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# Form **990-PF**

# EXTENDED TO AUGUST 17, 2015 Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. OMB No 1545-0052

Ford	alen	dar year 2014 or tax year beginning		, and ending		
Nar	ne of	foundation			A Employer identification	n number
T	HE	PRIME FOUNDATION			46-1389926	<u> </u>
		nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
		01 SE 26TH STREET			425-747-52	200
		own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	pending, check here
		LEVUE, WA 98005			<u>.</u>	at a state to the state of the
G C	heck	all that apply: Initial return	Initial return of a for	mer public charity	<b>D</b> 1. Foreign organization	s, check here
		Final return	Amended return		Foreign organizations me check here and attach co	eeting the 85% test,
		Address change	Name change		1	
H	_	type of organization: X Section 501(c)(3) ex	cempt private foundation Other taxable private foundat	non	E If private foundation sta under section 507(b)(1	
LEO		1-//	ng method: X Cash	Accrual	1	
		·	ther (specify)	Accidal	F If the foundation is in a under section 507(b)(1	
( <i>ii</i>		119,998. (Part I, colu	mn (d) must be on cash b	asis.)	ander seemen cor(b)(1	(,b), 01100K 11010
	rt I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	195,000.		N/A	
	2	Check If the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	151.	151.		STATEMENT 1
	4	Dividends and interest from securities				
	5a	Gross rents				
	b	Net rental income or (loss)		<del>.</del>		
Revenue	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a				
š	7	Capital gain net income (from Part IV, line 2)		0.		
ď	8	Net short-term capital gain				
	9	Income modifications				
2015	10a	Gross sales less returns and allowances				
7	b	Less Cost of goods sold				
9		Gross profit or (loss)		<del>-</del> .		
_		Other income	105 151	151		
SEP	12	Total. Add lines 1 through 11	195,151.	151 0		0.
	13	Compensation of officers, directors, trustees, etc  Other employee salaries and wages	U		<u> </u>	<del>                                     </del>
	14 15	Pension plans, employee benefits				
Zε	ı	Legal fees STMT 2	1,735.	0.	DEOGRA	0.
Z	1	Accounting fees	277330			
<b>ご</b> 常	1	Other professional fees		ি	<u></u>	197
SCANNED and Administrative Expenses	17	Interest		(a.F.)	SEP 0 4 2015	0
rati	18	Taxes		11 %	- Mary	c',1
nist	19	Depreciation and depletion		<u> -</u>	JUGDEN IT	
Ē	20	Occupancy		<del></del>	The State Control of the Control of	
Ä	21	Travel, conferences, and meetings				
anc	22	Printing and publications				
ing	23	Other expenses STMT 3	288.	0.		0.
Operating	24	Total operating and administrative		•		
Ö		expenses. Add lines 13 through 23	2,023. 92,353.	0		92,353.
_	l	Contributions, gifts, grants paid	94,353.			74,333.
	26	Total expenses and disbursements.	94,376.	0 .		92,353.
	07	Add lines 24 and 25 Subtract line 26 from line 12:	J±,3/0.	<u>U</u>	·	34,333.
	27		100,775.			
	i	Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)	100,113.	151		
	i	Adjusted net income (if negative, enter -0-)			N/A	

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	19,223.
2	Enter amount from Part I, line 27a	2	100,775.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	119,998.
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) - Part II, column (b), line 30	6	119,998.

þ

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)				<b>(b)</b> I	P - Purchase D - Donation		(c) Date acquired (mo., day, yr.)		(d) Date sold (mo., day, yr.)	
1a										
b NC	NE		<u>-</u>		ļ					
<u>C</u>		<del> </del>			-					
e e		·			+-	<del></del> ,				<del></del>
(e) Gross sales price		epreciation allowed (or allowable)		st or other basis xpense of sale					ain or (loss) (f) minus (	
<u>a</u>			1							
<u>b</u>										
е		_								
Complete only for assets show	ng gain in c	olumn (h) and owned by	the foundation	on 12/31/69		-	(I)	Gains (C	ol. (h) gain	minus
(i) F.M.V. as of 12/31/69		) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any			COI.	Losses	ot less than (from col. (I	n -U-) <b>or</b> h))
<u>a</u>	_									
<u>b</u>	<u> </u>		ļ	<del></del>						
d d										
e				-						
2 Capital gain net income or (net c	apital loss)	If gain, also enter -0	r in Part I, line	7 7	}	2				
3 Net short-term capital gain or (lo If gain, also enter in Part I, line 8	oss) as defin	ed in sections 1222(5) ar		•	J			•		
If (loss), enter -0- in Part I, line 8 Part V Qualification I	3				<u></u>	3	L			
(For optional use by domestic prival If section 4940(d)(2) applies, leave Was the foundation liable for the se If "Yes," the foundation does not qual	this part bla ction 4942 t alify under s	nk. ax on the distributable an ection 4940(e). Do not co	nount of any ye	ear in the base pe	eriod?					Yes X No
1 Enter the appropriate amount in	each colum		nstructions be	fore making any e						(d)
Base period years Calendar year (or tax year beginn	iing in)	(b) Adjusted qualifying dis		Net value of no	(c) Distribution ratio (col. (b) divided by col. (				ided by col. (c))	
2013	-	3	4,725. 0.			3	2,767 0			
2012			0.					•		.000000
2010										
2009										
2 Total of line 1, column (d)								2		1.059755
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number the foundation has been in existence if less than 5 years				r of ye	ars		3		.529878	
4 Enter the net value of noncharita	ible-use ass	ets for 2014 from Part X,	line 5					4		109,406.
5 Multiply line 4 by line 3								5		57,972.
6 Enter 1% of net investment inco	me (1% of F	Part I, line 27b)						6		2.
7 Add lines 5 and 6								7		57,974.
8 Enter qualifying distributions fro								8		92,353.
If line 8 is equal to or greater that See the Part VI instructions.	ın lıne 7, che	eck the box in Part VI, line	e 1b, and comp	lete that part usi	ng a 1	% tax	rate.			

Form 990-PF (2014) THE PRIME FOUNDATION	4040(a) 4040(b) 4040(a) ==	46-1383	inctri		2age 4	
Part VI Excise Tax Based on Investment Income (Section		4948 - See	ınstru	CHO	15)	
1a Exempt operating foundations described in section 4940(d)(2), check here						
Date of ruling or determination letter: (attach copy of letter	if necessary-see instructions)				_	
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V, check her	re 🕨 🗶 and enter 1%	1			2.	
of Part I, line 27b						
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations ent					_	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations of	nly. Others enter -0-)	2			0.	
3 Add lines 1 and 2		3			2.	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations of	nly. Others enter -0-)	4			<u>0.</u>	
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	-	5			2.	
6 Credits/Payments:						
a 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		7			0.	
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220	s attached	8				
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9			2.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overp	aid 🕨	10				
11 Enter the amount of line 10 to be: Credited to 2015 estimated tax	Refunded -	11				
Part VII-A Statements Regarding Activities						
1a During the tax year, did the foundation attempt to influence any national, state, or loca	l legislation or did it participate or intervel	ne in		Yes	No	
any political campaign?			1a		Х	
b Did it spend more than \$100 during the year (either directly or indirectly) for political particular in the spend more than \$100 during the year (either directly or indirectly) for political particular in the spend more than \$100 during the year (either directly or indirectly) for political particular in the spend more than \$100 during the year (either directly or indirectly) for political particular in the spend more than \$100 during the year (either directly or indirectly) for political particular in the spend more than \$100 during the year (either directly or indirectly) for political particular in the spend more than \$100 during the year (either directly or indirectly) for political particular in the spend more than \$100 during the year (either directly or indirectly) for political particular in the spend more than \$100 during the year (either directly or indirectly) for political particular in the year (either directly or indirectly) for political particular in the year (either directly or indirectly) for political particular in the year (either directly or indirectly) for political particular in the year (either directly or indirectly) for political particular in the year (either directly or indirectly) for political particular in the year (either directly or indirectly or in	ournoses (see instructions for the definition	n)?	1b		Х	
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activiti						
distributed by the foundation in connection with the activities.	so and sopres or any materials parms					
c Did the foundation file Form 1120-POL for this year?			10		х	
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
(1) On the foundation. $\blacktriangleright$ \$ (2) On foundation mar		_				
e Enter the reimbursement (if any) paid by the foundation during the year for political ex	· · · · · · · · · · · · · · · · · · ·	<u>-</u>				
managers. > \$0	pendituro tax imposod on roundation					
2 Has the foundation engaged in any activities that have not previously been reported to	the IRS2		2		х	
If "Yes," attach a detailed description of the activities.			_			
·	ning instrument, articles of incornoration	or				
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the c	3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or					
4a Did the foundation have unrelated business gross income of \$1,000 or more during the			3 4a		X	
b If "Yes," has it filed a tax return on Form 990-T for this year?	ie year:	N/A	4b			
5 Was there a liquidation, termination, dissolution, or substantial contraction during the	vear?	14/14	5		X	
	year.		<u> </u>		-22	
If "Yes," attach the statement required by General Instruction T.	find outhor:					
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satis	neu either.					
By language in the governing instrument, or      Divident leads that office well amond the reversing instrument on that no many instruments are the many instruments are the many instruments.	adatany directions that conflict with the at	ata law				
By state legislation that effectively amends the governing instrument so that no man	idatory directions that conflict with the st	ile iaw		v		
remain in the governing instrument?			6	X		
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 ?	(V	7	X		
8a Enter the states to which the foundation reports or with which it is registered (see inst	ructions) >					
WA						
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						
9 Is the foundation claiming status as a private operating foundation within the meaning		ilendar				
year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Y			9		Х	
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a	schedule listing their names and addresses	STMT 4	10	X		

		<u>46-1389</u>	<u>926</u>	J	Page 5
Pa	art VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory p	rıvıleges?			
	If "Yes," attach statement (see instructions)	_	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	ı	13	х	
	Website address ► N/A				
14	The books are in care of ► ERIC REICHANADTER  Telephone no.	<b>►</b> 425-74	7-5	200	
	Located at ► 13301 SE 26TH STREET, BELLEVUE, WA	ZIP+4 ▶98			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	· <u></u>		<b></b>	
	and enter the amount of tax-exempt interest received or accrued during the year	15	N	/A	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,			Yes	No
	securities, or other financial account in a foreign country?		16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name	of the			
	foreign country				
Pa	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):				
		s X No		İ	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			Į	
		s X No			
		s X No			
		s X No		İ	
	(5) Transfer any income or assets to a disqualified person (or make any of either available				
		s X No		ļ	
	(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			i	
		s X No		i	
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)?	N/A ►	1b	}	
	Organizations relying on a current notice regarding disaster assistance check here			-	
c	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	ĺ	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation				
	defined in section 4942(j)(3) or 4942(j)(5)):				
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) beginnin	a			
		s X No			
	If "Yes," list the years				
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			1	
	statement - see instructions.)	N/A	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.	·			
	<b>&gt;</b>			ļ	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			Į	
	during the year?	s X No			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons aft	-			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to di				
	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.)	N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	- •	4a		x
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose	that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?		4b		Х

Part VII-B.   Statements Regarding Activities for Which	Form 4720 May Bo I	Poguirod (t-	46-13899	26 Page €
	FORM 4720 Way be i	nequireu (contin	uea)	
5a During the year did the foundation pay or incur any amount to:	10.454.330	,	<b>□</b>	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section of the control o			es X No	
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or mair		. <del>V</del>	
any voter registration drive?	0		es X No	
(3) Provide a grant to an individual for travel, study, or other similar purpose		Y6	es Launo	
(4) Provide a grant to an organization other than a charitable, etc., organizat	ion described in section		es X No	
4945(d)(4)(A)? (see instructions)			S LAL NO	
(5) Provide for any purpose other than religious, charitable, scientific, literar	y, or educational purposes, or		es X No	
the prevention of cruelty to children or animals?			es Lauro	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u		in Regulations	NT / N	5b
section 53.4945 or in a current notice regarding disaster assistance (see inst			N/A	30
Organizations relying on a current notice regarding disaster assistance check				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption				
expenditure responsibility for the grant?		1/A	es L No	
If "Yes," attach the statement required by Regulations section 53 49				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	o pay premiums on		es X No	
a personal benefit contract?		Y6		ch V
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a	i personal benefit contract?		-	6b X
If "Yes" to 6b, file Form 8870.	h . lt t		es X No	
7a At any time during the tax year, was the foundation a party to a prohibited tax		Y6		7b
b If "Yes," did the foundation receive any proceeds or have any net income attri Part VIII Information About Officers, Directors, Trus		nogoro Highli		70
Paid Employees, and Contractors	stees, roundation wa	anagers, migni	y	
List all officers, directors, trustees, foundation managers and their	r compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other
ERIC REICHANADTER	<del></del>	ENIOR DIRE		4
13301 SE 26TH STREET			CION	
BELLEVUE, WA 98005	1.00	0.	0.	0.
MIKE BROBERG	SECRETARY/TRE			
13301 SE 26TH STREET		T-2011-11	-	
BELLEVUE, WA 98005	1.00	0.	0.	0.
DEBERTORY MIL 30003				
2 Compensation of five highest-paid employees (other than those in		, enter "NONE."		
(-) Name and address of each analysis and make the OFO 000	(b) Title, and average	(-) Com	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	allowances
NONE				
	7			
	7			
Total number of other employees paid over \$50,000			<b></b>	

Page 7

(a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compe NONE    Total number of others receiving over \$50,000 for professional services	3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
NONE  Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  1			(c) Compensation
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities  List the foundation's four largest direct antiable activities during the tax year, include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  1		(=, :),	1,
Part IX-A   Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  1	NOND	1	
Part IX-A   Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  1			
Part IX-A   Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  1		1	
Part IX-A   Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  1			
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Part IX-A   Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  1		_	
Part IX-A   Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  1			
List the foundation's four largest direct charitable activities during the tax year, include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  1	Total number of others receiving over \$50,000 for professional services		▶ 0
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  1			
Part IX-B Summary of Program-Related investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  All other program-related investments. See instructions.			Expenses
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  All other program-related investments. See instructions.		iced, etc.	
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  All other program-related investments. See instructions.	1 <u>N/A</u>		
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  All other program-related investments. See instructions.			
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  All other program-related investments. See instructions.			
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount  1	2		
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount  1			
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount  1			
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount  1	3		
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount  1			
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount  1			
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount  1	4		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  N/A  All other program-related investments. See instructions.	Part IX-B Summary of Program-Related Investments		
1 N/A  2 All other program-related investments. See instructions.	Describe the two largest program-related investments made by the foundation during the tax year on li	nes 1 and 2.	Amount
All other program-related investments. See instructions.	· · · · · · · · · · · · · · · · · · ·		
All other program-related investments. See instructions.	1 41/44		
All other program-related investments. See instructions.			
All other program-related investments. See instructions.	9		
<u> </u>			
<u> </u>	All other program-related investments. See instructions		
	•		
	J		
Total Add lines 1 through 3	Total Add lines 1 through 3		0.

Form **990-PF** (2014)

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, s	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes;		
a		1a	0.
b	Average of monthly cash balances	1b	111,072.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	111,072.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.	i i	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	111,072.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,666.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	109,406.
6_	Minimum investment return Enter 5% of line 5	6	5,470.
P	foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	5,470.
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c_	2.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	5,468.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	5,468.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	5,468.
P	Qualifying Distributions (see instructions)	· · · - · · · · · · · · · · · · · · · ·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	92,353.
	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Surtability test (prior IRS approval required)	3a	
b	,	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	92,353.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	income. Enter 1% of Part I, line 27b	_5	2.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	92,351.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies for	the section

Form **990-PF** (2014)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,	· ·	· · · · · · · · · · · · · · · · · · ·		
line 7				5,468.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2014:				
<b>a</b> From 2009				
<b>b</b> From 2010				
c From 2011	ļ			
<b>d</b> From 2012				
e From 2013 33,087.				
f Total of lines 3a through e	33,087.			<del></del>
4 Qualifying distributions for 2014 from				
Part XII, line 4: ►\$ 92,353.				
a Applied to 2013, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				5,46 <u>8</u> .
e Remaining amount distributed out of corpus	86,885.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	119,972.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	119,972.			
O Analysis of line 9:				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013 33,087.				
e Excess from 2014 86,885.				
23581				Form <b>990-PF</b> (2014)

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

SEE ATTACHED STATEMENT.

c Any submission deadlines:

Part XV Supplementary	Information	(continued)			
3 Grants and Contributions Pa	id During the Ye		Payment		
Recipient		If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or b	ousiness)	or substantial contributor	recipient	**	
a Paid during the year					
AMERICAN HEART ASSOCIATION	TNC		PC	HEART WALK.	
7272 GREENVILLE AVENUE	, 1110				
DALLAS, TX 75231					5,000.
BOYS AND GIRLS CLUB OF KING	G COUNTY		PC	YOUTH HEALTH AND	
603 STEWART ST NO 300			1	SOCIAL, EDUCATIONAL & CHARACTER DEVELOPMENT	
SEATTLE, WA 98101				OF YOUTH.	250,
CHROHN'S & COLITIS FOUNDAT:	ION OF		PC	TO CURE CROHN'S	
AMERICA INC				DISEASE AND ULCERATIVE	
733 THIRD AVENUE SUITE 510				COLITIS.	1 000
NEW YORK, NY 10017					1,000,
FAMILIES FOR EFFECTIVE AUT	ISM		PC	AUTISM ADVOCACY,	
TREATMENT OF WASHINGTON				EDUCATION AND SUPPORT.	
P0 BOX 6159					
BELLEVUE, WA 98008					10,100.
FRED HUTCHINSON CANCER RESI	EARCH		PC	CANCER RESEARCH.	
CENTER					
1100 FAIRVIEW AVENUE NORTH					
SEATTLE WA 98109	CEE CON	MINUMENT ON CHEE	rm / C \	<b>&gt;</b> 0-	9,550.
Total b Approved for future payment		TINUATION SHEE	17(5)	▶_3a_	92,353.
a Approved for future payment					
NONE					
				<b>N</b> 21	
Total		<del></del> .		<b>▶</b> 3b	0. m <b>990-PF</b> (2014)

As a superior of the superior	Unrelated b	usiness income	Excluded	by section 512, 513, or 514	(a)
ter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
Program service revenue:	code		code	7.00000	
b					·
С					
d					
e					
f	_				
g Fees and contracts from government agencies					
Membership dues and assessments					-
Interest on savings and temporary cash investments			14	151.	
Dividends and interest from securities			1 4	101.	
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other					
than inventory					
Net income or (loss) from special events					<del></del>
Gross profit or (loss) from sales of inventory Other revenue:					
ab					
C					
d					
е					
Subtotal. Add columns (b), (d), and (e)		0.	<u> </u>	151.	
Total. Add line 12, columns (b), (d), and (e)				13	15
ee worksheet in line 13 instructions to verify calculations.	.)				
Part XVI-B Relationship of Activities	s to the Accom	plishment of Ex	cempt P	urposes	

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

4) THE PRIME FOUNDATION 46-1389926 Information Regarding Transfers To and Transactions and Relationships With Noncharitable 46-1389926 Page 13 Part XVII

		Exempt Organ	izations							
1	Did the or	rganization directly or indii	rectly engage in any	of the following	ng with any other organization	on described in sectio	on 501(c) of		Yes	No
	the Code	(other than section 501(c)	)(3) organizations) c	r in section 52	27, relating to political organ	ızatıons?				
a	Transfers	from the reporting found	ation to a noncharita	ble exempt or	ganization of:					
	(1) Cash	ı						1a(1)		X
	(2) Other							1a(2)		X
þ	Other tran									
		s of assets to a noncharital						1b(1)		X
		hases of assets from a no		organization				1b(2)		<u>X</u>
		al of facilities, equipment,						1b(3)		<u>X</u>
	` '	bursement arrangements						1b(4)		<u>X</u>
	` '	s or loan guarantees						1b(5)		<u>X</u>
	• •	ormance of services or me	•	-				1b(6)		X X X X
		of facilities, equipment, ma						1c		<u>X</u>
d					edule. Column (b) should alv				ets,	
					ed less than fair market valu	e in any transaction (	or snaring arrangement, sni	ow in		
2).	ine no	d) the value of the goods, (b) Amount involved			e exempt organization	(4)				
a j L	ine no	(b) Amount involved	(c) Name of		e exempt organization	(U) Description of	of transfers, transactions, and sh	aring arr	angeme	nts
				N/A	· · · · · · · · · · · · · · · · · · ·					
		<del></del>								
					<u> </u>					
_										
					<del></del>					
							<del> </del>			
					<del>_</del> -					
	-									
										—
				-1-111						
2 a			•	•	or more tax-exempt organiz	zations described	<del></del>	Yes	T	] No
		501(c) of the Code (other	• •	)(5)) (1) (1) Sec.	11011 327 ?		L	1 162	LA	J 140
U	11 165, 0	omplete the following sche (a) Name of org			(b) Type of organization	le le	) Description of relationship	n		
-	_	N/A	unzution		(b) Type of organization	1,0	Ty Description of relationship	<u> </u>		
		IN/A					****			
		·····				····-	·			
		<del></del>								
	Under	r penalties of perjury, I declare t	that I have examined thi	s return, includir	I accompanying schedules and	statements, and to the b	est of my knowledge			_
Si	ما اسمم أ				n taxpayer) is based on all inform		nas any knowledge return	he IRS d with the	prepar	er
He	re	W 181	An.		18/17/15	Trustee		n below ( Yes	see ins	7 <b>1</b>
	Sign	nature of officer or trustee			Date	Title	ecurry	1 tes		⊥ No
_	1 2.9	Print/Type preparer's na	ıme	Preparer's s		·	Check If PTIN			
		The state of the s	····		-111		self- employed			
Pa	id	יד. א. דבדם	DRICHSEN	hil	hulled_	82015	P00	3 3 Q ·	212	
Paid Preparer							Firm's EIN ► 91-21	<u> </u>	31 31	
	e Only	Transcript Paragon Line Citoti / 10					THIN SLIN P JI-ZI	<b>∵/</b> ₩.	J <del>T</del>	
-		Firm's address ▶ 13	25 FOITRTH	Δ 17 Fr	#940					
			ATTLE, WA				Phone no. 206-62	<u> </u>	41 n	
		<u>5E</u> .	TITE, MW	30101	-4303					(2014)
							FULL			(41 02)

### Schedule B

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

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

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

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

2014

2014

Name of the organization Employer identification number 46-1389926 THE PRIME FOUNDATION Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

#### THE PRIME FOUNDATION

46-1389926

Part I	Contributors (see instructions) Use duplicate copies of Part I if a	dditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PRIME ELECTRIC, INC.  13301 SE 26TH ST BELLEVUE, WA  BELLEVUE, WA 98005	\$195,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

# THE PRIME FOUNDATION

46-1389926

Part II	Noncash Property (see instructions) Use duplicate copies of Pa	art II if additional space is needed.	· · · · · · · · · · · · · · · · · · ·	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
<del></del>				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Page 4 Name of organization Employer identification number 46-1389926 THE PRIME FOUNDATION Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

THE PRIME FOUNDATION

Part XV ·Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount contribution any foundation manager Name and address (home or business) recipient or substantial contributor GROUP HEALTH FOUNDATION PC GOBLIN GALLOP, GIFT OF 320 WESTLAKE AVE N SUITE 100 HEALTH GALA SEATTLE, WA 98109 FUNDRAISING, CHILD IMMUNIZATION. 12,500, KIDSQUEST CHILDREN'S MUSEUM PC CREATE LEARNING 4091 FACTORIA BLVD SE THROUGH THE POWER OF BELLEVUE WA 98006 PLAY AND EXPLORATION. 1,700. KING COUNTY LIBRARY SYSTEM FOUNDATION PC PROVIDE SUPPORT FOR 960 NEWPORT WAY NW THE KNG COUNTY LIBRARY ISSAQUAH, WA 98027 SYSTEM. 1,500. NORTHSHORE GIRLS SLOWPITCH SOFTBALL PC PROVIDES GIRLS AN ASSOCIATION OPPORTUNITY TO PLAY ORGANIZED SOFTBALL. PO BOX 235 600. BOTHELL WA 98041 SEATTLE CHILDRENS HOSPITAL FOUNDATION PC 5K WALK FOR CHARITY. PO BOX 5371 MS RC-507 SEATTLE, WA 98145 16,000. SHELTER, INC OF CONTRA COSTA COUNTY PC PREVENTING 1815 ARNOLD DRIVE HOMELESSNESS. 250. MARTINEZ, CA 94553 SNOQUALMIE VALLEY LITTLE LEAGUE PC PROVIDES AN PO BOX 351 OPPORTUNITY TO PLAY BASEBALL. 250. NORTH BEND WA 98045 SEATTLE ARCHITECTURE FOUNDATION PC EDUCATE THE PUBLIC TO 1333 FIFTH AVENUE BUILD APPRECIATION OF SEATTLE, WA 98101 SEATTLE'S BUILT ENVIRONMENT. 1,000, THE LEUKEMIA & LYMPHOMA SOCIETY. INC PC FUNDING FOR MEDICAL 1311 MAMARONECK AVENUE RESEARCH. WHITE PLAINS, NY 10605 250. REBUILDING TOGETHER SEATTLE PC PROVIDE REHABILITATION 811 HARRISON STREET & REPAIR SERVICES TO SEATTLE , WA 98109 LOW INCOME HOMEOWNERS. 250. Total from continuation sheets 66,453.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient PC PRESERVE AVIATION AND MUSEUM OF FLIGHT FOUNDATION 9404 EAST MARGINAL WAY SOUTH SPACE HISTORY. 1,500. SEATTLE WA 98108 PC ROC WHEELS PROVIDE MOBILITY PO BOX 11765 PRODUCTS FOR PEOPLE WITH DISABILITIES IN BOZEMAN, MT 59719 DEVELOPING COUNTRIES. 250. FRAGILE X ASSOCIATION OF WASHINGTON PC FAMILY RESOURCES, STATE INCREASED AWARENESS AND RESEARCH SUPPORT. 17837 1ST AVE S 166 NORMANDY PARK, WA 98148 1,500. AMERICAN NATIONAL RED CROSS & ITS PC OSO LANDSLIDE RELIEF. CONSTITUENT CHAPTERS AND BRANCHES 2025 E STREET NW WASHINGTON DC 20006 2,300. SENIOR SERVICES (SENIOR CENTERS ONLY) PC NORTHSHORE WRANGLERS 2208 SECOND AVENUE SEATTLE, WA 98121 500. SPARROW CLUBS USA PC PROVIDE FINANCIAL 906 NE GREENWOOD SUPPORT TO CHILDREN BEND , OR 97701 WITH LIFE THREATENING ILLNESSES, SERIOUS MEDICAL\_NEEDS OR 1,200. JENKIN'S CREEK ELEMENTARY PC EDUCATION. 2003 65TH AVE WEST TACOMA WA 98466 1,500, FIRE 1 FOUNDATION PC OSO FIRE DEPARTMENT PO BOX 12915 EVERETT WA 98206 500. WESTSOUND YOUTH FOUNDATION PC PROVIDE AN OPPORTUNITY PO BOX 706 FOR YOUNG PEOPLE TO PORT ORCHARD, WA 98366 IMPROVE THEIR BASKETBALL SKILLS. 5,000. THE TURNER CONSTRUCTION COMPANY PF SUPPORT FOR FRED FOUNDATION HUTCHINSON CANCER 3 PARAGON DRIVE RESEARCH CENTER. MONTVALE, NJ 07645 2,074. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient PC PROVIDE PARENT STINGRAY SWIM TEAM BOOSTERS EDUCATION, VOLUNTEER PO BOX 2359 SNOHOMISH, WA 98290 COORDINATION AND FINANCIAL SUPPORT TO 500, THE STINGRAY SWIM SAMUEL AND ALTHEA STROUM JEWISH PC ENSURE JEWISH CONTINUITY, SUPPORT COMMUNITY CENTER 3801 EAST MERCER WAY JEWISH UNITY, ENRICH MERCER ISLAND, WA 98040 JEWISH LIFE AND TO PARTICIPATE IN AND 1,500. LAKE STEVENS JUNIOR ATHLETIC PC PROMOTE YOUTH ASSOCIATION PARTICIPATION IN TEAM PO BOX 640 SPORTS. LAKE STEVENS WA 98258 250. HERITAGE CHRISTIAN ACADEMY PARENT PC EDUCATION TEACHER FELLOWSHIP 19527 104TH AVENUE NE BOTHELL WA 98011 250. LAKE WASHINGTON COLLEGE FOUNDATION PC EDUCATION 11605 132ND AVENUE NE NO W205C KIRKLAND, WA 98034 500. WASHINGTON LADYHAWKS FASTPITCH PC ASSIST YOUNG GIRLS IN ORGANIZATION OBTAINING ATHLETIC 13422 115TH AVE EAST COLLEGE SCHOLARSHIPS PUYALLUP, WA 98374 FOR COMPETING IN ORGANIZED FASTPITCH 100, MAPLEWOOD HEIGHTS PTA PC EDUCATION 2003 65TH AVE WEST TACOMA, WA 98466 250, WASHINGTON WOMEN IN NEED TO PROVIDE HEALTH AND 700 108TH AVENUE NE EDUCATION GRANTS TO BELLEVUE, WA 98004 LOW-INCOME WOMEN IN WASHINGTON TO HELP THEM IMPROVE THEIR 1,000. BENAROYA RESEARCH INSTITUTE AT PC MEDICAL RESEARCH. VIRGINIA MASON 1201 NINTH AVENUE SEATTLE, WA 98101 5.000. NORTHWEST HARVEST EMM PC TO PROVIDE NUTRITIOUS PO BOX 12272 FOOD TO HUNGRY PEOPLE. SEATTLE WA 98102 500. Total from continuation sheets

THE PRIME FOUNDATION

Part XV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation status of Purpose of grant or show any relationship to Amount contribution any foundation manager Name and address (home or business) recipient or substantial contributor UNITED WAY PC COMMUNITY SUPPORT. 720 SECOND AVENUE SEATTLE, WA 98104 550. ABSOLUTE BLAST FASTPITCH CLUB PC RECREATION. 2800 NORTHRUP WAY SUITE 220 BELLEVUE, WA 98004 500. BELLEVUE BOYS & GIRLS CLUBS INC PC SUPPORTING YOUNG 209 100TH AVENUE NE PEOPLE. BELLEVUE, WA 98004 1,000. JOHN HOFFMAN EMPLOYEE ASSISTANCE WITH I PO BOX 4160 MEDICAL AND LIVING SOUTH COLBY, WA 98384 EXPENSES OF AN INDIVIDUAL SUFFERING FROM TERMINAL CANCER. 3,629. REDMOND GIRLS BASKETBALL BOOSTER CLUB PC PROVIDE SUPPORT FOR 17272 104TH STREET NE REDMOND HIGH SCHOOL REDMOND, WA 98052 GIRLS BASKETBALL TEAMS. 300, Total from continuation sheets

Part XV Supplementary Information
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution
NAME OF RECIPIENT - SPARROW CLUBS USA
PROVIDE FINANCIAL SUPPORT TO CHILDREN WITH LIFE THREATENING ILLNESSES,
SERIOUS MEDICAL NEEDS OR CHRONIC DISABILITIES.
NAME OF RECIPIENT - STINGRAY SWIM TEAM BOOSTERS
PROVIDE PARENT EDUCATION, VOLUNTEER COORDINATION AND FINANCIAL SUPPORT
TO THE STINGRAY SWIM TEAM.
NAME OF RECIPIENT - SAMUEL AND ALTHEA STROUM JEWISH COMMUNITY CENTER
ENSURE JEWISH CONTINUITY, SUPPORT JEWISH UNITY, ENRICH JEWISH LIFE AND
TO PARTICIPATE IN AND PROMOTE THE WELL BEING OF THE JEWISH AND GENERAL
COMMUNITY AND THE PEOPLE OF ISRAEL.
NAME OF RECIPIENT - WASHINGTON LADYHAWKS FASTPITCH ORGANIZATION
ASSIST YOUNG GIRLS IN OBTAINING ATHLETIC COLLEGE SCHOLARSHIPS FOR
COMPETING IN ORGANIZED FASTPITCH SOFTBALL.
NAME OF RECIPIENT - WASHINGTON WOMEN IN NEED
TO PROVIDE HEALTH AND EDUCATION GRANTS TO LOW-INCOME WOMEN IN
WASHINGTON TO HELP THEM IMPROVE THEIR LIVES.

# THE PRIME FOUNDATION FORM 990-PF PAGE 10, PART XV, LINE 2B

The following information is required of all grant applicants:

#### 1. Cover Summary Page:

- Name of organization, individual, or project
- Contact information: name, address, phone, fax, e-mail
- Total amount of grant request
- Brief description of the request
- Qualifications under which application is being made (see item 8)

#### 2. Grant Proposal:

- Maximum length, two pages double-spaced, 12-point type.
- If more space is needed, include succinct additional material in an appendix.
- If request is for more than one project or program prioritize needs.

#### 3. Background Information:

A brief characterization of the proposed initiative or organization, along with a description of the mission statement, activities, and schedules. Also must provide clear presentation of overall funding needs.

#### 4. Relevancy:

Describe how the proposed initiative relates to addressing issues of concern to the general public.

### 5. Budget (The following information is requested where applicable):

- A budget for the project(s), program(s), or work for which intended by this proposal
- Current year's and next year's operating budget where appropriate
- Describe income sources, giving constituency, and any funds received or promised for this endeavor

#### 6. Performance Report:

Applicants are requested to submit a report on the grant activities to the Foundation within a year of receipt of the award. If a previous grant(s) has been received, a grant report must accompany this proposal. Report must be clearly identified as such and be on a separate page or pages. The report helps us not only understand what was accomplished, but also to help us learn from the grantee perspective about the effectiveness of our granting process. Attach extra pages or other materials that are relevant to reporting on the grant.

#### **Project Name:**

#### Organization or Individual Name:

1. Report on how you expended the grant money to accomplish your proposed project or implement your program.

# THE PRIME FOUNDATION FORM 990-PF PAGE 10, PART XV, LINE 2B CONTINUED

- 2. How did receiving the grant change or improve your organization or project? Please include in this response any insights, inspirations or hindrances you encountered.
- 3. In fulfilling your grant activity, what kinds of mutual support were fostered among your peers or peer organizations, and how were you able to work with other kinds of initiatives or corporations?
- 4. Please include with your report visual documentation (such as photographs, artwork, or charts, etc.) of your project or program that will show us what you did and that may also be used for purposes of publicity.

Submitted by: Signed:

Date:

#### 7. Future Development:

Indicate plan for enabling the continued viability of proposed work. This could include plans for expanding funding base support and other sources of current and future funding

#### 8. Qualifications:

Provide documentation as appropriate to individual or organizational status. Please send a list of officers and directors, your Federal Employer Identification Number FEIN), a current brochure, and if tax exempt, include IRS Section 501(c)(3) letter of determination. If there is an IRS determination other than Section 501(c)(3), please indicate this on cover summary.

FORM 990-PF INTEREST ON SAV	INGS AND TEM	PORARY CA	SH IN	IVESTMENTS	STATEMENT	1	
SOURCE	(A REVE PER B	NUE N	(B) NET INVESTMENT INCOME				
BANK INTEREST		151.		151.			
TOTAL TO PART I, LINE 3		151.		151.			
FORM 990-PF	LEGAL	FEES			STATEMENT	2	
DESCRIPTION	(A) EXPENSES PER BOOKS		ST-		(D) CHARITA ME PURPOS		
LEGAL FEES	1,735.		0.			0.	
TO FM 990-PF, PG 1, LN 16A	1,735.		0.			0.	
FORM 990-PF	OTHER E	XPENSES			STATEMENT	3	
DESCRIPTION	(A) EXPENSES PER BOOKS	NET INVE		ADJUSTED	(D) CHARITA ME PURPOS		
OFFICE SUPPLIES & EXPENSES BANK FEES	38. 250.	-	0.			0.	
TO FORM 990-PF, PG 1, LN 23	288.		0.			0.	

LIST OF SUBSTANTIAL CONTRIBUTORS STATEMENT FORM 990-PF PART VII-A, LINE 10 NAME OF CONTRIBUTOR ADDRESS 13301 SE 26TH STREET PRIME ELECTRIC, INC. BELLEVUE, WA 98005