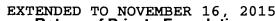


See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury Internal Revenue Service



EXTENDED TO NOVEMBER 16, 2015

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.

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

OMB No 1545-0052

For	caler	ıdar year 2014 or tax year beginni ng		, and ending		
Na	ne of	foundation			A Employer identification number	
		CASIN LAKE FOUNDATION			91-1545081	
		and street (or P O box number if mail is not delivered to street	address)	Room/si	D Telephone number	
		5 42ND AVENUE EAST own, state or province, country, and ZIP or foreign p	actal code		(206) 329-8899	
		TTLE, WA 98112	osiai code		C if exemption application is pending, check here	- L
_		all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations, check here	
		Final return	Amended return	. ,		
		Address change	Name change		Foreign organizations meeting the 85% test, check here and attach computation	ightharpoons
H (_	type of organization: X Section 501(c)(3) ex			E If private foundation status was terminat	ed
<u>_</u>			Other taxable private founda		under section 507(b)(1)(A), check here	
		· I —	ng method: X Cash	Accrual	F If the foundation is in a 60-month termin	ation
	om i -\$	Part II, col (c), line 16) 0t 4 , 809 , 102 . (Part I, colu	ther (specify)	nasis)	under section 507(b)(1)(B), check here	
		Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investmen	t (c) Adjusted net (d) Disburse	ements
تنا		The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	t (c) Adjusted net (0) Disburse for charitable p (cash basis	ourposes
	1	Contributions, gifts, grants, etc., received	9,248,524.		N/A	
	2	Check In the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	89,442.	89,44	2. STATEME	NT 2
	Ι.	Gross rents				
	١.	Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10	382,846.		STATEME	NT 1
Revenue	Гъ	Gross sales price for all assets on line 6a 4, 456, 754.	302,0101		D1111 11111	
eVe!	7	Capital gain net income (from Part IV line 2)		45,11	1.	
Œ	8	Net short-term capital gain				
	9	Income modifications Gross sales less returns				
		and allowances				
		Less Cost of goods sold Gross profit or (loss)				
	۱,,	Other income				
	12	Total. Add lines 1 through 11	9,720,812.	134,55	3.	
	13	Compensation of officers, directors, trustees, etc.	0.	· · · · · · · · · · · · · · · · · · ·	0.	0.
	14	Other employee salaries and wages				
ø	15	Pension plans, employee benefits				
nse		Legal fees				
Expenses		Accounting fees Other professional fees STMT 3	2,970.	1,48	5	0.
У В	17		2,570.	1,30		
rati	18	Taxes NOV 1 0 2015				
Operating and Administrati	19	Depreciation and depletion				
Ē	20	Occupancy ()				
Ă	21	Travel, conferences, and meetings				
a	22	Printing and publications	22 704	16 06	16	000
ting	23	Other expenses STMT 4 Total operating and administrative	33,794.	16,89	16	,896.
era		expenses Add lines 13 through 23	36,764.	18,38	11.	,896.
Ö	25	Contributions, gifts, grants paid	8,994,396.	20,50	8,994	, 396.
	26	Total expenses and disbursements.				<u></u>
	<u> </u>	Add lines 24 and 25	9,031,160.	18,38	9,011	,292.
	27	Subtract line 26 from line 12:	600 555			
	ı	Excess of revenue over expenses and disbursements	689,652.	116 15		
	ı	Net investment income (if negative, enter -0-)		116,17		
-	٠ ،	Adjusted net income (if negative, enter -0-)	<u>L</u>		N/A	

11-24-14 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2014)

1

				1545081 Page 2		
<u></u>	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	of year	
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value (c) Fair Market Value		
	1	Cash - non-interest-bearing	805 228	1,491,511.	1,491,511.	
	2	Savings and temporary cash investments	653,3244	591,264.	591,264.	
	3	Accounts receivable ►				
		Less¹ allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts		Ì		
	5	Grants receivable				
	ŀ	Receivables due from officers, directors, trustees, and other				
	-	disqualified persons				
	7	Other notes and loans receivable				
	Ĭ .	Less; allowance for doubtful accounts	1			
s	R	Inventories for sale or use				
Assets		Prepaid expenses and deferred charges				
As		Investments - U.S. and state government obligations				
		Investments - corporate stock STMT 5	1,841,908.	2,552,169.	2,726,327.	
		· •	1,041,300.	2,332,109.	2,140,341.	
	l	Investments - corporate bonds			·	
	' '	Investments - land, buildings, and equipment basis	·			
		Less accumulated depreciation				
	l .	Investments - mortgage loans				
	13	Investments - other				
	14	Land, buildings, and equipment basis	i			
		Less accumulated depreciation				
	1	Other assets (describe)				
	i i	Total assets (to be completed by all filers - see the				
_	_	-instructions. Also, see page 1, item 1)	3,301,060.	4,634,944.	4,809,102.	
	!	Accounts payable and accrued expenses	45 000			
	18	Grants payable	45,800.	690,032.		
es	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
igh	21	Mortgages and other notes payable				
_	22	Other liabilities (describe)				
	İ					
	23	Total liabilities (add lines 17 through 22)	45,800.	690,032.		
		Foundations that follow SFAS 117, check here				
(D		and complete lines 24 through 26 and lines 30 and 31.				
Balances	24	Unrestricted	3,255,260.	3,944,912.		
<u>la</u>	25	Temporarily restricted				
	26	Permanently restricted				
Ĕ		Foundations that do not follow SFAS 117, check here				
Ē		and complete lines 27 through 31.	1	•		
S	27	Capital stock, trust principal, or current funds				
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
As	29	Retained earnings, accumulated income, endowment, or other funds				
Net Assets or Fund	30	Total net assets or fund balances	3,255,260.	3,944,912.		
		· · · · · · · · · · · · · · · · · · ·				
	31	Total liabilities and net assets/fund balances	3,301,060.	4,634,944.		
Г	art	Analysis of Changes in Net Assets or Fund Ba	alances			
드	aí l					
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line 3	30			
	(mus	t agree with end-of-year figure reported on prior year's return)		1	3,255,260.	
2	Ente	amount from Part I, line 27a		2	689,652.	
3	Othe	r increases not included in line 2 (itemize)		3	0.	
4	Add	ines 1, 2, and 3		4	3,944,912.	
5	Decr	eases 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, col	umn (b), line 30	. 6	3,944,912.	

423511 11-24-14 3,944,912. Form **990-PF** (2014)

See the Part VI instructions.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

Form	990-PF (2014) MOCCASIN LAKE FOUNDATION		<u>-1545</u>			Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see	instru	ctio	ns)
1a	Exempt operating fournesses rescribed in section 4940(d)(2), check here and enter "N/A" on line 1.		1			
	Date of ruling or descriptions (attach copy of letter if necessary-see instructions)		}			
b	Domestic focus as section 4940(e) requirements in Part V, check here X and enter 1%	1			1,1	62.
	of Part I, line 275		1			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
	Tax under section 511 (comestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	1			0.
	Add lines 1 and 2	3			1,1	
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	1			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	1		1,1	62.
6	Credits/Payments:		1			
	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 1, 461	.				
	Exempt foreign organizations - tax withheld at source 6b	1				
	Tax paid with application for extension of time to file (Form 8868) 6c 350	1	1			
	Backup withholding erroneously withheld 6d	1				
	Total credits and payments. Add lines 6a through 6d	٦,	1		1 ຂ	11.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	 		<u> </u>	<u> </u>
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	°	 			
	·	\vdash	+			49.
10		10	-			0.
	Enter the amount of line 10 to be: Credited to 2015 estimated tax 649 Refunded rt VII-A Statements Regarding Activities	11	1			<u> </u>
_					Yes	Nia
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven	e in		1	163	
	any political campaign?	- \ 0	-	1a		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definitio			1b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ed or				
	distributed by the foundation in connection with the activities			١. ا		7.7
	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 \$ 0. (2) On foundation managers. \blacktriangleright \$ 0.	<u>-</u>		1 1		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$					
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 of incorporation,	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	I/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			1		
	By language in the governing instrument, or			1		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	e 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, col (c), and Part X	V		7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			1		
	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			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call	endar				
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	1	X
10	Did any persons become substantial contributors during the tax year? If "Yes " attach a schedule listing their names and addresses			10		X
			For	m 990	-PF(2014)

		<u>-15450</u>	81	F	age 5
Pa	irt VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, one a commoded entity within the meaning of		Į.		
	section 512(b)(13)? If "Yes," attach schedule (see instructions		11		X
12	Did the foundation make a distribution to a donor advised the secondation or a disqualified person had advisory privilegence.	_{jes?}			
	If "Yes," attach statement (see instructions)		12	l	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	F	13	x	
	Website address ► WWW.MOCCASINLAKE.ORG	_			
14	The books are in care of ▶ TERI LAZZARA Telephone no. ▶ (206)32	9 - 8	899	9
		4 ▶981			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	· • ·		—	
	and enter the amount of tax-exempt interest received or accrued during the year	1	N/	Α	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank.				No
	securities, or other financial account in a foreign country?	- 1	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	_{ie}		_	
	foreign country	"		- 1	
Pε	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.		Ty	es	No
1a	During the year did the foundation (either directly or indirectly):		 -	-	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	₹ No I			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	~			
	a disqualified person?	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?				
	(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)?	₹ No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	_ "		ł	
	if the foundation agreed to make a grant to or to employ the official for a period after			1	
	termination of government service, if terminating within 90 days.)	₹ No.			
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	~ ""	ŀ		
•	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		1ь		X
	Organizations relying on a current notice regarding disaster assistance check here	⊾┌──	"" 	-+	<u>~</u>
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	´'''	ļ		
	before the first day of the tax year beginning in 2014?		.		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	· -	1c		
-	defined in section 4942(j)(3) or 4942(j)(5)):		ŀ		
	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			l	
۰	before 2014?	77 a			
	If "Yes," list the years	ן יייי ב	1		
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		- 1		
_	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			- 1	
		N/A	a.	- 1	
	If the provisions of section 4942(a)(2) are being applied to any of the vears fisted in 2a, list the years here.	' ′^^ ⊢	2b	-+	
3.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	ĺ	- 1		
Ja	during the year?	77 No.		- 1	
ь	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after	ן יייי ב			
	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.	, l		- 1	
		_{7/2}	<u>, </u>	-	
<i>A</i> ~		·· ⊢	3b	+	
	Did the foundation invest during the year any amount in a manner that would expandize its charitable purposes? Did the foundation make any investment in a prior year (but after December 21, 1960) that could respect the charitable purposes that	· F	4a	+	<u>X</u>
ú	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?		,		v
	That het been removed from jeopardy before the first day of the tax year beginning in 2014?		4b	DE "	X
		Form	JJU-	~ r (2	(41 US

Form 990-PF (2014) MOCCASIN LAKE FOUNDATION 91-1545081	_ Page 6
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)	
5a During the year did the foundation pay or incur any amount to:	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or makes	
any voter registration drive?	
(3) Provide a grant to an individual for travel, study, or other similar purposes?	
(4) Provide a grant to an organization other than a charitable, etc., organization described in section	
4945(d)(4)(A)? (see instructions)	
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for	
the prevention of cruelty to children or animals?	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations	
section 53.4945 or in a current notice regarding disaster assistance (see instructions)?	
Organizations relying on a current notice regarding disaster assistance check here	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained	
expenditure responsibility for the grant?	
If "Yes," attach the statement required by Regulations section 53 4945-5(d)	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on	
a personal benefit contract?	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	l x
If "Yes" to 6b, file Form 8870	
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes X No	
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A 7b	
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly	
Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation.	
	a) Eynense
(a) Name and address hours per week devoted (If not paid, employee beent plans added to the paid of the paid defended plans and address and address and address hours per week devoted (If not paid, employee beent) plans and address are paid to the paid of the	e) Expense count, other
to position enter -0-) compensation	allowances
SEE STATEMENT 6 0. 0.	0.
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."	
(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 enefit plans and deterred compensation	e) Expense count, other allowances
devoted to position	allowances
NONE	
	0

Form **990-PF** (2014)

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 NONE (b) Type of service (c) Service	
(a) Name and address of each person paid more than \$50,000 (b) Type of service (c)	
(a) Name and address of each person paid more than \$50,000 (b) Type of service (c)	
	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities ▶	0
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. Expenses	
1 N/A	
	0.
2	
3	
4	
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 N/A	
2	
All other program-related investments. See instructions.	
<u> </u>	
Total. Add lines 1 through 3	0.
Form 990-P	

	m 990-PF (2014) MOCCASIN LAKE FOUNDATION	91-1	545081	Page 8
P	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, se	e instructions)
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	l _{1a}	3,039	,193
b	Average of monthly cash balances	1b	1,701	,696
C	Fair market value of all other assets	1c	•	,
d	Total (add lines 1a, b, and c)	1d	4,740	,889
e	Reduction claimed for blockage or other factors reported on lines 1a and		<u>-</u>	
	1c (attach detailed explanation) 1e 0.			
2	Acquisition indebtedness applicable to line 1 assets	1 2		0.
3	Subtract line 2 from line 1d	3	4,740	,889
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4		,113
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,669	,776
6	Minimum investment return. Enter 5% of line 5	6		,489
<u>P</u>	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here	nd certain		
1	Minimum investment return from Part X, line 6	1	233	,489.
2a	Tax on investment income for 2014 from Part VI, line 5			
Þ	Income tax for 2014. (This does not include the tax from Part VI.)			
	Add lines 2a and 2b	2c	1	<u>,162</u> .
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	232	,327.
4	Recoveries of amounts treated as qualifying distributions	4		0.
5	Add lines 3 and 4	5	232	,327.
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	232	,327.
<u> </u>	Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	-		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	9,011	
	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 chantable projects that satisfy the:			
	Suitability test (prior IRS approval required)	3a		
b	Cash distribution test (attach the required schedule)	3b		
4	Qualifying distributions, Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	9.011	. 292

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

 ${\bf 5}$ $\,$ Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years

Form **990-PF** (2014)

9,010,130.

6

1,162.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
Distributable amount for 2014 from Part XI, line 7				232,327.
2 Undistributed income, if any as of the end of 2014				232,3274
a Enter amount for 2013 only			0.	
b Total for prior years.				
b rotal for prior yours.		0.		
3 Excess distributions carryover, if any, to 2014				
aFrom 2009 3,498,105.				
bFrom 2010 3,370,877.				
cFrom 2011 4,233,421.				
dFrom 2012 4,366,761.				
eFrom 2013 6,362,108.				
f Total of lines 3a through e	21,831,272.			
4 Qualifying distributions for 2014 from	22/002/2/20			
Part XII, line 4 ⁻ ▶\$ 9,011,292.				
a Applied to 2013, but not more than line 2a	İ		0.	
· · · · · · · · · · · · · · · · · · ·				
b Applied to undistributed income of prior	}	0.		
years (Election required - see instructions)				
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	·			232,327.
d Applied to 2014 distributable amount	8,778,965.		···	434,341.
e Remaining amount distributed out of corpus	0,170,303.			-0.
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f 4c, and 4e Subtract line 5	30,610,237.			
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			۱ ا	
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				0
be distributed in 2015		"		0.
7 Amounts treated as distributions out of	1			
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	۱ ،			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009	2 400 105			
not applied on line 5 or line 7	3,498,105.			
9 Excess distributions carryover to 2015.	27 112 122			
Subtract lines 7 and 8 from line 6a	27,112,132.			
10 Analysis of line 9:				
a Excess from 2010 3,370,877.	İ		1	
b Excess from 2011 4,233,421.				
c Excess from 2012 4,366,761.		1		
dExcess from 2013 e Excess from 2014 6,362,108. 8,778,965.		į	1	
eExcess from 2014 8,778,965.		The state of the s		

	N LAKE FOUN				45081 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VI	I-A, question 9)	N/A	
್ a 🗗 🖈 ಕರ್ಯದಿಯಾಗಿ ಕರ್ನಾಲಕ ಕರ್ನಾಣಕ ಕರಣಕ ಕರಣಕ ಕರ್ನಾಣಕ ಕರಣಕ ಕರ್ನಾಣಕ ಕರ್ನಾಣಕ ಕರ್ನಾಣಕ ಕರ್ನಾಣಕ ಕರಣಕ ಕರಣಕ ಕರಣಕ ಕರ್ನಾಣಕ ಕರ್ನಾಣಕ ಕರಣಕ ಕರಣಕ ಕರ್ನಾಣಕ ಕರ್ನಾಣಕ ಕರ್ನಾಣಕ ಕರಣಕ ಕರಣಕ ಕರಣಕ ಕರ್ನಾಣಕ ಕರಣಕ ಕರಣಕ ಕರಣಕ ಕರಣಕ ಕರಣಕ ಕರಣಕ ಕರಣಕ ಕ	r determination letter that	t it is a private operating			
• and the ruling is effective for	2014, enter the date of t	the ruling	▶		
🖹 🔙 50x to indicate whether the found	lation is a private operatir	ng foundation described	ın section	4942(j)(3) or 49	942(j)(5)
🛂 a Emer the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not			,		
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from		·			
an exempt organization		1			
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	ete this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during t	he year-see inst	ructions.)			
Information Regarding Foundation List any managers of the foundation which year (but only if they have contributed in SEE STATEMENT 7	o have contributed more	than 2% of the total con section 507(d)(2).)	tributions received by th	e foundation before the clo	se of any tax
b List any managers of the foundation who other entity) of which the foundation ha			(or an equally large port	ion of the ownership of a p	artnership or
NONE					
2 Information Regarding Contribut					
Check here ► X if the foundation of the foundation makes gifts, grants, etc.	only makes contributions (see instructions) to indi-	to preselected charitable viduals or organizations	organizations and does under other conditions, o	not accept unsolicited requ complete items 2a, b, c, and	uests for funds. If d d.
a The name, address, and telephone num	ber or e-mail address of	the person to whom app	lications should be addre	essed:	
b The form in which applications should t	e submitted and informa	ition and materials they s	hould include:		···
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields	, kinds of institutions, or	other factors:	

				
Total	···			3a 0
b Approved for future payment				1
NONE				
·				
			į	
)
Total .		L		3b 0

Part XVI-A	Analysis of	f Income-P	Producing	Activities
------------	-------------	------------	-----------	-------------------

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	Amount	Tanodon moonic
b	· 	·····	++		
c	-		- 		
d			+ +		
e	·	 	1 1		
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments		-			
4 Dividends and interest from securities			14	89,442.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			7-7		······
8 Gain or (loss) from sales of assets other than inventory			18	45,111.	<u></u>
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b	-		\bot		
C	-		4		
d	-		44		
e	- }		+	127 552	
12 Subtotal. Add columns (b), (d), and (e)	L	0	<u>·</u>	134,553.	134 553
13 Total. Add line 12, columns (b), (d), and (e)	-	-		. 13	134,553.
(See worksheet in line 13 instructions to verify calculations.)					

Relationship of Activities to the Accomplishment of Exempt Purposes

Lille No. ▼	the foundation's exempt purposes (other than by providing funds for such purposes).
	·

Form 990-PF (2	014) MOCCA	SIN LAKE	FOUNDA	TION		91-15	45081	Pa	ige 13
Part XVII			sfers To a	and Transactions a	and Relations	hips With Nonch	aritable		
	Exempt Organ								
				g with any other organization		юп 501(c) of		Yes	No
	•			27, relating to political organ	uzations?			j	
	rom the reporting found	ation to a noncharita	ble exempt or	ganization of:			- I		
(1) Cash				•		-	. 1a(1)		X
(2) Otner	-			•		-	1a(2)		X
b Other tran		hla							v
• •	of assets to a noncharita					•	1b(1)		X
	ases of assets from a no	•	organization				1b(2)		X
	l of facilities, equipment,			•		•	1b(3)		X
	oursement arrangements	-		-			1b(4)		X
	s or loan guarantees rmance of services or me	mharchin or fundrai	cina colicitatio	ine		-	1b(5)	-	X
• •	facilities, equipment, ma		-				1b(6)		X
_				dule. Column (b) should alv	wave show the fair n	narket value of the goods		etc	
				ed less than fair market valu				cis,	
) the value of the goods,			ou root triair fair marrier vare	o in any transaction	or unaming arrangement	, 011011 111		
(a)Lme no	(b) Amount involved			exempt organization	(d) Description	o of transfers, transactions, a	nd shannog ar	rangemei	nts
			N/A	· ·					
					 				
					1				
		·				-			
2a is the four	idation directly or indirec	tly affiliated with, or i	related to, one	or more tax-exempt organi	zations described				
	501(c) of the Code (othe)(3)) or in sect	tion 527?			Yes	X	∫No
b if Yes, a	implete the following sch			r					
	(a) Name of org	ganization		(b) Type of organization		(c) Description of relation	nship		
	N/A								
		_ 							
		· ·			[
							·		
Library	populties of porting I dealers	that I have everywed the	a matura unaliudus	ig accompanying schedules and	atatamanta and to the	hast of any knowledge			
				n taxpayer) is based on all inform		t bon one knowledge	May the IRS of eturn with th		
Here	1 m	'Khder	son	11/2/15	DIRECT	s	shown below	(see inst	ታ)?
1 🛌	ature of officer or trustee		<u>, , , , , , , , , , , , , , , , , , , </u>	Date	DIRECT	TOR	X Yes	_	J No∫
Joigi	Print/Type preparer's na		Preparer's s	Date /	Date	Check if PTI	\I		
	r min i Ahe hichaici 2 lis	anno	Trichater 2.2	ignature .	Lage	self- employed	•		
Paid	JAMES P. M	עממוו	Jann	Murph.	10/26/15		00236	กดว	
Preparer	Firm's name ► DEL		I ()			Firm's EIN ► 86-			
Use Only	THE PROPERTY PARTY	CTITE IMA	4.4			PHILISEIN ► 00	1002/	14	
	Firm's address Q 2	प्रक्रााञ्च ट	ΔΥΕΝΠΙΕ	, SUITE 3300		 			
		ATTLE, WA				Phone no. (206) 716	_704	ሰሰ
	<u> </u>		. ,,,,,,,,			11 HOHE HO. (200	Form 99 0		
									, _ ∪ 17)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

OMB No 1545-0047

2014

Name of the organization

Employer identification number

M	OCCASIN LAKE FOUNDATION	91-1545081				
Organization type(check	one):					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le. See instructions				
-	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling by one contributor. Complete Parts I and II. See instructions for determining a contributor.	•				
Special Rules						
sections 509(a)(1 any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, tor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amour Z, line 1 Complete Parts I and II.	or 16b, and that received from				
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a outions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educa- cruelty to children or animals. Complete Parts I, II, and III	· ·				
year, contribution is checked, enter purpose Do not o	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a section section section section sections exclusively for religious, chantable, etc., purposes, but no such contributions totaled me here the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because it ole, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000 If this box , charitable, etc.,				
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule E in Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fo et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)					

Schodula	₽ /Eam	വവവ	000 E7	or 990-PF)	(2014)
oci iedule	D II OIIII	JJU.	330.52.	OI 330.FF	(2014)

Page 2

Name of organization

Employer identification number

MOCCA	SIN LAKE FOUNDATION		91-1545081
Part I	Contributors (see instructions) Use duplicate copies of Part I if accinor	as soace is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JULIE AND BEAU GOULD 1405 42ND AVENUE EAST SEATTLE, WA 98112	\$500,000	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
2	GAYE AND JAMES PIGOTT 1405 42ND AVENUE EAST SEATTLE, WA 98112	\$ 5,507,887	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	JAMES C. PIGOTT 2005 CLAT 1405 42ND AVENUE EAST SEATTLE, WA 98112	\$375,000	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
4	JAMES C. PIGOTT 2005 CLUT 1405 42ND AVENUE EAST SEATTLE, WA 98112	\$\$	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	JAMES C. PIGOTT 2012 CLUT 1405 42ND AVENUE EAST SEATTLE, WA 98112	\$2,619,296	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
423452 11-0	5-14	\$Schedule B (Fo	Person Payroll Noncash (Complete Part II for noncash contributions.) prm 990, 990-EZ, or 990-PF) (2014

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

Page 3

Name of organization

Employer identification number

MOCCASIN LAKE FOUNDATION

OCCA	SIN LAKE FOUNDATION		91-1545081
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	30,700 SHARES OF PACCAR STOCK @ \$65.20 32,000 SHARES OF PACCAR STOCK @ \$62.70	s4,007,887	7. VARIOUS
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Schedule B	(Form 990, 990-EZ, or 990-PF) (2014)		Pa					
Name of orga			Employer identification number					
MOCCAS	IN LAKE FOUNDATION		91-1545081					
Part III	the year from any one contributor. Complete	e columns (a) through (e) and the folio	d in section 501(c)(7), (8), or (10) that total more than \$1,000 to owing line entry. For organizations					
	completing Part III, enter the total of exclusively religion Use duplicate copies of Part III if addition		or less for the year (Enterthis info once) \$					
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Part I		(1,7 = 1 = 1,0	(2,200)					
ľ		(e) Transfer of gi	ift					
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee					
ŀ								
-(a) No								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
<u> </u>								
	(e) Transfer of gift							
1	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee					
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Part I	(b) Furpose of gift	(c) ose or girt	(a) Description of now girt is field					
i i	(e) Transfer of gift							
-	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
	Transition of Italian account		Troidestromp of buildings to buildings					
(a) N/a								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
		(e) Transfer of gr	rit .					
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee					
								