
ê	1 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?	1		
	If "Yes," list the years \(\sum_{} \),	'		
ł	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) N/A		•	
	• • •	2b		
(If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
٠.	Dut the foundation held many them 2000 downton and and the second many through			
38	I Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No			
	·			
	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.) N/A	26		
4	· · · · · · · · · · · · · · · · · · ·	3b	ļ	X
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	.,,	
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	4h	•	x

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

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Part VIII Information About Officers, Directors, Trustees, Foundation Management VIII Paid Employees, and Contractors (continued)	jers, Highly	
3 Five highest-paid independent contractors for professional services. 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 services)	• 0
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		Expenses
1 N/A		
2		
3		
	-	
4		
· · · · · · · · · · · · · · · · · · ·		
Part IX-B Summary of Program-Related Investments		
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.
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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
-	Average monthly fair market value of securities	1a	1,567,578.
b		1b	1,567,578. 47,967.
-	Fair market value of all other assets	10	· · · · · · · · · · · · · · · · · · ·
d	Total (add lines 1a, b, and c)	1d	1,615,545.
_	Reduction claimed for blockage or other factors reported on lines 1a and		<u> </u>
·	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,615,545.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	24,233.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,591,312.
6_	Minimum investment return. Enter 5% of line 5	6	79,566.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	79,566.
2a	1 1 224		
b	Income tax for 2012 (This does not include the tax from Part VI)	1	
C	Add lines 2a and 2b	2c	1,634.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,634. 77,932.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	77,932.
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	77,932.
	art XII Qualifying Distributions (see instructions)	· · · · · · · · · · · · · · · · · · ·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		55 275
a		1a	55,275. 0.
	Program-related investments - total from Part IX-B	1b 2	
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		
а	A contract of the contract of	3a	
_	Cash distribution test (attach the required schedule)	3b	55,275.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	0.
e	Income Enter 1% of Part I, line 27b	6	55,275.
6	Adjusted qualifying distributions Subtract line 5 from line 4	<u> </u>	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years	quannes 10	A the section

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Part XIII	Undistributed	Income	(see instructions

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,				
line 7				77,932.
2 Undistributed income, if any, as of the end of 2012	'aa',i		into con comensanto la con-	
a Enter amount for 2011 only			48,996.	
b Total for prior years	· · · · · · · · · · · · · · · · · · ·			——————————————————————————————————————
,,		0.		
3 Excess distributions carryover, if any, to 2012.		11. 11. 11. 11. 11. 11. 11. 11. 11. 11.		
a From 2007				
b From 2008				
c From 2009				
d From 2010				
e From 2011				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2012 from				
Part XII, line 4 ▶ \$55,275 .				
a Applied to 2011, but not more than line 2a			48,996.	
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 2012 distributable amount				6,279.
e Remaining amount distributed out of corpus	0.		, , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·
5 Excess distributions carryover applied to 2012 (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:				
& 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 2011 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2012 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2013	<u> </u>			71,653.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			ļ
8 Excess distributions carryover from 2007				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2013.				
Subtract lines 7 and 8 from line 6a	0.			ļ
O Analysis of line 9				
a Excess from 2008				
b Excess from 2009				
c Excess from 2010				
d Excess from 2011				
e Excess from 2012	·	L		Form 000 DE (2012)

	SAMUEL SEL		I A sussetion (I)		OTIOI Page 10
Part XIV Private Operating F	·		I·A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo		-	▶ └──		
b Check box to indicate whether the found		ng foundation described		4942(J)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	0.0044	Prior 3 years	(1) 0000	
income from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
 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			<u> </u>	<u> </u>	
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					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during t					
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh	o have contributed more	than 2% of the total con	tributions received by the	e foundation before the clo	se of any tax
year (but only if they have contributed r	nore than \$5,000) (See s	section 507(d)(2))			
NONE					
b List any managers of the foundation wh			(or an equally large port	ion of the ownership of a p	artnership or
other entity) of which the foundation ha	s a 10% or greater intere	st			
NONE					
2 Information Regarding Contribut					
Check here ► if the foundation of					
the foundation makes gifts, grants, etc	·			omplete items za, b, c, and	J U
a The name, address, and telephone num	ber or e-mail of the perso	on to whom applications	should be addressed		
SEE STATEMENT 10					
b The form in which applications should t	pe submitted and informa	ition and materials they s	nould include		
c Any submission deadlines					
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields	, kinds of institutions, or	other factors	
		_	_		

C/O DR. SAMUEL SELINGER

91-6481161

Page 11

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) recipient or substantial contributor a Paid during the year COMMUNITY COLLEGES OF SPOKANE NONE PUBLIC CHARITY PROVIDE FUNDING FOR **FOUNDATION** SCHOLARSHIP PROGRAMS 501 N RIVERPOINT BLVD 9,000. SPOKANE, WA 99217-6000 EASTERN WASHINGTON UNIVERSITY NONE PUBLIC CHARITY PROVIDE FUNDING FOR FOUNDATION SCHOLARSHIP PROGRAMS 102 HARGREAVES HALL CHENEY, WA 99004 5,000. HUMANITIES WA NONE PUBLIC CHARITY PROVIDE FUNDING TO 1204 MINOR AVE IMRPOVE INDIVIDUAL AND SEATTLE, WA 98101 COMMUNITY LIFE THROUGH PUBLIC PROGRAMS THAT INTERPRET CULTURE AND 500. JOHNS HOPKINS MEDICAL SCHOOL NONE PUBLIC CHARITY IMPROVE HEALTH BY 3400 NORTH CHARLES ST. SETTING THE STANDARD BALTIMORE, MD 21218-2696 OF EXCELLENCE IN MEDICAL EDUCATION 1,000. KPBX PUBLIC RADIO NONE PUBLIC CHARITY SUPPORT ARTISTIC, 2319 N. MONROE ST. EDUCATIONAL AND SPOKANE, WA 99205-4586 INFORMATION PROGRAMMING 1,000. SEE CONTINUATION SHEET(S) **▶** 3a Total 49,205. b Approved for future payment NONE 0. Total **▶** 3b

Form 990-PF (2012)

er gross amounts unless otherwise indicated	Unrelated	ousiness income		ded by section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
ı		·			
	1 1				
Fees and contracts from government agencies					
Nembership dues and assessments		-			
nterest on savings and temporary cash					
nvestments			14	34.	
Dividends and interest from securities			14		
let rental income or (loss) from real estate		<u> </u>			
Debt-financed property					
Not debt-financed property		* · · · · · · · · · · · · · · · · · · ·	<u> </u>		
let rental income or (loss) from personal		-			
property					
Other investment income					
Gain or (loss) from sales of assets other			1		
han inventory			18	49,301.	
let income or (loss) from special events					
Gross profit or (loss) from sales of inventory	-			-	
Other revenue					
1 1			<u> </u>		
	1 1		<u> </u>		
	1		1		
			 -		
Subtotal Add columns (b), (d), and (e)		0	•	98,792.	
otal. Add line 12, columns (b), (d), and (e)					98,7
worksheet in line 13 instructions to verify calculation	ins)				
rt XVI-B Relationship of Activit	•	anlishment of F	Evamn	t Durnoege	
KINTIO DEIGHOUSHID OF WORKIN			-vellih		
	h income is reported in	column (e) of Part XVI	-A contril	outed importantly to the accom	plishment of
e No. Explain below how each activity for which					
		s for such purposes)			
ne No. Explain below how each activity for which		s for such purposes)			
e No. Explain below how each activity for which		s for such purposes)			
e No. Explain below how each activity for which		s for such purposes)			
e No. Explain below how each activity for which		s for such purposes)			
e No. Explain below how each activity for which		s for such purposes)			
e No. Explain below how each activity for which		s for such purposes)			
e No. Explain below how each activity for which		s for such purposes)			
e No. Explain below how each activity for which		s for such purposes)			
e No. Explain below how each activity for which		s for such purposes)			
e No. Explain below how each activity for which		s for such purposes)			
ne No. Explain below how each activity for which		s for such purposes)			
ne No. Explain below how each activity for which		s for such purposes)			
e No. Explain below how each activity for which		s for such purposes)			

223621 12-05-12

Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of Yes No 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 1a(1) (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c 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 X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship 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 nd complete. Decialation of preparer (other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below (see instr)? Sign Here 11/6/ CO-TRUSTEE X Yes Signature of officer or trustee Title Print/Type preparer's name Preparer's signature Date Check ____ PTIN self-employed 11-1-13 Paid ANDREW J. MCDIRMID P00227045 **Preparer** Firm's name ► MCDIRMID, MIKKELSEN & SECREST, Firm's EIN ► 91-1078087 Use Only Firm's address ▶ 926 W. SPRAGUE AVE, STE 300

Form **990-PF** (2012)

509.747.6154

Phone no

SPOKANE, WA 99201.4000

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

2012

TH	E SELINGER-SHONE FOUNDATION	
C/		91-6481161
Organization type (check o	ne):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
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	
	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ile. See instructions.
General Rule		
X For an organization contributor. Comp	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in m lete Parts I and II.	oney or property) from any one
Special Rules		
509(a)(1) and 170(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the o i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	
total contributions	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contri of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, or edi cruelty to children or animals. Complete Parts I, II, and III.	
contributions for u If this box is check purpose. Do not c	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contribes exclusively for religious, charitable, etc., purposes, but these contributions did not to sed, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the General Rule applies to this organization because re, etc., contributions of \$5,000 or more during the year	tal to more than \$1,000. ely religious, charitable, etc.,

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

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).

Name of organization
THE SELINGER-SHONE FOUNDATION
C/O DR. SAMUEL SELINGER

Employer identification number 91–6481161

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THE STELLA L. SELINGER CHARITABLE LEAD TRUST 5441 S. QUAIL RIDGE RD. SPOKANE, WA 99223	\$ <u>139,699.</u>	Person X Payroll
(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 Occupate Part II if there is a noncash contribution.)

Name of organization THE SELINGER-SHONE FOUNDATION C/O DR. SAMUEL SELINGER

Employer identification number

91-6481161

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

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

IME Of Orgai HE SEI	nization LINGER-SHONE FOUNDATION		Employer identification number
O DR	. SAMUEL SELINGER		91-6481161
art III	Exclusively religious, charitable, etc., individu year. Complete columns (a) through (e) and the fit the total of exclusively religious, charitable, etc., c Use duplicate copies of Part III if additional s	ollowing line entry. For organization on the second contributions of \$1,000 or less for	c)(7), (8), or (10) organizations that total more than \$1,000 for toons completing Part III, enter rithe year (Enter this information once)
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	ft
-	Transferee's name, address, and a	ZIP + 4	Relationship of transferor to transferee
a) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
-		(e) Transfer of gif	ft
-	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee
-			
n) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
— ·			
		(e) Transfer of gif	ft
	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 gif	ft
	Transferee's name, address, and	-	Relationship of transferor to transferee

Part IV Capital Gains and Los	sses for Tax on Investment Income		
	describe the kind(s) of property solo		(b) How acquired P - Purchase Companies (c) Date acquired Companies (mo, day, yr) (mo, day, yr)
1a ANADARKO PETRO	LEUM CORP		P 05/10/1110/11/12
b BLACKROCK GLOB			P 08/24/11/10/15/12
c BLACKROCK GLOB	P 08/26/11/10/15/12		
d CARRIZO OIL & O			P 07/18/1110/11/12
e CHESAPEAKE ENE			P 06/20/1105/04/12
† CONOCOPHILLIPS			P 07/20/11/10/11/12
g CONTINENTAL RE	SOURCES	P 06/14/11/10/11/12	
	OBAL CLASS I		P 11/18/1110/15/12
HERBALIFE LTD			P 02/24/1110/11/12
HERBALIFE LTD			P 05/18/1110/11/12
k IVY ASSET STRA	TEGY		P 08/24/1110/09/12
I IVY ASSET STRA	TEGY		P 08/26/11/10/09/12
m IVY ASSET STRA	TEGY		P 09/16/11/10/09/12
n IVY ASSET STRA	TEGY		P 10/20/1110/09/12
0 IVY ASSET STRA	TEGY		P 12/09/1110/09/12
	(f) Depreciation allowed	(g) Cost or other basis	(h) Gain or (loss)
(e) Gross sales price	(or allowable)	plus expense of sale	(e) plus (f) minus (g)
a 1,040.		1,126.	<86.>
b 62,224.		60,000.	2,224.
c 28,232.		26,993.	1,239.
d 2,509.		4,145.	<1,636.>
e 3,953.		5,767.	<1,814.>
f 5,778.		5,904.	<126.>
g 1,888.		1,532.	356.
h 98,359.		91,479.	6,880.
10,410.		7,615.	2,795.
2,602.	<u> </u>	2,680.	<78.>
k 64,948.	<u> </u>	60,000.	4,948.
109,683.		100,000.	9,683.
m 146,378.		137,000.	9,378.
n 111,791.		100,000.	11,791.
0 6,275.	<u> </u>	5,618.	657.
Complete only for assets showing	ng gain in column (h) and owned by	the foundation on 12/31/69	(I) Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			<86.>
b			2,224.
С			1,239.
d			<1,636.>
е			<1,814.>
f			<126.>
g			356.
h			6,880.
1			2,795.
J			<78.>
k			4,948.
I.			9,683.
m			9,378.
n			11,791.
0			657.
	. 14	ria Dart I lan 7	
2 Capital gain net income or (net ca	ipital loss) { If gain, also enter "-(r in Part I, line 7 0-" in Part I, line 7	2
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) ar	\	
If gain, also enter in Part I, line 8,		}	
If (loss), enter "-0-" in Part I, line 8		<i>J</i>	3

Part IV Capital Gains and Los	ses for Tax on Investment Income				
(a) List and 2-story bri	describe the kind(s) of property solution warehouse, or common stock, 20	d, e g , real estate, 00 shs MLC Co	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a IVY ASSET STRAT	ГЕGY		P	02/02/11	10/09/12
b NATIONAL OILWEI			P	05/16/11	
c NATIONAL OILWEI		-	P	06/01/11	
d OCCIDENTAL PETH	ROLEUM CORP		P	05/10/11	
θ PHILIPS 66			P	07/15/11	
f SANDRIDGE ENERG	3Y INC		P	05/24/11	<u> 10/11/12</u>
g					
<u>h</u>					
<u>k</u>					
<u>m</u>					
<u>n</u>					
0	/6) Depression - 11 - 14	(a) Oaak an akkantoo o	<u>l</u>) County (15)	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) plus (f) minus (g)	
a 67,527.		65,100.			2,427.
b 4,014.		3,552.			462.
c 1,606.		1,449.			157.
d 848.		1,059.			<211.>
e 2,365.		1,754.			611.
f 731.		1,087.			<356.>
9					
<u>h</u>					
1					
k				•	
1					
m					
n					
0					
	g gain in column (h) and owned by	the foundation on 12/31/69	(I) Los	sses (from col (h))	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	Gains (excess	of col (h) gain ove not less than "-0-")	rcol (k),
a					2,427.
b					462.
С					157.
d					<211.>
е					611.
ſ					<356.>
g					
<u>h</u>					
i			 		
1					
<u>k</u>		<u> </u>			
1					
<u>m</u>	<u> </u>				···
<u>n</u>					
0		1		 	
2 Capital gain net income or (net ca		, m, a, t, i, iii, i, i	2		49,301.
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) ar	nd (6)			
If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line 8		}	3	N/A	

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to contribution Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor KSPS PUBLIC TELEVISION NONE PUBLIC CHARITY SUPPORT PUBLIC 3911 S REGAL ST. PROGRAMMING SERVICES SPOKANE, WA 999223 3,000. PRESCRIPTION DRUG ASSISTANCE NONE PUBLIC CHARITY SERVE THE COMMUNITY BY FOUNDATION PROVIDING LOW-INCOME 1111 HARVARD AVE UNINSURED WASHINGTON SEATTLE, WA 98122 STATE RESIDENTS WITH PRESCRIPTION MEDICINES 6,100. PRINCETON UNIVERSITY NONE PUBLIC CHARITY PROVIDE FUNDING FOR PO BOX 5357 EDUCATIONAL & 500. PRINCETON, NJ 08543-5357 SCHOLARSHIP PROGRAMS PROVIDENCE HEALTHCARE FOUNDATION NONE PUBLIC CHARITY SERVE THE COMMUNITY BY 101 W 8TH AVE OFFERING AN INCREASED SPOKANE, WA 99204 LEVEL OF HEALTH CARE 10,605. SPOKANE PARKS FOUNDATION NONE PUBLIC CHARITY PROVIDE FUNDING FOR PO BOX 2021 THE CREATION AND PRESERVATION OF SPOKANE, WA 99210 SPOKANE PARKS. 5,000. SPOKANE PUBLIC LIBRARY FOUNDATION NONE PUBLIC CHARITY PROVIDE FUNDING TO 906 W MAIN AVE ENSURE CONTINUED SPOKANE, WA 99201-0905 EXCELLENCE IN LIBRARY SERVICES FOR THE SPOKANE COMMUNITY 2,000. SPOKANE SYMPHONY NONE PUBLIC CHARITY PROVIDE FUNDING FOR PO BOX 365 SYMPHONY ACTIVITIES SPOKANE, WA 99210-0365 2,500. ST. GEORGES SCHOOL NONE PUBLIC CHARITY PROVIDE FUNDING FOR TEACHERS TO CONTINUE 2929 W WAIKIKI RD SPOKANE, WA 99208-9209 TO GIVE STUDENTS AN OUSTANDING COLLEGE PREP EDUCATION, 1,000. TRANSITIONS SPOKANE NONE PUBLIC CHARITY FOSTER THE PERSONAL GROWTH AND WHOLENESS 3104 WEST FORT GEORGE WRIGHT OF WOMEN 2,000. SPOKANE, WA 99224-5203 32,705. Total from continuation sheets

THE SELINGER-SHONE FOUNDATION

C/O DR. SAMUEL SELINGER	91-6481161
Part XV Supplementary Information	
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution	
NAME OF RECIPIENT - HUMANITIES WA	
PROVIDE FUNDING TO IMPPOVE INDIVIDUAL AND COMMUNITY LIFE T	THROUGH PUBLIC
PROGRAMS THAT INTERPRET CULTURE AND PROVIDE A FORUM FOR CI	VIC DIALOGUE.
NAME OF RECIPIENT - PRESCRIPTION DRUG ASSISTANCE FOUNDATION)N
SERVE THE COMMUNITY BY PROVIDING LOW-INCOME, UNINSURED WAS	SHINGTON STATE
RESIDENTS WITH PRESCRIPTION MEDICINES AT NO OR LOW COST.	····
 	-

FORM 990-PF INTEREST ON SAV	INGS A	ND TEM	PORARY C	ASH IN	VESTMENTS	STATE	MENT	
SOURCE						AM	OUNT	
MERRILL LYNCH							3	34.
TOTAL TO FORM 990-PF, PART I	, LINE	3, CO	LUMN A				3	34.
FÖRM 990-PF DIVIDENI	DS AND	INTER	EST FROM	SECUR	RITIES	STATE	MENT	2
SOURCE		GROSS	AMOUNT		TAL GAINS		MN (A) OUNT)
MERRILL LYNCH			49,457.		0.		49,45	 57.
TOTAL TO FM 990-PF, PART I,	LN 4		49,457.		0.		49,45	57.
FORM 990-PF		LEGAL	FEES			STATE	MENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTEI NET INCOM		(D) ARITAE URPOSE	
AHRENS & DEANGELLI, PLLC		330.		165.		0.	16	65.
TO FM 990-PF, PG 1, LN 16A		330.		165.		0.	16	65.
FORM 990-PF	AC	COUNTI	NG FEES			STATE	MENT	4
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTEI NET INCON		(D) ARITAE URPOSE	
MCDIRMID, MIKKELSEN &	_							
SECREST, P.S.		8,575.	4	,287.		0.	4,28	00.

FORM 990-PF	XAT	ES		STATEMENT			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			TABLE		
EXCISE TAXES	1,118.	1,118	3.	0.	0.		
TO FORM 990-PF, PG 1, LN 18	1,118.	1,118	3.	0.	0.		
FORM 990-PF	OTHER E	XPENSES		STATEMEN	т 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOM			TABLE		
INVESTMENT ADVISORY FEES	9,910.	9,910).	0.	0.		
TO FORM 990-PF, PG 1, LN 23	9,910.	9,910).	0.	0.		
FORM 990-PF	CORPORAT	E STOCK		STATEMEN	T 7		
DESCRIPTION		I	BOOK VALUE	FAIR MAR VALUE			
ANADARKO PETROLEUM CORP CARRIZO OIL & GAS INC CHESAPEAKE ENERGY CORP CONOCOPHILLIPS CONTINENTAL RESOURCES HERBALIFE LTD NATIONAL OILWELL VARCO OCCIDENTAL PETROLEUM CORP SANDRIDGE ENERGY INC			0. 0. 0. 0. 0. 0.		0. 0. 0. 0. 0.		
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		0.		0.		

FORM 990-PF	OTHER INVESTMENTS		STATEMENT 8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
BLACKROCK GLOBAL FIRST EAGLE GLOBAL CLASS I IVY ASSET STRATEGY FUND PERMANENT PORTFOLIO FUND PIMCO ALL ASSET	COST COST COST COST COST	393,474. 393,677. 0. 408,437. 405,473.	431,257 438,060 0 405,589 395,355
TOTAL TO FORM 990-PF, PART II,	LINE 13	1,601,061.	1,670,261
	SUBSTANTIAL CONTRIE	BUTORS	STATEMENT S

NAME OF CONTRIBUTOR

ADDRESS

THE STELLA L. SELINGER CHARITABLE LEAD TRUST

5441 S. QUAIL RIDGE RD.

SPOKANE, WA 99223

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FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

DR. SAMUEL L. SELINGER 5441 S. QUAIL RIDGE RD. SPOKANE, WA 99223

TELEPHONE NUMBER

509-747-6154

FORM AND CONTENT OF APPLICATIONS

GRANT REQUESTS SHOULD BE MADE IN WRITING AND SHOULD INDICATE THE INTENDED USE OF THE FUNDS. PROOF OF EXEMPT STATUS SHOULD ACCOMPANY ALL APPLICATIONS. THE ORGANIZATION HAS A SCHOLARSHIP APPLICATION FORM WITH INSTRUCTIONS.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

SCHOLARSHIP AWARDS WILL NOT EXCEED \$20,000 PER YEAR IN TOTAL.

Form **8868**

(Rev. January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

If you a	re filing for an Automatic 3-Month Extension, comple	te only Pa	rt I and check this box			► X
If you a	re filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of t	this form).		
Do not co	emplete Part II unless you have already been granted a	an automa	itic 3-month extension on a previous	ly filed For	m 8868.	
ectronic	c filing (e-file). You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of tim	ne to file (6	months for	r a corporation
	o file Form 990-T), or an additional (not automatic) 3-mo					
	file any of the forms listed in Part I or Part II with the exc				•	
	Benefit Contracts, which must be sent to the IRS in pap					
	irs gov/efile and click on e-file for Charities & Nonprofits		,		.	
Part I	Automatic 3-Month Extension of Time		submit original (no copies ne	eded).		
	tion required to file Form 990-T and requesting an autor	-				
art I only	• • •	nado o mo	orth extension offeat this box and t	complete		
•	orporations (including 1120-C filers), partnerships, REM	IICs and t	rusts must use Form 7004 to reques	t an aytan	sion of timo	
	me tax returns	nos, and a	rusts must use i omi roo4 to reques	it an exten	sion or time	
ype or	Name of exempt organization or other filer, see instru	otione.		Employer	i do natifica nati	
	THE SELINGER-SHONE FOUNDAT			Employer	identification	on number (EIN) o
rint	C/O DR. SAMUEL SELINGER	ION			01 64	81161
ile by the			_			
lue date for ling your	Number, street, and room or suite no If a P.O. box, s	ee Instruc	tions.	Social se	curity numb	er (SSN)
eturn See	5441 S. QUAIL RIDGE RD.					
structions	City, town or post office, state, and ZIP code. For a for	oreign add	ress, see instructions			
	SPOKANE, WA 99223					
nter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
		Ţ -	1			
pplication	on	Return	Application			Return
s For		Code	Is For			Code
orm 990	or Form 990-EZ	01	Form 990-T (corporation)			07
orm 990	BL	02	Form 1041-A			08
orm 472) (Individual)	03	Form 4720			09
orm 990	PF	04	Form 5227			10
orm 990	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
orm 990	T (trust other than above)	06	Form 8870			12
	DR. SAMUEL L.	SELIN				
The bo	oks are in the care of \blacktriangleright 5441 S. QUAIL 1	RIDGE	RD SPOKANE, WA	9922	3	
	one No. ► (509) 624-2805		FAX No. ▶		·	
	rganization does not have an office or place of busines	s in the Ur				
	s for a Group Return, enter the organization's four digit			lf this is fo	the whole	group check this
oox ► [. If it is for part of the group, check this box	~				-
	quest an automatic 3-month (6 months for a corporation				CIS THE CALC	maiori is ior.
	NOVEMBER 15, 2013, to file the exemp				The extens	lon.
	or the organization's return for:	n Organiza	mon return for the organization haine	eu above.	THE EXTERNS	.011
▶ [
_	calendar year or XI tax year beginning APR 1, 2012		d ending MAR 31, 2013			
	Tax year beginning AFR 1, 2012	, an	a ending FIAIX 31, 2013		_	
0 1621	a Annua and and an and an and a second a second and a second a second and a second a second and a second a second and a se			Frank 1	_	
2 If th	e tax year entered in line 1 is for less than 12 months, o	cneck reas	on:	Final retur	n	
L.,	Change in accounting period					
						
	is application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any		_	2 544
	refundable credits. See instructions.			3a	\$	2,500
	is application is for Form 990-PF, 990-T, 4720, or 6069,	-				_
	mated tax payments made. Include any prior year over			3b	\$	0
c Bal	ance due. Subtract line 3b from line 3a. Include your pa	ayment wit	th this form, if required,			
	ising EFTPS (Electronic Federal Tax Payment System)			3c	\$	2,500
aution.	f you are going to make an electronic fund withdrawal	with this F	orm 8868, see Form 8453-EO and Fe	orm 8879-	EO for payn	nent instructions.
_HA F	or Privacy Act and Paperwork Reduction Act Notice,	see instr	uctions.		Form	8868 (Rev. 1-201