

#### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



## Form **990-PF**

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

OMB No. 1545-0052

2014

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.

Open to Public Inspection

<u>F</u> (	or cal	endar year 2014, oı	r tax year beginning	12/09 , <b>201</b> 4	s, and ending 12	/31 , 2014	
		S FAMILY FOU SE SCENIC L				A Employer identification nu 47-2529981  B Telephone number (see ins	
v	ANC	OUVER, WA 98	661			360-314-2327	
_	Cha	ack all that and in	(V) to study on the second	District and a factor	LI. L	C If exemption application is	pending, check here 🕨 🗌
G	CHE	eck all that apply:	X Initial return Final return	Initial return of a for Amended return	mer public charity	D 1 Foreign organizations, che	ck here
H	Che	eck type of organiza	Address change	Name change 1(c)(3) exempt private	foundation	2 Foreign organizations mee here and attach computati	
<del>-</del>	Fair	Section 4947(a)(	1) nonexempt charitable ts at end of year    J Ac		private foundation	E If private foundation statu under section 507(b)(1)(A	s was terminated ), check here
	<b>►</b> \$		: 16)	Other (specify) , column (d) must be o		F If the foundation is in a 60 under section 507(b)(1)(B	
P	art I	Expenses (The columns (b), (c)	ne total of amounts in , and (d) may not neces- amounts in column (a)	(a) Revenue and expenses per books	(b) Net investmer income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
		1 Contributions, gifts, gr	ants, etc, received (attach schedule)	428,948.			
		2 Ck ►if the	foundn is not required to attach Sch B			, , ,	
2015		3 Interest on savings and 4 Dividends and interest	temporary cash investments			<u>N/A</u>	
		5 a Gross rents					
Z e	_	b Net rental income or (loss)					
	R E	6 a Net gain or (loss) from b Gross sales price		5,754.			<u> </u>
JUN	V E		ncome (from Part IV, line 2)		269,48	3.	-
$\bigcirc$	EVENUE	8 Net short-term cap 9 Income modificati	•				
	E	10 a Gross sales less returns and allowances.				•,	
5		b Less Cost of goods sold	-				
		C Gross profit or (loss) (					
00		11 Other income (att	ach schedule)				!
		12 Total. Add lines		434,702.	269,48	3.	1
		1	officers, directors, trustees, etc alaries and wages	0.			
		15 Pension plans, en	•				
	A	16 a Legal fees (attach	•		-		
	M	b Accounting fees (a	•				
ò	N	17 Interest.					
OP E R A T	S T R	18 Taxes (attach schedule	••				
Ą	Ą	19 Depreciation (atta sch) and depletion					
N G	Ę V	20 Occupancy 21 Travel, conference	es and meetings	Internal Revenue S	enrica		
A N	E	22 Printing and public	<del>-</del>	Received LB #			
D	P	23 Other expenses (a	attach schedule)	MAY 1 8 2019			•
	N S E	24 Total operating a		- rates to SAL	<u>-</u>		
	Š	expenses. Add lin 25 Contributions, gifts, gra	-	SPC FRESMO	<b>3</b> 0		
		26 Total expenses an Add lines 24 and 2					
_		27 Subtract line 26 fr		0.		0.	0.
		а Excess of revenue and disbursemen	•	434,702.			
			come (if negative, enter -0-)	131,102.	269,48	3.	
	_	C Adjusted net inco	me (if negative, enter -0-) .				•

Par	t II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)	Beginning of year	End o	of year
	<u>::</u>		(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		434,702.	434,702.
	2	Savings and temporary cash investments		13.17.131.1	
	3	Accounts receivable		100 100 100	
	İ	Less: allowance for doubtful accounts b			1
	4		<del></del>		<del> </del>
	'	Pledges receivable	<del></del>		
	5	Grants receivable	<del></del>	<del> </del>	<del> </del>
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions).			
_	7	Other notes and loans receivable (attach sch) >		1.3	
Ą		Less: allowance for doubtful accounts ▶	,		,
Š	8	Inventories for sale or use			
ASSETS	9	Prepaid expenses and deferred charges			
Ś	10:	a Investments – U.S. and state government obligations (attach schedule)			
	l i	b Investments — corporate stock (attach schedule)			<del></del>
	1	c Investments — corporate bonds (attach schedule)			
	ı	Investments – land, buildings, and			
	''	equipment: basis			
		Less: accumulated depreciation (attach schedule)			
	12	Investments — mortgage loans			
	13	Investments — other (attach schedule)			
	14	Land, buildings, and equipment: basis	er year to the first that the	Line of the track I have to	
		Less: accumulated depreciation (attach schedule)			
	15	Other assets (describe ►			
	16	Total assets (to be completed by all filers — see the instructions. Also, see page 1, item I)	0.	434,702.	434,702.
Ļ	17	Accounts payable and accrued expenses			"一个"
Å	18	Grants payable			
B	19	Deferred revenue			·····································
Ľ	20	Loans from officers, directors, trustees, & other disqualified persons			
ī	21	Mortgages and other notes payable (attach schedule)			
T	22	Other liabilities (describe )			
Ė	_				
E S	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
N F	24	Unrestricted			医洗涤剂
N F E U T N	25	Temporarily restricted.			
I N	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here X and complete lines 27 through 31.			
A B A L A N	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
o E	29	Retained earnings, accumulated income, endowment, or other funds		434,702.	
RS	30	Total net assets or fund balances (see instructions)	0.	434,702.	Sammer Land
	31	Total liabilities and net assets/fund balances			
	1	(see instructions)	0.	434,702.	James E 112 To 1 12 12 15
Par	t-III	Analysis of Changes in Net Assets or Fund Balance	es		
1	Tota end-	i net assets or fund balances at beginning of year — Part II, colu of-year figure reported on prior year's return)	mn (a), line 30 (must a	gree with	0.
2	Ente	r amount from Part I, line 27a		2	434,702.
3	Other	increases not included in line 2 (itemize)		3	//
4	Δdd	lines 1, 2, and 3		4	434,702.
	Dooro	acon not included in line 2 (itemize)		<u> </u>	333,104.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)	- Part II column (b)	line 30 6	434,702.
<u> </u>	· ota	4000to or tana balances at ena or year (line + fillinas line 5)	,		434,704.

Form 990-PF (2014)

Par	t iv / Capital Gains and I	Losses for lax on investme	nt income			
	(a) List and describe 2-story brick warehous	the kind(s) of property sold (e.g., ee; or common stock, 200 shares M	real estate, LC Company)	(b) How acqui P — Purchas D — Donatio	e (month, day, year)	(d) Date sold (month, day, year)
1 a	3048.437 SHS T ROWE	PRICE HEALTH SCIENCES	S - ATTACHED	D	VARIOUS	12/30/14
		PRICE BLUE CHIP GROW'		D	VARIOUS	12/30/14
				ļ		
				<u> </u>	_	
e	(e) Gross sales price	(f) Depreciation allowed	(g) Cost or other ba	)	(h) Gain or	(loss)
	· · · · · · · · · · · · · · · · · · ·	(or allowable)	plus expense of sa	ale	(e) plus (f) m	ninus (g)
				7,198.		142,291.
	2207220.		9	3,021.	-·	127,192.
	Complete only for assets show	ring gain in column (h) and owned	by the foundation on 12/31	/69	(1) Gains (Coli	ımn (h)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if	n (I)	gain minus column () than -0-) or Losses (fi	), but not less
a	1					142,291.
E	)					127,192.
	; 					
	<u>'                                      </u>				<u> </u>	
e	) 				<del></del>	<u>-</u>
2	Capital gain net income or (ne	t capital loss) — If gain, also	o enter in Part I, line 7 iter -0- in Part I, line 7	[	2	269,483.
3	Net short-term capital gain or	(loss) as defined in sections 1222(5	5) and (6):	,		
	If gain, also enter in Part I, lin	e 8, column (c) (see instructions). I	f (loss), enter -0-	_	_	•
·B·		C			3	0.
		r Section 4940(e) for Reduce oundations subject to the section 4940			N/A	
(FOI	optional use by domestic private is	ourleations subject to the section 4540	o(a) tax our net investment in	come.)	N/A	
If se	ction 4940(d)(2) applies, leave t	this part blank.				
Was	the foundation liable for the se-	ction 4942 tax on the distributable a	amount of any year in the l	oase period?.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	∏No
If 'Ye	es,' the foundation does not qua	alify under section 4940(e). Do not	complete this part.			
1	Enter the appropriate amount in	each column for each year; see the in	structions before making any	entries.		
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as	sets (c	( <b>d)</b> Distribution olumn (b) divided	
	2013					
	2012					
	2011					
	2010					
	2009					
2	Total of line 1 column (d)			] ,	2	
3	number of years the foundation	ne 5-year base period — divide the n has been in existence if less thar	15 years	::	3	
	•			T		
4	Enter the net value of nonchar	itable-use assets for 2014 from Par	rt X, line 5	· ···  -•	1	<del> </del>
5	Multiply line 4 by line 3			· · · · <u>   </u>	5	
6	Enter 1% of net investment in	come (1% of Part I, line 27b)			5	·
7	Add lines 5 and 6			<u>  :</u>	7	
8	Enter qualifying distributions fi	rom Part XII, line 4			3	
	If line 8 is equal to or greater that Part VI instructions.	in line 7, check the box in Part VI, line	e 1b, and complete that part	using a 1% ta	rate. See the	

		<u> 2529</u>			Page 4
	t VI 🐩 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – sec	instru	ctions)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here   and enter 'N/A' on line 1.	}}	· · ·		
	Date of ruling or determination letter: (attach copy of letter if necessary – see instrs)				
t	Domestic foundations that meet the section 4940(e) requirements in Part V,	1		5,	390.
	check here ► and enter 1% of Part I, line 27b	~ ···	<del> </del>	A	
C	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)	. ــننــ ـا	اعتباست		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0.
3	Add lines 1 and 2	3		5,	390.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-).	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter ·0·	5		5,	390.
6	Credits/Payments:		· ·		-
а	2014 estimated tax pmts and 2013 overpayment credited to 2014		- •	; ; ; ;	
b	Exempt foreign organizations – tax withheld at source 6b	:	1. 1.	٠,٠٠	
C	: Tax paid with application for extension of time to file (Form 8868) 6 c	r 5 1	1 6.33		
d	Backup withholding erroneously withheld 6 d				- ;
7	Total credits and payments. Add lines 6a through 6d	7			0.
8	Enter any penalty for underpayment of estimated tax. Check here	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		5,:	390.
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				
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		7.	Yes	No
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		· · · [ 1:	a	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?		1	ь	X
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published		72.36	1 (2) Ac.	
c	or distributed by the foundation in connection with the activities.  Did the foundation file Form 1120-POL for this year?		۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔۔		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		\$ 00	<u> </u>	
	(1) On the foundation . $\blacktriangleright$ \$ 0. (2) On foundation managers . $\blacktriangleright$ \$		0.	种级区	
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers		المناب		- 13 g
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	• •	2		X
	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		1		n
	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		<u> </u>
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4	a	X
b	olf 'Yes,' has it filed a tax return on Form 990-T for this year?		4	b N	/A_
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	<u> </u>	X
	If 'Yes,' attach the statement required by General Instruction T.				1,4
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			10.00	3,3
	By language in the governing instrument, or				Z
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		7	X	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)		" <u>\$</u> \$\$	1500	5,434
	WA		- \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	SJ. 533	
L	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		-		7, 7
C	(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 of section 4942(j)(3) or for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If 'Yes,' complete	4942(j e Part	)(5) XIV. <b>9</b>		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	<u>.1</u>		X	<u> </u>
BAA			Form 9	90-PF (2	2014)

Х

Form 990-PF (2014)

13	and enter the amount of tax-exempt interest received or accrued during the year			N/F
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	. 16	Yes	No 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	3	· · · · · · · · · · · · · · · · · · ·	
Par	rt:VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		<u> </u>
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	Ţ.~ .	Yes	No
1 a	a During the year did the foundation (either directly or indirectly):	1 2		,
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			1.3
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	3.75	14.7	ئے اوا مراث
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	15	ار بار ار بار	<b>,</b> , ,
	(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)?	10.50 S	, , , , , , , , , , , , , , , , , , ,	
	(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.)	A STATE OF		
t	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)?	1 b	N	∵.ડૉ /A_
	Organizations relying on a current notice regarding disaster assistance check here	،"د. ز	51	
C	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	1	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)):			778.4. 12.3.5.
ā	a 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?			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
	If 'Yes,' list the years ► 20 , 20 , 20	in the		77
t	b Are there any years listed in 2a for which the foundation is <b>not</b> 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	1		
	all years listed, answer 'No' and attach statement – see instructions.)	. 2 b	N.	/A
(	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 , 20 , 20 , 20	\$		1
3 8	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	4.75		1127
Ł	b If 'Yes,' did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014)	3b	W.	A
		<u> </u>		
4 8	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	. 4a		Х

**b** 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?

BAA

TOWN SOCIAL (SOLA) TITCKS LYMITTI LOOME			4/-25/	7330T	raye		
Rart VII-B: Statements Regarding Activiti		1 4720 May Be Req	uired (continued)				
5 a During the year did the foundation pay or incu	r any amount to:						
(1) Carry on propaganda, or otherwise attempt	ot to influence legislatio	n (section 4945(e))?	···· Yes X	No	.   •		
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?							
(3) Provide a grant to an individual for travel,				No			
(4) Provide a grant to an organization other the in section 4945(d)(4)(A)? (see instructions	nan a charitable, etc, or	ganızatıon described	Yes X	No :			
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	; literary, or or animals?	Yes X	No			
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or in	the transactions fail to a current notice regard	qualify under the excep ling disaster assistance	tions	·			
(see instructions)? Organizations relying on a current notice regains				5 b	N/A_		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	he foundation claim ex	emption from the	. N/A Yes	No			
If 'Yes,' attach the statement required by Regu	ulations section 53 4945	5-5(d).		; - <sup>-</sup> ,			
6a Did the foundation, during the year, receive ar on a personal benefit contract?			Yes X	No	, , , , , , , , , , , , , , , , , , ,		
b Did the foundation, during the year, pay premi If 'Yes' to 6b. file Form 8870.	ums, directly or indirec	tly, on a personal bene	fit contract?	6b	X		
7a At any time during the tax year, was the found	dation a party to a prohi	bited tax shelter transa	action? Yes X	No			
b If 'Yes,' did the foundation receive any procee							
Part VIII Information About Officers, Di and Contractors	rectors, Trustees,	Foundation Manag	gers, Highly Paid E	imployee:	5,		
1 List all officers, directors, trustees, foundatio	n managers and their o	compensation (see inst	ructions).				
(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) Expens other a	se account, illowances		
BRENT HICKS	PRESIDENT	0.	0.		0		
5525 SE SCENIC LANE #200 VANCOUVER, WA 98661	0						
JORJA HICKS	DIRECTOR	0.	0.		0		
5525 SE SCENIC LANE #200	0						
VANCOUVER, WA 98661							
LISA HICKS	SECRETARY	0.	0.		0		
13740 NW BURTON STREET PORTLAND, OR 97229	0						
2 Compensation of five highest-paid employees (ot							
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expens other a	se account, llowances		
NONE							
	j		ļ				
Total number of other employees paid over \$50,000	<u></u> 				0		

Form 990-PF (2014) HICKS FAMILY FOUNDATION	47-2529981	Page 7
Part VIII   Information About Officers, Directors, Trustees, Foundation Manag and Contractors (continued)	ers, Highly Paid Employees,	
3 Five highest-paid independent contractors for professional services (see instructions). If no		
	e of service (c) Compens	ation
NONE		
Total number of others receiving over \$50,000 for professional services	•	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as organizations and other beneficiaries served, conferences convened, research papers produced, etc.	the number of Expenses	i
1 THE FOUNDATION DOES NOT HAVE OTHER SPECIFIC DIRECT CHARITA	BLE	
ACTIVITIES OTHER THAN CONTRIBUTIONS TO VARIOUS CHARITABLE ORGANIZATIONS.		
2		
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 2. Amount	
1		
N/A		
2		
All other program-related investments. See instructions. 3		
<b></b>		
Total Add lines 1 through 3	<b>&gt;</b>	

BAA

Form 990-PF (2014)

Form 990-PF (2014) HICKS FAMILY FOUNDATION	47-2529981	Page 8
Part X Minimum Investment Return (All domestic foundations must complete this particle see instructions.)	rt. Foreign found	ations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: a Average monthly fair market value of securities	1a	
<b>b</b> Average of monthly cash balances		434,702.
c Fair market value of all other assets (see instructions)		_ 131, 102.
d Total (add lines 1a, b, and c)	\	434,702.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c	· · ·	10 17 . 02 .
(attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	434,702.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	6,521.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	428,181.
6 Minimum investment return. Enter 5% of line 5 SHORT YEAR MODIFIED PERCENTAGE 0.31	.51 % 6	1,349.
Part:XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private of and certain foreign organizations check here ► and do not complete this particular in the particular interest in the pa		ions
1 Minimum investment return from Part X, line 6	1	1,349.
2 a Tax on investment income for 2014 from Part VI, line 5	390.	
b Income tax for 2014. (This does not include the tax from Part VI.) 2b	5 X-1	
c Add lines 2a and 2b		5,390.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	-4,041.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	<u> </u>	-4,041.
6 Deduction from distributable amount (see instructions)		
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	0.
Rărti XIII Qualifying Distributions (see ınstructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:	1 Clare	
a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1a	
b Program-related investments — total from Part IX-B	1b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes		
3 Amounts set aside for specific charitable projects that satisfy the:	17.87	
a Suitability test (prior IRS approval required)	За	
b Cash distribution test (attach the required schedule)	<del></del>	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	1 4	0.
Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
<b>Note.</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether t qualifies for the section 4940(e) reduction of tax in those years.	the foundation	
BAA	Form	990-PF (2014)

### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	<b>(c)</b> 2013	<b>(d)</b> 2014
1 Distributable amount for 2014 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2014:				
a Enter amount for 2013 only	74 .		0.	
<b>b</b> Total for prior years: 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2014:	•			
<b>a</b> From 2009	. '			
<b>b</b> From 2010	•			
c From 2011		,	1	
d From 2012				
e From 2013	,			1
f Total of lines 3a through e	0.	- , , , , , , , , , , , , , , , , , , ,		
4 Qualifying distributions for 2014 from Part				
XII, line 4: ► \$		-1		
a Applied to 2013, but not more than line 2a .	7.7		0.	
b Applied to undistributed income of prior years (Election required — see instructions)		0.	2	
c Treated as distributions out of corpus (Election required — see instructions)	0.			
d Applied to 2014 distributable amount				0.
e Remaining amount distributed out of corpus .	0.		The property of the same of	
5 Excess distributions carryover applied to 2014	0.	F 44		0.
(If an amount appears in column (d), the	Early of Control			
same amount must be shown in column (a).)				
6 Futuation at total of each column ac	ends a Midden of the		M. 18 19 19 19 19 19 19 19 19 19 19 19 19 19	The state of the s
6 Enter the net total of each column as indicated below:		1000 BANG		
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.	1 1300 1 1300	Handley Through the	11 / 3 cm 3 10 cm
b Prior years' undistributed income Subtract line 4b from line 2b		0.		A STATE OF THE STA
c Enter the amount of prior years' undistributed	1.5		7 1 7 1	
income for which a notice of deficiency has been issued, or on which the section 4942(a)				The said of the
tax has been previously assessed		0.	3 3 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
d Subtract line 6c from line 6b. Taxable	Try glader to a to a			
amount — see instructions	file to the second	0.		1 / East 14 . 15 / Car
e Undistributed income for 2013. Subtract line 4a from	8 14 T. M.			
line 2a. Taxable amount — see instructions			0.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
f Undistributed income for 2014. Subtract lines				
4d and 5 from line 1. This amount must be			And the state of t	,
distributed in 2015.	100		Transfer of the state of the state of	U.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by		10 10 10 10 10 10 10		
section 170(b)(1)(F) or 4942(g)(3) (Election			75	
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions).	0.			,
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:	1-m, 17-n; == 1		training to	
a Excess from 2010				
b Excess from 2011	┧	1		
c Excess from 2012				
d Excess from 2013	<b> </b>	-		
e Excess from 2014	† (		(** : . · · · · · · · · · · · · · · · · · ·	
G EXCESS HOTH EST 1	<u> </u>	1, , , , , , , , , , , , , , , , , , ,	<u> </u>	Form 990-PF (2014)

Form 990-PF (2014) HICKS FAMILY FOUN			- <del></del>	47-252998	
Part:XIV   Private Operating Foundations (see instructions and Part VII-A, question 9) N/					
1 a If the foundation has received a ruling or deter is effective for 2014, enter the date of the i	ruling				
b Check box to indicate whether the foundate		erating foundation d	<del></del>	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for each year listed	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(e) Total
<b>b</b> 85% of line 2a		<u> </u>	<b>_</b>		<del></del>
c Qualifying distributions from Part XII, line 4 for each year listed	<del></del>				
d Amounts included in line 2c not used directly for active conduct of exempt activities				· · · · · · · · · · · · · · · · · · ·	
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c				:	
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:					ı
(1) Value of all assets			<u> </u>		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
· · · · · · · · · · · · · · · · · · ·		<del> </del>	<del> </del>		<del></del>
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV: Supplementary Information (assets at any time during the Information Regarding Foundation Manag	year — see in	structions.)	<del></del>	<u> </u>	
a List any managers of the foundation who have close of any tax year (but only if they have BRENT HICKS	contributed more	than \$5,000). (See	section 507(d)(2).)	y the loundation ben	ore the
b List any managers of the foundation who own a partnership or other entity) of which the f NONE	10% or more of the oundation has a 1	stock of a corporatio 0% or greater intere	n (or an equally large est.	portion of the owner	ship of
2 Information Regarding Contribution, Gran Check here ► X if the foundation only make requests for funds. If the foundation makes complete items 2a, b, c, and d.	tes contributions to gifts, grants, etc	preselected charitable (see instructions) to	e organizations and do individuals or orga	nizations under othe	
a The name, address, and telephone number or	e-mail address of th	ne person to whom ap	pplications should be	addressed:	
b The form in which applications should be s	ubmitted and infor	mation and materia	ls they should inclu	de:	
c Any submission deadlines:					
d Any restrictions or limitations on awards, si	uch as by geograp	hical areas, charital	ble fields, kinds of ii	nstitutions, or other	factors:
BAA		EA0310L 06/17/14		F	orm <b>990-PF</b> (2014)

	If recipient is an individual.	Faur 3-1		N/A
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient	CONTIDUUON	1
Paid during the year	<u> </u>			1
•		,		
		1		İ
	<b>1</b>	[		
				ļ
	Ì	1		
	Ì			İ
	- {			1
	ļ			
	ļ	ļ		1
	ı	1		
				[
	l l	1		
	İ	į i		1
		Į J		
		1		1
		] ]		
		] ]		
		]		1
	1			
		1		
	i	[ ]		1
	ļ	1		1
	}	1 (		1
	1	}		į
		1		ļ
	1			
	1			
		1		1
	{	[		1
		1		
	- 1	1		1
		!		1
		j		
Total		· · · · · · · · · · · · · · · · · · ·	≯ 3;	a
Approved for future payment		1	<del></del>	
		1		ł
				1
		] [		
		]		1
		j l		
		<b>,</b>		1
	1	[		
		<u> </u>		1
	{	i		1
		}		Į
	•	1		1
		I I		i
		ļ		}
•				
•				
•				

#### Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.		Unrelated business income E		Exclude	d by section 512, 513, or 514	(0)	
1	Prog	ram service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions.)
-	a riogi	Tam service revenue,			code	<del> </del>	
ı	ь		<del> </del>		<del>                                     </del>	<del> </del>	
•	c						
(	d	<del> </del>	<u> </u>				
(	<u>-</u> ,				<u> </u>	<u> </u>	
1	Fees	and contracts from government agencies	<del> </del>		<del> </del>	<del> </del>	<del></del>
2		bership dues and assessments .			<del> </del>		
3		st on savings and temporary cash investments			<del> </del>		
4		ends and interest from securities				<u> </u>	
5	Net re	ental income or (loss) from real estate:	- h '	1.151.121.121.13		N. E. S. S. S. S. S. S. S. S. S. S. S. S. S.	
		financed property.					
ı		lebt-financed property					
6		ntal income or (loss) from personal property			<u> </u>		
7		r investment income.					
8		r (loss) from sales of assets other than inventory			18	5,754.	
9		ncome or (loss) from special events s profit or (loss) from sales of inventory			<del>                                     </del>		
10 11		r revenue:	70 70 7 1 1 2 2 1 1 2 2 2 1 1 2 2 2 2 2 2 2 2		1:5		2. 位显数制制 等的人心。
• • •		revenue.	11 1, 1 - 1	4 1. 28 x 34 82 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 5	THE PERSON NEW	771
	<u></u>		<del> </del>		<del>                                     </del>		
		<del></del>			1		
	<u></u>						
12			37 7 7 7		1812 To		
13		. Add line 12, columns (b), (d), and (e)				13	5,754.
(See	works	sheet in line 13 instructions to verify calculate	ons )			<del></del> _	<del></del>
Pa	t XVI	BB Relationship of Activities to the	e Accomp	lishment of Exemp	ot Purp	oses	
Lin	e No.	Explain below how each activity for which is accomplishment of the foundation's exempt	ncome is rep	orted in column (e) of	Part XVI	A contributed important	ily to the
			t purposes (c	ther thair by providing		Sucir purposes). (Occ.)	1131 4010113.7
	1	N/A					
						<del></del>	
							· · · · · · · · · · · · · · · · · · ·
						·— ·— ·	
		<u> </u>			<del></del>		
			<del></del>				
BAA		<u></u>	TEF	A0502L 06/17/14			Form 990-PF (2014)
-			1667	TOTAL			, ,

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

	<u> </u>	ii.e.a.tioi13							
des	I the organization direc scribed in section 501(c ating to political organi	c) of the Code (o	engage in any of other than section	the following wi 501(c)(3) organ	th any of	ther organization) or in section (	n 527,		Yes No
a Tra	ansfers from the reporti	ng foundation to	a noncharitable	exempt organiz	ation of:			I	
	Cash							1 a (1)	x ·
(2)	Other assets							1 a (2)	$\frac{x}{x}$
_	ner transactions:							12 2	
	Sales of assets to a n	oncharitable exe	emnt organization	1				1 b (1)	X
	Purchases of assets for							1 b (2)	X
	Rental of facilities, eq							1 b (3)	$\frac{\Lambda}{X}$
	Reimbursement arrange								
								1 b (4)	X
	Loans or loan guarant							1 b (5)	X
	Performance of service		-					1 b (6)	X
c Sn	aring of facilities, equip	ment, mailing lis	sts, other assets,	or paid employ	ees			1c	X
d If the any	he answer to any of the goods, other assets, or s y transaction or sharing	e above is 'Yes,' services given by arrangement, s	complete the fol the reporting foun- how in column (c	lowing schedule dation. If the four t) the value of the	. Columi dation re ne goods	n <b>(b)</b> should alw eceived less than s, other assets,	rays show the fair if fair market value in or services receive	market valu ed	le of
(a) Line r	o. (b) Amount involved	(c) Name (	of noncharitable exem	pt organization	(d)	Description of trans	sfers, transactions, and	sharing arran	gements
N/A			·		_				
	· <del></del>	<del></del>							
<del></del>		<del>-  </del>					<del></del>		
	<del></del>	<del></del>							
	<del></del>	<del></del>	<del></del>						
	·	<del></del>					<del></del>		
_									
		<del></del>							
		<del></del>							<del></del>
	<u>.</u>	<del></del>							
. <u> </u>									
des	he foundation directly or scribed in section 501(c Yes,' complete the follo	) of the Code (o	d with, or related to ther than section	o, one or more ta 501(c)(3)) or in	x-exemp section	t organizations 527?		. Yes	ΧNο
	(a) Name of organize		(b) Type	of organization		(c)	Description of rel	ationship	
N/A			<u>`</u>					<del></del>	
	<del>- ···_ · · · · · · · · · · · · · · · · ·</del>								
			<del>-</del>				<del></del>		
	···						<del></del>		
·		<del></del>					<del></del> -		
<del></del>	Index consistes of persons. I dec	lare that I have are	upad this return, includ	ling accompanying sc	hedules an	d statements, and to	the hest of my knowledg	e and helief i	t is true
Sign	Under penalties of perjury, I descorrect, and complete Declarate	on of prepare (other	ivan taxpayer) is base		- \		edge.	May the If	RS discuss
Here	3	DEXT		5-13-15		RESIDENT		_   (see ipstri	shown below uctions)?
	Signature of officer or trustee	ンピリ	/	Dete	Til			X	Yes No
	Print/Type preparer's	name	Preparers	ignature		Date	Check If	PTIN	<del></del>
Paid	ROBERT P. I	WIEST	ROPERT	CLIFF WEEKSEP	X/	5/08/15	self-employed	P00678	982
repar			KESSLER WIE				Firm's EIN > 20-5	888003	
Use Or			LUMBIA STRE			<u> </u>			
JSE UI	iiy  iii s codicas		OR 97201-5		, 50		Phone no (503	) 225-1	612
BAA	1	LOKITAND,	OR SIZUL-S	000			(303		)-PF (2014)
DAA								1 01111 776	)-FF (GV14)

#### 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, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

HICKS FAMILY FOUNDATION		47-2529981
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a	private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priva	ite foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Ge	neral Rule or a Special Rule	
Note. Only a section 501(c)(7), (8), or (10) orga	nization can check boxes for both the General Rule and a S	pecial Rule. See instructions.
General Rule		
For an organization filing Form 990, 990-EZ property) from any one contributor. Complete	, or 990-PF that received, during the year, contributions tota ie Parts I and II. See instructions for determining a contribut	ling \$5,000 or more (in money or or's total contributions.
Special Rules		
$\square$ under sections 509(a)(1) and 170(b)(1)(A)(vi) t	(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% supplied the checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 1	ba, or 16b, and that
received from any one contributor, during the	e year, total contributions of the greater of (1) \$5,000 or (2) 0-EZ, line 1. Complete Parts I and II.	2% of the amount on (i)
Form 990, Part VIII, line III, or (ii) Form 990	-EZ, fille 1. Complete Faits I and II.	
For an organization described in section 50	(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fit than \$1,000 exclusively for religious, charitable, scientific, lit	rom any one contributor,
during the year, total contributions of more purposes. or for the prevention of cruelty to	than \$1,000 exclusively for religious, charitable, scientific, lit children or animals. Complete Parts 1, II, and III.	erary, or educational
,,,,,,,, .	,	
For an organization described in section 50	(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fi	rom any one contributor,
during the year, contributions exclusively for	r religious, charitable, etc., purposes, but no such contribution	ons totaled more than
\$1,000. If this box is checked, enter here the	e total contributions that were received during the year for a my of the parts unless the <b>General Rule</b> applies to this organ	n <i>exclusively</i> religious, orzation hecause
it received nonexclusively religious, charitab	le, etc., contributions totaling \$5,000 or more during the year	ir ▶ \$
	,,	
Caution: An organization that is not covered by	the General Rule and/or the Special Rules does not file Sch	edule B (Form 990, 990-EZ, or
990-PF) but it must answer 'No' on Part IV. In	e 2, of its Form 990; or check the box on line H of its Form 9 filing requirements of Schedule B (Form 990, 990-EZ, or 99	390-EZ or on its form 990-PF.

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, or 990-PF.

Name of org	B (Form 990, 990-EZ, or 990-PF) (2014)	Page	1 of 1 of Part 1
_	FAMILY FOUNDATION		r identification number 529981
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space	is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BRENT & JORJA HICKS  5525 SE SCENIC LANE, #200  VANCOUVER, WA 98661	\$428,948.	Person X  Payroll  Noncash X  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
			(Complete Part II for noncash contributions.)
	777 4 07001 071711	Sanadula & (Form 000	GUILE / AT UUILEN (2017)

1 to

1 of Part II

Name of organization

HICKS FAMILY FOUNDATION

Employer identification number 47-2529981

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	TROWE PRICE STOCK		
		\$423,948.	12/23/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<b></b>		\$	
(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
		<u> </u>   \$	
		9	
(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
		\$	

1 of Part III

HICKS I	FAMILY FOUNDATION			Employer identification number 47-2529981
Part III	Exclusively religious, charitable, e	tc contributions to orga	nizations de	
	or (10) that total more than \$1,000 for t	he year from any one contrib	outor. Complete	columns (a) through (e) and
	the following line entry. For organizations c	ompleting Part III, enter the tota	al of exclusively	y religious, charitable, etc.,
	contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional	(Enter this information once. So	ee instructions	.) ► \$N/A
(2)			<del></del>	(d)
(a) No. from	(b) Purpose of gift	(c) Use of gift	1	(d) Description of how gift is held
Part I				
	N/A			
		<u></u>		
		(a)		
		(e) Transfer of gift		
	Transferee's name, addres	s, and ZIP + 4	Relati	onship of transferor to transferee
(2)	(h)	(6)	<del></del> -	(4)
(a) No. from	(b) Purpose of gift	(c) Use of gift	ĺ	(d) Description of how gift is held
Part I				
•			+ .	
	<b></b>			
			+ -	
		(e)		<del></del>
		(e) Transfer of gift		
	Transferee's name, addres	s, and ZIP + 4	Relati	onship of transferor to transferee
(a)	(b)	(c)		(d)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d)  Description of how gift is held
raiti				
	<u> </u>			
			+	
		(e) Transfer of gift		
	Transferee's name, addres		Relati	onship of transferor to transferee
	Transferee S traine, address	3, 4114 211 + 4		onship of danseror to danseror
•				
(a) No. from	(b)	(c) Use of gift		(d) Description of how gift is held
No. from Part I	Purpose of gift	Use of gift		Description of how gift is held
		<del></del>		
			. – – – – † .	
			<u> </u>	
		(e) Transfer of gift		
	Transferee's name, addres		Palati	onship of transferor to transferee
	Transieree 5 manie, addres	3, WIN AII 7 4	Neidli	onship of dansieror to dansieree
	<b> </b>			

2014

#### **FEDERAL STATEMENTS**

PAGE 1

**CLIENT HICKSFF** 

**HICKS FAMILY FOUNDATION** 

47-2529981

5/08/15

05:54PM

STATEMENT 1 FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

NAME OF SUBSTANTIAL CONTRIBUTOR ADDRESS OF SUBSTANTIAL CONTRIBUTOR

BRENT S. HICKS

5525 SE SCENIC LANE #200

VANCOUVER, WA 98661

JORJA D. HICKS

5525 SE SCENIC LANE #200

VANCOUVER, WA 98661

HICKS FAMILY FOUNDATION
FORM 990-PF, PART IV, LN. 1a & 1b
Capital Gains and Losses for Tax of Investment Income

YEAR. 2014 EIN: 47-2529981

LONG TERM TRANSACTIONS

					Carrying Book		Investment	
		Date			Basis (FMV at		Basis (Donor's	
Description	Quantity	Acquired	Date Sold	Sales Price	gift date)	Gain/Loss	Basis)	Gain/Loss
T ROWE PRICE HEALTH SCIENCES (PRHSX)	2,431 222	5/29/2009	12/30/2014	167,073 58	163,523 99	3,549 58	53592 23	113,481 35
T ROWE PRICE HEALTH SCIENCES (PRHSX)	70 745	10/30/2009	12/30/2014	4,86160	4,758 31	103 29	1,559 46	3,302.14
T ROWE PRICE HEALTH SCIENCES (PRHSX)	88 067	07/23/2010	12/30/2014	6,05196	5,923 39	128 58	1,941.29	4,110 67
T ROWE PRICE HEALTH SCIENCES (PRHSX)	350 787	12/01/2010	12/30/2014	24,106 08	23,593 93	512.15	7,732 51	16,373.57
T ROWE PRICE HEALTH SCIENCES (PRHSX)	15 790	12/15/2010	12/30/2014	1,085 09	1,062 04	23 05	348 06	737 03
T ROWE PRICE HEALTH SCIENCES (PRHSX)	64 087	12/15/2011	12/30/2014	4,404 06	4,310 49	93 57	1,412 69	2,991 37
T ROWE PRICE HEALTH SCIENCES (PRHSX)	27 739	12/15/2011	12/30/2014	1,906 22	1,865 73	40 50	611.46	1,294 76
T ROWE PRICE BLUE CHIP GROWTH ADV CL (PABGX)	825 000	05/29/2009	12/30/2014	55,753 50	55,423 50	330 00	23,553 75	32,199 75
T ROWE PRICE BLUE CHIP GROWTH ADV CL (PABGX)	139 752	01/15/2010	12/30/2014	9,444 44	9,388 54	55 90	3,989 28	5,455 16
T ROWE PRICE BLUE CHIP GROWTH ADV CL (PABGX)	1,720 168	03/22/2010	12/30/2014	116,248 95	115,560 89	688 07	49,102 90	67,146 05
T ROWE PRICE BLUE CHIP GROWTH ADV CL (PABGX)	197 301	04/23/2010	12/30/2014	13,333 60	13,254 68	78.92	5,632 04	7,701 56
T ROWE PRICE BLUE CHIP GROWTH ADV CL (PABGX)	376 339	07/23/2010	12/30/2014	25,432 99	25,282 45	150 54	10,742 75	14,690 24
						•		•
TOTAL LONG TERM GAINS/ (LOSSES)	5 306 907			420 702 00	20 671 60		000000	-
	6,500.50			459,102.00	CE: 14E'C74	9,794.14	160,216.42	203,403.00
TOTAL INVESTMENT GAINS / (LOSSES)				429,702.08	423,947.93	5,754.14	160,218.42	269,483.66