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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

		2013 ca pplicable	C Name of organization THE PRIDE FOUNDATION	-2014	D Employer	identi	fication number
- Addre	ess ch	nange	Doing Business As		91-1325	007	
Name		_	Doing dusiness As				
Initial Term			Number and street (or P O box if mail is not delivered to street address) Room/suit 2014 EAST MADISON STREET NO 300	e	E Telephone (206) 32		
Amen		return n pending	City or town, state or province, country, and ZIP or foreign postal code SEATTLE, WA 98122		G Gross rece		
			F Name and address of principal officer KRIS HERMANNS 2014 EAST MADISON STREET NO 300 SEATTLE, WA 98122	su	this a group re bordinates?	turn fo	r ┌Yes ៧ No
- T			, in the second	inc	e all subordina cluded?		Γ Y es Γ No
		npt status	,(-)(-) ,(-) (,(-)(-) ((-)(-) ((-)(-)(-)(-)((-)(-)((-)(-)((-)()((-)((-)()((-)((-)((-)((11	"No," attach a	list (s	ee instructions)
Wel	bsite	e: ► W'	WW PRIDEFOUNDATION ORG	H(c) G	roup exemptior	numb	er ►
∢ Form •	of or	ganızatıo	n 🔽 Corporation Trust Association Other ►	L Year o	f formation 1985	M Sta WA	ate of legal domicile
Part	31	Sun	nmary			WA	
<u> </u>			describe the organization's mission or most significant activities GTHEN & SUPPORT GAY & LESBIAN COMMUNITY IN THE PACIFIC N	ORTHWE	ST		
ACHVINES & SAVVEIHAINCE	2	Check	this box 📭 if the organization discontinued its operations or disposed o	f more tha	n 25% of its ne	t asse	ts
8	3	Numbei	r of voting members of the governing body (Part VI, line 1a)			з	1
2	4	Numbei	r of independent voting members of the governing body (Part VI, line 1b)			4	1
	5	Total n	umber of individuals employed in calendar year 2013 (Part V , line 2a) $$.		[5	1
	6	Total n	umber of volunteers (estimate if necessary)		· ·	6	34
			nrelated business revenue from Part VIII, column (C), line 12			7a	
	b	Net unr	elated business taxable income from Form 990-T, line 34			7b	
	_			P	rior Year 2,803,95	_	Current Year
ā	8 9		ributions and grants (Part VIII, line 1h)		· · · · ·	2	1,072,66
Heyenue	10		stment income (Part VIII, olumn (A), lines 3, 4, and 7d)		-3,184,71	_	1,362,13
Ē]	11		r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		256,62	_	198,89
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)				2	2,633,68
:	13		ts and similar amounts paid (Part IX, column (A), lines 1–3)		1,161,83		1,316,71
	14		fits paid to or for members (Part IX, column (A), line 4)				
82 1	15	Salar 5-10	ries, other compensation, employee benefits (Part IX, column (A), lines		1,232,11	5	969,84
EXPenses L	16a		ssional fundraising fees (Part IX, column (A), line 11e)			5	
ਲੈਂ∣	b	Total f	undraising expenses (Part IX, column (D), line 25) ▶289,008				
_	17	Othe	r expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,111,15	1	868,22
:	18	Total	expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		4,505,09	9	3,154,79
	19	Reve	nue less expenses Subtract line 18 from line 12		-4,629,23	1	-521,10
်မှို့				Beginn	ing of Current Year		End of Year
Fund Balances	20	Total	assets (Part X, line 16)		48,497,50	3	43,897,79
(# z	21		liabilities (Part X, line 26)		21,644,17		15,647,17
2 2	22	Neta	ssets or fund balances Subtract line 21 from line 20		26,853,33	0	28,250,61
ny kno repare	pena wled	alties of	nature Block If perjury, I declare that I have examined this return, including accompany I belief, it is true, correct, and complete Declaration of preparer (other the chowledge *** hature of officer				
lere			THY WEHLE TREASURER e or print name and title				
		17		ite (Check If P	IN	
Paid			HOWARD DONKIN CPA 20	14-08-12	self-employed P(014772	6
ore p	are		Firm's name JACOBSON JARVIS & CO PLLC	Į i	Firm's EIN 🟲 91-2	011386	
Jse (Firm's address ► 600 STEWART STREET SUITE 1900	1	Phone no (206) 6	28-8990	l

SEATTLE, WA 981011219

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

✓ Yes No

25,000) (Revenue \$

25,980 including grants of \$ Total program service expenses > 2,512,432

Other program services (Describe in Schedule O)

(Expenses \$

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{\circ}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Νo
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νo
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M \footnotemark	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		Νo
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	Yes	

	Check if Schedule O contains a response or note to any line in this Part V		Yes	Ϊ́N
la	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 7		1 62	N
	Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable 1b 0	┥		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	4		
	gaming (gambling) winnings to prize winners?	1 c	Yes	
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		N
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	70		
_	In 163, to fine 3a of 3b, did the organization merofin 0000-17	5c		
ā	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		١
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
		8		
-	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a 9b		
	Did the organization make a distribution to a donor, donor advisor, or related person?	90		
)	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	- -		
L	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	1		
	<u> </u>	1		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the	12a		
	year	1		
•	Is the organization licensed to issue qualified health plans in more than one state?			
2	Note. See the instructions for additional information the organization must report on Schedule O	13a		
а	1 1	\vdash		
	Enter the amount of reserves the organization is required to maintain by the states		!	l
b	in which the organization is licensed to issue qualified health plans	_		
b c				

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management						
			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year						
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O						
b	Enter the number of voting members included in line 1a, above, who are independent						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No			
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No			
6	Did the organization have members or stockholders?	6		No			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following						
а	The governing body?	8a	Yes				
b	Each committee with authority to act on behalf of the governing body?	8b	Yes				
9	9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O						
	organization's maining address' It les, provide the hames and addresses in schedule 0	9		Νo			
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	_	ıe Cod				
Se		_	ue Cod Yes				
		_		e.)			
10a	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu		e.) No			
10a b	Did the organization have local chapters, branches, or affiliates?	evenu 10a		e.) No			
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	e.) No			
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a	Yes	e.) No			
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	e.) No			
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	e.) No			
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	e.) No			
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes	e.) No			
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	e.) No			
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	e.) No			
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	e.) No			
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	e.) No			
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	e.) No			
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	e.) No No			

- 17 List the States with which a copy of this Form 990 is required to be filed ►WA
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available.

✓ Own website ✓ Another's website ✓ Upon request ✓ Other (explain in Schedule O)

- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►JIMBO WORM 2014 EAST MADISON STREET SUITE 300 SEATTLE, WA 98122 (206) 323-3318

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ♦ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot ecto	not box h an or/tr	chelle Highest compensated	ess er e)	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
						2				
(1) SETH KIRBY	12 00	x		x				0	0	0
PRESIDENT								, and the second		
(2) RACHEL VALDEZ	7 00	×		x				0	0	0
VICE PRESIDENT										
(3) MIKE SCOTT	7 00	×		х				o	0	0
SECRETARY										
(4) KATHY WEHLE	7 00	x		х				О	0	0
TREASURER (5) JOYCE ALLEN	3 00									
	3 00	Х						0	0	0
BOARD MEMBER (6) RAMON ALVAREZ	2.00									
	3 00	x						О	0	0
BOARD MEMBER (7) DOUGLAS EXWORTHY										
	5 00	x						0	0	0
BOARD MEMBER							-			
(8) BEN BAKKENTA	5 00	х						0	0	0
BOARD MEMBER										
(9) NICOLE BROWNING	3 00	l x						0	0	0
BOARD MEMBER										
(10) ROBERT CUNDALL	3 00	X						0	0	0
BOARD MEMBER										
(11) BOB EVANS	5 00	×						0	0	0
BOARD MEMBER								· ·		
(12) SHELLEY HAYES	3 00	x						0	0	0
BOARD MEMBER		_ ^						0	0	0
(13) ERIN LENNON	3 00							0	0	
BOARD MEMBER		X						0	0	0
(14) EMILIE JACKSON-EDNEY	3 00	Ü							-	-
BOARD MEMBER		X						0	0	0
(15) GEORGE NUNES	3 00							_	_	_
BOARD MEMBER		X						0	0	0
(16) ALEX PAVA	3 00									
BOARD MEMBER		X						0	0	0
(17) KATHY REIM	3 00									
BOARD MEMBER		X						0	0	0
										Form 990 (2013)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) A verage hours per week (list any hours	more than one box, unless comperson is both an officer and a director/trustee) or						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	Estim amount comper from	ated of other isation the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organiz and re organiz	lated
(18) ELIAS ROJAS	3 00	х						0	0		0
BOARD MEMBER (19) JEFF SAKUMA	5 00			_	\vdash						
BOARD MEMBER	3 00	×						0	0	ı	0
(20) KATHY SEWELL	3 00										
BOARD MEMBER		X						0	0		0
(21) GREGORY D SMITH	3 00	х						0	0		0
BOARD MEMBER (22) JEAN-PAUL WILLYNCK	2.00	ļ									
BOARD MEMBER	3 00	×						О	0		0
(23) TARA SMITH	5 00										
BOARD MEMBER		X						0	0		0
(24) STEVEN WAKEFIELD	3 00	х						0	0		0
BOARD MEMBER (25) KRIS HERMANNS	40.00								_		
` '	40 00			x				126,480	0	ı	13,112
EXECUTIVE DIRECTOR (26) JIMBO WORM	40 00										
DIRECTOR OF FINANCE & OPER				X				82,882	0		10,850
						<u> </u> 					
1b Sub-Total			•	•		-					
						⊩⊢		209,362	0		23,962
Total number of individuals (including \$100,000 of reportable compensation)	•			ed a	bove	e) who	rec	eived more than			
3 Did the organization list any former of							r hıç	ghest compensate	d employee	Yes	No
on line 1a? If "Yes," complete Schedul For any individual listed on line 1a, is organization and related organization	s the sum of report	table c	ompe	ensa		ando					No
individual		•	• •	•	•	•	•		4		No
5 Did any person listed on line 1a rece services rendered to the organization									• • • 5		No
Section B. Independent Contrac	ctors										
Complete this table for your five high compensation from the organization	'-	-							•	s tax vear	
· · ·	(A)			2416		. , cui			(B)	, (C)
Name an	d business address							Description	on of services	Comper	nsation
								1			

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►0

Form 99								P a g e 9
Part V		Statement o Check if Schedu	f Revenue ule O contains a respor	nse or note to any lir	ie in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
χş	1a	Federated camp	paigns 1a	70,349				
Grants Amounts	b	Membership du	es 1b					
9 9	С	Fundraising eve	ents 1 c					
Giffs, nilar Aı	d	Related organiz	ations 1d					
ons, Gifts, Grants Similar Amounts	е	Government grants	s (contributions) 1e					
Contributions, and Other Sim	f	All other contribution	ons, gifts, grants, and 1f ot included above	1,002,313				
tributio Other	g	Noncash contribution 1a-1f \$	ons included in lines	79,097	İ			
Contand	h	Total. Add lines	s 1a-1f	· · ·	1,072,662			
				Business Code				
ven	2a							
8	Ь		_					
МСЄ	С							
æ	d							
ia E	e f	All other progra	ım service revenue					
Program Serwce Revenue	•	-						
	g 3	Total. Add lines	s 2a-2f ome (including dividen	de interest				
		and other simila	aramounts)	•	597,788			597,788
	4		tment of tax-exempt bond	proceeds 🕨				
	5	Royalties	(1) Dool	(··) Davas na l				
	6a	Gross rents	(ı) Real	(II) Personal				
	ь	Less rental						
	С	expenses Rental income						
	d	or (loss) Net rental incor	me or (loss)					
	-		(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	5,863,432					
	b	Less cost or other basis and	5,099,086					
	С	sales expenses Gain or (loss)	764,346					
	d		s)		764,346			764,346
nne	8a	Gross income for events (not include) \$	luding					
Other Revenue		of contributions See Part IV, lin	reported on line 1c) e 18 a					
ř			penses b					
٠ ا	C		loss) from fundraising rom gaming activities	events 🛌				
	<i>3</i> a	See Part IV, lin						
	b	Less direct ex	penses b					
			loss) from gaming acti	vities				
	10a	Gross sales of returns and allo						
			a					
			oods sold b loss) from sales of inve	entory				
		Miscellaneous		Business Code				
	11a	BEQUEST ADM		525920	198,315			198,315
	b	MISCELLANEC		900099	576			576
	С							
	d	All other revenu						
	е	Total. Add lines		🕨	198,891			
	12	Total revenue.	See Instructions .		2,633,687	0	o	1,561,025

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

	Check if Schedule O contains a response or note to any line in this	Part IX	 (B)		 (D)
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	894,360	894,360		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	422,356	422,356		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	,	,		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	232,181	111,477	79,221	41,483
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	570,541	469,265	38,999	62,277
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	20,557	16,032	1,863	2,662
9	Other employee benefits	74,269	61,888	5,593	6,788
10	Payroll taxes	72,299	53,912	9,684	8,703
11	Fees for services (non-employees)				
а	Management				
b	Legal	3,007			3,007
c	Accounting	17,705	13,967	2,036	1,702
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	159,142		159,142	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on	100 703	00.225	6.022	02.545
40	Schedule O)	199,792	99,325	6,922	93,545
12	Advertising and promotion	7,367	6,705	335	327
13	Office expenses	72,086	44,441	6,739	20,906
14	Information technology				
15	Royalties				
16	Occupancy	153,310	122,036		14,537
17	Travel	67,864	59,915	7,246	703
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	8,700	8,380		320
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	34,473	26,860	3,144	4,469
23	Insurance	3,912	1,350	2,394	168
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	EVENTS AND CATERING	96,682	68,162	11,258	17,262
b	SUPPLIES & EQUIPMENT	24,243	20,860	1,720	1,663
С	DUES, FEES AND LICENSES	8,594	8,425	85	84
d	IN-KIND EXPENSE	1,838	1,838		
е	All other expenses	9,514	878	234	8,402
25	Total functional expenses. Add lines 1 through 24e	3,154,792	2,512,432	353,352	289,008
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ✓ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	292,731	1	303,451
	2	Savings and temporary cash investments	113,437	2	113,440
	3	Pledges and grants receivable, net	326,876	3	289,029
	4	Accounts receivable, net	3,254	4	1,224
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
<u>ss</u>	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		5	
Š	l _			6	
Assets	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	33,736	8	20.400
	9 10a	Prepaid expenses and deferred charges	·	9	28,199
	Ь	Less accumulated depreciation 10b 129,095	87,846	100	53,373
	11	Investments—publicly traded securities	24,934,755	11	26,508,393
	12	Investments—other securities See Part IV, line 11	21,001,100	12	20,000,000
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	22,704,868	15	16,600,682
	16	Total assets. Add lines 1 through 15 (must equal line 34)	48,497,503	16	43,897,791
	17	Accounts payable and accrued expenses	54,972	17	57,638
	18	Grants payable	91.881	18	265,870
	19	Deferred revenue	01,001	19	6,500
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D	21,497,320	21	15,317,168
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	21, 101, 020	21	10,011,100
ge		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
	26	D	21,644,173	25	15,647,176
	26	Total liabilities. Add lines 17 through 25	21,044,173	26	13,047,170
Š	27	lines 27 through 29, and lines 33 and 34. Unrestricted net assets	79,222	27	90,166
<u>ಣ</u>	28		2,451,576	28	3,666,626
<u>~</u>	1	Temporarily restricted net assets	24,322,532	29	24,493,823
Fund Balance	29	Permanently restricted net assets	24,322,032	29	24,493,023
正		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
0.0	30	Capital stock or trust principal, or current funds		30	
흱	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net /	33	Total net assets or fund balances	26,853,330	33	28,250,615
ž	34	Total liabilities and net assets/fund balances	48,497,503	34	43,897,791
	ı - ·	The state of the s	.5, 107, 550	<i>-</i>	.5,557,751

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				· .୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,6	33,687
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,1	.54,792
3	Revenue less expenses Subtract line 2 from line 1	3		- 5	521,105
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		26,8	353,330
5	Net unrealized gains (losses) on investments	5		1,9	18,390
6	Donated services and use of facilities	6		<u> </u>	<u> </u>
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			(
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		28,2	250,615
Par	t XII Financial Statements and Reporting				-
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both Separate basis Both consolidated and separate basis	wed on			
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
_	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	Separate basis Consolidated basis Both consolidated and separate basis			1	
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			II.	ll l
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1)nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

Open to Public **Inspection**

Name	of	the	orga	nizatio	n
HF PR	TDF	FOU	NDAT	ION	

Employer identification number

01-1325007

Par	+ T	Reas	on for Pu	blic Charity Sta	tus (All or	nanization	ns must con	nlete this	nart) See i		<u> </u>	
				te foundation becaus						nou actions	٠.	
1	Г		· ·	ion of churches, or a	· ·		= -	•	-			
2	_		-	in section 170(b)(1					(-)(-)(-)			
3	,			• • • •	rative hospital service organization described in section 170(b)(1)(A)(iii). rganization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the							
4	<u></u>											
•	'			ity, and state								
5	\sqcap	An orga	anızatıon op	erated for the benefi	t of a college	e or univers	ity owned or	operated by	/ a governmer	ntal unit des	cribed in	
		sect ion	170(b)(1)((A)(iv). (Complete P	art II)							
6	Γ	A feder	al, state, or	local government or	governmen	tal unit des	cribed in sec	tion 170(b)	(1)(A)(v).			
7	~	Anorga	anization th	at normally receives	a substanti	al part of its	s support from	n a governn	nental unit or	from the ger	neral publi	с
	_			on 170(b)(1)(A)(vi).	•	•						
8	_		•	described in section			•	•				
9	ı	_		at normally receives	-				•	-	_	SS
				rities related to its ex								
		•		oss investment inco				•		tax) from b	usinesses	i
	_			ganızatıon after June								
LO L1				ganized and operated ganized and operated								
e	Γ	a [Type I	ibes the type of supp b Type II c ox, I certify that the ion managers and ot	Type II organization	I - Function is not con	nally integrat trolled direct	ted d F ly or indired	Type III - N tly by one or:	more disqua	lified pers	ons
			1311 10u11uati 1 509(a)(2)	ion managers and on	ner than one	or more pu	ibliciy suppoi	teu organiz	ations descri	Jed III Sectio) 11 509(a)	(1)01
f			_	received a written de	etermination	from the I	RS that it is a	a Type I, Ty	pe II, or Type	III support	tıng organ	ızatıo <u>n,</u>
			this box	2006			.	.				ı
g			rugust 17, 2 ng persons?	2006, has the organi	zation acce	pted any gr	it or contribu	tion from an	y of the			
				rectly or indirectly o	ontrols, eith	ner alone or	together wit	h persons d	escribed in (ii)	Yes	No
				governing body of th			_	•	•		g(i)	+
		(ii) A fa	amıly memb	er of a person descri	bed in (i) ab	ove?				110	g(ii)	+-
			•	lled entity of a perso) above?				y(iii)	+-
h		Provide	the followi	ng information about	the support	ed organiza	ition(s)				<u> </u>	
				J	• •	J	. ,					
(i) Name of supported organization				(ii) EIN (iii) Type of (iv) Is the organization organization in		(v) Did you notify the organization		(vi) Is organiza	tıon ın	mon	mount c	
		ation			col (i) lis		ın col (i)	•	col (i) or	_	sup	port
				lines 1-9 above or IRC section	your gove docume	_	suppo	ort?	in the U	157		
				(see	docume	: IIC ·						
				instructions))	Vac	l Na	V _C -	N _a	V _C -	T No	\dashv	
					Yes	No	Yes	No	Yes	No	+	
						 	+	+		+	+	
Total				I		1	1	1	ı	1	1	

instructions

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 **(e)** 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 2,470,459 1,294,189 1,357,518 2,803,958 1,072,662 8,998,786 include any "unusual grants ") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 2,470,459 1,294,189 1,357,518 2,803,958 1,072,662 8,998,786 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 1,778,623 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column Public support. Subtract line 5 from 7,220,163 line 4 Section B. Total Support Calendar year (or fiscal year (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 **(e)** 2013 (f) Total beginning in) 🟲 2,803,958 1,072,662 2,470,459 1,294,189 1,357,518 8,998,786 Amounts from line 4 Gross income from interest, dividends, payments received on 508,026 569,038 529,549 629,128 597,788 securities loans, rents, royalties 2,833,529 and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 425,750 369,489 313,930 256,627 198,891 1,564,687 capital assets (Explain in Part IV) 11 Total support (Add lines 7 13,397,002 through 10) Gross receipts from related activities, etc (see instructions) 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here $\ldots\ldots\ldots\ldots\ldots$ Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 53 890 % Public support percentage for 2012 Schedule A, Part II, line 14 15 15 56 230 % 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box **▶**▽ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported $\vdash \Gamma$ organization b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt						
	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the state of the sta	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV		formation. Provide the explanations required by Part II, line 10; Part II, lin ne 12. Also complete this part for any additional information. (See instruction				
Facts And Circumstances Test						
Retu	ırn Reference	Explanation				
		Schodulo A / Form 000 o	000 E7) 201			

Schedule A (Form 990 or 990-EZ) 2013

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

DLN: 93493227052564

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Inspection

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** THE PRIDE FOUNDATION 91-1325007 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 Was a correction made? ☐ Yes ┌ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

section 4911 tax for this year?

┌ Yes ┌ No

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

Check	▶ □	if the filing	organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address,	EIN,
		expenses	and share of excess lobbying expenditures)	

B Check ► T if the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	7,500	
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)		
c	Total lobbying expenditures (add lines 1a and 1b	p)	7,500	
d	Other exempt purpose expenditures		3,147,292	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	3,154,792	
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both	307,740	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)	76,935	
h	Subtract line 1g from line 1a If zero or less, ente	er-0-	0	
i	Subtract line 1f from line 1c If zero or less, ente	r-0-	0	
j	If there is an amount other than zero on either lir	ne 1h or line 1ı, did the organization file Form 47	20 reporting	_ Ves

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) Total beginning in) Lobbying nontaxable amount 304,176 375,255 307,740 987,171 Lobbying ceiling amount 1,480,757 (150% of line 2a, column(e)) 40,708 164,874 7,500 Total lobbying expenditures 213,082 Grassroots nontaxable amount 76,044 93,814 76,935 246,793 Grassroots ceiling amount 370,190 (150% of line 2d, column (e)) 20,708 7,500 87,754 115,962 Grassroots lobbying expenditures

		on under section 501(h)).	(6	a)		(b)	
For e activ	-	ow, provide in Part IV a detailed description of the lobbying	Yes	No	A	moun	nt
1		n attempt to influence foreign, national, state or local ence public opinion on a legislative matter or referendum,		l			
а	Volunteers?						
b	Paid staff or management (include compe	ensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?						
d	Mailings to members, legislators, or the						
е	Publications, or published or broadcast s	<u> </u>			_		
f	Grants to other organizations for lobbying	- · · · -					
g		fs, government officials, or a legislative body?			1		
h		entions, speeches, lectures, or any similar means?			+		
i	Other activities?	-					
j	Total Add lines 1c through 1i	501(a)(2)2		1	-		
2a	If "Yes," enter the amount of any tax inc	anization to be not described in section 501(c)(3)?			-		
b c		urred by organization managers under section 4912					
d		on 4912 tax, did it file Form 4720 for this year?					
		ation is exempt under section 501(c)(4), section 5	:01/c	1/51	or se	ctio	
III.	501(c)(6).	ation is exempt under section 301(c)(4), section 5	,O1(C	,,,	01 30	Ctio	••
						Yes	No
1	Were substantially all (90% or more) due	es received nondeductible by members?			1		
2	Did the organization make only in-house	lobbying expenditures of \$2,000 or less?			2		
3		obbying and political expenditures from the prior year?			3		
Pai		ation is exempt under section 501(c)(4), section 5 (a) BOTH Part III-A, lines 1 and 2, are answered " 5."					
1	Dues, assessments and similar amounts	from members	1				
2	Section 162(e) nondeductible lobbying a expenses for which the section 527(f) to	nd political expenditures (do not include amounts of political ix was paid).					
a	Current year		2a				
b	Carryover from last year		2b				
c	Total	22/2//1//A) notices of nondedicatible section 162/2 disc	2c				
3 4		033(e)(1)(A) notices of nondeductible section 162(e) dues ne 2c exceeds the amount on line 3, what portion of the excess	3				
4		to the reasonable estimate of nondeductible lobbying and					
	political expenditure next year?		4				
5	Taxable amount of lobbying and political	expenditures (see instructions)	5				
P	art IV Supplemental Informati	on					
	ovide the descriptions required for Part I-A rt II-B, line 1 Also, complete this part for a	, line 1 , Part l-B, line 4 , Part l-C , line 5 , Part II-A (affiliated grou iny additional information	p lıst),	Part I	I-A, lı	ne 2,	and
	Return Reference	Explanation					
L PΔR		RANT OF \$7,500 WAS AWARDED TO FAIR POCATELLO, AN O	RGAN	ΙΖΔΤΙ	O N M	RKII	VG.
. 1711		FEND A CITY ANTI-DISCRIMINATION ORDINANCE IN POCA				- 1/1/11	

201104410 0 (101111 330 01 330 12) 2013	1 age -		
Part IV Supplemental Information	on <i>(continued)</i>		
Return Reference	Explanation		

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493227052564

OMB No 1545-0047

SCHEDULE D

Department of the Treasury

(Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions. ► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection**

Internal Revenue Service Name of the organization Employer identification number THE PRIDE FOUNDATION 91-1325007 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 25 Aggregate contributions to (during year) 306,853 3 Aggregate grants from (during year) 321,376 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Γ Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located **\(\mathbb{F}_{\top}\)** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Par	TIII Organizations Maintaining Co	llections of Art,	Histo	rical	Treasu	res, or O	ther	Similar Ass	sets (c	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records	s, ched	_ `		-		ignificant use	of its	
а	Public exhibition		d [_ Lo	an or exch	nange progr	ams			
b	Scholarly research		e [ot	her					
С	Preservation for future generations									
4	Provide a description of the organization's copart XIII	ollections and explain	howt	hey fur	ther the o	rganızatıon	's exe	mpt purpose II	n	
5	During the year, did the organization solicit								-	-
Do	assets to be sold to raise funds rather than to the sold to raise funds rather than to the sold to raise funds rather than to the sold to the sold to raise funds rather than the sold than the sold to raise funds rather than the sold than the so							<u>'</u>	Yes	l No
Fai	Part IV, line 9, or reported an ar					i aliswele	и те	5 10 701111 9	90,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?					r other ass	ets no	ot [_ Yes	✓ No
b	If "Yes," explain the arrangement in Part XI	II and complete the fo	ollowin	g table		_				
						-		Am	ount	
С.	Beginning balance					-	1c			
d	Additions during the year					-	1d			
e f	Distributions during the year					-	1e			
f	Ending balance	000 5 111	242			L	1f		7 12	
2a	Did the organization include an amount on F	orm 990, Part X, line	217					J	✓ Yes	Г No
b	If "Yes," explain the arrangement in Part XI									<u> </u>
Pa	rt V Endowment Funds. Complete	(a)Current year		ered " or year					(e)Four v	ears back
1a	Beginning of year balance	24,809,536		24,614,1	_	24,232,646		23,080,635		18,157,592
b	Contributions	135,226		61,3	68	102,827		90,534		894,933
c	Net investment earnings, gains, and losses	3,029,967		1,689,0	73	1,639,137		2,007,367		4,783,337
d	Grants or scholarships	246,532		231,7		212,699		176,846		83,388
e	Other expenditures for facilities and programs	1,323,616		1,281,7	89	1,108,998		734,540		671,839
f	Administrative expenses	42,702		41,5	39	38,763		37,504		
g	End of year balance	26,361,879		24,809,5	36	24,614,150		24,232,646		23,080,635
2	Provide the estimated percentage of the cur	rent year end balance	(line	1g, col	umn (a)) h	neld as				
а	Board designated or quasi-endowment 🕨									
b	Permanent endowment ► 88 000 %									
c	Temporarily restricted endowment ► 12 The percentages in lines 2a, 2b, and 2c sho	000 % uld equal 100%								
За	Are there endowment funds not in the posse	ssion of the organizat	ion the	at are h	eld and a	dmınıstered	for th	ne		T
	organization by (i) unrelated organizations							3a(Yes i) Yes	No
	(ii) related organizations		٠	٠			٠.	3a(i		No
b	If "Yes" to 3a(II), are the related organization		on Sch	nedule	R?	· . · . · .	•	3b		
4	Describe in Part XIII the intended uses of the	ne organization's endo	owmen	t funds						
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line		e org	anızat	ion answ	ered 'Yes	' to F	orm 990, Pa	rt IV, lı	ne
	Description of property	10.			st or other nvestment)	(b)Cost or basis (oth		(c) Accumulated depreciation	d (d) E	Book value
	Land								\top	
	Buildings		ŀ							
	Leasehold improvements		.							
	Equipment		. [183	2,468	129,0	95	53,373
	Other			- (5)	10() ;			F.	\perp	F2 5==
Iota	I. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part X,	colum	n (B), li	ne 10(c).)					53,373
								Schedule D	(Form 9	990) 2013

See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuat Cost or end-of-year mark	
(1)Financial derivatives		Cost of end-of-year mark	tet value
(2)Closely-held equity interests			
Other			
() mail () mail () mail () mil ()	<u> </u>		
Part VIII Investments—Program Related. Co See Form 990, Part X, line 13.	emplete if the organizati	on answered 'Yes' to Form	990, Part IV, line 11c.
(a) Description of investment	(b) Book value	(c) Method of valuat	ion
		Cost or end-of-year mark	cet value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	F		
Part IX Other Assets. Complete if the organization		90, Part IV, line 11d See Form	
(a) Descri	ption		(b) Book value
(1) ASSETS HELD IN TRUST			
(2) DEPOSITS			1,268,942
			14,572
			14,572
			14,572
			14,572
			14,572
			14,572
			14,572
			14,572
			14,572
(3) MARKETABLE SECURITIES HELD FOR OTHERS			14,572 15,317,168
(3) MARKETABLE SECURITIES HELD FOR OTHERS Total. (Column (b) must equal Form 990, Part X, col.(B) line 15			14,572 15,317,168 16,600,682
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga			14,572 15,317,168 16,600,682
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25.			14,572 15,317,168 16,600,682
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	nızatıon answered 'Yes'		14,572 15,317,168 16,600,682
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	nızatıon answered 'Yes'		14,572 15,317,168 16,600,682
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	nızatıon answered 'Yes'		14,572 15,317,168 16,600,682
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	nızatıon answered 'Yes'		14,572 15,317,168 16,600,682
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. (a) Description of liability	nızatıon answered 'Yes'		14,572 15,317,168 16,600,682
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	nızatıon answered 'Yes'		14,572 15,317,168 16,600,682
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	nızatıon answered 'Yes'		14,572 15,317,168 16,600,682
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	nızatıon answered 'Yes'		14,572 15,317,168 16,600,682
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	nızatıon answered 'Yes'		14,572 15,317,168 16,600,682
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	nızatıon answered 'Yes'		14,572 15,317,168 16,600,682
Form 990, Part X, line 25.	nızatıon answered 'Yes'		14,572 15,317,168 16,600,682
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	nızatıon answered 'Yes'		14,572 15,317,168 16,600,682
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	nızatıon answered 'Yes'		14,572 15,317,168 16,600,682
Total. (Column (b) must equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. Complete if the orgation form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes	nızatıon answered 'Yes'		14,572 15,317,168 16,600,682
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25. 1 (a) Description of liability	(b) Book value	to Form 990, Part IV, line	16,600,682 11e or 11f. See

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue per the organization answered 'Yes' to Form 990, Part IV, line 12a.	er Retur	'n Complete ıf
1	Total revenue, gains, and other support per audited financial statements	1	4,394,93!
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII) 2d		
e	Add lines 2a through 2d	2e	1,920,390
3	Subtract line 2e from line 1	3	2,474,54!
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 159,142		
b	Other (Describe in Part XIII)...........4b		
C	Add lines 4a and 4b	4c	159,142
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	2,633,687
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses if the organization answered 'Yes' to Form 990, Part IV, line 12a.	per Ret	urn. Complete
1	Total expenses and losses per audited financial statements	1	2,997,650
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities 2a 2,000		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)		
е	Add lines 2a through 2d	2e	2,000
3	Subtract line 2e from line 1	3	2,995,650
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 159,142		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	159,142
5	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18.)	5	3 154 79

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Return Reference	Explanation
PART IV, LINE 2B	THE ASSET ACCOUNT "MARKETABLE SECURITIES - HELD FOR OTHERS" AND THE LIABILITY ACCOUNT "BEQUEST FUNDS HELD FOR OTHERS" REPRESENT THE FAIR MARKET VALUE OF A PORTION OF A BEQUEST RECEIVED BY THE FOUNDATION THAT IS TO BE PAID TO SPECIFIC ORGANIZATIONS IN PROPORTIONS DETERMINED BY THE WILL
PART V, LINE 4	ENDOWED SCHOLARSHIP FUNDS PROVIDE FOR SPECIFIC SCHOLARSHIP AWARDS ONCE PER YEAR GENERAL ENDOWMENT PROVIDES FOUR QUARTERLY DISTRIBUTIONS PER YEAR FOR GENERAL OPERATIONS

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Return Reference		Explanation

Schedule D (Form 990) 2013

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

Attach to Form 990 ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

Employer identification number

DLN: 93493227052564

Open to Public Inspection

THE PRIDE FOUNDATION							
						91-1325007	
Part I General Information 1 Does the organization maintain the selection criteria used to available Describe in Part IV the organization	records to substanti ward the grants or as:	ate the amount of the			the grants or assist	ance, and	✓ Yes
Part II Grants and Other A Form 990, Part IV, lin	ssistance to Gov	vernments and O	rganizations in the	United States. Con	nplete if the orga d if additional spa	nization answered "Y ace is needed.	es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							
2 Enter total number of section 5	01(c)(3) and governr	nent organizations list	ted in the line 1 table .			<u> </u> ▶	29

Enter total number of other organizations listed in the line 1 table

PART I, LINE 2

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Pa	art IV, line 22
Part III can be duplicated if additional space is needed.	

(a)Type of grant or assistance		Number of ecipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHIPS FOR POST- SECONDARY EDUCATION		96	422,356			
Part IV Supplemental In	formation.	Provide the info	rmation required in P	art I, line 2, Part III,	column (b), and any other	additional information.
Return Reference Explanation						

GRANTS ARE TYPICALLY AWARDED FOR A SPECIFIC PROJECT AS OUTLINED IN THE GRANT APPLICATION AND AWARD LETTER

Schedule I (Form 990) 2013

Software ID:

Software Version:

EIN: 91-1325007

Name: THE PRIDE FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMP TEN TREES 1122 E PIKE ST PMB 1488 SEATTLE, WA 98122	01-0923793	501(C)(3)	8,000				SUPPORT LGBT COMMUNITY
CLACKAMAS WOMEN'S SERVICES 256 WARNER MILNE RD OREGON CITY,OR 97045	93-0900119	501(C)(3)	5,300				SUPPORT LGBT COMMUNITY
FAIR POCATELLO PO BOX 184 POCATELLO,ID 83204		501(C)(4)	7,500				SUPPORT LGBT COMMUNITY
GAY CITY HEALTH PROJECT 517 E PIKE ST SEATTLE,WA 98122	91-1685822	501(C)(3)	12,000				SUPPORT LGBT COMMUNITY
GLOBAL PARTNERSHIPS 1932 1ST AVE SUITE 400 SEATTLE,WA 98101	82-0574491	501(C)(3)	40,500				SUPPORT LGBT COMMUNITY
IDENTITY INC PO BOX 200070 ANCHORAGE, AK 99520	92-0091087	501(C)(3)	6,000				SUPPORT LGBT COMMUNITY
KING CO SEXUAL ASSAULT RESOURCE CENTER PO BOX 300 RENTON,WA 98057	91-0967255	501(C)(3)	5,250				SUPPORT LGBT COMMUNITY
LAMBDA LEGAL DEFENSE & EDUCATION FUND 120 WALL ST 19TH FLOOR NEW YORK, NY 100053919	23-7395681	501(C)(3)	24,500				SUPPORT LGBT COMMUNITY
LEGAL VOICE 907 PINE ST 500 SEATTLE, WA 98101	91-1047900	501(C)(3)	7,000				SUPPORT LGBT COMMUNITY
LOTUS RISING 711 MEDFORD CTR 154 MEDFORD,OR 97504	26-1984677	501(C)(3)	5,350				SUPPORT LGBT COMMUNITY

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MONTANA HUMAN RIGHTS NETWORK PO BOX 1509 HELENA,MT 596241509	81-0472423	501(C)(3)	5,804				SUPPORT LGBT COMMUNITY
NCBI MISSOULA 1280 S 3RD ST W SUITE B MISSOULA,MT 59801	81-0526099	501(C)(3)	5,500				SUPPORT LGBT COMMUNITY
NORTHWEST YOUTH SERVICES 1020 N STATE ST BELLINGHAM,WA 98225	91-0970561	501(C)(3)	22,100				SUPPORT LGBT COMMUNITY
ODYSSEY YOUTH CENTER 1121 S PERRY ST SPOKANE, WA 992023524	91-2045932	501(C)(3)	55,500				SUPPORT LGBT COMMUNITY
PEACE & JUSTICE ACTION LEAGUE 35 W MAIN ST 120M SPOKANE, WA 99201	91-1234899	501(C)(3)	5,500				SUPPORT LGBT COMMUNITY
PEACE FOR THE STREETS BY KIDS FROM THE STREETS 1814 SUMMIT AVE SEATTLE, WA 98122	91-1921191	501(C)(3)	7,500				SUPPORT LGBT COMMUNITY
PROGRAM FOR APPROPRIATE TECHNOLOGY IN HEALTH PO BOX 900922 SEATTLE, WA 98109	91-1157127	501(C)(3)	33,266				SUPPORT LGBT COMMUNITY
PIERCE COUNTY AIDS FOUNDATION 3520 S PINE ST TACOMA, WA 98409	91-1385245	501(C)(3)	148,700				SUPPORT LGBT COMMUNITY
PLANNED PARENTHOOD OF GREATER WASHINGTON & NORTH IDAHO 123 E INDIANA SPOKANE, WA 99207	91-6071384	501(C)(3)	5,500				SUPPORT LGBT COMMUNITY
QLAW FOUNDATION PO BOX 1286 SEATTLE, WA 98111	65-1253851	501(C)(3)	5,050				SUPPORT LGBT COMMUNITY

Form 990, Schedule I, Part	t II, Grants an	d Other Assistance	to Governments	and Organization	s in the United Sta	ites		
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
RAINBOW CENTER 741 ST HELENS AVE TACOMA,WA 98418	91-1859897	501(C)(3)	5,500				SUPPORT LGBT COMMUNITY	
SEATTLE CHILDREN'S HOSPITAL FOUNDATION PO BOX 5371 SEATTLE,WA 98145	91-1156519	501(C)(3)	5,200				SUPPORT LGBT COMMUNITY	
SEATTLE CHILDREN'S THEATRE 201 THOMAS ST SEATTLE,WA 98109	51-0172421	501(C)(3)	15,600				SUPPORT LGBT COMMUNITY	
SEATTLE COUNSELING SERVICE 1216 PINE ST SUITE 300 SEATTLE,WA 98101	23-7258439	501(C)(3)	6,000				SUPPORT LGBT COMMUNITY	
STONEWALL YOUTH PO BOX 7383 OLYMPIA,WA 985077383	94-3202727	501(C)(3)	13,200				SUPPORT LGBT COMMUNITY	
THE NORTHWEST SCHOOL 1415 SUMMIT AVE SEATTLE, WA 98122	91-1061146	501(C)(3)	10,250				SUPPORT LGBT COMMUNITY	
THREE DOLLAR BILL CINEMA 1122 E PIKE ST 1313 SEATTLE, WA 981223934	91-1708195	501(C)(3)	8,196				SUPPORT LGBT COMMUNITY	
UNIVERSITY CONGREGATIONAL UNITED CHURCH 4515 15TH AVE NE SEATTLE, WA 981054201	91-0573111	501(C)(3)	21,700				SUPPORT LGBT COMMUNITY	
WESTERN STATES CENTER PO BOX 40305 PORTLAND,OR 97240	93-0952137	501(C)(3)	5,500				SUPPORT LGBT COMMUNITY	
YOUTHCARE 2500 NE 54TH ST SUITE 100 SEATTLE, WA 981053142	91-0917079	501(C)(3)	7,300				SUPPORT LGBT COMMUNITY	

DLN: 93493227052564

OMB No 1545-0047

Open to Public

SCHEDULE M (Form 990)

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

Employer identification number

HEI	PRIDE FOUNDATION			وا	91-1325007			
Pa	rt I Types of Property							
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash cont		_	nts
	Art—Works of art							
2	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	11	77,25	STOCK MARKE	PRIC	E	
	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—O ther							
18	Collectibles							
19	Food inventory	X	4	87	6 RETAIL COST			
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts		_					
	Other►(VEL)	X	2	94	7 RETAIL COST			
26	Other►(STAGE)	X	1	1	5 RETAIL COST			
27	O ther ▶()							
28	Other ► ()							
29	Number of Forms 8283 received by th							
	for which the organization completed I	Form 8283,	Part IV, Donee Acknowle	dgement	29			
						_	Yes	No
30a	During the year, did the organization							
	it must hold for at least three years f				ed to be used			
	for exempt purposes for the entire ho		l' · · · · · · ·			30a		No
b	If "Yes," describe the arrangement in	n Part II						
	Does the organization have a gift acc					31	Yes	
32a	Does the organization hire or use this	•	related organizations to s	olicit, process, or sell n	oncash			
	contributions?					32a		No
	If "Yes," describe in Part II							
33	If the organization did not report an a	imount in co	olumn (c) for a type of prop	erty for which column (a	ı) ıs checked,			

Part II

Supplemental Information. Provide the information required by Part I, lines 30b,

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference Explanation

Schedule M (Form 990) (2013)

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DLN: 93493227052564

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

2013
Open to Public Inspection

Name of the organization
THE PRIDE FOUNDATION

Employer identification number
91-1325007

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	A COPY OF THE RETURN WAS EMAILED TO ALL BOARD MEMBERS AND DISCUSSED AT A BOARD MEETING
FORM 990, PART VI, SECTION B, LINE 12C	DIRECTORS ANNUALLY COMPLETE A CONFLICT OF INTEREST QUESTIONNAIRE
FORM 990, PART VI, SECTION B, LINE 15	THE KING COUNTY UNITED WAY SALARY SURVEY IS USED FOR COMPARABILITY DATA EXECUTIVE DIRECTOR'S REVIEW IS PERFORMED BY THE EXECUTIVE COMMITTEE AND OTHER EMPLOYEES ARE REVIEWED BY THE EXECUTIVE DIRECTOR
FORM 990, PART VI, SECTION C, LINE 19	ALL ARE AVAILABLE UPON REQUEST SUMMARIZED FINANCIAL STATEMENTS ARE AVAILABLE EACH YEAR THROUGH OUR ANNUAL REPORT PUBLICATION AUDIT REPORTS ARE AVAILABLE ON OUR WEBSITE
FORM 990, PART XII, LINE 2C	THE AUDIT COMMITTEE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR