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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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

F	or ca	lendar year 2014 or tax year beginning			<u>-/∠⊥, 2014,</u>	and endi		<del>.</del>	03/31, 20 13
	Name	of foundation					A	Employer identifi	
	GLE	NORCHY MARKETPLACE FOUNDATIO	N					98-122774	2
	Numb	er and street (or P O box number if mail is not delivered	to street	address)		Room/suit	e E	Telephone number	er (see instructions)
								(20	6) 448-0676
	200	O FIRST AVENUE #2504							
_	City o	r town, state or province, country, and ZIP or foreign po	stal code	•	=				
	•						c	If exemption applica pending, check here	tion is
	SEA	TTLE, WA 98121						pending, check here	
_		eck all that apply. X Initial return		Initial return	of a former n	ublic char	ıtv -		
٥	One	Final return		Amended ref	•	abilo criai	ם ריי	<ol> <li>1. Foreign organizati</li> <li>2 Foreign organizati</li> </ol>	
		<b>⊢</b>	-	1				85% test, check h	
		Address change	-)(0)	Name change				computation .	
Н		ck type of organization X Section 501(					E	If private foundation	status was terminated
$\perp$		ection 4947(a)(1) nonexempt charitable trust		ther taxable pr			_	under section 507(b)	(1)(A), check here . P
I			_	method X C		rual	F		in a 60-month termination
				ecify)				under section 507(b)	(1)(B), check here . $\blacktriangleright$
_			olumn (c	d) must be on cas	h basis )				
F	art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		Revenue and penses per books	(b) Net inve		(c)	Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
_	4			1,101,915.					(00000000000000000000000000000000000000
	1 2	Check Contributions, gifts, grants, etc., received (attach schedule).		_,,,	<del></del>	+			<u> </u>
		attach Sch Β				<u> </u>			
	3	Interest on savings and temporary cash investments.							
	4	Dividends and interest from securities				-			
		Gross rents							
_	b	Net rental income or (loss)							·
Revenue		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a							
e	7	Capital gain net income (from Part IV, line 2) .							
œ	8	Net short-term capital gain							
	9	Income modifications					- ;		
	10 a	Gross sales less returns and allowances • • • • •					ـ ( زر	- F '1	1
	b	Less Cost of goods sold .							'
	С	Gross profit or (loss) (attach schedule)					1R 0	7 2013	
	11	Other income (attach schedule)				24.		1 ′	
	12	Total. Add lines 1 through 11		1,101,915.		1	;-, ;-		<u> </u>
	13	Compensation of officers, directors, trustees, etc		0		14 - 74 - 46 - 1			
es	14	Other employee salaries and wages							
ns	15	Pension plans, employee benefits							
Expens		Legal fees (attach schedule)							
ũ	h	Accounting fees (attach schedule)ATCH 1		1,915.					1,915
Ve	c	Other professional fees (attach schedule)							
ati	17	Interest	****		-				
str	10	Taxes (attach schedule) (see instructions)							
Ξ	c 17 18 19 20 21	Depreciation (attach schedule) and depletion.			•				
투	20	·			·				<del></del>
Ă	24	Occupancy							
pu	21				<del></del> .				
a	22	Printing and publications		397.	<u> </u>				397
ij	23 24 25	Other expenses (attach schedule) ATCH . 2 .				-		-	
rat	24	Total operating and administrative expenses.		2,312.					2,312
be		Add lines 13 through 23		2,512.					
		Contributions, gifts, grants paid		2,312.		0		0	2,312
_	26	Total expenses and disbursements Add lines 24 and 25		۷,312.				<u> </u>	2,312
	27	Subtract line 26 from line 12 <sup>-</sup>		1 000 603				ŀ	
		Excess of revenue over expenses and disbursements		1,099,603.					
	b	Net investment income (if negative, enter -0-)				0			

F	art II	Ralanca Shacta	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
ئلا _	art II	Datance Sneets	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bear	ing		613,467.	613,467.
	2		cash investments			
	3	Accounts receivable				
		Less allowance for dou	btful accounts ▶			
	4					· · · · · · · · · · · · · · · · · · ·
		Less allowance for dou	btful accounts ▶			
	5					
	6		officers, directors, trustees, and other			
		disqualified persons (att	tach schedule) (see instructions)			
	7		eceivable (attach schedule)			
			btful accounts ▶			
s	8		e			
ssets	9	Prepaid expenses and d	eferred charges			
As			e government obligations (attach schedule)			
			stock (attach schedule)			
			bonds (attach schedule)			
	11	Investments - land, buildings	tition			
						<del></del>
			loans			
	14	Land, buildings, and	_			
		equipment basis Less accumulated deprecia	tion -			
		(attach schedule)	ATCH 3		486,136.	486,136.
	16	Total assets (describe )	completed by all filers - see the		100, 200,	
		The state of the s	age 1, item l)	o	1,099,603.	1,099,603.
					_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
			ccrued expenses	1	· · · · · · · · · · · · · · · · · · ·	
,,						
ţį						
Liabilities			rs, trustees, and other disqualified persons			
<u>e</u>			tes payable (attach schedule)			
	22	Other liabilities (describe	: ▶)			
	22	Tatal Habilities (add Ima	a 47 through 22)	o	٨	
-			s 17 through 22)			
ses			ow SFAS 117, check here . ► 24 through 26 and lines 30 and 31.			
a						
Ba						
힏		*				
Net Assets or Fund Balance			not follow SFAS 117, ▶ X plete lines 27 through 31.			
2	27	Capital stock, trust princ	cipal, or current funds		1,099,603.	
se		Paid-in or capital surplus, or	land, bldg, and equipment fund			
B	29	Retained earnings, accumu	lated income, endowment, or other funds 🔒 💄			
힐	30	Total net assets or fund	balances (see instructions)	0	1,099,603.	
	31	Total liabilities and	net assets/fund balances (see			
				<u> </u>	1,099,603.	<u> </u>
			nges in Net Assets or Fund Balar			
1			alances at beginning of year - Part I			
	end-	of-year figure reporte	d on prior year's return)			0
2	Ente	r amount from Part I,	line 27a		2	1,099,603.
			led in line 2 (itemize) ▶			
		lines 1, 2, and 3			4	1,099,603.
5	Deci	eases not included in	line 2 (itemize) ►		_5_	· · · · · · · · · · · · · · · · · · ·
6	Tota	I net assets or fund ba	alances at end of year (line 4 minus	line 5) - Part II, column (b	), line 30 6	1,099,603.

Page	3
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P	art IV Capital Gains	and Losses for Tax on Inv	estment Income				
	(a) List and	(b) How acquired	(c) Date acquired	(d) Date sold			
	2-story b	P - Purchase D - Donation	(mo , day, yr )	(mo , day, yr )			
<u>1a</u>	•						
_ <u>b</u>							
_ <u>c</u>							
<u>_d</u>					<u></u>		
<u>e</u>		<b>6 B 1 1 1 1 1</b>	(a) Cost or other basis		#N 0 22 x x x #1		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mını		
_				_			
_a b							
c							
d							
e							
	Complete only for assets	showing gain in column (h) and owne	ed by the foundation on 12/31/69	(1)	Gains (Col (h) ga	ain minus	
	(i) F M V as of 12/31/69	(j) Adjusted basis	(k) Excess of col (i)		(k), but not less t	han -0-) <b>or</b>	
	(1) 1 W V 43 OI 12/01/03	as of 12/31/69	over col (j), if any		Losses (from co	(n)) 	
a							
_b							
_ <u>c</u>							
<u>d</u>					<del></del>		
<u>e</u>			Tour class enter in Port I line 7				
2	Capital gain net income of		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2			
3	Net short-term canital da	" ا In or (loss) as defined in sections		-			
ŭ			tructions) If (loss), enter -0- in	1			
	<u> </u>			3			
Pa	art V Qualification (	Inder Section 4940(e) for Re	duced Tax on Net Investment I	ncome			
lf s	ection 4940(d)(2) applies,	leave this part blank NOT	r AVAILABLE FOR INITIAL	YEAR R	ETURNS		
		the section 4942 tax on the distrib not qualify under section 4940(e)	outable amount of any year in the back.  Do not complete this part.	ase period	?	Yes No	
1	Enter the appropriate am	ount in each column for each yea	ar; see the instructions before makin	g any entr	ies		
	(a) Base period years	(b)	(c)		(d) Distribution ra	atio.	
_Ca	ilendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets	(	(col (b) divided by		
	2013						
	2012						
	2011					- 49	
	2010						
_	2009			<u> </u>			
_				,			
_				2			
3			le the total on line 2 by 5, or by the	3			
	number of years the four	idation has been in existence if les	ss than 5 years			<del></del>	
4	4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5						
5	5 Multiply line 4 by line 3						
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6	<u> </u>		
7	Add lines 5 and 6			7	<del>.</del>		
8	Enter qualifying distribution of line 8 is equal to or grant VI instructions.	ons from Part XII, line 4 reater than line 7, check the box	ın Part VI, line 1b, and complete t	hat part u		rate. See the	

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ction	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0
	here and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2			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			0
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a			
þ	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			_
7	Total credits and payments Add lines 6a through 6d			0
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0
0	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
1	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refunded ▶ 11			
_	t VII-A Statements Regarding Activities		····	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes_	No
	participate or intervene in any political campaign?	<u>1</u> a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			v
	Instructions for the definition)?	1b		X
	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			Х
	Did the foundation file Form 1120-POL for this year?	1c		Λ
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation ►\$ (2) On foundation managers ►\$			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers  \$	_		х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		
	If "Yes," attach a detailed description of the activities			
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	3		х
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	4a		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4b	N	/A
	If "Yes," has it filed a tax return on Form 990-T for this year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
•	By language in the governing instrument, or		ł	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	Х	
	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	WA,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		ļ	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
	is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"	1	ľ	
	complete Part XIV	9	Х_	
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses . ATCH. 4	10	Х	
	Fo	m <b>99</b> (	0-PF (	2014)

Pa	t VII-A Statements Regarding Activities (continued)			
	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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address NA			
14	The books are in care of ▶ PAUL BRAINERD Telephone no ▶ 206-448-	-067	6	
	The books are in care of ▶ PAUL BRAINERD  Located at ▶ 2000 FIRST AVE. #2504 SEATTLE, WA  Section 4947(a)(1) propeyempt charitable trusts filing Form 990-PE in lieu of Form 1041 a Check here			
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	VA_	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority	-	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-221) If			
	"Yes," enter the name of the foreign country ▶			
Pai	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly).			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disquamed personi			
	(3) Furnish goods, services, or racinities to (or accept them from) a disquamed person.			
	(4) La Compensation to, or pay of reminates the expenses of, a anadomines 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)?			
	the benefit or use of a disqualified person)?			
	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)			
H	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
•	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	Х	
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2014?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2014?			
	If "Yes," list the years  ,,,,,,,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		N	Ά
	all years listed, answer "No" and attach statement - see instructions )	<u>2b</u>		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
•	Did the foundation hald many them a 20/ direct or indirect interest in any hydrogen enterprise			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
	at any time during the year?			
ú	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2014)	3b	N/	<u>A</u>
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		T	-
_	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b_		<u> </u>
	For	n 990	)-PF	(2014)

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Pai	t VII-B Statements Regarding Activities	for Which Form	4720 May Be Red	uired (continu	ed)		
5a	During the year did the foundation pay or incur any amo	ount to			==1		
	(1) Carry on propaganda, or otherwise attempt to influe	ence legislation (sectio	n 4945(e))?	Yes Z	X No		
	(2) Influence the outcome of any specific public ele	ection (see section 4	4955), or to carry o		_		
	directly or indirectly, any voter registration drive?			·	X No		
	(3) Provide a grant to an individual for travel, study, or o	other similar purposes?		Yes	X No		
	(4) Provide a grant to an organization other than a	charitable, etc., org	anization described	ın	_		
	section 4945(d)(4)(A)? (see instructions)			Yes	X No		
	(5) Provide for any purpose other than religious, ch	naritable, scientific,	literary, or education	al		:	
	purposes, or for the prevention of cruelty to children	or animals?		. Yes	X No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the		•	•			NA
	Regulations section 53 4945 or in a current notice regar	ding disaster assistar	ice (see instructions)?		• • • -	5b	14/7
	Organizations relying on a current notice regarding disas	ster assistance check	here		. ▶∟	]	
C	If the answer is "Yes" to question 5a(4), does the		•		_		
	because it maintained expenditure responsibility for the	grant?		. Yes	No		
	If "Yes," attach the statement required by Regulations see	ction 53 4945-5(d)					
6a	Did the foundation, during the year, receive any fur	nds, directly or indire	ectly, to pay premiu	ms	<del></del> 1		
	on a personal benefit contract?			. — —	X No		
b	Did the foundation, during the year, pay premiums, dire	ectly or indirectly, on a	personal benefit contra	act?		6b	<u> </u>
	If "Yes" to 6b, file Form 8870						
7a	At any time during the tax year, was the foundation a page				X No		v
	If "Yes," did the foundation receive any proceeds or have tyll Information About Officers, Director					<u>  7b  </u>	<u> </u>
	and Contractors			·	Lilibio	, 663,	
1	List all officers, directors, trustees, foundation n						
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions t employee benefit pla	ans   "	e) Expense other allo	
		devoted to position	enter -0-)	and deferred compens	sation		
ATC	 4 5		(	,	d		0
110.							
	·						
	· · · · · · · · · · · · · · · · · · ·						
	Compensation of five highest-paid employees "NONE."	(other than thos	e included on lin	e 1 - see inst	ructions	). If no	ne, enter
		(b) Title, and average	4.10	(d) Contributions employee benef		e) Expense	account.
(a)	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferre	ed `	other allo	wances
NON	₹			Componication			
			C	d	d		0
-							
					ŀ		
`atal	number of other employees hald over \$50,000						0

98-1227742 GLENORCHY MARKETPLACE FOUNDATION Form 990-PF (2014) Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE ō Total number of others receiving over \$50,000 for professional services. Part IX-A **Summary of Direct Charitable Activities** List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficiaries served, conferences convened, research papers produced, etc NONE Summary of Program-Related Investments (see instructions) Amount Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 NONE NONE

Form 990-PF (2014)

All other program-related investments. See instructions

NONE

Total. Add lines 1 through 3

Dage	9
rade	С

Par	X	<b>Minimum Investment Return</b> (All domestic foundations must complete this part. Foresee instructions.)	gn fo	oundations,
1	Fair	market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purp	oses		
а	Aver	age monthly fair market value of securities	1a	
b	Aver	age of monthly cash balances	1b	174,576.
С	Fair	market value of all other assets (see instructions)	1c	124,555.
d	Tota	I (add lines 1a, b, and c)	1d	299,131.
е	Redu	iction claimed for blockage or other factors reported on lines 1a and	}	
	1c (a	attach detailed explanation)		
2	Acqu	usition indebtedness applicable to line 1 assets	2	_
3	Subt	ract line 2 from line 1d  deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see	3	299,131.
4	Cash	deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstr	uctions)	4	4,487.
5	Net	value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	294,644.
6	Mini	mum investment return. Enter 5% of line 5	6	5,287.
Par	ΧI	<b>Distributable Amount</b> (see instructions) (Section 4942(J)(3) and (J)(5) private operating four and certain foreign organizations check here ► X and do not complete this part)	datio	ns
1	Mınır	num investment return from Part X, line 6	1	
2 a	Tax	on investment income for 2014 from Part VI, line 5		
b	Incor	me tax for 2014 (This does not include the tax from Part VI) 2b		
c		lines 2a and 2b	2c	
3	Distr	ibutable amount before adjustments Subtract line 2c from line 1	3	
4		overies of amounts treated as qualifying distributions	4	
5		lines 3 and 4	5	
6		uction from distributable amount (see instructions)	6	
7		ributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		
		1	7	
Par		Qualifying Distributions (see instructions)	•	
1	Amo	unts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
а		enses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	2,312.
b	Prog	ram-related investments - total from Part IX-B	1b	
2	Amo	unts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purp	oses	2	2,210.
3		unts set aside for specific charitable projects that satisfy the		
а	Suita	bility test (prior IRS approval required)	3a	
b	Cash	distribution test (attach the required schedule)	3b	
4	Quali	fying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	4,522.
5		idations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
		r 1% of Part I, line 27b (see instructions)	5	0
6	Adju	sted qualifying distributions. Subtract line 5 from line 4	6	4,522.
		e. The amount on line 6 will be used in Part V, column (b), in subsequent years when c	alcula	ating whether the foundation
		qualifies for the section 4940(e) reduction of tax in those years		-

	art XIII Undistributed Income (see instru	ictions)			Page 3
Г		· · · · · · · · · · · · · · · · · · ·	(6)	(a)	(4)
1	Distributable amount for 2014 from Part XI,	(a) Corpus	Years prior to 2013	(c) 2013	(d) 2014
	line 7				0
	Undistributed income, if any, as of the end of 2014				
а	Enter amount for 2013 only		ļ		
	Total for prior years 20 12 ,20 11 ,20 10				
	Excess distributions carryover, if any, to 2014				
	From 2009				
b	From 2010				
	From 2011				
d	From 2012				
	From 2013				
f	Total of lines 3a through e			1	
4	Qualifying distributions for 2014 from Part XII,				
	line 4 ▶ \$				1
а	Applied to 2013, but not more than line 2a	· · · · · · · · · · · · · · · · · · ·			
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
ď	Applied to 2014 distributable amount				
	Remaining amount distributed out of corpus				
	Excess distributions carryover applied to 2014				
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a) ) Enter the net total of each column as				
0	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
	Prior years' undistributed income Subtract				_
_	line 4b from line 2b				
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				
Ч	Subtract line 6c from line 6b Taxable				
•	amount - see instructions				
е	Undistributed income for 2013 Subtract line				
	4a from line 2a Taxable amount - see instructions				
				•	
t	Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2015				
7	Amounts treated as distributions out of corpus				
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be		:		
	required - see instructions)				
В	Excess distributions carryover from 2009 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2015.				
-	Subtract lines 7 and 8 from line 6a	0			
0	Analysis of line 9				
	Excess from 2010				
	Excess from 2011			,	
	Excess from 2012				
	Excess from 2013				
	Excess from 2014				

orn	• 1 990-PF (2014)	GLENORCHY	MARKETPLACE F	OUNDATION	98	-1227742 Page <b>10</b>
Pa	rt XIV Private Op	erating Foundations	(see instructions a	nd Part VII-A, quest	tion 9)	
1 a	If the foundation has	•		• •	rating	
h	foundation, and the ruling Check box to indicate v				n section X 4942	(j)(3) or   4942(j)(5)
	Check box to indicate v	Tax year	s a private operating	Prior 3 years	11 30011011 121 49421	1)(3) (1)   4342())(3)
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	I or the minimum investment		(4,2000	(0) = 0 = 0	(4)2071	
	return from Part X for each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part					
	XII, line 4 for each year listed .	4,522.				4,522
ď	Amounts included in line 2c not used directly for active conduct of exempt activities	-				
е	Qualifying distributions made					
	directly for active conduct of exempt activities. Subtract line	4 500				4 500
3	2d from line 2c	4,522.				4,522
	alternative test relied upon					
а	"Assets" alternative test - enter					
	<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying :</li></ul>					
	under section					
b	4942(j)(3)(B)(i) "Endowment" alternative test-					
	enter 2/3 of minimum invest-			:		
	ment return shown in Part X, line 6 for each year listed	3,525.				3,525.
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 sup- port from an exempt					
	organization					
Pa	• 1	tary Information (C	omplete this part	only if the found	lation had \$5.000	or more in assets
	at any time	during the year - se	e instructions.)	<b>,</b>		
	Information Regarding	_				
а	List any managers of t before the close of any	he foundation who ha tax year (but only if the	ive contributed more y have contributed m	e than 2% of the tota nore than \$5,000). (S	al contributions recei ee section 507(d)(2))	ved by the foundation
		BORAH BRAINERD				
	List any managers of to ownership of a partners					y large portion of the
	ownership of a partiters	ship of other entity) of v	vilicii the loundation	nas a 10 % or greater	interest	
	NA					
2	Information Regarding	Contribution, Grant, (	Gift, Loan, Scholarsh	ip. etc Programs:	•	
		e foundation only m		•	itable organizations	and does not accept
	unsolicited requests fo					
	other conditions, comp					
а	The name, address, an N/A	d telephone number of	r e-mail address of th	ne person to whom ap	plications should be ad	dressed
b	The form in which appli	cations should be subn	nitted and informatio	n and materials they	should include	
	N/A					
С	Any submission deadlin	es				
	N/A					
	Any restrictions or lin factors	nitations on awards,	such as by geogra	ohical areas, charita	ble fields, kinds of	institutions, or other

N/A

Form 990-PF (2014) Page **11** Part XV Supplementary Information (continued)

3	3 Grants and Contributions Paid During the Year or Approved for Future Payment  Recipient   If recipient is an individual, show any relationship to any foundation manager or substantial contribution   Purpose of grant or contribution   Amount    Name and address (home or business)   Amount   Purpose of grant or contribution   Amount    Recipient   Purpose of grant or contribution   Purpose of grant or contribution   Amount    Recipient   Purpose of grant or contribution   Purpose of grant or contribut								
	Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount				
	Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount				
а	Paid during the year	Si Gastiania continuator							
	•								
			•						
		•							
		п							
	Total			▶ 3a	None				
h	Approved for future payment								
	Approved for rutare payment								
		ļ							
		ļ							
			-						
	Total			▶ 3b	None				

JSA 4E1491 1 000

98-1227742 GLENORCHY MARKETPLACE FOUNDATION Form 990-PF (2014) Page **12** Part XVI-A Analysis of Income-Producing Activities (e) Unrelated business income Excluded by section 512, 513, or 514 Enter gross amounts unless otherwise indicated. Related or exempt (a) (b) (d) (c) function income Business code Amount Exclusion code Amount 1 Program service revenue (See instructions) 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 . . . . 5 Net rental income or (loss) from real estate b Not debt-financed property . . . . . . 6 Net rental income or (loss) from personal property 7 Other investment income . . . . . . . . . . . . 8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from special events . . . 10 Gross profit or (loss) from sales of inventory. . 11 Other revenue a \_\_\_\_\_ 12 Subtotal Add columns (b), (d), and (e) . . . . (See worksheet in line 13 instructions to verify calculations) Relationship of Activities to the Accomplishment of Exempt Purposes

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

Form 9	90-PF (	2014)	GLENORC	HY MARKE	TPLACE FOUR	1DATTON	1	98-122	27742	Pag	ge <b>1</b> 3
Part	XVII	Information R Exempt Organ		ransfers T	o and Transa	ctions	and Relation	ships With Nor	nchar	itable	)
1	Did th	e organization direct	ly or indirectly	engage in	any of the follow	wing with	any other orga	nization described		Yes	No
1	n sec	tion 501(c) of the Co	ode (other than	section 50	1(c)(3) organiza	tions) or i	n section 527, r	elating to political			
(	organı	zations?									ł
a	Transf	ers from the reporting	ig foundation t	o a nonchar	itable exempt or	ganızatıor	ı of.				ĺ
(	(1) Ca	sh							1a(1)		Х
(	(2) Ot	her assets							1a(2)		Х
		transactions:									
(	<b>1)</b> Sa	les of assets to a no	ncharitable exe	empt organiz	ation				1b(1)	<u> </u>	Х
(	<b>2)</b> Pu	rchases of assets fro	om a noncharit	table exempt	organization				1b(2)		Х
(	(3) Re	ntal of facilities, equi	pment, or othe	rassets		. <b></b> .			1b(3)		Х
(	<b>4)</b> Re	imbursement arrange	ements						1b(4)		X
(	<b>5)</b> Lo	ans or loan guarantee	es						1b(5)		X
(	6) Pe	rformance of service	s or members	hip or fundr	aising solicitation	3			1b(6)	_	X
c	Sharin	g of facilities, equipn	nent, mailing li	sts, other as	sets, or paid emi	oloyees			1c		X
		answer to any of th								fair m	arke
		of the goods, other									
\	/alue i	n any transaction or	sharing arran	ngement, sh	ow in column (d	i) the val	ue of the goods	, other assets, or	service	s rece	eived
(a) Lin	e no	(b) Amount involved	(c) Name of	noncharitable	exempt organization	(d)	Description of transf	ers, transactions, and sh	aring arra	ıngemei	nts
		N/A				N/.	A				
	$\neg \uparrow$							<u> </u>			
			· <del>-</del> · · · ·	**							
						<u> </u>	***************************************	·			
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									•		
								··			-
	-					-					
	_						·				
					-						
	-										
		foundation directly oped in section 501(c)							Y	es X	No
b l	f "Yes	<u>," complete the follov</u>	wing schedule					<del></del>			
		(a) Name of organization	<u></u>	(b	) Type of organization	<u> </u>	(	c) Description of relation	ship		
	·						<u> </u>				
	-						<u> </u>				
							<u> </u>				
	<u> </u>										
		penalties of perjury, I decla t, and complete Declaration of						the best of my knowled	ge and b	elief, it	is true
Sign					10/11			May the IR	S discus	this	retum
lere	'	AUL BRAINERD	7/		118/16	- '	ESIDENT	with the p	reparer	shown_	below
	Sigr	nature of officer or trustee		Date	10/4	Title		(see instruction	ns)? <u>X</u>	Yes	No
	J	Tauf I	Denmen	/ 2	118/16			<del></del> ,			
aid		Print/Type preparer's nar		Preparer	s signature		Date	_	PTIN		_
ren:		NORMA J OLIAS	ON	1 1/4	cuasin	COOK	70//	self-employed	P002		9
	arar	. 777	11/1 C ATTSC	י אות וארי			I I	⊾ つコ /	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 2	

206-285-7242

Firm's EIN ▶ 27-4238573

98119-3928 Phone no

Paid

Preparer

**Use Only** 

Firm's address

KING & OLIASON PLLC ▶ 514 SECOND AVE. WEST

SEATTLE,

## Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury

Internal Revenue Service Name of the organization **Schedule of Contributors** 

OMB No 1545-0047

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

Employer Identification number

GLENORCHY MARKETPI	ACE FOUNDATION		98-1227742
Organization type (check o	ne)		
Filers of:	Section:		
Form 990 or 990-EZ	501(c)( ) (enter number) organization		
	4947(a)(1) nonexempt charitable trust <b>not</b> treat	ted as a private foi	ındatıon
	527 political organization		
Form 990-PF	X 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated a	as a private founda	tion
	501(c)(3) taxable private foundation		
General Rule  X For an organizati	(7), (8), or (10) organization can check boxes for both the Good on filing Form 990, 990-EZ, or 990-PF that received, during yor property) from any one contributor. Complete Parts I a contributions	g the year, contribu	itions totaling \$5,000
Special Rules			
regulations under 13, 16a, or 16b, \$5,000 or <b>(2)</b> 2%	on described in section 501(c)(3) filing Form 990 or 990-E2 sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Sch and that received from any one contributor, during the year of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form	edule A (Form 990 t, total contributions m 990-EZ, line 1. Co	or 990-EZ), Part II, line of the greater of (1) omplete Parts I and II.
contributor, durin	on described in section 501(c)(7), (8), or (10) filing Form 999 githe year, total contributions of more than \$1,000 exclusive ional purposes, or the prevention of cruelty to children or a	vely for religious, ch	arıtable, scientific,
contributor, durin contributions tota during the year fo General Rule app	on described in section 501(c)(7), (8), or (10) filing Form 98 to the year, contributions exclusively for religious, charitable ed more than \$1,000. If this box is checked, enter here the ran exclusively religious, charitable, etc., purpose. Do not a lies to this organization because it received nonexclusively remore during the year.	e, etc., purposes, but e total contributions complete any of the religious, charitable	at no such s that were received parts unless the s, etc , contributions
Caution. An organization th 990-EZ, or 990-PF), but it m	at is not covered by the General Rule and/or the Special R ust answer "No" on Part IV, line 2, of its Form 990; or che	ules does not file Seck the box on line I	chedule B (Form 990, If of its Form 990-EZ or on its

Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

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

Employer Identification number 98-1227742

			90-122//42
Part I	Contributors (see instructions). Use duplicate copies	of Part I if additional space is nee	ded.
(a) No.	. (b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	PAUL AND DEBORAH BRAINERD  2000 1ST AVENUE, #2504  SEATTLE, WA 98121	\$1,101,915.	Person  Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for

noncash contributions)

Name of organization GLENORCHY MARKETPLACE FOUNDATION

Employer Identification number 98-1227742

art II	<b>Noncash Property</b>	(see instructions)	. Use duplicate co	pies of Part II if additional	space is needed
arr	Moncash Froperty	(See manuchons)	i. Use uupiicale co	pics of Fart II if additional	space is ne

(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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
		1	

Employer identification number 98-1227742

Part III	Exclusively religious, charitable, etc. that total more than \$1,000 for the y following line entry. For organizations contributions of \$1,000 or less for the Use duplicate copies of Part III if additional and the copies of the	year from any one s completing Part III, e year. (Enter this in	contributor. Comp enter the total of entermation once. S	elete columns (a) through (e) and the exclusively religious, charitable, etc.
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
	,	(e) Transi	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relation	nship 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, an	(e) Transf nd ZIP + 4		nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, an	nd ZIP + 4	Relation	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, an	d ZIP + 4	Relation	ship of transferor to transferee

FEES	
ACCOUNTING	
ı	
н	
PART	
990PF,	
FORM	

CHARITABLE PURPOSES	1,915.	1,915.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	1,915.	1,915.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

ATTACHMENT 1 PAGE 20

# ATTACHMENT 2

REVENUE AND

- OTHER EXPENSES

PART I

FORM 990PF,

EXPENSES PER BOOKS

ADJUSTED NET

INCOME

CHARITABLE PURPOSES

397.

397.

DESCRIPTION QUICKBOOKS SOFTWARE

397.

TOTALS

ATTACHMENT 2 PAGE 21

98-1227742

ı ΙI PART FORM 990PF,

DESCRIPTION

POUNAMU HOLDINGS CONTRIBUTION DEPOSIT FOR WORK BIKE

BOOK VALUE ENDING

ENDING FMV

483,926.

483,926. 2,210.

486,136.

486,136.

4

ATTACHMENT

FORM 990PF, PART VII-A, LINE 10 - NEW SUBSTANTIAL CONTRIBUTORS

NAME AND ADDRESS

PAUL AND DEBORAH BRAINERD 2000 1ST AVENUE, #2504 SEATTLE, WA 98121

ATTACHMENT 4 PAGE 23

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	CERS, DIRECTORS, AND TRUSTEES		ATTACH	ATTACHMENT 5	
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES	
PAUL BRAINERD 2000 FIRST AVENUE #2504 SEATTLE, WA 98121	DIR / PRES / TREASURER 35.00	0	0	0	
DEBORAH BRAINERD 2000 FIRST AVENUE #2504 SEATTLE, WA 98121	DIR / VICE PRES / SECRETARY 35.00	0	0	0	
	GRAND TOTALS	0	0	0	

# Regulation Section 1.263(a)-1(f) - De Minimis Safe Harbor Election

Taxpayer Name:

GLENORCHY MARKETPLACE FOUNDATION

Taxpayer Address:

200 FIRST AVENUE, SUITE 2504 SEATTLE, WA 98121\_

Taxpayer ID Number:

98-1227742

Year-End:

03/31/2015

Under IRC Regulation Section 1.263(a)-1(f), the taxpayer hereby elects to apply the de minimis safe harbor election.

3123JF K266 1/28/2016 10:53:19 AM V 14-7.16