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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

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Open to Public Inspection

For cal	lendar year 2014, or tax year beginning		and ending		
	ORFER FOUNDATION		A	Employer identification nur 91-1621459	
	7 - 42ND AVE. S.W. TLE, WA 98116-1702		В	Telephone number (see inst 206-938-5422	ructions)
			С	If exemption application is	pending, check here 🕨 🔲
G Che	eck all that apply Initial return	Initial return of a form Amended return	ner public charity	1 Foreign organizations, chec	k here
	Address change	Name change		2 Foreign organizations meet here and attach computation	ang the 85% test, check
H Che	eck type of organization Section 50 Section 4947(a)(1) nonexempt charitable	1(c)(3) exempt private for		If private foundation status	L
	market value of all assets at end of year J Ac	counting method X Ca		under section 507(b)(1)(A)	
(froi ► S	m Part II, column (c), line 16)	Other (specify)	F	If the foundation is in a 60	
	5 500, 038. (Part I	(a) Revenue and	(b) Net investment	under section 507(b)(1)(B) (c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	evnenses ner hooks	income	income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc, received (attach schedule)	23,000.			
	2 Ck ► if the foundn is not required to attach Sch B				
	3 Interest on savings and temporary cash investments 4 Dividends and interest from securities	1.054	1 054		
	5 a Gross rents	1,054.	1,054.		
_	b Net rental income or (loss)	* \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
R E V	A Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a			BEACHIVE	
V E N	7 Capital gain net income (from Part IV, line 2)	2. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		KEULIVE	
N U	8 Net short-term capital gain 9 Income modifications			100/ 1111/ 0.00	
Ě	10 a Gross sales less returns and	200 X		8 JUN 2 2 20	
	allowances b Less Cost of goods sold			Money	
	C Gross profit or (loss) (attach schedule).	· · · · · · · · · · · · · · · · · · ·			
	11 Other income (attach schedule)				*
	12 Total Add lines 1 through 11	26,054.	1,054.	0.	., * ***
	13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages	0.	-		
	15 Pension plans, employee benefits				
A D	16 a Legal fees (attach schedule) b Accounting fees (attach sch) SEE ST 1	2 411	0 411		
M. I	C Other prof fees (attach sch)	2,411.	2,411.	-	
O P S T R	17 Interest	= =			
E TRA	18 Taxes (attach schedule)(See instrs) SEE STM 2 19 Depreciation (attach sch) and depletion	3,418.	3,418.		
N V	20 Occupancy 21 Travel, conferences, and meetings				
A E	21 Travel, conferences, and meetings 22 Printing and publications.			- -	
A E X P	23 Other expenses (attach schedule)	252	0.50		
E N S	SEE STATEMENT 3 24 Total operating and administrative	260.	260.		
E	expenses. Add lines 13 through 23	6,089.	6,089.		
	25 Contributions, grifts, grants paid PART AV 26 Total expenses and disbursements.	22,000.	* * * * * * * * * * * * * * * * * * * *		22,000.
 	Add lines 24 and 25	28,089.	6,089.	0.	22,000.
	27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements	-2,035.			, (A)
	b Net investment income (if negative, enter -0-)		0.		
	C Adjusted net income (if negative, enter -0-)			0.	

Dat	> (1)	Balance Sheets	column should be for end-of-year amounts only	Beginning of year	End (of year
n Gal	W.		(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest	-bearing .	5,207.	2,144.	2,144.
	2	Savings and tempor	ary cash investments	461,718.	461,739.	461,739.
	3	Accounts receivable	>		· · · · · · · · · · · · · · · · · · ·	53.
		Less: allowance for	doubtful accounts >		سنت عد علانطو د	
	4	Pledges receivable	·			** C. 64()
		Less, allowance for	doubtful accounts	_ in / his a through a limit of the section of the	يون مرساه باست کی کی دارد در این در	and the second s
	5	Grants receivable				
	6	Receivables due from official	cers, directors, trustees, and other ch schedule) (see instructions)			
	7	Other notes and loans rec	•	, /		
Α	′	Less allowance for				<u> </u>
S	8	Inventories for sale				-
ASSETS	9	Prepaid expenses a		-		-
Ţ	-					
5		obligations (attach s	•	101.005		
		Investments — corporate	•	134,295.	135,302.	36,155.
		: Investments — corporate	·			<u> </u>
	11	Investments – land, equipment: basis	buildings, and			
		Less. accumulated deprec (attach schedule)	•			
	12	Investments - mort	gage loans.			
	13	Investments - other	(attach schedule)			
	14	Land, buildings, and	equipment basis►	25 2 2 2 2 2	,	
		Less. accumulated deprec (attach schedule)	iation			
	15				•	
	16	see the instructions	completed by all filers — Also, see page 1, item I)	601,220.	599,185.	500,038.
Ļ	17	Accounts payable ar	nd accrued expenses			
Å	18	Grants payable				
B	19	Deferred revenue				
L	20	Loans from officers, direc	tors, trustees, & other disqualified persons			
 	21	Mortgages and other note:	s payable (attach schedule)			
i	22	Other liabilities (des	cribe ►)		
E	22	Tetal liabilities (odd	lunes 17 through 22)	0	0]
	23		lines 17 through 22)	0.	0.	
		and complete lines	24 through 26 and lines 30 and 31.			
N F E U	24	Unrestricted				
TN	25	Temporarily restricted			_	
D	26	Permanently restrict				<u> </u>
A B S A L T A		Foundations that do and complete lines	o not follow SFAS 117, check here 🕒 🛚 🔯 27 through 31.	<u> </u>		
EL	27	Capital stock, trust p	orincipal, or current funds			* 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
5 N	28	•	or land, bldg, and equipment fund			-
O E	29		ulated income, endowment, or other funds	601,220.	599,185.	1
RS	30	= :	fund balances (see instructions)	601,220.	599,185.	† !
	31		net assets/fund balances	601,220.	599,185.	, , , , , , , , , , , , , , , , , , ,
Par		Analysis of Chan	ges in Net Assets or Fund Baland		•	
1	Tota	I net assets or fund b	alances at beginning of year — Part II, cold on prior year's return)		gree with	601,220.
		r amount from Part I,			2	-2,035.
		increases not included in li		•	3	2,035.
		lines 1, 2, and 3			· 3	599,185.
		ases not included in line 2 ((itemize)		5	399,183.
			alances at end of year (line 4 minus line 5) - Part II column (h) I		599 185

	Losses for Tax on Investmer				
(a) List and describ 2-story brick warehou	e the kind(s) of property sold (e g , i se, or common stock, 200 shares Mi	real estate, LC Company)	(b) How acquire P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a N/A					
b					
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale		(h) Gain or (e) plus (f) n	(loss) ninus (g)
а					
b					
С					
d					
е					
	wing gain in column (h) and owned t			(I) Gains (Col	
(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 an	(I) Iy t	gain minus column (han -0-) or Losses (f	
a					
b					
С					
d					
е					
2 Capital gain net income or (no3 Net short-term capital gain or	et capital loss) If gain, also If (loss), en (loss) as defined in sections 1222(5	enter in Part I, line 7 ter -0- in Part I, line 7	2		
If gain, also enter in Part I, lii in Part I, line 8	ne 8, column (c) (see instructions) l	f (loss), enter -0-	3		
Part Qualification Under	er Section 4940(e) for Reduce	d Tax on Net Investme	ent Incom	e	
	this part blank ection 4942 tax on the distributable a alify under section 4940(e) Do not o	* -	ase period?	Yes	X No
1 Enter the appropriate amount in	each column for each year, see the in	structions before making any e	entries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asso	ets (co	(d) Distribution lumn (b) divided	
2013	19,000.	500	,046.		0.037997
2012	15,000.		,667.		0.038494
2011	8,090.		,349.		0.023224
2010	16,950.		,033.		0.054849
2009	17,500.	241	,342.		0.072511
2 Total of line 1, column (d).		·	2	-	0.227075
3 Average distribution ratio for number of years the foundation	the 5-year base period — divide the on has been in existence if less than	total on line 2 by 5, or by th 5 years	е 3		0.045415
4 Enter the net value of noncha	oritable-use assets for 2014 from Par	t X, line 5	4		491,515.
5 Multiply line 4 by line 3			5		22,322.
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		22,322.
8 Enter qualifying distributions			8		22,000.
If line 8 is equal to or greater th	an line 7, check the box in Part VI, line	1b, and complete that part us	sing a 1% tax	rate See the	

Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instruct	tions)	· · · ·	- 3-
	Exempt operating foundations described in section 4940(d)(2), check here		704.3	,	
	Date of ruling or determination letter. (attach copy of letter if necessary – see instrs)		hamma aba Fan		
t	Domestic foundations that meet the section 4940(e) requirements in Part V,	1			0.
	check here ► and enter 1% of Part I, line 27b		7 3	- ` ,	
C	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)			<u>-</u>	··· •
2	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			0.
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			0.
6	Credits/Payments	*		`1	
	2014 estimated tax pmts and 2013 overpayment credited to 2014		. stas	3	
	Exempt foreign organizations — tax withheld at source 6b	330			:
	: Tax paid with application for extension of time to file (Form 8868) 6 c 5,000.	`			* 1
	I Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d	,			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8		5,1	000.
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		5 (00.
11	Enter the amount of line 10 to be. Credited to 2015 estimated tax	11			000.
	AVII A Statements Regarding Activities	••		<u> </u>	
·	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1 a		Х
ŀ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes				
•	(see Instructions for the definition)?		1 b		Х
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		lts.	,	
	Did the foundation file Form 1120-POL for this year?		1 c		X
(Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			\$ 1	
	(1) On the foundation S O. (2) On foundation managers S Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on		<u>0.</u>		<
	foundation managers >\$ 0.			3"	
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	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			l	
	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		Х
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4 a		Х
	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	ļ	X
_	If 'Yes,' attach the statement required by General Instruction T.			2	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			* ²	
	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 law remain in the governing instrument?			37	
7	with the state law remain in the governing instrument? 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	-
	Enter the states to which the foundation reports or with which it is registered (see instructions)		1	, ^	-
•	WA				,
	off 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		8 b	X	1
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	4942(1)	(5)		
•	for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If 'Yes,' complete	Part X	iv 9		Х
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names				
	and addresses		10		X
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raci	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		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► WILLIAM & MARGARET NEUDORFER Telephone no ► 206-9	38-5	422	
	Located at ► 1326 - 42ND AVE. S.W. SEATTLE WA ZIP + 4 ► 98116-170			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	N/Ā		
	and enter the amount of tax-exempt interest received or accrued during the year			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		Yes	No
	bank, securities, or other financial account in a foreign country?	16		Х
	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	. 511		
Pa	MAYIL 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.	3.4	Yes	No
1 a	During the year did the foundation (either directly or indirectly)			<u> </u>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			, 3
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	* *	·	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	- 1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			2"
				, a
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) Yes X No			
ı	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	Î	/A
	Organizations relying on a current notice regarding disaster assistance check here			.3. 1
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,		Ì	
	that were not corrected before the first day of the tax year beginning in 2014?	1 c		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))		1.5 w	*
•	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?			
	If 'Yes,' list the years ► 20 _ , 20 _ , 20 , 20	A	. 1	357
	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		jyl	9 × 8 .
	all years listed, answer 'No' and attach statement - see instructions)	2 b	N	/A
•	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	1 4 4	****	
	► 20 , 20 , 20		là.	
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business	. "	ľ "	
	enterprise at any time during the year?		7 🔣	
ı	of tyes,' 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 large of the 5-year period (or longer period approved)	l "i,		, i
	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)	3 b	NT.	/A
_		30	IN	, A
4 8	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		X
ı	Did the foundation make any investment in a prior year (but after December 31, 1969) that could			ij
•	jeopardize its charitable purpose that had not been removed from jeopardy before the first day of		11.	
DAA	the tax year beginning in 2014?	4 b		X
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Form 990-,PF			FOUNDATION
PartVIE	Statem	ents Regardi	ng Activities

Part VII-B Statements Regarding Activiti		4720 May Be Req	uired (continued)	
5'a During the year did the foundation pay or incu	-			
(1) Carry on propaganda, or otherwise attemp			∐ Yes X	No No
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section ition drive?	4955), or to carry	Yes X	No A
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes	No 🚉
(4) Provide a grant to an organization other the in section 4945(d)(4)(A)? (see instructions	nan a charitable, etc, or i)	ganization described	Yes X	No S
(5) Provide for any purpose other than religion educational purposes, or for the preventio	us, charitable, scientific n of cruelty to children	c, 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 (see instructions)?	the transactions fail to a current notice regard	qualify under the excep ding disaster assistance	tions	5b N/A
Organizations relying on a current notice rega	rding disaster assistanc	ce check here	▶ [
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	the foundation claim ex sibility for the grant?	emption from the	N/A Yes] No
If 'Yes,' attach the statement required by Regu	ulations section 53 4945	5-5(d)		
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	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 prob	ibited tax shelter transa	ection? Yes X	No No
b If 'Yes,' did the foundation receive any procee				N/A 7b
PartVIII Information About Officers, Di				
and Contractors				
1 List all officers, directors, trustees, foundatio			•	1
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
WILLIAM C. NEUDORFER	FOUNDATION M	0.	0.	0.
1326 - 42ND S.W.	3.00			
SEATTLE, WA 98116-1702				
MARGARET E. NEUDORFER 1326 - 46TH SW	FOUNDATION M 3.00	0.	0.	0.
SEATTLE, WA 98116	3.00			
BENTIEL, WA JOHO				-
2 Compensation of five highest-paid employees (of	her than those included	on line 1 — see instruction	ns) If none enter 'NONE	
(a) Name and address of each employee	(b) Title, and average	(c) Compensation	(d)Contributions to	(e) Expense account,
paid more than \$50,000	hours per week devoted to position	,,	employee benefit plans and deferred compensation	other allowances
NONE				
	-	· · · · · · · · · · · · · · · · · · ·	· · · · ·	
				
Total number of other employees paid over \$50,000)			

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions 3	
Total. Add lines 1 through 3	
LOTAL AND LINES I INFOLIAN 3	·

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Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes a Average monthly fair market value of securities. 1 a 34,000. **b** Average of monthly cash balances 1 b 465,000. c Fair market value of all other assets (see instructions) 1 c d Total (add lines 1a, b, and c) 1 d 499,000. e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1 e 0 2 Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 3 499,000. Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions) 7,485. 4 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 5 491,515. Minimum investment return. Enter 5% of line 5 6 24,576. Part Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.) Minimum investment return from Part X, line 6 1 24,576. 2a Tax on investment income for 2014 from Part VI, line 5 2 a b Income tax for 2014 (This does not include the tax from Part VI) 2 b c Add lines 2a and 2b **2** c Distributable amount before adjustments. Subtract line 2c from line 1 3 24,576. Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 5 24,576. Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 7 24,576 PartXII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1 a 22,000. **b** Program-related investments — total from Part IX-B 1 b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. purposes. 2 Amounts set aside for specific charitable projects that satisfy the. a Suitability test (prior IRS approval required) 3 a **b** Cash distribution test (attach the required schedule) 3 b

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V. line 8, and Part XIII, line 4

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)

Adjusted qualifying distributions. Subtract line 5 from line 4

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22,000

22,000.

4

5

6

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		1.7		24,576.
2 Undistributed income, if any, as of the end of 2014.				24,570.
a Enter amount for 2013 only			21,284.	
b Total for prior years 20 , 20 , 20	: 4%	0.	•	
3 Excess distributions carryover, if any, to 2014:				
a From 2009	*	"		y
b From 2010	• • • ,			
c From 2011	44 , 3 ° °	* .		
d From 2012				
e From 2013	\$, ;	, ,	`	
f Total of lines 3a through e	0.	, ,	` ` ` ·	
4 Qualifying distributions for 2014 from Part	,	•		
XII, line 4: \$ 22,000.	46			
a Applied to 2013, but not more than line 2a	* * * * * * * * * * * * * * * * * * * *	<u> </u>	21,284.	
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	· · · · · · · · · · · · · · · · · · ·	1 2		716.
e Remaining amount distributed out of corpus	0.		**	, *
5 Excess distributions carryover applied to 2014	0.		*	0.
(If an amount appears in column (d), the same amount must be shown in column (a))	2 2 3 2 2		3	
Same amount must be shown in column (a)	, , , ,	, ₄ \	*	***
6 Enter the net total of each column as indicated below:	. : a)/6%88			* * * * * * * * * * * * * * * * * * * *
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed	, 34,	0.		
income for which a notice of deficiency has			<i>,</i>	\$ V.
been issued, or on which the section 4942(a) tax has been previously assessed	* \$ `	o.	1	
	*. *.	0.		
d Subtract line 6c from line 6b Taxable amount — see instructions	***	0.		à
e Undistributed income for 2013 Subtract line 4a from		<u>}</u>	<u> </u>	
line 2a Taxable amount — see instructions	* ,		0.	,
	\$v			<u>, , , , , , , , , , , , , , , , , , , </u>
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2015	* * * *	200	****	23,860.
7 Amounts treated as distributions out of		**		ii .
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 (see instructions)	0.	'>å		
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2010	*	, ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,
b Excess from 2011	2	` '	×ŧ	*
c Excess from 2012				
d Excess from 2013				
e Excess from 2014	· · · · · · · · · · · · · · · · · · ·			

Form 990-PF	(2014) NEUDORFER	FOUNDAT	CION			91-1621459	Page 10
Part XIV	Private Operating						N/A
ıs effec	oundation has received a retrive for 2014, enter the	date of the	ruling				T 4040()(5)
	box to indicate whether			erating toundation d		4942(j)(3) or	4942(j)(5)
income	he lesser of the adjusted from Part I or the minit	mum	Tax year	(L) 2012	Prior 3 years	40.0011	(-) T-4-1
each y	nent return from Part X ear listed	for	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
b 85% of							
line 4 f	ing distributions from Pa or each year listed		_				
for active	included in line 2c not used di e conduct of exempt activities						
for acti	ing distributions made d ve conduct of exempt a ct line 2d from line 2c	lirectly ctivities			_		
	ete 3a, b, or c for the tive test relied upon						
	s' alternative test — ente	r					
` '	lue of all assets						
sec	lue of assets qualifying in action 4942(j)(3)(B)(i)						
minimun	ent' alternative test — enter 2) n investment return shown in P r each year listed						
	rt' alternative test — ent						
inv div on	tal support other than gr estment income (interes idends, rents, payments securities loans (section 2(a)(5)), or royalties)	st,					
(2) Sup	pport from general public and 5 re exempt organizations as pro						
(3) La	ection 4942(j)(3)(B)(III) rgest amount of support	from					
	exempt organization						
	Supplementary Info	armatian.	(Complete this	nort only if the	foundation had	\$5,000 ax mara	<u> </u>
Patt AV	assets at any time	during th	e year — see in	structions.)	iouiluation nau	\$5,000 OF INOTE	
a List any close of	ation Regarding Foundary managers of the foundate of any tax year (but only STATEMENT 4	ion who have	e contributed more t	nan 2% of the total co than \$5,000) (See	ontributions received t section 507(d)(2))	by the foundation befo	re the
b List any	y managers of the foundat	ion who own	10% or more of the	stock of a corporatio	n (or an equally large	nortion of the owners	hin of
a partr NONE	nership or other entity) o	f which the	foundation has a 1	0% or greater intere	est	F S S S S S S S S S S	
Check reques comple	its for funds. If the found ete items 2a, b, c, and d	ation only ma dation make	kes contributions to s gifts, grants, etc	preselected charitabl (see instructions) to	e organizations and o o individuals or orga		
a The na	me, address, and telephor	ne number or	r e-mail address of t	he person to whom a	pplications should be	addressed.	
SEE	STATEMENT 5						
b The fo	rm in which applications	should be	submitted and info	rmation and materia	als they should inclu	de.	· — —
	STATEMENT FOR L	INE 2A					
C Ally St	iomission deadillies						
	STATEMENT FOR L						
d Any re	strictions or limitations of	on awards, s	such as by geograp	phical areas, charita	ble fields, kinds of i	nstitutions, or other	factors.
SEE	STATEMENT FOR L	INE 2A					
BAA			TE	EA0310L 06/17/14		Fo	rm 990-PF (2014)

Page 11

3 Grants and Contributions Paid During the Ye	ear or Approved for Fut	ure Paymen	it	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	substantial contributor	recipient	Contribution	
Name and address (home or business) a Paid during the year SEE STATEMENT 6	substantial contributor	recipient	CONTRIBUTION	
b Approved for future payment			► 3a	22,000.
Total		L	 	

iter gross amounts unless otherwise indicated	Unrelate	ed business income	Exclude	d by section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)
a	-				
b					
С					
d					·
e			ļ		
f			-		
g Fees and contracts from government agencie	S		 		_
2 Membership dues and assessments 3 Interest on savings and temporary cash investments			1.4		
3 Interest on savings and temporary cash investments 4 Dividends and interest from securities			14		1 05
5 Net rental income or (loss) from real estate.	***********	10.400 C. (12.400)	14	• § «?	1,05
a Debt-financed property	1. MP (JAK) 2. 1788-33			· · · · · · · · · · · · · · · · · · ·	*
b Not debt-financed property			-		
6 Net rental income or (loss) from personal property					<u> </u>
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory	-		 		
9 Net income or (loss) from special events.			 		
O Gross profit or (loss) from sales of inventory					
1 Other revenue			28" 2. " 3/		* # * * * * * * * * * * * * * * * * * *
a	2 6 6 200 - CO - 200 0 2 7 9 7 4			11.0,5.0,0	
b					
С					
			1		
d	ŀ				
d e					
			. 1 .		
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)	<u> </u>		6 Å ×	13	1,054 1,054
e Subtotal Add columns (b), (d), and (e)	<u> </u>				
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)	ulations)	ishment of Exemp		13	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc Relationship of Activities to	ulations) the Accompl		t Purp	oses	1,054
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc Relationship of Activities to Explain below how each activity for whaccomplishment of the foundation's exe	ulations) the Accompl		t Purp	oses	1,054
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc Relationship of Activities to	ulations) the Accompl		t Purp	oses	1,054
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc Relationship of Activities to Explain below how each activity for whaccomplishment of the foundation's exe	ulations) the Accompl		t Purp	oses	1,05
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc Relationship of Activities to Explain below how each activity for whaccomplishment of the foundation's exe	ulations) the Accompl		t Purp	oses	1,05
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc Relationship of Activities to Explain below how each activity for whaccomplishment of the foundation's exe	ulations) the Accompl		t Purp	oses	1,05
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc Relationship of Activities to Explain below how each activity for whaccomplishment of the foundation's exe	ulations) the Accompl		t Purp	oses	1,05
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc Relationship of Activities to Explain below how each activity for whaccomplishment of the foundation's exe	ulations) the Accompl		t Purp	oses	1,05
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc Relationship of Activities to Explain below how each activity for whaccomplishment of the foundation's exe	ulations) the Accompl		t Purp	oses	1,05
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc Relationship of Activities to Explain below how each activity for whaccomplishment of the foundation's exe	ulations) the Accompl		t Purp	oses	1,05
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc Relationship of Activities to Explain below how each activity for whaccomplishment of the foundation's exe	ulations) the Accompl		t Purp	oses	1,05
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc Relationship of Activities to Explain below how each activity for whaccomplishment of the foundation's exe	ulations) the Accompl		t Purp	oses	1,05
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Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc Relationship of Activities to Explain below how each activity for whaccomplishment of the foundation's exe	ulations) the Accompl		t Purp	oses	1,05
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc Relationship of Activities to Explain below how each activity for whaccomplishment of the foundation's exe	ulations) the Accompl		t Purp	oses	1,05
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Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc Relationship of Activities to Explain below how each activity for whaccomplishment of the foundation's exe	ulations) the Accompl		t Purp	oses	1,05
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc Relationship of Activities to Explain below how each activity for whaccomplishment of the foundation's exe	ulations) the Accompl		t Purp	oses	1,05
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc Relationship of Activities to Explain below how each activity for whaccomplishment of the foundation's exe	ulations) the Accompl		t Purp	oses	1,05
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc Relationship of Activities to Explain below how each activity for whaccomplishment of the foundation's exe	ulations) the Accompl		t Purp	oses	1,054
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc Relationship of Activities to Explain below how each activity for whaccomplishment of the foundation's exe	ulations) the Accompl		t Purp	oses	1,054

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

	<u></u>											
describ	organization directed in section 501(o	c) of the Code (ot	ngage in an ther than se	y of the follow ction 501 (c)(3	wing with 3) organi	n any o zations	ther organizations or in sections	on 527,			Yes	No
a Transfe	ers from the report	ing foundation to	a noncharit	able exempt	organiza	tion of						
(1) Cas										1 a (1)		<u>X</u>
	ner assets									1 a (2)		X
	ransactions.								3			
• •	es of assets to a r								L	1 b (1)		<u>X</u>
` '	rchases of assets f		•	organization					<u> </u>	1 b (2)		X
\-	ntal of facilities, eq		r assets						_	1 b (3)		X
` '	mbursement arran	•								1 b (4)		X
	ans or loan guarant rformance of service		n or fundra	icina colicitati	one				-	1 b (5)		X
	of facilities, equip		•	•		oc.			-	1 b (6) 1 c		X
Conaming	or lacilities, equip	ment, maining no	its, other as	sets, or paid	employe	C3.			L.	10	LI	
d If the a	nswer to any of the ds, other assets, or nsaction or sharing	e above is 'Yes,' or services given by the arrangement of	complete the	e following so foundation if	chedule the found	Columi	n (b) should alveceived less than	vays show to fair market	he fair ma	arket val	ue of	
(a) Line no	(b) Amount involved			exempt organiza			Description of tran			arıng arra	ngement	s
N/A	(3)	(0)				()						
30, 33												
									•			
					ŀ							
												
	· · ·											
					-							
							 					
				 		•						
	- · · · · · · · · · · · · · · · · · · ·											
		_	-									
2 a Is the fo	oundation directly or ed in section 501 (c	indirectly affiliated c) of the Code (ot	l with, or rela ther than se	ited to, one or ction 501(c)(3	more tax 3)) or in :	-exemp	t organizations 527?			Yes	X	No
	complete the follo										_	
`	a) Name of organiz	ation	(b)	Type of organ	nization		(0) Descriptio	n of relat	ionship		
N/A												
												
Under	penalties of perjury, I de	clare that I have exami	ned this return,	including accomp	anying sch	edules an	d statements, and to	the best of my	knowledge a	and belief,	it is true,	
Sign	t, and complete Declara	tion of preparer (other t	than taxpayer) is	s based on all info	ormation of	which pre	eparer has any know	ledge		May the	IDC dias	
Here		_ \	\	1.		•				May the this retuing preparer	n with th	ie
		mgas	#	Date	1.12	┸ 、 [‡]	FOUNDATION the	MGR		(see ipst	(uctions	'
Sign	Print/Type preparer's		rena	per's signature	,		Date	- 	1, 1	TIN IX	Yes	No
Daid	1		/	Jost IL	- ///		6-8-1	Check self-empl	□"		2216	
Paid		HANSON, CPA		C DIIC	100		1- 5 0			P0000:	2 <u>7</u> T D	
Preparer	Firm's name Firm's address	REBAR & AS	H AVENU		#201			Firm's EIN	91-12	15/54		
Use Only	i iiii s address		A 98116		#4UI			Phone no	(206)	938-	2906	
BAA	<u> </u>	OUNTIUE, W	11 20110	1101	-			1		Form 9 9		
											(

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

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

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

NEUDORFER FOUNDATION		91-1621459
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 priv	ate foundation
	X 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	inization can check boxes for both the General Rule and a S	Special Rule See instructions
General Rule		
[X] For an organization filing Form 990, 990-EZ property) from any one contributor Comple	, or 990-PF that received, during the year, contributions tota te Parts I and II. See instructions for determining a contribu	aling \$5,000 or more (in money or itor's total contributions
Special Rules		
under sections 509(a)(1) and 170(b)(1)(A)(vi).	1(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% supp that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, ne year, total contributions of the greater of (1) \$5,000 or (2) 0-EZ, line 1 Complete Parts I and II	16a or 16b and that
For an organization described in section 50 during the year, total contributions of more purposes, or for the prevention of cruelty to	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received than \$1,000 <i>exclusively</i> for religious, charitable, scientific, lichildren or animals. Complete Parts I, II, and III	from any one contributor, terary, or educational
during the year, contributions exclusively fo \$1,000 If this box is checked, enter here the charitable, etc., purpose. Do not complete a	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received to religious, charitable, etc., purposes, but no such contribution to total contributions that were received during the year for any of the parts unless the General Rule applies to this organile, etc., contributions totaling \$5,000 or more during the year	ons totaled more than an <i>exclusively</i> religious, anization bec <u>a</u> use
990-PF), but it must answer 'No' on Part IV, lin	the General Rule and/or the Special Rules does not file Sc e 2, of its Form 990, or check the box on line H of its Form e filing requirements of Schedule B (Form 990, 990-EZ, or 9	990-EZ or on its Form 990-PF.

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

	Schedule B	(Form 990,	990-EZ.	or 990-PF)	(2014)
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1 of Part 1

Name of organization NEUDORFER FOUNDATION Page 1 of 1
Employer identification number 91-1621459

EMICOLE I COLLETO LOTA (SEE I USTICCIOUS). OSE OUDICATE CODIES OF PAICE II AGGILIGIAI SUACE IS DEEDED.	207011	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	WILLIAM AND MARGARET NEUDORFER 1326 42ND AVE SW SEATTLE, WA 98116-1702	\$25,000.	Person X Payroll Noncash (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 Payroll Noncash (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 Payroll Noncash (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)

Page

1 to 1 of Part II
Employer identification number

NEUDORFER FOUNDATION

91-1621459

BAA	Sch	edule B (Form 990, 990-EZ, o	or 990-PF) (2014)
		\$	
		- - 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<u></u>	 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
Part I		(see instructions)	
(a) No.	(b) Description of noncash property given	(c) FMV (or estimate)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
Part I	Description of noncash property given	(c) FMV (or estimate) (see instructions)	Date received
(a) No.	(b) Description of noncash property given	\$ (c)	(d) Date received
	N/A		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional	space is needed	

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)	Page	1 to	1	of Part III		
Name of organization NEUDORFER FOUNDATION		Employer ide	1459			
Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8)						

	or (10) that total more than \$1,000 for the following line entry. For organizations of contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional states.	ne year from any one contrib ompleting Part III, enter the tota (Enter this information once S	al of exclusively religious, charitable, etc.	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
<u> </u>	N/A			
	Transferee's name, address	(e) Transfer of gift s, 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	
				
	Transferee's name, address	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	
	Transferee's name, address	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	
	Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee	

2	0	1	4

FEDERAL STATEMENTS

PAGE 1

NEUDORFER FOUNDATION

91-1621459

(D)

CHARITABLE

STATEMENT 1 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES

	(A)	(B) NET	(C)
	EXPENSES	INVESTMENT	ADJUSTED
	PER BOOKS	INCOME	NET INCOME
ACCOUNTING	\$ 2,411.	\$ 2,411.	

INCOME PURPOSES TOTAL $\frac{\$}{\$}$ 2,411. $\frac{\$}{\$}$ 2,411. $\frac{\$}{\$}$ 2,411. $\frac{\$}{\$}$ 0.

STATEMENT 2 FORM 990-PF, PART I, LINE 18 **TAXES**

		(A) PENSES BOOKS		NET STMENT COME	 (C) USTED INCOME	 (D) HARITABLE PURPOSES
TOTAL	\$ \$	3,418. 3,418.	\$ \$	3,418. 3,418.	\$ 0.	\$ 0.

STATEMENT 3 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT EXPENSES OTHER	TOTAL	\$ 25. 235. \$ 260.	\$ 25. 235. \$ 260.	\$ 0.	\$ 0.

STATEMENT 4 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

WILLIAM C. NEUDORFER MARGARET E. NEUDORFER

STATEMENT 5 FORM 990-PF, PART XV, LINE 2A-D **APPLICATION SUBMISSION INFORMATION**

NAME OF GRANT PROGRAM:

NAME:

CARE OF:

STREET ADDRESS:

CITY, STATE, ZIP CODE:

NEUDORFER FOUNDATION WILLIAM NEUDORFER

1326 42ND AVE SW SEATTLE, WA 98116

TELEPHONE:

E-MAIL ADDRESS: FORM AND CONTENT:

WRITTEN ONLY

2014

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STATEMENT 5 (CONTINUED) FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

SUBMISSION DEADLINES:

N/A

RESTRICTIONS ON AWARDS:

N/A

STATEMENT 6 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
HOLY ROSARY SCHOOL 4142 42ND SW SEATTLE, WA 98116	NONE	PC	UNRESTRICTED	\$ 7,450.
VARIOUS, UNDER \$1,000 VARIOUS VARIOUS, WA 98116	NONE	PC	UNRESTRICTED	4,550.
RONALD MCDONALD HOUSE 5130 40TH AVE NE SEATTLE, WA 98105	NONE	PC	UNRISTRICTED	1,000.
MILLIONAIR CLUB 2515 WESTERN AVE SEATTLE, WA 98121	NONE	PC	UNRISTRICTED	1,000.
MAKE A WISH FOUNDATION 811 1ST AVE #520 SEATTLE, WA 98121	NONE	PC	UNRISTRICTED	1,000.
WEST SEATTLE FOOD BANK 3419 SW MORGAN ST SEATTLE, WA 98126	NONE	PC	UNRISTRICTED	1,000.
WEST SEATTLE HELPLINE 6516 35TH AVE SW #204 SEATTLE, WA 98126	NONE	PC	UNRISTRICTED	1,000.
NW HARVEST PO BOX 12272 SEATTLE, WA 98102	NONE	PC	UNRISTRICTED	1,000.
USO NORTHWEST 17801 INTERNATIONAL BLVD SEATTLE, WA 98158	NONE	PC	UNRISTRICTED	1,000.
SALVATION ARMY PO BOX 9219 SEATTLE, WA 98109	NONE	PC	UNRISTRICTED	1,000.

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STATEMENT 6 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
ALS FOUNDATION EVERGREEN MEMORIAL GARDENS VANCOUVER, WA 98684	NONE	PC	UNRISTRICTED	\$ 1,000.
NATIONAL MULTIPLE SCLEROSIS SOCIETY 192 NICKERSON ST, SUITE 100 SEATTLE, WA 98109	NONE	PC	UNRISTRICTED	1,000.
			TOTAL	\$ 22,000.

(Rev January 2014)

Application for Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

OMB No 1545-1709

Internal Revenue		►Information about Form 8868 a	and its instr	uctions is at www.irs.gov/form8868.			
If you are	e filing for an	Automatic 3-Month Extension, con	nplete only	Part I and check this box		<u> </u>	
If you are	e filing for an	Additional (Not Automatic) 3-Mont	h Extensior	n, complete only Part II (on page 2 of th	ıs form)		
Do not comp	plete Part II un	less you have already been grante	d an autom	atic 3-month extension on a previously f	iled Form 8868		
request an ex Associated V	required to file dension of time With Certain Pi	: Form 990-T), or an additional (not : to file any of the forms listed in Part	: automatic) I or Part II w ust be sent	d a 3-month automatic extension of time 3-month extension of time. You can elevith the exception of Form 8870, Information to the IRS in paper format (see instruct Charities & Nonprofits.)	ectronically file Form Return for Transfers	1 8868 to	
Parl I	Automatic	3-Month Extension of Time.	Only sub	omit original (no copies needed).			
A corporatio	n required to f	ile Form 990-T and requesting an a	automatic 6	-month extension - check this box and	complete Part I only	, <u> </u>	
All other cor income tax i	porations (inc returns	luding 1120-C filers), partnerships,	REMICs, ar	nd trusts must use Form 7004 to request Enter filer's identi	t an extension of tim fying number, see ii		
-	Name of exempt	organization or other filer, see instructions			Employer identification n		
Type or							
print	NEUDORFE	RFER FOUNDATION 91			91-1621459	1-1621459	
File by the		and room or suite number. If a P.O. box, see in	structions		Social security number (S	SSN)	
due date for filing your		2ND AVE. S.W.					
return See instructions	City, town or pos	t office, state, and ZIP code. For a foreign addr	ress, see instru	ctions			
	SEATTLE,	WA 98116-1702			<u>-</u>		
Enter the Re	eturn code for	the return that this application is fo	r (file a sep	parate application for each return).		04	
Application Is For			Return Code	Application Is For		Return Code	
Form 990 or f	Form 990-EZ		01	Form 990-T (corporation)		07	
Form 990-BL	-		02	Form 1041-A		08	
Form 4720 (Individual)			03	Form 4720 (other than individual)		09	
Form 990-PF 04 Form 5227					10		
	90-T (section 401(a) or 408(a) trust) 05 Form 6069					11	
Form 990-T	(trust other the	an above)	06	Form 8870		12	
	s are in the car		- 				
		-938-5422s not have an office or place of bus	Fax No			. □	
-	-	eturn, enter the organization's four			this is for the whole	a aroup	
check the		If it is for part of the group, c		· — · · · — —		• • •	
	nsion is for	I it is is part of the group, o	neon una bi		ines and Envisor an	members	
		3-month (6 months for a corporation	required to f	ile Form 990-T) extension of time			
until	8/15		•	turn for the organization named above			
_	calendar yea						
] tay yaar baa	720 <u>14</u> 01	and and	20			
P _	lax year begi	nning , 20	, and endin	' ^y			
	ax year entere ange in accou	ed in line 1 is for less than 12 month nting period	hs, check re	eason.	al return		
3a If this	annlication is t	for Forms 990-BL 990-PF 990-T 4	720 or 606	9 enter the tentative tax less any		_	

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit

c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions

nonrefundable credits See instructions

5,000.

5,000.

3a \$

3 b |\$

3 c \$