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Form **990-PF**

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

► Do not enter Social Security numbers on this form as it may be made public

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For	cale	ndar year 2013 or tax year beginning		, and ending		
Na	me o	foundation	A Employer identification	number		
		E NORTH FAMILY FOUNDATI			91-6577620	
		and street (or PO box number if mail is not delivered to street $5~91ST~AVE~NE$	B Telephone number	4.0		
		town, state or province, country, and ZIP or foreign p	nostal anda	·	425-256-02	
		ROW POINT, WA 98004	JOSIAI CODE		C If exemption application is p	ending, check here
G	Chec	k all that apply Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	, check here
		Final return	Amended return		2 5	
		Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test, mputation
H	_	k type of organization X Section 501(c)(3) ex			E If private foundation stat	tus was terminated
l F		ection 4947(a)(1) nonexempt charitable trust arket value of all assets at end of year J Account	Other taxable private foundaing method X Cash	Accrual	under section 507(b)(1)	
		· / _	ther (specify)	L Accidal	F If the foundation is in a 6 under section 507(b)(1)	
	\$	3715713 • (Part I, colu	• • • • • • • • • • • • • • • • • • • •	pasis.)		(D), check here
P	art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received	9298.			
	2	Check In the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	120020	120014	120020	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	4	Dividends and interest from securities . Gross rents	120020.	120014.	120020.	STATEMENT 1
	-	Net rental income or (loss)				
ø	62	Net gain or (loss) from sale of assets not on line 10	83137.	·····		
Revenue	t	Gross sales price for all assets on line 6a 499445.	' -			,-,N(
Je v	7	Capital gain net income (from Part IV, line 2)		83137.		
_	8	Net short-term capital gain		·····	N/A	
<u>,</u>	9 10a	Income modifications Gross sales less returns				
9. 00 0	1	Less Cost of goods sold RECEIVED				
€		Gross profit or (loss)				,
₹7	11	Other income S Total. Add Infest through AY 1 2 2014				
	12	Total. Add International through Y1 1 2 2014	212455.	203151.	120020.	
	13	Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	14 15	Other employee salaries and wagen, UT Pension plans, employee benefits	<u> </u>			
多se		Legal fees		<u>-</u>		<u> </u>
	1	Accounting fees STMT 2	2865.	0.	0.	2865.
Windows Windows	C	Other professional fees				•
tive	17	Interest	100			
Operating and Administrative Expense	18	Taxes STMT 3	136.	136.	0.	0.
i. E	19 20	Depreciation and depletion Occupancy				
Adn	21	Travel, conferences, and meetings			-	
P	22	Printing and publications			·-	· · · · · · · · · · · · · · · · · · ·
ng 8	23	Other expenses STMT 4	10449.	11424.	0.	25.
rati	24	Total operating and administrative				
Ope		expenses. Add lines 13 through 23	13450.	11560.	0.	2890.
_		Contributions, gifts, grants paid	297250.			297250.
	26	Total expenses and disbursements. Add lines 24 and 25	310700.	11560.	0.	300140.
	27	Subtract line 26 from line 12			ÿ.	555140
	а	Excess of revenue over expenses and disbursements	-98245.			
		Net investment income (if negative, enter -0-)	,,	191591.		
32350 10-10) C	Adjusted net income (if negative, enter -0-)			120020.	- 000 5=
10-10	-13	LHA For Paperwork Reduction Act Notice, see i	mstructions.		7.1	Form 990-PF (2013)

Da	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End	of year
Pa	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	23820.	182874	182874.
	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			
	disqualified persons	Ì		
	7 Other notes and loans receivable			
	Less allowance for doubtful accounts ▶	ĺ		
2	8 Inventories for sale or use			
232613	9 Prepaid expenses and deferred charges	-		
₹ ₁	Oa Investments - U S and state government obligations		,	
Ι.	b Investments - corporate stock			
	c Investments - corporate bonds		· · · · · · · · · · · · · · · · · · ·	
	1 Investments - land, buildings, and equipment basis		······································	
'		Ì		
	Less accumulated depreciation Investments - mortgage loans	+		
	amum c	3473762.	3257562	3532839.
1		34/3/02.	3237302	3332037.
'	4 Land, buildings, and equipment basis			
	Less accumulated depreciation			
	5 Other assets (describe)			
ו	6 Total assets (to be completed by all filers - see the	2407502	2440426	2715712
+	instructions Also, see page 1, item 1)	3497582.	3440436	3715713.
	7 Accounts payable and accrued expenses			4
1	' '			4
ន្ធ 1	9 Deferred revenue			
2	}			
	, ,			_
1 2	2 Other liabilities (describe 🕨)	_		
			_	
-	3 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.			
2	4 Unrestricted _			
2	5 Temporarily restricted			
2	6 Permanently restricted			
2	Foundations that do not follow SFAS 117, check here			
-	and complete lines 27 through 31.			
2	7 Capital stock, trust principal, or current funds	3326675.	3367774	•
2	8 Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0 .	
Signal of Land Balance	- · · · · · · · · · · · · · · · · · · ·	170907.	72662	
į ₃		3497582.	3440436	
٠ ١			· · · · ···	
3	1 Total liabilities and net assets/fund balances	3497582.	3440436	
	र Ⅲ Analysis of Changes in Net Assets or Fund B		-	·
				
	tal net assets or fund balances at beginning of year - Part II, column (a), line	30	1.	2407502
	nust agree with end-of-year figure reported on prior year's return)	•	1	3497582.
	ter amount from Part I, line 27a	OPP OF	memenia E	40505
	her increases not included in line 2 (itemize)	SEE STA	TEMENT 5 3	
	Id lines 1, 2, and 3	TMG 2012	4	3442844.
	creases not included in line 2 (itemize) TAXES PAID DUR	· · · · · · · · · · · · · · · · · · ·		2408.
<u>3 To</u>	<u>tal net assets or fund balances at end of year (line 4 minus line 5) - Part II, co</u>	lumn (b), line 30	6	3440436.

323511 10-10-13

Part IV Capital Gains and Los	ses for Tax on Investment Income				
	describe the kind(s) of property sold ck warehouse, or common stock, 20		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a CORNERSTONE ADV	GLOBAL PUBLIC F	EQ	P		
b CORNERSTONE ADV	P				
c CORNERSTONE ADV	P				
d CORNERSTONE ADV			P		
e PIMCO TOTAL RET			P		
f TEMPLETON GLOBA			P		
g CORNERSTONE ADV		EQ	P		
h CAPITAL GAINS I	DIVIDENDS				
_1		- 		_	
_1					
k					
_1					
m					
n					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		 Gain or (loss) lus (f) minus (g)	
a 211082.	(OI allowable)	186865.	(6) t	nus (i) minus (y)	24217.
21056		29296.			2560.
10150		39459.		-	999.
C 4 1 0	-	6399.			19.
12476	-	13947.			-471.
15180	-	15084.		<u>-</u>	96.
160025		125258.			35677.
h 20040.		123230.			20040.
1 200101			-		
;					
k					
1					
m					
n					
0					
	g gain in column (h) and owned by the	ne 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 over ot less than "-0-")	
a			**	<u>-</u>	24217.
b			**		2560.
C			**		999.
d			**	 	19.
e			**		-471.
f			**		96.
g					35677.
h					20040.
1					
1					
k					
m					
n	,				
0					
2 Capital gain net income or (net cap	oital loss) - { If gain, also enter if (loss), enter "-0-	in Part I, line 7 " in Part I, line 7	2		83137.
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, c	column (c)	}			27420
If (loss), enter "-0-" in Part I, line 8			3		27420.

Part IV Capital Gains	and Lo	osses for Tax on In	vestment	Income					
2-story brick v		tind(s) of property sold (e g , or common stock, 200 shs			P-P	w acquired urchase Jonation	(c) Date ac		(d) Date sold (mo , day, yr)
1a `					Ļ				
b SEE ATTACHE	STA	TEMENT			ļ				· - -
<u>C</u>					 				
<u>d</u>									
_e	160	Depresenting allowed	(#) Coo	ot as ather bears	┸		(h) Co.		
(e) Gross sales price	10	Depreciation allowed (or allowable)		st or other basis expense of sale				n or (loss) (f) minus (
<u>a</u>	 								
<u>b</u>	 								
d .	 								
e 499445.				41630	18.				83137
Complete only for assets show		column (h) and owned by t	he foundation				(I) Gains (Co	l (h) gain	
, , , , , , , , , , , , , , , , , , ,		(j) Adjusted basis		cess of col (I)		C	ol (k), but no	ot less thar	1 - 0-) or
(i) F M V as of 12/31/69		as of 12/31/69		col (j), if any			Losses (1	from col (i	h))
a	 	-	-				-		
b			-						
C	<u> </u>							·	
d	1								
e			-			-			83137.
		∫ If gain, also enter	ın Part I line	7	1				
2 Capital gain net income or (net o	capital loss	(if (loss), enter -0-	in Part I, line	7		2			83137.
Net short-term capital gain or (lo	oss) as det								
If gain, also enter in Part I, line 8			G (0))				
If (loss), enter -0- in Part I, line 8		Section 4940(e) for			<u> </u>	3			27420.
Vas the foundation liable for the se	alify under	section 4940(e) Do not co	mplete this pa	rt					Yes X No
1 Enter the appropriate amount in (a)	each coil		structions be	rore making any e					(d)
Base period years		(b) Adjusted qualifying dist	ributions	Net value of no	(C) ncharita	hle-use asset	, ,	Distrib	utión ratio
Calendar year (or tax year beginn	ing in)		42166.	- Ivet value of the		354413		cor (b) aiv	ided by col (c)) . 068329
2012 2011			84099.			361255			.050961
2010			06121.			304803			.067624
2009			44532.			282029			.051247
2008			25992.			278352			.045263
		`					7		
? Total of line 1, column (d)							2		.283424
Average distribution ratio for the	5-year ba	ise period - divide the total o	n line 2 by 5,	or by the number	of years	;			
the foundation has been in exist	ence if les	s than 5 years		•			3		.056685
Enter the net value of noncharita	ible-use as	ssets for 2013 from Part X, I	ine 5				4		3631169.
Multiply line 4 by line 3							5		205833.
									1016
Enter 1% of net investment inco	me (1% o	f Part I, line 27b)					. 6		1916.
									207740
Add lines 5 and 6		•					7		207749.
1. Enter qualifiuma distributions for	m Dad VII	line 4							300140.
B Enter qualifying distributions fro			حدد المسا	lata that			[8]		300140.
If line 8 is equal to or greater that See the Part VI instructions	ııı ııne /, c	HECK THE DOX IN PART VI, line	io, and comp	nete that part usin	ig a 1% 1	ax rate			
250 the Care of modification									orm 000 DE (2012

Part VI Excise Tax Based on Investment Income (Section 4940(p), 4940(p), or 4948 - see instructions) Ta Earnpt operating foundation described in school 4940(c)(c), check here >	orm	990-PF(2013) TRUE NORTH FAMILY FOUNDATION		6577			age 4
Discretion foundations that meet the section 4940(a) requirements in Part V, check here			4948	<u>- see i</u>	nstru	ction	<u>15)</u>
b Domestry foundations that meet the section 449(e) ejequements in Part V, reach knew							
of Part I, line 270 c All other domestic foundations enter 2% of line 276 Exempt foreign organizations enter 4% of Part I, line 12, col (b) 2		Date of ruling or determination letter (attach copy of letter if necessary-see instructions)				1.0	
E All other domestic foundations enter 2% of the 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b) 2	b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔀 and enter 1%	1			19	16.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 4 Subtitue A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- 6 Edetar programs or a subtract line 4 from line 3 If zero or less, enter -0- 6 Edetar any penalty for underpayment of subtract line 5 from 9688) 6 Backup withholding erroreously withheld 7 Tax lots reflets and payments Ado line 6 is from 9688. 8 Edet any penalty for underpayment of estimated tax. Per large and or line 10 income 1		of Part I, line 27b					
3 1916. Subtile A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Subtile A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Tax hased on investment income. Subtract line 4 from line 3 if zero or less, enter -0- C credis/Payments 2013 estimated tax payments and 2012 overpayment credded to 2013 E beempt foreign organizations - tax withheld at source Tax pax dwith application for extension of time to fite (Form 8868) B backup withholding erroneously withheld T Total credits and payments Add lines 6a through 64 Better any penalty for underspayment of estimated tax Check here							^
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5 Tax based on investment incomes. Subtract line 4 from line 3 if zero or less, enter -0- 6 Ceedis/Payments 2 2013 estimated tax payments and 2012 overpayment credited to 2013 6 Exempt foreign organizations - tax withheld at source 7 Tox paid with application for extension of time to file (Form 8868) 6 Exempt prolegion organizations - tax withheld at source 8 Tax paid with application for extension of time to file (Form 8868) 6 Exempt prolegion organizations - tax withheld at source 8 Tax due, If the total of lines 5 and 8 is more than the rough 6d 8 Tax due, If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due, If the total of lines 5 and 8 is more than the total of lines 5 and 8, enter the amount overpaid 10 overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 12 Enter the amount of line 10 to be Credited to 2014 estimated tax ► 12 A Tax laxed of the standard of the standar	-	•	<u> </u>	ļ		19	
6 Credits/Payments a 2013 estimated tax payments and 2012 overpayment credited to 2013 be Exempt foreign organizations - Lax withheld at source the Exempt foreign organizations - Lax withheld at source the Exempt foreign organizations - Lax withheld at Source the Exempt foreign organizations - Lax withheld at Source the Exempt foreign organizations - Lax withheld at Source the Exempt foreign organizations - Lax withheld at Source the Exempt foreign organizations - Lax withheld at Source the Exempt foreign organizations of the Exempt foreign organization or decided to 10				ļ		10	
b Exempt foreign organizations - Tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld d Backup withholding erroneously withheld form 17 Total credits and payments Add lines 6a through 6d Refer any penalty for underpayment of estimated tax. Check here if the form 2220 is attached g Tax due. If the total of lines 5 and 8 is more than hier 7, entar amount ower 10 Overpayment. If line 7 is more than the total of lines 5 and 8 is more than hier 7, entar amount ower 10 Overpayment. If line 7 is more than the total of lines 5 and 8 is more than hier 7, entar amount ower 10 Overpayment. If line 7 is more than the total of lines 5 and 8 is more than hier 7, entar amount ower 10 Overpayment. If line 7 is more than the total of lines 5 and 8 is more than hier 7, entar amount ower 10 Overpayment. If line 7 is more than the 10 to be Credited to 2014 estimated tax ▶ 23 77 . Refunded ▶ 10 23 77. It Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ 23 77 . Refunded ▶ 10 23 77. It Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ 23 77 . Refunded ▶ 10 23 77. It Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ 23 77 . Refunded ▶ 10 23 77. It Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ 23 77 . Refunded ▶ 10 2 37 7. It Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ 23 77 . Refunded ▶ 10 2 37 7. It Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ 23 77 . Refunded ▶ 10 2 37 7. It Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ 23 77 . Refunded ▶ 10 2 37 7. It Enter the amount of line 10 to be Credited to 2014 estimated tax ≥ 2 37 7 . Refunded ▶ 10 2 37 7. It Enter the amount of line 10 to be Credited to 2014 estimated tax ≥ 2 37 7 . Refunded ▶ 11 2 3 2 3 7 3 . It Enter the amount of line 10 to be Credited tax ≥ 2 3 7 3 . Refunded ▶ 10 2 3 7 7 . It Enter the amount of line 10 2 2 2 2 2 3 7 3 . Refunded ▶ 1			5	ļ		19	10.
b Exempt foreign organizations - lax withheld at source c Tax pad with application for extension of time to file (Form 8868) 6 c 6 d 8 deachy withholding erroneously withheld 7 Total credits and payments Add lines 6a through 64 8 Enter any penalty for underpayment of estimated tax Check here if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than hie 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 12 2377. Refunded > 10 2377. Refunded > 11 0 2377. Refunded > 11 0 2377. Refunded > 12 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			,				
t Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld d Backup withholding erroneously withheld To Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax Check here		2010 Ostantico das paymonto una 2012 Osospaymonto contest to 2010	3 •				
d Backup withholding erroneously withhold 7 Total credits and payments. Add lines 6 at hrough 6d 8 Total credits and payments Add lines 6 and 8 is more than line 7, enter amount owed 9 Total credits and payment of estimated tax. Check here if Form 2220 is attached 8 Total credits in the total of lines 5 and 8 is more than line 7, enter amount owed 9 Total Companyment. If line 7 is more than the total of lines 5 and 8, enter the amount overpald 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpald 11 Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ 2.377.Refunded ▶ 11 0.2. Part VII-A Statements Regarding Activities 12 Duning that axy year, did the foundation altempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 12 Did 4 spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 13 If the answer is "Yes" to face 1th, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 14 Did the foundation file Form 1120-POL for this year? 15 Did the foundation file Form 1120-POL for this year? 16 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ 0. 2 Has the foundation he year political expenditure tax imposed on foundation not be provided to the IRS? 16 "Yes," attach a detailed description of the activities. 2 Has the foundation have unrelated business grows income of \$1,000 or more during the year? 3 A bid the foundation have unrelated business grows income of \$1,000 or more during the year? 3 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 3 Fires, "attach the statement required by General Instruction T 4 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e			[
7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here							
8 Enter any penalty for underpayment of estimated tax. Check here		The state of the s	┥,			12	oз
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 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 0 0. Part VII-A Statements Regarding Activities 13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 15 Dud it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 16 If the answer is "Yes" to fact the adetailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 2 Did the foundation if Form 1120-PDL for this year? 2 Enter the amount (if any) or tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$\infty\$ \$\infty						42	93.
10				 			
11 Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ 2 3 7 7 . Refunded ▶ 11				 		23	77
Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b If the answer is "Yes" to face th, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 1c Did the foundation file Form 1120-POL for this year? 2d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year 2 Enter the remiburisement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ 0 . 2 Enter the remiburisement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ 0 . 2 Has the foundation mapaged in any activities that have not previously been reported to the IRS? 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 4 b If If "Yes," attach the statement required by General Instruction T 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? A b 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, or ■ By state legislation that effectively amends the governing instrument so that no mandatory direction		0000		-			
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Form 990-PF (2013) TRUE NORTH FAMILY FOUNDA			91-65776	20	Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y6	s X No		
(2) Influence the outcome of any specific public election (see section 4955), o	or to carry on, directly or indire	ectly,			
any voter registration drive?	•	Ye	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	? .	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				
the prevention of cruelty to children or animals?	-	Ye	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	•	ın Regulations			
section 53 4945 or in a current notice regarding disaster assistance (see instru	•		- — H	5b	
Organizations relying on a current notice regarding disaster assistance check h	·				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi					
expenditure responsibility for the grant?	•	I/A Y6	s L No		
If "Yes," attach the statement required by Regulations section 53.494					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<u> </u>	6b	<u> X</u>
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s		. L Ye	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu		-		7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	magers, Highly	/		
1 List all officers, directors, trustees, foundation managers and their	companyation	-			
List di officers, directors, trastees, foundation managers and their	(b) Title, and average	(c) Compensation	(d) Contributions to	(0)	Evnanca
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	acco	Expense unt, other
ROBERT R. WILKERSON	to position TRUSTEE	`enter'-0-)´	compensation	alic	owances
4215 91ST AVENUE NE	IKUSIEE				
YARROW POINT, WA 98004	1.00	0.	0.		0.
	TRUSTEE				
4215 91ST AVENUE NE	INODIEE				
YARROW POINT, WA 98004	1.00	0.	0.		0.
THE TOTAL TO	1.00	0.			
 -					
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		<u>. </u>	
	(b) Title, and average		(d) Contributions to	(e)	Expense unt, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	acco	unt, other owances
NONE	dovoted to position		compensation		
			·		
		1			
	· · · · · · · · · · · · · · · · · · ·				
		[
Total number of other employees paid over \$50,000	<u> </u>	·	>		0

0.

Total. Add lines 1 through 3

	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations		e instructions)
<u> </u>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes	moations, se	e manuchons.)
-	Average monthly fair market value of securities	1a	3645282.
b		1b	41184.
C		16	
d	Total (add lines 1a, b, and c)	1d	3686466.
е			
	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	1 2	0.
3	Subtract line 2 from line 1d	3	3686466.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	55297.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	3631169.
6_	Minimum investment return. Enter 5% of line 5	6	181558.
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	181558.
2a			
b	Income tax for 2013 (This does not include the tax from Part VI)	1 1	
C	Add lines 2a and 2b	7 2c	1916.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	179642.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	179642.
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	179642.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		200140
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	300140.
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	
3	Amounts set aside for specific charitable projects that satisfy the		
	Suitability test (prior IRS approval required)	3a	
b		3b	200140
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	300140.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		1016
_	income Enter 1% of Part I, line 27b	5	1916.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	298224.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for th	e section

4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI,		F		2010
line 7				179642.
2 Undistributed income, if any, as of the end of 2013				1,7012.
a Enter amount for 2012 only			0.	
b Total for prior years				······
		0.		
3 Excess distributions carryover, if any, to 2013				······································
a From 2008				
b From 2009 491.				
c From 2010 61753.				
d From 2011 7033.	1			
e From 2012 73447.				
f Total of lines 3a through e	142724.			
4 Qualifying distributions for 2013 from	112,210			
Part XII, line 4 ►\$ 300140.				
a Applied to 2012, but not more than line 2a			0.	
b Applied to undistributed income of prior			U •	·····
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		0.	····	······
	0.			
(Election required - see instructions)	0.			179642.
d Applied to 2013 distributable amount	120498.			1/9042.
e Remaining amount distributed out of corpus	0.	····		
5 Excess distributions carryover applied to 2013 (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		Additional		
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	263222.			
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 2012 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2013 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2014				0.
7 Amounts treated as distributions out of	1			······································
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2014.				
Subtract lines 7 and 8 from line 6a	263222.			
O Analysis of line 9				
a Excess from 2009 491.		`		
b Excess from 2010 61753.		[
c Excess from 2011 7033.				
d Excess from 2012 73447.				
e Excess from 2013 120498.				
52,000 nom 2010 12 0 19 0 1	1.	<u></u> £_	l	Farm 000 DE (0010)

Form 990-PF (2013) TRUE NO	RTH FAMILY	FOUNDATION		91-65	77620 Page 10
Part XIV Private Operating F	oundations (see I	nstructions and Part V	I-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter th	at it is a private operating			
, foundation, and the ruling is effective fo	r 2013, enter the date of	f the ruling	▶		
b Check box to indicate whether the found	iation is a private operal	ting foundation described		4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for					
each year listed					ļ <u> </u>
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 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)			<u> </u>		
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					
Part XV Supplementary Info	rmation (Compl	ete this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during t	he year-see ins	tructions.)			
1 Information Regarding Foundation	n Managers:			<u> </u>	
a List any managers of the foundation wh			tributions received by th	e foundation before the clo	se of any tax
year (but only if they have contributed in	nore than \$5,000) (See	section 507(d)(2))			
SEE STATEMENT 7					
b List any managers of the foundation wh other entity) of which the foundation has			(or an equally large por	tion of the ownership of a p	partnership or
NONE					
2 Information Regarding Contribution Check here ► X If the foundation of the foundation makes gifts, grants, etc.	nly makes contributions	s to preselected charitable	organizations and does		
a The name, address, and telephone num	· · _ · _ · _ · _ · _ · _ · _ · _ ·				
b The form in which applications should b	e submitted and inform	ation and materials they s	hould include		
c Any submission deadlines					
d Any restrictions or limitations on awards	s, such as by geographi	cal areas, charitable fields	, kinds of institutions, or	other factors	
323601 10 10 12					Form QQQ_DE (2012)

323611 10-10-13

** SEE PURPOSE OF GRANT CONTINUATIONS

3 Grants and Contributions Paid During the Y	If recipient is an individual,	7	1	
Recipient Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		·
DELLEGATE DOVO : CIPI C CIVID		501/01/21	TUDDUED CHARTMAN E	
BELLEVUE BOYS & GIRLS CLUB		501(C)(3)	FURTHER CHARITABLE	
209 100TH VE NE BELLEVUE, WA 98105			PURPOSE	10000
BEBBEVOE, WA 90103		-		10000
GEORGETOWN UNIVERSITY		501(C)(3)	FURTHER CHARITABLE	
3700 O STREET NW			PURPOSE	
WASHINGTON , DC 20057				2500
BELLEVUE LIFESPRING		501(C)(3)	FURTHER CHARITABLE	
P O BOX 53203			PURPOSE	
BELLEVUE, WA 98015				1000
CONSTRUCTION FOR CHANGE		501(C)(3)	FURTHER CHARITABLE	
335 PARK PLACE CTR G119			PURPOSE	
KIRKLAND, WA 98033	 	F01 (G) (3)	TANDUMED OUT TO THE	1500
BEN TOWNE FOUNDATION		501(C)(3)	FURHTER CHARITABLE	
4616 25TH AVE NE #717 SEATTLE, WA 98105			PURPOSE	
SHATTHE, WA SOLUS		1	FURTHER CHARITABLE	
			PURPOSE	140000
CHILDHAVEN		501(C)(3)	FURTHER CHARITABLE	
316 BROADWAY			PURPOSE	
SEATTLE, WA 98122				25000
DESTRUCTION TO THE PROPERTY OF		F01/G)/3)		
DESERT COMMUNITY FOUNDATION 75105 MERLE DR		501(C)(3)	FURTHER CHARITABLE PURPOSE	
PALM DESERT, CA 92211		1	FORFOSE	250
ESPERANZA INTERNATIONAL		501(C)(3)	FURTHER CHARITABLE	
13219 NE 20TH ST			PURPOSE	
BELLEVUE, WA 98005				
			FURTHER CHARITABLE	5000
GLOBAL PARTNERSHIPS		501(C)(3)	FURTHER CHARITABLE	
1932 1ST AVE #400			PURPOSE	
SEATTLE, WA 98101				5000
HOPELINK		501(C)(3)	FURTHER CHARITABLE	
10675 WILLOWS RD NE, #275			PURPOSE	
REDMOND, WA 98052	1	1	ı	2500

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
MARSHA RIVKIN CENTER		501(C)(3)	FURTHER CHARITABLE	
801 BROAADWAY, #701			PURPOSE	5050
SEATTLE, WA 98122	+	E01 (a) (3)	TUDBUID CUADIMANI F	5250
LEUKEMIA & LYMPHOMA SOCIETY 1311 MAMARONECK AVE #310		501(C)(3)	FURTHER CHARITABLE PURPOSE	
WHITE PLAINS , NY 10605			FORFOSE	
, 11 2000		}	FURTHER CHARITABLE	
			PURPOSE	16750
CAMINO FOUNDATION		501(C)(3)	FURTHER CHARITABLE	
			PURPOSE	5000
MOCKINGBIRD SOCIETY		501(C)(3)	FURTHER CHARITABLE	
2100 245H AVE S, #240			PURPOSE	11250
SEATTLE, WA 98144				11230
MOUNT VIEW PRESBYTERIAN CHURCH		501(C)(3)	FURTHER CHARITABLE	
10806 12TH AVE SW			PURPOSE	
SEATTLE, WA 98146				5000
		501/51/21		
ROVERT VASEN FOUNDATION 2807 102ND AVE SE		501(C)(3)	FURTHER CHARITABLE PURPOSE	
BELLEVUE, WA 98004		1	PORPOSE	5000
DEBERTOE, WA 30004				
THE YES FOUNDATION OF WHITE CENTER		501(C)(3)	FURTHER CHARITABLE	
P O BOX 47260			PURPOSE	
SEATTLE, WA 98146				7500
		504 (5) (2)		
UNIVERSITY OF WASHINGTON 4333 BROOKLYN AVE NE BOX 359505		501(C)(3)	FURTHER CHARITABLE PURPOSE	
SEATTLE, WA 98195			FORFOSE	13500
			FURTHER CHARITABLE	
			PURPOSE	
SEATTLE CANCER ALLIANCE 825 EASTLAKE AVE E		501(C)(3)	FURTHER CHARITABLE PURPOSE	
SEATTLE, WA 98109				250
Total from continuation sheets		<u></u>		

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Ye	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		<u> </u>
YOUNG LIFE OF WEST SEATTLE		501(C)(3)	FURTHER CHARITABLE	
P O BOX 46054			PURPOSE	10000
SEATTLE, WA 98146				10000.
				1
		{		
				
				
				
	, i			
Total from anti-matic - sheets		L		 -
Total from continuation sheets			<u></u>	

TRUE NORTH FAMILY FOUNDATION	91-65//620
Part XV Supplementary Information	
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution	
NAME OF RECIPIENT - ESPERANZA INTERNATIONAL	
The of the off	
FURTHER CHARITABLE PURPOSE	
	
FURTHER CHARITABLE PURPOSE	
FORTHER CHARTTABLE FORFOSE	
	`
•	
,	
	,

Part XVI-A Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated		business income		y section 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
	Code			-	
b				-	
C	J ' 'J				
d	1				
e	1 1				
1					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					
investments					
Dividends and interest from securities			14	120020.	
Net rental income or (loss) from real estate					
a Debt-financed property			\bot		
b Not debt-financed property					
Net rental income or (loss) from personal					
property .			1		
Other investment income					
Gain or (loss) from sales of assets other	}				
than inventory			18	83137.	
Net income or (loss) from special events	<u> </u>				
Gross profit or (loss) from sales of inventory	ļ				
Other revenue					
a	_		 		
b			 		
C	_		 		
d			 		
e			-	202157	_
Subtotal Add columns (b), (d), and (e)	<u> </u>	0	•	203157.	20315
B Total. Add line 12, columns (b), (d), and (e) i <u>e</u> e worksheet in line 13 instructions to verify calcul <u>a</u> tions	- \	-		. 13	20313
Part XVI-B Relationship of Activities ine No. Explain below how each activity for which the foundation's exempt purposes (other to	income is reported in (column (e) of Part XVI-			plishment of
					
621 10-13					Form 990-PF (2

' 	· · · · · · · · · · · · · · · · · · ·	NODELL EN	/TT 17 - TO				0.1	6577	c 2 0		
Part		NORTH FAN		and Transaction	s and D	olotionchi		-6577			ge 13
	Exempt Organ		151615 10 6	illu Transactions	s and n	-ialionsiii	he mini im	Unchan	lable	;	
1 Dic	the organization directly or indi		of the followin	g with any other organiz	zation descr	 ibed in section	501(c) of			Yes	No
	Code (other than section 501(c						30 /(0/ 0.				
	nsfers from the reporting found				3						
	Cash			,					1a(1)		х
٠,	Other assets		•		•		• •		1a(2)		X
b Oth	er transactions		••		-						
(1)	Sales of assets to a noncharita	ible exempt organiza	ation						1b(1)		Х
	Purchases of assets from a no								1b(2)		X
(3)	Rental of facilities, equipment,	or other assets		_					16(3)		X
(4)	Reimbursement arrangements	;							1b(4)		X
(5)	Loans or loan guarantees								1b(5)		X
(6)	Performance of services or me	embership or fundra	ising solicitatio	ns	•				1b(6)		X
c Sh	aring of facilities, equipment, ma	ailing lists, other ass	ets, or paid em	ployees	-				10_		X
d If t	he answer to any of the above is	"Yes," complete the	following sche	dule Column (b) should	d always she	ow the fair ma	ket value of the	e goods, ot	ner ass	ets,	
	services given by the reporting f			ed less than fair market	value in any	transaction o	r sharing arranç	gement, sh	ow in		
	umn (d) the value of the goods,										
(a) Line n	o (b) Amount involved	(c) Name o		exempt organization	(0	Description of	transfers, transac	tions, and sh	anng an	angeme	ents
			N/A			-	·				
							·				
		ļ <u></u> .			_				_		
		ļ					 _				
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										_	
	 							·		_	
					_						
	 -										
		<u> </u>									
22 01	he foundation directly or indirec	athy affiliated with or	related to one	or more tay-ayamat are	nanizatione /	decombed					
	he foundation directly or indirect section 501(c) of the Code (othe				janizativns i	rescribed			Yes	X	No
	Yes," complete the following sch		,)(3)) or iii sect	1011 327					7 163		
<u>,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, </u>	(a) Name of org			(b) Type of organization	on I	(c	Description of	relationshi	D		
	N/A	<u> </u>		(-, ,,,-		•			<u>-</u>		
					1						
						_					
				-							
											
	Under penalties of perjury, I declare								the IRS	discuss	this
Sign	and belief, it is true, correct, and co	mplete Declaration of p	reparer (other that	n taxpayer) is based on all in	iformation of v		-	returr	with the	e prepar	rer
Here	> Korut FY	Mosersi	n	1517/1	4	Trust	ee	X	٦.] No
_	Signature of officer or trustee	9		Date	Titi	e					
	Print/Type preparer's na	ame	Preparer's si	gnature	Date,		heck X If	PTIN			
			//	-1! 44	17/2	י אונגונ	elf- employed]			
Paid			1	Photo		المامه اد		P00	<u>938</u>	<u> 299</u>	
Prepa	arer Firm's name ► LOR	REN D. HOS	STEK, C	PA			Firm's EIN 🕨				

Use Only

Firm's address ▶ 4209 21ST AVE WEST, #401 SEATTLE, WA 98199

Phone no 206-623-9395

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.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2013

Employer identification number

TRUE NORTH FAMILY FOUNDATION 91-6577620 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 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 General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** 🔟 For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

TRUE NORTH FAMILY FOUNDATION

91-6577620

Part I	Contributors (see instructions) Use duplicate copies of Part I if addit	ional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROBERT & PEGGY WILKERSON 4215 91ST AVE NE YARROW POINT, WA 98004	\$\$ 	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	,	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

TRUE NORTH FAMILY FOUNDATION

91-6577620

Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(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
			000 E7 or 000 PE (2012

Schedule B (Form 990, 990-EZ, or 990-PF) (2013) Page 4 Name of organization Employer identification number TRUE NORTH FAMILY FOUNDATION 91-6577620 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the Part III year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF	DIVIDEND	S AND INTER	EST FROM SECU	RITIES ST	PATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	NET INVEST-	(C) ADJUSTED NET INCOME
GLOBAL PARTNERSHIPS SIF 5.0 MERRILL LYNCH	1919 235				1919.
SCHWAB#7591-0265 DIVIDENDS	137900				0. 118095.
SCHWAB#7591-0265 T E DVDS	6	•	0. 6	. 0.	6.
TO PART I, LINE 4	140060	2004	120020	120014.	120020.
FORM 990-PF		ACCOUNTI	NG FEES	Si	PATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS			(D) CHARITABLE PURPOSES
ACCOUNTANT	_	2865.	0.	0.	2865.
TO FORM 990-PF, PG 1	, LN 16B =	2865.	0.	0.	2865.
FORM 990-PF		TAX	ES	Si	PATEMENT 3
		(A)	(B) NET INVEST-	(C) ADJUSTED	(D) CHARITABLE
DESCRIPTION		EXPENSES PER BOOKS			PURPOSES
DESCRIPTION ———— FOREIGN TAXES PAID					

FORM 990-PF	OTHER E	XPENSES			STA	TEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	NET INVE	EST-	(C) ADJUSTEI NET INCOM)	(D) CHARITA PURPOS	
CORNERSTONE INVESTMENT FEES FILING FEES	10424. 25.		424.		0.		0. 25.
TO FORM 990-PF, PG 1, LN 23	10449.	11	424.		0.		25.
FORM 990-PF OTHER INCREASE	S IN NET ASS	ETS OR FU	JND BA	LANCES	STA	ATEMENT	5
DESCRIPTION						AMOUNT	
TO CORRECT PRIOR YEAR ADJUST	MENT TO COST	BASIS				435	07.
TO CORRECT PRIOR YEAR ADJUST		BASIS				435	
					STA		07.
TOTAL TO FORM 990-PF, PART I	OTHER INV		ВОС	OK VALUE	FAI	435	07.
TOTAL TO FORM 990-PF, PART I FORM 990-PF DESCRIPTION PIMCO TOTAL RETURN INST	OTHER INV	ESTMENTS LUATION ETHOD FMV	вос	608246.	FAI	435 ATEMENT R MARKE VALUE 5844	07. T
TOTAL TO FORM 990-PF, PART I FORM 990-PF DESCRIPTION PIMCO TOTAL RETURN INST TEMPLETON GLOBAL BOND	OTHER INV	ESTMENTS LUATION ETHOD FMV FMV	ВОС	608246. 213177.	FAI	ATEMENT R MARKE VALUE 5844 2119	07.
TOTAL TO FORM 990-PF, PART I FORM 990-PF DESCRIPTION PIMCO TOTAL RETURN INST TEMPLETON GLOBAL BOND CORNERSTONE ADV PUBLIC ALT	OTHER INV	ESTMENTS LUATION ETHOD FMV	вос	608246. 213177. 687453.	FAI	ATEMENT R MARKE VALUE 5844 2119 6983	07.
TOTAL TO FORM 990-PF, PART I FORM 990-PF DESCRIPTION PIMCO TOTAL RETURN INST TEMPLETON GLOBAL BOND CORNERSTONE ADV PUBLIC ALT CORNERSTONE ADV INC OPPORT CORNERSTONE ADV REAL ESTATE	OTHER INV	ESTMENTS LUATION ETHOD FMV FMV FMV FMV	ВОС	608246. 213177. 687453. 260827. 294542.	FAI	435 ATEMENT IR MARKE VALUE 5844 2119 6983 2787 2820	07.
TOTAL TO FORM 990-PF, PART I FORM 990-PF DESCRIPTION PIMCO TOTAL RETURN INST TEMPLETON GLOBAL BOND CORNERSTONE ADV PUBLIC ALT CORNERSTONE ADV INC OPPORT	OTHER INV	ESTMENTS LUATION ETHOD FMV FMV FMV FMV FMV	ВОС	608246. 213177. 687453. 260827.	FAI	435 ATEMENT IR MARKE VALUE 5844 2119 6983 2787	07 07 05 50 62 26 90

LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

ROBERT R. WILKERSON PEGGY B. WILKERSON