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Department of the Treasury

Internal Revenue Service

DLN: 93491317013015

OMB No 1545-0052

Open to Public Inspection

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

▶ Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its instructions is at <u>www.irs.gov/form990pf</u>.

, and ending 12-31-2014 For calendar year 2014, or tax year beginning 01-01-2014

		undation GIE FOUNDATION			A Employer identification number				
						27-2313989			
		street (or P O box number if mail is i	not delivered to street address)	Room/suite		B Telephone nu	mber (see instruction	ns)	
55	0 10611	H AVE NE SUITE 207				(425) 440-6862			
		n, state or province, country, and ZIP o NA 98004	r foreign postal code			C If exemption	application is pendin	g, check here 🕨 🦵	
G C1	neck a	Il that apply Initial return Final return	Initial return of a fo	ormer public charity	/	2. Foreign oi	ganizations, check he	the 85%	
<u></u>	ock t	ype of organization	ge Name change	a foundation			k here and attach co Indation status was t	erminated	
_		n 4947(a)(1) nonexempt charita			n	under sectioi	n 507(b)(1)(A), chec	k here	
		ket value of all assets at end	J Accounting method			F If the founda	ation is in a 60-mont	h termination	
		from Part II, col. (c), \$ 657,697	Other (specify)			under sectioi	n 507(b)(1)(B), chec	k here 🕨 🖡	
	t I		(Part I, column (d) must b	e on casn dasis.)				(d) Dishursaments	
Pa		Analysis of Revenue a total of amounts in columns (b), (c) necessarily equal the amounts in constructions)	c), and (d) may not olumn (a) (see	(a) Revenue and expenses per books	(b) N	et investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc	c , received (attach						
		schedule)		41,669					
	2	Check F If the foundation is	not required to attach						
		Sch B		1 000		4 000			
	3	Interest on savings and tempo	· · ·	1,083		1,083			
	4	Dividends and interest from se	curities						
	5a b	Gross rents						_	
Ф	6a	Net gain or (loss) from sale of	<u> </u>						
를	Ь	Gross sales price for all assets							
Revenue	-	——————	s on time oa						
	7	Capital gain net income (from I	<u> </u>			0			
	8	Net short-term capital gain .							
	9	Income modifications							
	10a	Gross sales less returns and allowances							
	ь	Less Cost of goods sold							
	c	Gross profit or (loss) (attach s	chedule)						
	11	Other income (attach schedule	e)						
	12	Total. Add lines 1 through 11		42,752		1,083			
	13	Compensation of officers, direc	· · · ·	0		0		0	
ωń	14	Other employee salaries and w		57,276		0		57,276	
Expenses	15	Pension plans, employee bene	<u> </u>	11,894		0		11,894	
Ž	16a b	Legal fees (attach schedule). Accounting fees (attach sched		3,210		0		3,210	
Ë	C	Other professional fees (attach				0		268	
Administrative	17					3			
trat	18	Taxes (attach schedule) (see i	la la	§ 23		0		0	
2	19	Depreciation (attach schedule	······			0			
Ē	20	Occupancy							
A	21	Travel, conferences, and meet	ıngs		_				
and	22	Printing and publications	<u> </u>						
Ę	23	Other expenses (attach sched	<u> </u>	29,069		0		29,069	
atii	24	Total operating and administra	-						
Operating		Add lines 13 through 23	<u> </u>	104,788		0		101,717	
0	25	Contributions, gifts, grants pai	<u> </u>	190,656				190,656	
	26	Total expenses and disburseme 25	ents. Add lines 24 and	295,444		0		292,373	
	27	Subtract line 26 from line 12							
	a	Excess of revenue over expens	⊢	-252,692					
	ь	Net investment income (if nega	· · · ·			1,083			
	c	Adjusted net income (If negative	, ,			N- 11200V		000 PF (2014)	

Da	rt II	Ralanco Shoots Attached schedules and amounts in the description column	Beginning of year	End o	f year
u C		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	839,510	634,048	634,048
	3	Accounts receivable 🟲			
		Less allowance for doubtful accounts 🟲	44,971	789	789
	4	Pledges receivable 🟲			
		Less allowance for doubtful accounts 🕨			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) 🟲			
		Less allowance for doubtful accounts 🟲			
νl	8	Inventories for sale or use			
Sets Sets	9	Prepaid expenses and deferred charges			
Š.	10a	Investments—U S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)			
		Investments—corporate bonds (attach schedule)			
	_	Investments—land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
		Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis - 30,480			
	1-7	Less accumulated depreciation (attach schedule) > 7,620	25,908	95. 22,860	22,860
	16		23,300	22,000	22,000
	15	Other assets (describe) Total assets (to be completed by all filers—see the			
	16	instructions Also, see page 1, item I)	910,389	657,697	657,697
4	47	Accounts payable and accrued expenses	710,507	037,037	
	17				
اي	18	Grants payable			
≝∣	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
׀בֿ	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0	0	
Ņ		Foundations that follow SFAS 117, check here			
Balance		and complete lines 24 through 26 and lines 30 and 31.			
힐	24	Unrestricted			
	25	Temporarily restricted			
Fund	26	Permanently restricted			
리		Foundations that do not follow SFAS 117, check here 🕨 🔽			
5		and complete lines 27 through 31.			
낉	27	Capital stock, trust principal, or current funds	0	0	
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	910,389	657,697	
₹	30	Total net assets or fund balances (see instructions)	910,389	657,697	
	31	Total liabilities and net assets/fund balances (see instructions)	910,389	657,697	
Pa	rt II	Analysis of Changes in Net Assets or Fund Balances			
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must a	gree	
		with end-of-year figure reported on prior year's return)		1	910,389
2		Enter amount from Part I, line 27a		2	-252,692
3		Other increases not included in line 2 (itemize)		3	0
4		Add lines 1, 2, and 3		4	657,697
5		Decreases not included in line 2 (itemize)		5	0
6		Total net assets or fund balances at end of year (line 4 minus line 5)—F	art II, column (b), l	ine 30 . 6	657,697

<u> </u>	VI Canital Gains:	and Losses for Tax on Inve	stment Incom			Page
	(a) List and describe	the kınd(s) of property sold (e g , r ouse, or common stock, 200 shs I	eal estate,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a						
	-					
(e)	Gross sales price	(f) Deprectation allower (or allowable)	1	st or other basis xpense of sale		or (loss)) mınus (g)
а		,		'		, (3)
b						
С						
d						
e						
Con	nplete only for assets s	showing gain in column (h) and own	ed by the foundatio	on on 12/31/69	(I) Gains (Col	(h) gaın mınus
(i) i	M V as of 12/31/69	(j) Adjusted basis		cess of col (ı)	col (k), but not l	
		as of 12/31/69	over	col (j), if any	Losses (fro	om coi (n))
<u>а</u>					+	
b						
С .						
d						
е			If gaın, also ente			
3	Net short-term capita	- al gaın or (loss) as defined ın sectio	one 1222/E) and /6	· :\	2	
	If gain, also enter in l in Part I, line 8 .	Part I, line 8, column (c) (see instri			3	
Part V	ın Part I, line 8 .	Part I, line 8, column (c) (see instri	uctions) If (loss),	enter - 0 -	<u> </u>	
	in Part I, line 8 . Qualification L	Part I, line 8, column (c) (see instru	uctions) If (loss), o	enter - 0 - · · · n Net Investme	nt Income	
or opti	In Part I, line 8 Qualification United to the property of the	Part I, line 8, column (c) (see instriction of the solution of	uctions) If (loss), o	enter - 0 - · · · n Net Investme	nt Income	
or options sections as the	Qualification Qu	Part I, line 8, column (c) (see instruction) Jnder Section 4940(e) for Instruction in the section in the section 4942 tax on the distribution in the section 4942 tax on tax on the section 4942 tax on tax on tax on tax or	Reduced Tax o	n Net Investment on net investment y year in the base pe	nt Income	Γ Yes Γ Να
or options of the sections of the section of the sect	on Part I, line 8 Qualification Use by domestic part 1, 2, 2, 3, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4,	Part I, line 8, column (c) (see instruction) Jnder Section 4940(e) for Instruction in the section 4942 tax on the distribution of qualify under section 4940(e) D	Reduced Tax of ection 4940(a) tax able amount of any of not complete this	n Net Investme on net investment y year in the base possible part	nt Income Income) eriod?	Γ Yes Γ Να
or options of the sections of the section of the sect	onal use by domestic ponal use for the foundation does not be the appropriate amount of the foundation does not be the appropriate amount of the foundation does not be the appropriate amount of the foundation does not be the appropriate amount of the foundation does not be the appropriate amount of the foundation does not be the foundation does n	Part I, line 8, column (c) (see instruction) Jnder Section 4940(e) for Instruction in the section in the section 4942 tax on the distribution in the section 4942 tax on tax on the section 4942 tax on tax on tax on tax or	Reduced Tax of ection 4940(a) tax able amount of any of not complete this	n Net Investme on net investment y year in the base possible part	nt Income Income) eriod?	Γ Yes Γ Να
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sections the "Yes," Base page 1	Qualification (a) period years Calendar rax year beginning in) 2013 2012 2011 2010	Part I, line 8, column (c) (see instruction) Jinder Section 4940(e) for Instruction for Instruction 4940 (e) for Instruction 4942 tax on the distribution for qualify under section 4940(e) Dunt in each column for each year, so (b) Adjusted qualifying distributions 354,063 288,494	Reduced Tax of ection 4940(a) tax cable amount of any to not complete this ee instructions before the Net value of nonchar	n Net Investment y year in the base personal part fore making any ent aritable-use assets 1,125,599 1,376,996	nt Income Income) eriod? ries (d) Distributior	n ratio by col (c)) 0 31455 0 20951 0 18474
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or options section is the 'Yes," 1 Enter Base page (or	Qualification (a) onal use by domestic properties of the foundation liable for the the foundation does not be the appropriate amount of the foundation does not be the appropriate amount of the foundation does not be the appropriate amount of the foundation does not be the appropriate amount of the foundation does not be the foundation does not be foundation does no	Part I, line 8, column (c) (see instruction) Jinder Section 4940(e) for Instruction for the section 4942 tax on the distribution and qualify under section 4940(e) Dunt in each column for each year, section 4940(e) Dunt in each dualifying distributions (b) Adjusted qualifying distributions 354,063 288,494 168,986 59,226 In (d)	Reduced Tax of ection 4940(a) tax cable amount of any of not complete this eee instructions be Net value of nonchable the total on life if less than 5 years.	n Net Investment year in the base personal part fore making any ent 1,125,599 1,376,996 914,723 985,289 ne 2 by 5, or by ars	nt Income Income Income Incom	0 31455 0 20951 0 18474 0 06011 0 7689
sections the 'Yes," 1 Ente Base ; year (or	Qualification L onal use by domestic p n 4940(d)(2) applies, l foundation liable for th the foundation does not er the appropriate amo (a) period years Calendar r tax year beginning in) 2013 2012 2011 2010 2009 Total of line 1, colum A verage distribution the number of years t Enter the net value o	Part I, line 8, column (c) (see instruction) Jinder Section 4940(e) for Instruction for Instruction 4940(e) for Instruction 4942 tax on the distribution of qualify under section 4940(e) Dunt in each column for each year, so (b) Adjusted qualifying distributions 354,063 288,494 168,986 59,226 In (d)	Reduced Tax of ection 4940(a) tax of ection 4940(a) tax of not complete this error with the end of	n Net Investment y year in the base personal part fore making any ent 1,125,599 1,376,996 914,723 985,289 ne 2 by 5, or by ars 5	nt Income Income Income) eriod? ries (d) Distributior (col (b) divided	0 31455 0 20951 0 18474 0 06011 0 7689
section as the "Yes," 1 Ente Base payear (or	Qualification (a) onal use by domestic part 1, line 8 onal use by domestic part 4940 (d)(2) applies, to the foundation liable for the the foundation does not be the appropriate amount (a) period years Calendar art ax year beginning in) 2013 2012 2011 2010 2009 Total of line 1, column Average distribution the number of years to Enter the net value of Multiply line 4 by line Enter 1% of net investigation.	Part I, line 8, column (c) (see instruction) Jinder Section 4940(e) for Instruction 4940 (e) for Instruction 4942 tax on the distribution 4940 (e) Dunt in each column for each year, so (b) Adjusted qualifying distributions 354,063 288,494 168,986 59,226 In (d)	Reduced Tax of ection 4940(a) tax cable amount of any of not complete this ee instructions be expected by the expectation of th	n Net Investment y year in the base personal part fore making any ent 1,125,599 1,376,996 914,723 985,289 ne 2 by 5, or by ars 5	nt Income Income Income Income Income	0 7689: 0 1922: 821,0:
section as the "Yes," 1 Ente Base year (or	Qualification L onal use by domestic p onal use by domestic p on 4940(d)(2) applies, l foundation liable for th the foundation does not er the appropriate amo (a) period years Calendar of tax year beginning in) 2013 2012 2011 2010 2009 Total of line 1, column A verage distribution the number of years to Enter the net value of Multiply line 4 by line Enter 1% of net invest Add lines 5 and 6.	Part I, line 8, column (c) (see instruction) Jinder Section 4940(e) for It orivate foundations subject to the soleave this part blank e section 4942 tax on the distribution 4940(e) Dunt in each column for each year, soleave this part blank (b) Adjusted qualifying distributions 354,063 288,494 168,986 59,226 In (d)	Reduced Tax of ection 4940(a) tax of ection 4940(a) tax of not complete this error tax of noncharacters. (c) Net value of noncharacters that is entirely tax of the total on line if less than 5 years 4 from Part X, line	n Net Investment y year in the base possible part fore making any ent 1,125,599 1,376,996 914,723 985,289 ne 2 by 5, or by ars 5	nt Income	

	990-PF (2014) t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	must is		age 4
	Exempt operating foundations described in section 4940(d)(2), check here Fand enter "N/A"	ructio	115)	
1a	on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary-see ; instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			11
	here Fand enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
3	Add lines 1 and 2			11
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others			0
5	enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			11
6	C redits /P ayments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a			
b	Exempt foreign organizations—tax withheld at source 6b			
c	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d			0
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9			11
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded 11			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
-	It participate or intervene in any political campaign?	1a		No
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?	1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials	10		140
	published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \blacktriangleright \$0 (2) On foundation managers \blacktriangleright \$0			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers 🕨 \$0	_		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		No
_	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		No
_	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or) '		
	By state legislation that effectively amends the governing instrument so that no mandatory directions] .	
	that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			
=	General (or designate) of each state as required by General Instruction G? If "No," attach explanation.	8b		No
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			
	or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)?			
	If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses.	10		No

Pai	rt VII-A Statements Regarding Activities (continued)			- 5
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	. 12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►N/A			<u> </u>
14	The books are in care of ►SHAWN TAYLOR Telephone no ►(425))440-	-6862	
	Located at ►550 106TH AVENUE NE SUITE 207 BELLEVUE WA ZIP+4 ►98004			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			▶ ┌
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial			
	Accounts (FBAR) If "Yes", enter the name of the foreign country 🕨			
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes \(\bar{V} \) No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)? Yes V No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to $1a(1)-(6)$, did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		No
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2014?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
_	operating foundation defined in section 4942(1)(3) or 4942(1)(5))			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d			
_	and 6e, Part XIII) for tax year(s) beginning before 2014?			
	If "Yes," list the years ▶ 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
_	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
·	► 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
Ja	any time during the year?			
h	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation			
D	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section $4943(c)(7)$) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2014.).	3b		
4-		-		N/a
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4.		.
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

Pa	rt VII-B	Statements Rega	rding Activities fo	r Wł	nich Form 4720	May	Be Required (cont	inue	d)	
5a	During the	e year did the foundation	n pay or incurany amou	nt to						
	(1) Carry	on propaganda, or other	wise attempt to influence	ce leg	ııslatıon (section 49	45(e)) [?]	√ No		
	(2) Influe	nce the outcome of any	specific public election	(see	section 4955), or to	carr	ry			
	on, dıı	rectly or indirectly, any v	voter registration drive?	· .			T Yes F	√ No		
	(3) Provid	de a grant to an individua	al for travel, study, or of	thers	ımılar purposes?		┌ Yes ┡	√ No		
	(4) Provid	de a grant to an organıza	ition other than a charit	able,	etc , organization de	scrib	oed			
	ın sec	tion 4945(d)(4)(A)? (se	ee instructions)				\ \ Yes \	√ No		
	(5) Provid	de for any purpose other	than religious, charitab	le, sc	ientific, literary, or					
	educa	tional purposes, or for th	he prevention of cruelty	to ch	ııldren or anımals?.		Yes 🖟	√ No		
ь	If any ans	werıs "Yes" to 5a(1)-(5), did any of the transa	ction	s fail to qualify unde	r the	exceptions described in			
	Regulatio	ns section 53 4945 or ii	n a current notice regar	ding o	disaster assistance	(see	ınstructions)?		5b	No
	O rganızat	ions relying on a current	t notice regarding disas	teras	ssistance check her	e	▶↑	_		
c		wer is "Yes" to question								
		•			•		 Yes	- No		
		ttach the statement requi					, ,			
6a		undation, during the yea				pren	niums on			
		I benefit contract?						- No		
ь							benefit contract?		6b	No
		o 6b, file Form 8870.	, pa, premiums, unecc	., 011	an cody, on a perso	onui l	Jane Contract.	•	⊢ —̈́	 110
7a		ne during the tax year, w	as the foundation a par	tv to :	a probibited tay chol	tort	ransaction? TYes (- No		
							the transaction?		7b	
							n Managers, Highly			lovoos
Pa		and Contractors	conficers, Director	3, 1	i ustees, i ound	101	i Managers, mgmy	raiu	шр	ioyees,
1		icers, directors, trustees	s, foundation managers	and t	heir compensation (see i	nstructions).			
			(b) Title, and average	(c) Compensation		(d) Contributions to	(a) F	vnanc	e account,
	(a) Nar	ne and address	hours per week	(If not paid, enter		mployee benefit plans			owances
	A -1 -1 - 1 - 1	D-t- T-bl-	devoted to position	+	-0-)	and	deferred compensation			
See	Additional	Data Lable	-							
				+						
2	Compensat	ion of five highest-paid	employees (other than	thos	e included on line 1–	-see	instructions). If none, e	nter "N	NONE."	,
	-		(b) Title and ave				(d) Contributions to			
(a)		address of each employ nore than \$50,000	hours per wee	_	(c) Compensation	n	employee benefit	1		e account, owances
	рато п	iore than \$50,000	devoted to posit	ion			plans and deferred compensation	00	neran	owances
NAT	NA AUS		FOUNDATION		50	,452	,			0
		ENUE NE STE 207	COORDINAT			,				·
	LEVUE, WA		40 00							
	· ·									
			\dashv							
Tota	l number of	other employees paid o	ver \$50,000							0

Part VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If	none, enter "NONE".	
(a) Name and address of each person paid more than \$50,000 (b) Type of	service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informatio organizations and other beneficiaries served, conferences convened, research papers produced, etc.	n such as the number of	Expenses
1THE IPADS FOR KIDS PROGRAM AT SEATTLE CHILDREN'S HOSPITAL LAUNCHED IN THE PROGRAM SERVED APPROXIMATELY 11,280 PATIENTS WITHIN ALL INPATIEN HOSPITAL, BOTH BY LOANING CUSTOMIZED IPADS TO PATIENTS STAYING IN THE WELL AS PROVIDING IPADS TO HOSPITAL STAFF TO USE IN THEIR DIRECT INTERVENTE HOSPITAL STAFF INCLUDES CHILD LIFE SPECIALISTS, MUSIC THERAPY AND RECREATION THERAPY	T UNITS OF THE E HOSPITAL, AS VENTIONS WITH	71,472
2THE BUNGIE FOUNDATION PURCHASED A PONTOON BOAT IN 2012 TO SOLELY BE CHILDREN'S CAMPS AFFILIATED WITH CHILDREN'S HOSPITALS AND ASSOCIATE F 2014, THE BOAT WAS USED AT THE SEATTLE CHILDREN'S HOSPITAL STANLEY STAFOR DISABLED AND SICK KIDS, SERVING APPROXIMATELY 150 CHILDREN	OUNDATIONS IN	9,712
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	d 2	A mount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. 1 purposes 1a 833.518 1h 1c 1d 833.518 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 833.518 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 12.503 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 821.015 5 41.051 **Distributable Amount** (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and Part XT certain foreign organizations check here $\blacktriangleright \Gamma$ and do not complete this part.) 41.051 1 Tax on investment income for 2014 from Part VI, line 5. 11 2a Income tax for 2014 (This does not include the tax from Part VI). . . 2c 11 3 41.040 3 4 Λ 4 5 5 41.040 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 7 41.040 Part XIII Oualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. 1a 292.373 1b 0 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. 2 2 3 Amounts set aside for specific charitable projects that satisfy the За. 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 292,373 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 5 11 292,362 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

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

	all VIII Olidisti indiced Tilcollie (see ilisti	actions)			
		(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1	Distributable amount for 2014 from Part XI, line 7	00.600	reare prior to lead	2020	41,040
	Undistributed income, if any, as of the end of 2014				,
	Enter amount for 2013 only			0	
	Total for prior years 20		0		
3	Excess distributions carryover, if any, to 2014				
	From 2009				
	From 2010				
	From 2011				
	From 2012				
	From 2013				
f	Total of lines 3a through e	694,730			
	Qualifying distributions for 2014 from Part				
	XII, line 4 🕨 \$ 292,373				
а	Applied to 2013, but not more than line 2a			0	
	Applied to undistributed income of prior years		0		
	(Election required—see instructions).				
C	Treated as distributions out of corpus (Election	0			
	required—see instructions)				
d	Applied to 2014 distributable amount				41,040
е	Remaining amount distributed out of corpus	251,333			
5	Excess distributions carryover applied to 2014	0			(
	(If an amount appears ın column (d), the same amount must be shown ın column (a).)				
6	Enter the net total of each column as				
Ü	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	946,063			
b	Prior years' undistributed income Subtract line 4b from line 2b		0		
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)		0		
-4	tax has been previously assessed Subtract line 6c from line 6b Taxable amount				
u	—see instructions		0		
e	Undistributed income for 2013 Subtract line				
	4a from line 2a Taxable amount—see				
	instructions			0	
f	Undistributed income for 2014 Subtract				
	lines 4d and 5 from line 1 This amount must be distributed in 2015				(
7	Amounts treated as distributions out of				
•	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may	0			
	be required - see instructions)	0			
8	Excess distributions carryover from 2009 not	0			
_	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	946,063			
10	Analysis of line 9				
	Excess from 2010 53,839				
b	Excess from 2011 123,332				
c	Excess from 2012 219,730				
d	Excess from 2013 297,829				
е	Excess from 2014 251,333				

Check here F if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

- a The name, address, and telephone number or email address of the person to whom applications should be addressed
- b The form in which applications should be submitted and information and materials they should include
- c Any submission deadlines
- **d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount
	or substantial contributor	recipient		
a Paid during the year See Additional Data Table	or substantial contributor	recipient		
				100.65
Total	<u> </u>	<u> </u>		190,65

Form 990-F	· · · · · · · · · · · · · · · · · · ·	8-4:				Page 12
	Analysis of Income-Producions amounts unless otherwise indicated		usiness income	Excluded by section	n 512, 513, or 514	(e)
-	service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See instructions)
						mstructions)
с						
	and contracts from government agencies					
3 Interes	rship dues and assessments t on savings and temporary cash nents			14	1,083	
	ds and interest from securities tal income or (loss) from real estate					
a Debt-	financed property					
6 Net ren	tal income or (loss) from personal					
8 Gain or	nvestment income					
9 Net inc	ome or (loss) from special events					
	orofit or (loss) from sales of inventory evenue a					
d						
12 Subtota	I Add columns (b), (d), and (e).)	1,083	
(See w	odd line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify ca	alculations)				1,083
Part XVI Line No.	Explain below how each activity for whic the accomplishment of the foundation's instructions)	h income is re	ported ın column (e) of Part XVI-A c	ontributed importa	

Part	XVII	Information Re Noncharitable					sactions and	l Relationships	With			
		rganization directly or in 01(c) of the Code (other	ndırectly (engage ir	n any of t	he following wi					Yes	No
orga	ınızat	ions?										
a Trar	nsfers	from the reporting four	idation to	a noncha	arıtable e	exempt organiz	ation of					
										1a(1)		No
(2)	Othe	erassets								1a(2)		No
					_							
d If th	e ans	wer to any of the above	ıs "Yes,"	complet	e the fol	lowing schedul	e Column (b) s	hould always show	the fair ma	rket va		140
(a) Line	No	(b) Amount involved	(c) Name	of nonchai	rıtable exe	mpt organization	(d) Description	on of transfers, transac	tions, and sha	rıng arra	ngemer	nts
												-
desc	ribed	d in section 501(c) of the complete the following:	ne Code (d schedule		n sectior	n 501(c)(3)) or	in section 527	?			₂₅ [•	, No
Sign	the	best of my knowledge a	nd belief,	ıt ıs true	, correct				an taxpayer	r) is bas	sed on	all
Here)	*****				2015-11-12		k *	return - with the			
	<u></u>	ther assets. La(2) New transactions	10									
			name	Prepare	er's Sıgn	ature				07465	598	
Paid Prepa Use	rer	CLARK NUBER					'	Firm's EIN ► 9	1-1194016	5		
Only		10900 NE 4TH STRE	ET SUITE	E 1700	BELLEV	UE,		Phone no (42	5)454-491	. 9		

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances	
HAROLD RYAN	PRESIDENT	0	0	0	
550 106TH AVENUE NE SUITE 207 BELLEVUE, WA 98004	0 50				
BRENT ABRAHAMSEN	SECRETARY	0	0	0	
550 106TH AVENUE NE SUITE 207 BELLEVUE, WA 98004	0 50				
ONDRAUS JENKINS	DIRECTOR	0	0	0	
550 106TH AVENUE NE SUITE 207 BELLEVUE, WA 98004	0 50				
PETE PARSONS	DIRECTOR	0	0	0	
550 106TH AVENUE NE SUITE 207 BELLEVUE, WA 98004	0 50				
ZACH RUSSELL	DIRECTOR	0	0	0	
550 106TH AVENUE NE SUITE 207 BELLEVUE, WA 98004	0 50				

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ACCION INTERNATIONAL 56 ROLAND STREET SUITE 300 BOSTON,MA 02129	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	1,000
ACLU 125 BROAD STREET 18TH FLOOR NEW YORK,NY 10004	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	250
AGAINST MALARIA FOUNDATION 310 W 20TH ST STE 300 KANSAS CITY,MO 64108	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	500
ALCOTT ELEMENTARY PTSA 4213 228TH AVE NE REDMOND, WA 98053	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	40
AMERICAN CANCER SOCIETY 250 WILLIAMS STREET NW ATLANTA,GA 30303	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	585
AMERICAN DIABETES ASSOCIATION 1701 N BEAUREGARD STREET ALEXANDRIA,VA 22311	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	20
AMERICAN LUNG ASSOCIATION 55 W WACKER DRIVE SUITE 1150 CHICAGO,IL 60601	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	100
AMERICAN RED CROSS 2025 E STREET NW WASHINGTON,DC 20006	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	750
ANNA SCHINDLER FOUNDATION 6700 S STATELINE RD POST FALLS,ID 83854	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	5,000
ARCHDIOCESE OF SEATTLE 710 9TH AVE SEATTLE,WA 98104	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	567
ARTHRITIS FOUNDATION 115 NE 100TH STREET SUITE 350 SEATTLE,WA 98125	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	150
ASCENDING LIGHTS LEADERSHIP NETWORK PO BOX 27790 LOS ANGELES, CA 90027	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	600
ASPCA 424 E 92ND ST NEWYORK,NY 101286804	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	250
BEN FRANKLIN PTA 12434 NE 60TH ST KIRKLAND,WA 98033	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	300
BUCKY BEAVER PRESCHOOL 13803 115TH AVE NE KIRKLAND, WA 98034	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	900
Total			🕨 3a	190,656

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
BURKE MUSEUM OF NATURAL HISTORY & CULTURE UNIVERSITY OF WASHINGTON BOX 353010 SEATTLE, WA 98195	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	200
CARINGBRIDGE PO BOX 6032 ALBERT LEA,MN 56007	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	101
CHARITY WATER 200 VARICK STREET SUITE 201 NEW YORK,NY 10014	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	150
CHILD'S PLAY CHARITY 8040 161ST AVE NE REDMOND,WA 98052	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	11,125
CHILD'S PLAY CHARITY 8040 161ST AVE NE REDMOND,WA 98052	NONE	PC 509(A)(1) OR 509	AUCTION ITEMS	192
CHILDHAVEN 316 BROADWAY SEATTLE,WA 981225325	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	450
CHILDREN'S MIRACLE NETWORK HOSPITALS 205 W 700 S SALT LAKE CITY, UT 84101	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	510
CLASSICAL 981 10 HARRISON STREET SEATTLE,WA 98109	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	120
COMPASSION INTL 12290 VOYAGER PARKWAY COLORADO SPRINGS,CO 80921	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	1,463
CONSERVATION NORTHWEST 1829 10TH AVE W SUITE B SEATTLE,WA 98119	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	1,000
CREEKSIDE ELEMENTARY PTA 20777 SE 16TH ST SAMMAMISH,WA 98075	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	100
CYSTIC FIBROSIS FOUNDATION 6931 ARLINGTON ROAD 2ND FLOOR BETHESDA,MD 20814	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	500
DEMOCRACY NOW 207 W 25TH ST 11TH FLOOR NEW YORK, NY 10001	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	1,000
DIRECT RELIEF 27 S LA PATERA LANE SANTA BARBARA,CA 93117	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	25
DOCTORS WITHOUT BORDERS 333	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	1,950

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor. A Paid during the year DONORSCHOOSEORG 134 WEST 37 STREET 11TH FLOOR NEW YORK, NY 10018 EARTH JUSTICE 50 CALIFORNIA STREET SUITE 500 SAN FRANCISCO, CA 94111 EASTSIDE BABY CORNER 1510 NW MAPLE ST PO BOX 712 ISSAQUAH, WA 98027 ELECTRONIC FRONTIER FOUNDATION 815 EDDY STREET SAN FRANCISCO, CA 94109 EVERGREEN HEALTHCARE FOUNDATION 12040 NE 128TH STREET MS-5 KIRKLAND, WA 98034 EXTRA LIFE 205 W 700 S SALT LAKE CITY, UT 84101 FAIR 124 W 30TH STREET SUITE 201 NONE FARESTART 700 VIRGINIA ST SEATURED 100 NONE FARESTART 700 VIRGINIA ST SEATURED 100 NONE FIRST PRESBYTERIAN CHURCH OF BELLEVUE WAY NE BELLEVUE, WA 98004 FISTULA FOUNDATION 1900 THE ALAMEDA SUITE 500 SAN JOSE, CA 981261427 FOSTER KINSHIP 317 S 6TH ST LAX VEGAS NONE FOSTER KINSHIP 317 S 6TH ST LAX VEGAS NONE PC 509(A) (1) OR 509 FRED HUTCHINSON CANCER RESEARCH CENTER 1100 FAIR LAY WAY NE NONE PC 509(A) (1) OR 509 GENERAL SUPPORT FRED HUTCHINSON CANCER RESEARCH CENTER 1100 FAIR LAY WAY NE 98024 FRED HUTCHINSON CANCER RESEARCH CENTER 1100 FAIR VIEW WAY EN PO BOX 190244	
a Paid during the year DONORSCHOOSEORG 134 WEST 37 NONE PC 509(A) (1) OR 509 EARTH JUSTICE 50 CALIFORNIA STREET SUITE 500 SAN FRANCISCO, CA 94111 EASTSIDE BABY CORNER 1510 NW MAPLE ST PO BOX 712 ISSAQUAH, WA 98027 ELECTRONIC FRONTIER FOUNDATION 815 EDDY STREET SAN FRANCISCO, CA 94109 EVERGREEN HEALTHCARE FOUNDATION 12040 NE 128TH STREET MS. SIRVELAND, WA 98034 EXTRA LIFE 205 W 700 S SALT LAKE CITY, UT 84101 FAIR 124 W 30TH STREET SUITE 201 NONE PC 509(A) (1) OR 509 FARESTART 700 VIRGINIA ST SEALLE VILLE WAY NE BELLEVUE, WA 98004 FISTULA FOUNDATION 1900 THE ALAMEDA SUITE 500 SAN JOSE, CA 981261427 FOSTER KINSHIP 317 S 6TH ST LAS VEGAS, NV 89101 FRED HUTCHINSON CANCER RESEARCH CENTER 100 NONE PC 509(A) (1) OR 509 FRED HUTCHINSON CANCER RESEARCH CENTER 100 NONE PC 509(A) GENERAL SUPPORT (1) OR 509 FRED HUTCHINSON CANCER RESEARCH CENTER 1100 FRED HUTCHINSON CANCER RESEARCH CENTER 1100 FRED HUTCHINSON CANCER RESEARCH CENTER 1100	r A mount
DONORSCHOOSEORG 134 WEST 37 STREET 11TH FLOOR NEW YORK,NY 10018 PC 509(A) (1) OR 509 GENERAL SUPPORT	
STREET 11TH FLOOR	
STREET SUITE 500 SAN FRANCISCO, CA 94111 EASTSIDE BABY CORNER 1510 NW MAPLE ST PO BOX 712 ISSAQUAH, WA 98027 ELECTRONIC FRONTIER FOUNDATION 815 EDDY STREET SAN FRANCISCO, CA 94109 EVERGREEN HEALTHCARE FOUNDATION 12040 NE 128TH STREET MS-5 KIRKLAND, WA 98034 EXTRA LIFE 205 W 700 S SALT LAKE CITY, UT 84101 FAIR 124 W 30TH STREET SUITE 201 NONE FARESTART 700 VIRGINIA ST SEATTLE, WA 98101 FIRST PRESBYTERIAN CHURCH OF BELLEVUE 1717 BELLEVUE WAY NE BELLEVUE 1717 BELLEVUE WAY NE BELLEVUE 1717 BELLEVUE WAY NE BELLEVUE, WA 98004 FISSULA FOUNDATION 1900 THE ALAMEDA SUITE 500 SAN JOSE, CA 981261427 FOSTER KINSHIP 317 S 6TH ST LAS VEGAS, NV 89101 RESEARCH CENTER 1100 (1) OR 509 (1) OR 509 GENERAL SUPPORT (A)(I) GENERAL SUPPORT (B)(I) GENERAL SUPPORT (B) GEN	75
MAPLE ST PO BOX 712 ISSAQUAH, WA 98027 ELECTRONIC FRONTIER FOUNDATION 815 EDDY STREET SAN FRANCISCO, CA 94109 EVERGREEN HEALTHCARE FOUNDATION 12040 NE 128TH STREET MS-5 KIRKLAND, WA 98034 EXTRA LIFE 205 W 700 S SALT LAKE CITY, UT 84101 NONE PC 509(A) (1) OR 509 GENERAL SUPPORT (1) OR 509 FAIR 124 W 30TH STREET SUITE 201 NEW YORK, NY 10001 PC 509(A) (1) OR 509 GENERAL SUPPORT (1) OR 509 FARESTART 700 VIRGINIA ST SEATTLE, WA 98101 NONE PC 509(A) (1) OR 509 FIRST PRESBYTERIAN CHURCH OF BELLEVUE, WA 98004 PC 170(B)(1) GENERAL SUPPORT (A)(I) OR 509 GENERAL SUPPORT (BELLEVUE, WA 98004 FISTULA FOUNDATION 1900 THE ALAMEDA SUITE 500 SAN JOSE, CA 981261427 FOSTER KINSHIP 317 S 6TH ST LAS VEGAS, NV 89101 NONE PC 509(A) (1) OR 509 GENERAL SUPPORT (1) OR 509 GEN	600
FOUNDATION 815 EDDY STREET SAN FRANCISCO, CA 94109 EVERGREEN HEALTHCARE FOUNDATION 12040 NE 128TH STREET MS-5 KIRKLAND, WA 98034 EXTRA LIFE 205 W 700 S SALT LAKE CITY, UT 84101 FAIR 124 W 30TH STREET SUITE 201 NEW YORK, NY 10001 FARESTART 700 VIRGINIA ST SEATTLE, WA 98101 FIRST PRESBYTERIAN CHURCH OF BELLEVUE 1717 BELLEVUE WAY NE BELLEVUE, WA 98004 FISTULA FOUNDATION 1900 THE ALAMEDA SUITE 500 SAN JOSE, CA 981261427 FOSTER KINSHIP 317 S 6TH ST LAS VEGAS, NV 89101 FRED HUTCHINSON CANCER RESEARCH CENTER 1100 NONE PC 509(A) (1) OR 509 GENERAL SUPPORT (A)(I) GENERAL SUPPORT (A)(I) GENERAL SUPPORT (BILLEVUE WAY NE BELLEVUE, WA 98004 FOR 509(A) (1) OR 509 GENERAL SUPPORT (A)(I) OR 509 GENERAL SUPPORT (BILLEVUE WAY NE BELLEVUE, WA 98004 FOSTER KINSHIP 317 S 6TH ST LAS VEGAS, NV 89101 FRED HUTCHINSON CANCER RESEARCH CENTER 1100	313
FOUNDATION 12040 NE 128TH STREET MS-5 KIRKLAND, WA 98034 EXTRA LIFE 205 W 700 S SALT LAKE CITY, UT 84101 FAIR 124 W 30TH STREET SUITE 201 NEW YORK, NY 10001 FARESTART 700 VIRGINIA ST SEATTLE, WA 98101 FIRST PRESBYTERIAN CHURCH OF BELLEVUE 1717 BELLEVUE WAY NE BELLEVUE, WA 98004 FISTULA FOUNDATION 1900 THE ALAMEDA SUITE 500 SAN JOSE, CA 981261427 FOSTER KINSHIP 317 S 6TH ST LAS VEGAS, NV 89101 FRED HUTCHINSON CANCER RESEARCH CENTER 1100 NONE PC 509(A) (1) OR 509 GENERAL SUPPORT (1) OR 509	200
SALT LAKE CITY, UT 84101 FAIR 124 W 30TH STREET SUITE 201 NEW YORK, NY 10001 FARESTART 700 VIRGINIA ST SEATTLE, WA 98101 FIRST PRESBYTERIAN CHURCH OF BELLEVUE 1717 BELLEVUE WAY NE BELLEVUE, WA 98004 FISTULA FOUNDATION 1900 THE ALAMEDA SUITE 500 SAN JOSE, CA 981261427 FOSTER KINSHIP 317 S 6TH ST LAS VEGAS, NV 89101 FRED HUTCHINSON CANCER RESEARCH CENTER 1100 PC 509(A) (1) OR 509 GENERAL SUPPORT (1) OR 509 FPC 509(A) GENERAL SUPPORT (1) OR 509 GENERAL SUPPORT (1) OR 509 FRED HUTCHINSON CANCER RESEARCH CENTER 1100	150
201 NEW YORK, NY 10001 FARESTART 700 VIRGINIA ST SEATTLE, WA 98101 FIRST PRESBYTERIAN CHURCH OF BELLEVUE 1717 BELLEVUE WAY NE BELLEVUE, WA 98004 FISTULA FOUNDATION 1900 THE ALAMEDA SUITE 500 SAN JOSE, CA 981261427 FOSTER KINSHIP 317 S 6TH ST LAS VEGAS, NV 89101 FRED HUTCHINSON CANCER RESEARCH CENTER 1100 (1) OR 509 (1) OR 509 GENERAL SUPPORT (1) OR 509	100
FIRST PRESBYTERIAN CHURCH OF BELLEVUE 1717 BELLEVUE WAY NE BELLEVUE, WA 98004 FISTULA FOUNDATION 1900 THE ALAMEDA SUITE 500 SAN JOSE, CA 981261427 FOSTER KINSHIP 317 S 6TH ST LAS VEGAS, NV 89101 FRED HUTCHINSON CANCER RESEARCH CENTER 1100 (1) OR 509 PC 170(B)(1) GENERAL SUPPORT (A)(I) FOR 509 PC 509(A) (1) OR 509 GENERAL SUPPORT (1) OR 509 GENERAL SUPPORT (1) OR 509 GENERAL SUPPORT (1) OR 509	500
BELLEVUE 1717 BELLEVUE WAY NE BELLEVUE, WA 98004 FISTULA FOUNDATION 1900 THE ALAMEDA SUITE 500 SAN JOSE, CA 981261427 FOSTER KINSHIP 317 S 6TH ST LAS VEGAS, NV 89101 FRED HUTCHINSON CANCER RESEARCH CENTER 1100 (A)(I) PC 509(A) (I) OR 509 GENERAL SUPPORT (1) OR 509 GENERAL SUPPORT (1) OR 509	500
ALAMEDA SUITE 500 SAN JOSE, CA 981261427 FOSTER KINSHIP 317 S 6TH ST LAS VEGAS, NV 89101 FRED HUTCHINSON CANCER RESEARCH CENTER 1100 (1) OR 509 (1) OR 509 PC 509(A) (1) OR 509 GENERAL SUPPORT (1) OR 509	7,606
LAS VEGAS, NV 89101 (1) OR 509 FRED HUTCHINSON CANCER RESEARCH CENTER 1100 PC 509(A) (1) OR 509 GENERAL SUPPORT (1) OR 509	250
RESEARCH CENTER 1100 (1) OR 509	1,210
SEATTLE, WA 981091024	5,225
FRIENDS OF CLOUD MOUNTAIN 373 AGREN ROAD CASTLE ROCK, WA 98611 NONE PC 509(A) (1) OR 509 GENERAL SUPPORT	300
FRIENDS OF KEXP 113 DEXTER AVE NONE PC 509(A) GENERAL SUPPORT (1) OR 509 SEATTLE, WA 98109	468
GEORGIA TECH ALUMNI ASSOCIATION 190 NORTH AVE NW ATLANTA,GA 303132550 NONE PC 509(A) (1) OR 509	150
Total	3a 190,656

THOMAS WAY					
a Rand during the year	Recipient	show any relationship to	status of		A mount
GOSPEL FOR ASIA 1116 ST	Name and address (home or business)		recipient		
THOMAS WAY	a Paid during the year				
DRIVE ISSAQUAH, WA 98029	THOMAS WAY	NONE		GENERAL SUPPORT	500
SOUNDATION 2823 ROCKEFELLER	DRIVE	NONE		GENERAL SUPPORT	350
PINE STREET SUITE 322 SEATTLE, WA 98122 NONE PC 509(A)(1) GENERAL SUPPORT 2,67	FOUNDATION 2823 ROCKEFELLER AVENUE	NONE		GENERAL SUPPORT	100
3300 120TH AVENUE NE	PINE STREET SUITE 322	NONE		GENERAL SUPPORT	300
AGENCY 13132 NE 177TH PL	7300 120TH AVENUE NE	NONE		GENERAL SUPPORT	2,676
NE STE 275 REDMOND, WA 98052 SAQUAH FOOD & CLOTHING BANK 179 1ST AVE SE ISSAQUAH, WA 98027 SAQUAH, WA 98034 SAQUAH, WA 98039 SAATILE, WA 98109 SAQUAH, WA 98009 SAQUAH,	AGENCY 13132 NE 177TH PL	NONE		GENERAL SUPPORT	250
BANK 179 1ST AVE SE ISSAQUAH, WA 98027	NE STE 275	NONE		GENERAL SUPPORT	250
FOUNDATION PO BOX 835 ISSAQUAH, WA 98027	BANK 179 1ST AVE SE	NONE		GENERAL SUPPORT	250
NE 132ND STREET KIRKLAND, WA 98034 CR 509	FOUNDATION PO BOX 835	NONE		GENERAL SUPPORT	360
SEATTLE, WA 98109 KHAN ACADEMY PO BOX 1630 MOUNTAIN VIEW, CA 94042 KING FM 981 2000 18TH AVE E SEATTLE, WA 98112 KUOW PUGET SOUND PUBLIC RADIO 4518 UNIVERSITY WAY NE SUITE 310 SEATTLE, WA 98105 LEUKEMIA & LYMPHOMA SOCIETY 123 NW 36TH ST SUITE 100 SEATTLE, WA 98107 OR 509 OR 509 PC 509(A)(1) GENERAL SUPPORT OR 509 BENERAL SUPPORT OR 509 1,05 GENERAL SUPPORT OR 509 1,05 1,05 GENERAL SUPPORT OR 509 1,05	NE 132ND STREET	NONE		GENERAL SUPPORT	100
MOUNTAIN VIEW, CA 94042 KING FM 981 2000 18TH AVE E SEATTLE, WA 98112 KUOW PUGET SOUND PUBLIC RADIO 4518 UNIVERSITY WAY NE SUITE 310 SEATTLE, WA 98105 LEUKEMIA & LYMPHOMA SOCIETY 123 NW 36TH ST SUITE 100 SEATTLE, WA 98107 OR 509 PC 509(A)(1) GENERAL SUPPORT 83 OR 509 PC 509(A)(1) GENERAL SUPPORT 1,05		NONE		GENERAL SUPPORT	75
KUOW PUGET SOUND PUBLIC RADIO 4518 UNIVERSITY WAY NE SUITE 310 SEATTLE, WA 98105 LEUKEMIA & LYMPHOMA SOCIETY 123 NW 36TH ST SUITE 100 SEATTLE, WA 98107 OR 509 PC 509(A)(1) OR 509 PC 509(A)(1) OR 509 GENERAL SUPPORT 1,05		NONE		GENERAL SUPPORT	1,000
RADIO 4518 UNIVERSITY WAY NE SUITE 310 SEATTLE, WA 98105 LEUKEMIA & LYMPHOMA SOCIETY 123 NW 36TH ST SUITE 100 SEATTLE, WA 98107 OR 509 PC 509(A)(1) GENERAL SUPPORT 1,05		NONE		GENERAL SUPPORT	120
123 NW 36TH ST SUITE 100 SEATTLE, WA 98107	RADIO 4518 UNIVERSITY WAY NE SUITE 310	NONE		GENERAL SUPPORT	835
Total	123 NW 36TH ST SUITE 100	NONE		GENERAL SUPPORT	1,050
, the state of the	Total				190,656

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
LISTEN AND TALK 8610 8TH AVE	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	200
SEATTLE, WA 98115				
LYNCHBURG COLLEGE 501 LAKESIDE DRIVE LYNCHBURG,VA 245013113	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	100
MAKE-A-WISH FOUNDATION 811 FIRST AVENUE SUITE 520 SEATTLE,WA 98104	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	13,500
MAKE-A-WISH FOUNDATION 811 FIRST AVENUE SUITE 520 SEATTLE,WA 98104	NONE	PC 509(A)(1) OR 509	HOSTING SICK CHILDREN AND FULFILLING WISHES	44,949
MARCH OF DIMES FOUNDATION 10301 NE 10TH ST 759 BELLEVUE, WA 98004	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	100
MERCY CORPS 45 SWANKENY STREET PORTLAND,OR 97204	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	625
MODEST NEEDS FOUNDATION 115 E 30TH ST FL 1 NEW YORK,NY 10016	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	500
MOUNT BAKER THEATRE 104 N COMMERCIAL ST BELLINGHAM, WA 98225	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	100
NATIONAL MULTIPLE SCLEROSIS SOCIETY 733 THIRD AVENUE NEW YORK,NY 10017	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	345
NATIONAL PARKS CONSERVATION ASSOCIATION 777 6TH STREET NW SUITE 700 WASHINGTON, DC 200013723	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	25
NATIONAL STROKE ASSOCIATION 9707 EAST EASTER LANE SUITE B CENTENNIAL,CO 80112	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	75
NATURAL RESOURCES DEFENSE COUNCIL 40 WEST 20TH ST NEW YORK,NY 10011	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	500
NETWORK FOR GOOD 515 THIRD NONE AVENUE SEATTLE, WA 98104		PC 509(A)(1) OR 509	GENERAL SUPPORT	50
NORTHWEST HARVEST PO BOX NONE 12272 SEATTLE, WA 98102		PC 509(A)(1) OR 509	GENERAL SUPPORT	200
NORTHWEST ORGANIZATION FOR ANIMAL HELP 31300 BRANDSTROM ROAD STANWOOD,WA 98292	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	1,000
Total				190,656

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
NORTHWEST SCHOONER SOCIETY PO BOX 75421 SEATTLE,WA 98175	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	500
OPEN WINDOW SCHOOL 6128 168TH PLACE SE BELLEVUE, WA 98006	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	500
PACIFIC SCIENCE CENTER 200 SECOND AVE N SEATTLE,WA 98109	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	1,045
PERUVIAN HEARTS 24918 GENESEE TRAIL RD GOLDEN,CO 80401	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	200
PHINNEY NEIGHBORHOOD ASSOCIATION 6532 PHINNEY AVE N SEATTLE, WA 98103	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	100
PIONEERS 10123 WILLIAM CAREY DRIVE ORLANDO,FL 328326931	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	1,145
PLAN USA 155 PLAN WAY WARWICK,RI 02886	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	100
PLANNED PARENTHOOD 1110 VERMONT AVE NW WASHINGTON,DC 20005	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	1,150
POET & WRITERS INC 216 1ST AVE S SUITE 251 SEATTLE,WA 98104	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	250
QUEEN ANNE ELEMENTARY PTSA 411 BOSTON ST SEATTLE,WA 98109	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	500
REEL GRRLS 1409 21ST AVE SEATTLE,WA 98122	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	250
RIGHT QUESTION INSTITUTE 2464 MASSACHUSETTS AVENUE SUITE 314 CAMBRIDGE,MA 02140	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	100
RONALD MCDONALD HOUSE CHARITIES 5130 40TH AVE NE SEATTLE,WA 98105	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	31,100
RONALD MCDONALD HOUSE CHARITIES 5130 40TH AVE NE SEATTLE,WA 98105	NONE	PC 509(A) (1) OR 509	HOSTING CHILDREN	146
RYTHER 2400 NE 95TH ST SEATTLE,WA 98115	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	100
Total			▶ 3a	190,656

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
SAMARITAN'S PURSE PO BOX 3000 BOONE,NC 28607	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	30
SEATTLE CHILDREN'S HOSPITAL 4800 SAND POINT WAY NE SEATTLE,WA 98105	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	3,850
SEATTLE CHILDREN'S HOSPITAL 4800 SAND POINT WAY NE SEATTLE,WA 98105	NONE	PC 509(A)(1) OR 509	EQUIPMENT DONATIONS TO AUTISM CENTER	3,685
SEATTLE NORTH APP PTA 4509 INTERLAKE AVENUE N 101 SEATTLE,WA 98103	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	1,200
SEATTLE PACIFIC UNIVERSITY 3307 THIRD AVENUE W SEATTLE,WA 981191997	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	1,000
SEATTLE PUBLIC LIBRARY FOUNDATION 1000 4TH AVE SEATTLE,WA 98104	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	200
SEATTLE SYMPHONY 200 UNIVERSITY STREET SEATTLE,WA 98101	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	75
SEATTLE'S UNION GOSPEL MISSION PO BOX 202 SEATTLE,WA 981110202	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	30
SEND INTERNATIONAL PO BOX 513 FARMINGTON,MI 48332	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	500
SHARE OUR STRENGTH 1030 15TH STREET NW SUITE 1100 W WASHINGTON,DC 20005	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	250
SIERRA CLUB FOUNDATION 85 SECOND STREET SUITE 750 SAN FRANCISCO, CA 94105	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	100
SOCIAL VENTURE PARTNERS 220 2ND AVENUE SOUTH 3RD FLOOR SEATTLE,WA 98104	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	3,000
SOLID GROUND 1501 NORTH 45TH ST SEATTLE,WA 981036708	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	250
SPARROW HOSPITAL FOUNDATION PO BOX 30480 LANSING, MI 48909	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	75
ST BALDRICK'S FOUNDATION 1333 SOUTH MAYFLOWER AVENUE SUITE 400 MONROVIA,CA 91016	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	50
Total				190,656

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
	or substantial contributor			
a Paid during the year				
ST MONICA SCHOOL 4320 87TH AVE SE MERCER ISLAND, WA 98040	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	500
ST THOMAS SCHOOL 8300 NE 12TH STREET MEDINA,WA 98039	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	100
SUSAN G KOMEN FOR THE CURE 820 W JACKSON BLVD SUITE 800 CHICAGO,IL 60607	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	100
THE ALS ASSOCIATION 1275 K STREET NW SUITE 250 WASHINGTON,DC 20005	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	1,070
THE ATTIC LEARNING COMMUNITY PO BOX 1668 WOODINVILLE, WA 98072	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	500
THE BREAST CANCER RESEARCH FOUNDATION 60 EAST 56TH STREET 8TH FLOOR NEWYORK,NY 10022	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	200
THE CENTRAL PENNSYLVANIA COMMUNITY FOUNDATION 1330 11TH AVENUE ALTOONA,PA 16602	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	10,000
THE EVERGREEN STATE COLLEGE FOUNDATION 2700 EVERGREEN PARKWAY NW LIBRARY 3900 OLYMPIA,WA 98505	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	100
THE LEUKEMIA & LYMPHOMA SOCIETY 123 NW 36TH ST SUITE 100 SEATTLE,WA 98107	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	1,800
THE NATURE CONSERVANCY PO BOX 6080 ALBERT LEA,MN 56007	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	50
TREEHOUSE FOR KIDS 2000 18TH AVE E SEATTLE,WA 98112	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	100
UNICEF USA 125 MAIDEN LANE NEW YORK, NY 10038	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	350
UNION OF CONCERNED SCIENTISTS 2 BRATTLE SQUARE CAMBRIDGE,MA 021383780	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	500
UNITED WAY 701 N FAIRFAX STREET ALEXANDRIA,VA 22314	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	150
WASHINGTON ENVIRONMENTAL COUNCIL 1402 THIRD AVE SUITE 1400 SEATTLE,WA 98101	NONE	PC 509(A) (1) OR 509	GENERAL SUPPORT	200
Total				190,656

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
WASHINGTON TRAILS ASSOCIATION 720 SECOND AVENUE SUITE 300 SEATTLE,WA 98104	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	1,050
WATERORG 920 MAIN SUITE 1800 KANSAS CITY,MO 64105	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	500
WHITTIER ELEMENTARY PTA 1320 NW 75TH ST SEATTLE,WA 98117	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	600
WIKIPEDIA 149 NEW MONTGOMERY STREET FLOOR 6 SAN FRANCISCO,CA 94105	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	400
WOODINVILLE MONTESSORI 19102 NORTH CREEK PARKWAY BOTHELL,WA 98011	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	350
WOODLAND PARK ZOO 601 N 59TH ST SEATTLE,WA 98103	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	200
WORLD VISION PO BOX 9716 FEDERAL WAY, WA 98063	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	2,120
WORLD WILDLIFE FUND 1250 24TH STREET NW WASHINGTON,DC 200371193	NONE	PC 509(A)(1) OR 509	GENERAL SUPPORT	205
Total				190,656

TY 2014 Accounting Fees Schedule

Name: THE BUNGIE FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	3,210	0		3,210

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TY 2014 Depreciation Schedule

Name: THE BUNGIE FOUNDATION

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

EIN: 27-2313989

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
PONTOON BOAT	2012-07-01	30,480	4,572	SL	10 000000000000	3,048	0		

DLN: 93491317013015

TY 2014 Explanation of Non-Filing with Attorney General Statement

Name: THE BUNGIE FOUNDATION

EIN: 27-2313989

Statement: WASHINGTON STATE REQUIRES FILING FOR PRIVATE

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

AND ACCOUNTS RECEIVABLE, IT IS BELOW THIS FILING

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

STATE THIS YEAR.

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491317013015

TY 2014 Land, Etc. Schedule

Name: THE BUNGIE FOUNDATION

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
PONTOON BOAT	30,480	7,620	22,860	

TY 2014 Other Expenses Schedule

Name: THE BUNGIE FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PRO GRAM ACTIVITIES	16,089	0		16,089
INSURANCE	9,340	0		9,340
MISCELLANEOUS	3,640	0		3,640

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TY 2014 Other Professional Fees Schedule

Name: THE BUNGIE FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OTHER PROFESSIONAL FEES	268	0		268

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491317013015

TY 2014 Taxes Schedule

Name: THE BUNGIE FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	23	0		0

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491317013015

Employer identification number

OMB No 1545-0047

0044

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

THE BUNGIE FOUNDATION

Schedule of Contributors

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

2014

			27-2313989			
Organ	ization type (check on	e)				
Filers	of:	Section:				
Form 9	990 or 990-EZ	501(c)() (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 990-PF		501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
ন		ng Form 990, 990-EZ, or 990-PF that received, during the year, contributions tot ny one contributor Complete Parts I and II See instructions for determining a co				
Opeci	ai Nuies					
Γ	under sections 509(a) received from any one	scribed in section $501(c)(3)$ filing Form 990 or 990-EZ that met the $33^1 / 3\%$ supp (1) and $170(b)(1)(A)(vi)$, that checked Schedule A (Form 990 or 990-EZ), Part I contributor, during the year, total contributions of the greater of (1) \$5,000 or (Form 990-EZ, line 1 Complete Parts I and II	ll, line 13, 16a, or 16b, and that			
Γ	during the year, total c	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received ontributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, ruelty to children or animals. Complete Parts I, II, and III				
Γ	during the year, contril this box is checked, er purpose Do not compl	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received outlons exclusively for religious, charitable, etc., purposes, but no such contributer here the total contributions that were received during the year for an excluete any of the parts unless the General Rule applies to this organization becald, contributions totaling \$5,000 or more during the year	utions totaled more than \$1,000 lf is ively religious, charitable, etc, use it received nonexclusively			

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization THE BUNGIE FOUNDATION **Employer identification number**

27-2313989

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BUNGIE INC 550 106TH AVE NE STE 207 BELLEVUE, WA 98004	\$ 41,096	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Name of organization **Employer identification number** THE BUNGIE FOUNDATION 27-2313989 Noncash Property (see instructions) Use duplicate copies of Part II if additional space is Part II (a) No. (c) (b) (d) from FMV (or estimate) Date received Description of noncash property given Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2014)			Page 4	
	organization			Employer identification number	
I HE BUN	GIE FOUNDATION		27-2313989		
Part III		om any one r the total of uctions)	contributor. Complete	cribed in section 501(c)(7), (8), or (10) e columns (a) through (e) and the following line thantable, etc, contributions of \$1,000 or less for \$	
(a) No. from Part I	(b) Purpose of gift) Use of gift	(d) Description of how gift is held	
	Transferee's name, address, and Z		Transfer of gift Relatio	onship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	Transferee's name, address, and ZIP 4		(e) Transfer of gift Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(0) Use of gift	(d) Description of how gift is held	
	Transferee's name, address, and Z		Transfer of gift Relatio	enship of transferor to transferee	
(a) No					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	Transferee's name, address, and ZIP 4		Transfer of gift Relatio	enship of transferor to transferee	