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For calendar year 2015, or tax year beginning 01-01-2015

Department of the Treasury

Internal Revenue Service

DLN: 93491187002166

, and ending 12-31-2015

OMB No 1545-0052

Open to Public Inspection

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

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

A Employer identification number Name of foundation ORIN SMITH FAMILY FOUNDATION 20-0477535 BTelephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) 4963 NE 85TH STREET (206) 525-1283 **C** If exemption application is pending, check here City or town, state or province, country, and ZIP or foreign postal code SEATTLE, WA 981153913 G Check all that apply Initial return Initial return of a former public charity **D 1.** Foreign organizations, check here Final return Amended return $\textbf{2.} \ \ \text{Foreign organizations meeting the } 85\%$ Name change Address change test, check here and attach computation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation **J**Accounting method IFair market value of all assets at end If the foundation is in a 60-month termination Cother (specify) under section 507(b)(1)(B), check here of year (from Part II, col. (c), (Part I, column (d) must be on cash basis.) line 16) ►\$ 29,697,302 Part I **Analysis of Revenue and Expenses** Disbursements Revenue and Net investment Adjusted net for charitable (The total of amounts in columns (b), (c), and (d) may not expenses per necessarily equal the amounts in column (a) (see (b) (c) income purposes income books (d) (cash basis only) instructions)) Contributions, gifts, grants, etc , received (attach 1 973,360 2 Check ► ☐ If the foundation is **not** required to attach 3 Interest on savings and temporary cash investments 659 659 343,424 343,424 Dividends and interest from securities Gross rents 5a Net rental income or (loss) b Net gain or (loss) from sale of assets not on line 10 1,483,262 6a Revenue b Gross sales price for all assets on line 6a 2,812,637 2,812,637 Capital gain net income (from Part IV, line 2) . . Net short-term capital gain . . . 8 Income modifications . . . 10a Gross sales less returns and allowances Less Cost of goods sold . . . b Gross profit or (loss) (attach schedule) . . 19,167 19,167 Other income (attach schedule) 11 Total.Add lines 1 through 11 2,819,872 3,175,887 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages . . . 15 Pension plans, employee benefits . . Operating and Administrative Expenses 忉 305 Legal fees (attach schedule). 305 16a 囿 3,89 1,945 1,945 Accounting fees (attach schedule). . . . b Other professional fees (attach schedule) . C **17** 2 37,819 2,207 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion . 20 Occupancy 21 Travel, conferences, and meetings. 22 Printing and publications. . 囪 144,380 144.355 25 23 Other expenses (attach schedule). 24 Total operating and administrative expenses. 148.507 Add lines 13 through 23 186.394 2.275 762,000 762,000 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 948,394 148,507 764,275 25 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements 1,871,478 a 3,027,380 Net investment income (if negative, enter -0-) Adjusted net income(if negative, enter -0-) For Paperwork Reduction Act Notice, see instructions. Form **990-PF** (2015) Cat No 11289X

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	(a) Book Value	(b) Book Value	(c) Fall Plance Value
	2	Savings and temporary cash investments	5,373,782	6,537,344	6,537,344
	3	Accounts receivable -	, ,	, ,	, ,
		Less allowance for doubtful accounts -			
	4	Pledges receivable -			
	•	Less allowance for doubtful accounts -			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	U	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	,	Less allowance for doubtful accounts			
		Inventories for sale or use			
왍	8	Prepaid expenses and deferred charges			
Assets	9	<u> </u>			
Ā	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	16,089,415	16,284,625	21,329,223
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule)			_
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	1,000,000	1,512,706	1,830,735
	14	Land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe 🟲)			
	16	Total assets(to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	22,463,197	24,334,675	29,697,302
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ě	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
_	21	Mortgages and other notes payable (attach schedule)			
┙	22	Other liabilities (describe 🟲)			
	23	Total liabilities(add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here			
Balances		and complete lines 24 through 26 and lines 30 and 31.			
띭	24	Unrestricted			
<u> 5</u>	25	Temporarily restricted			
	26	Permanently restricted			
Fund		Foundations that do not follow SFAS 117, check here			
or F		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	0	0	
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
Ą	29	Retained earnings, accumulated income, endowment, or other funds	22,463,197	24,334,675	
Net	30	Total net assets or fund balances(see instructions)	22,463,197	24,334,675	
~	31	Total liabilities and net assets/fund balances(see instructions)	22,463,197	24,334,675	
Pa	rt III	<u> </u>	l		_
1		Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must adi	ree	
		with end-of-year figure reported on prior year's return)			22,463,197
2		Enter amount from Part I, line 27a		<u> </u>	1,871,478
3		Other increases not included in line 2 (itemize)		_ 3	0
4		Add lines 1, 2, and 3		4	24,334,675
5		Decreases not included in line 2 (itemize)		_ 5	0
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa		e 30 . 6	24,334,675

Part IV Capital Gains and Losses for Tax on Investment Income

		nd(s) of property sold (e g , re , or common stock, 200 shs		How acquired P—Purchase (b) D—Donation		ate acquired mo , day, yr)	Date sold (d) (mo , day, yr)	
1 a	50,000 SHS STARBUCKS (CORPORATION						
b	CAPITAL GAINS DIVIDEN	DS		Р				
d								
e								
) Gross sales price	Depreciation allowed (f) (or allowable)		t or other basis expense of sale			or (loss) (f) minus (g)	
a	2,527,988	3					2,527,988	
b	284,649	,					284,649	
С С								
d								
	mplete only for assets showing	ggain in column (h) and owne	d by the foundation	n on 12/31/69		Gains (Col	(h) gain minus	
		Adjusted basis		cess of col (ı)	− c	ol (k), but no	ot less than -0-) or	
(i)	FMV as of 12/31/69	(j) as of 12/31/69	(k) ove	rcol (j), ıfany	(I) Losses (from col (h))			
a							2,527,988	
b							284,649	
С								
d								
е								
3	If gain, also enter in Part I, in Part I, line 8	net capital loss) { or (loss) as defined in section line 8, column (c) (see instruc	ctions) If (loss), e	n Part I , line 7 }) nter -0-	3		2,812,637	
	ional use by domestic private on 4940(d)(2) applies, leave t							
If"Yes,	foundation liable for the secti " the foundation does not qual	ify under section 4940(e) Do	not complete this	part			Γ Yes Γ No	
1 Ent	er the appropriate amount in e	each column for each year, se	e instructions befo	ore making any ent	ries			
	(a) period years Calendar or tax year beginning in) Adj	(b) usted qualifying distributions	(c) Net value of noncha			(d) Distributio (col (b) divided	n ratio	
	2014	812,744		20,894,596			0 038897	
	2013	1,033,462		17,176,917			0 060166	
	2012	652,075		12,388,294			0 052636	
	2011	1,563,875		6,781,752			0 230600	
	2010	2,737,614		8,694,479			0 314868	
2				<u> </u>	2		0 697167	
3		or the 5-year base period—div Indation has been in existence			3		0 139433	
4		aritable-use assets for 2015			4		28,275,860	
5			•	<u> </u>	5		3,942,588	
6		income (1% of Part I, line 27		<u> </u>	6		30,274	
7			-	<u> </u>	7		3,972,862	

the Part VI instructions

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

764,275

ĽŒΙ	Excise Tax based on Investment Income (Section 4940(a), 4940(b), 49	74 0(e),	01 4340—See	paye	: 10 OL	the ms	LIUCLIO	115)	
1a		· [)]					
	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,			IJ	1			6 (0,548
	here ► Tand enter 1% of Part I, line 27b			•					
С	All other domestic foundations enter 2% of line $27b$ Exempt foreign organiza Part I, line 12 , col (b)	itions e	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foun enter -0-)	idation	s only Others	5	2				0
3	Add lines 1 and 2				3			6(0,548
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ndation	s only Other	s	4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, en	nter - 0		.	5			6(0,548
6	Credits/Payments								
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	20,	100					
b	Exempt foreign organizations—tax withheld at source	6b							
С	Tax paid with application for extension of time to file (Form 8868)	6c	56,	500					
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d				7			7 (5,600
8	Enter any penalty for underpayment of estimated tax Check here 🔽 If Form 2	220 is	attached 🕏		8				820
9	$\textbf{Tax}\ \textbf{due.} If the total of lines 5 and 8 is more than line 7, enter \textbf{amount}\ \textbf{owed}\ \textbf{.}$			F	9				
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount	t overp	oaid	•	10			1 !	5,232
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	.5,232	Refunded	•	11				0
Pai	t VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, state	, or loc	al legislation	or di	d			Yes	No
	it participate or intervene in any political campaign?						1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for p			ee In	structio	ons			
	for definition)?					•	1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities	and co	pies of any ma	aterial	s				
	published or distributed by the foundation in connection with the activities.								
	Did the foundation file Form 1120-POL for this year?			•		•	1 c		No
d	Enter the amount (If any) of tax on political expenditures (section 4955) impos			_					
	(1) On the foundation \Rightarrow \$ 0 (2) On foundation managers			0					
е	Enter the reimbursement (if any) paid by the foundation during the year for poli	itical e	xpenditure tax	k imp	osed				
_	on foundation managers 🕨 \$								
2	Has the foundation engaged in any activities that have not previously been rep	ortea	to the IRS?				2		No
_	If "Yes," attach a detailed description of the activities.				4				
3	Has the foundation made any changes, not previously reported to the IRS, in it of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confo	_	_	-		5	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more di						4a	Yes	140
_	If "Yes," has it filed a tax return on Form 990-T for this year?						4b	Yes	
ь 5	Was there a liquidation, termination, dissolution, or substantial contraction dui						5	163	No.
•	If "Yes," attach the statement required by General Instruction T.	ing the	e year						NO
6	Are the requirements of section 508(e) (relating to sections 4941 through 494	45)sa	tisfied either						
•	By language in the governing instrument, or	15,54	cioned citilei						
	By state legislation that effectively amends the governing instrument so the	at no n	nandatory dire	ection	าร				
	that conflict with the state law remain in the governing instrument?						6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	?If "Yes	s," complete Pa	rt II,	col. (c)),			
	and Part XV.						7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (s	see ins	tructions)						
	▶WA			_					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	90-PF	to the Attorne	y					
	General (or designate) of each state as required by General Instruction G? If $^\prime$	"No," at	tach explanatio	on .			8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the n	meanın	g of section 4	942(່ງ)(3)				
	or $4942(j)(5)$ for calendar year 2015 or the taxable year beginning in 2015 (see	ee inst	ructions for P	art X	۲V)?				
	If "Yes," complete Part XIV						9	igsqcup	No
10	Did any persons become substantial contributors during the tax year? If "Yes,"	" attach	a schedule lis	ting	their na	ames			
	and addresses.						10		No

Par	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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ► <u>N/A</u>			
14	The books are in care of ►KEVIN SMITH Telephone no ►(206) 525	-1283	
	Located at ▶4963 NE 85TH STREET SEATTLE WA ZIP+4 ▶9811539			
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	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	مه ا	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(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 V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No			
	(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)?			
	(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)			
ь	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		No
	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,			
Ī	that were not corrected before the first day of the tax year beginning in 2015?	1c		No
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 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years ▶ 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20 <u>, 20</u> , 20 <u>, 20</u>			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section $4943(c)(7)$) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	if the foundation had excess business holdings in 2015.)	3b		<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	1	No

Pa	Statements Rega	arding Activities for	· Wr	iich Form 4/20	мау	Be Required (Cont	inue	ea)	_
5a	During the year did the foundation	n pay or incur any amour	it to						
	(1) Carry on propaganda, or othe	rwise attempt to influenc	e leg	ıslatıon (section 49	45(e)) [?]	No		ı
	(2) Influence the outcome of any	specific public election	(see	section 4955), or to	carı	гу			ı
	on, directly or indirectly, any	voter registration drive?				\ Yes \	No		ı
	(3) Provide a grant to an individu	ial for travel, study, or ot	hers	ımılar purposes?		┌ Yes ┌	No		ı
	(4) Provide a grant to an organiza	atıon other than a charıta	ble,	etc , organızatıon de	scrib	oed			ı
	ın section 4945(d)(4)(A)? (s	ee instructions)				Yes	No		ı
	(5) Provide for any purpose other	r than religious, charitabl	e, sc	ientific, literary, or					ı
	educational purposes, or for t	the prevention of cruelty	to ch	ıldren or anımals?.			No		
b	If any answer is "Yes" to 5a(1)-((5), dıd any of the transac	tions	fail to qualify under	the	exceptions described in			
	Regulations section 53 4945 or							5b	
	Organizations relying on a curren						_		
С	If the answer is "Yes" to question						_		
	tax because it maintained expend				•	\ Yes \	No		
	If "Yes," attach the statement requ	· -							ı
6a	Did the foundation, during the yea		-		-		_		ı
	a personal benefit contract?								
Ь	Did the foundation, during the yea	ar, pay premiums, directl	y or ı	ndirectly, on a perso	nall	benefit contract?	•	6b No	
	If "Yes" to 6b, file Form 8870.						_		
7a	At any time during the tax year, v	·	•	•		·			
ь	If yes, did the foundation receive							7b	_
Pa	rt VIIII and Contractors	t Officers, Director	s, I	rustees, Founda	tioi	n Managers, Hignly	Paic	i Employees,	
1	List all officers, directors, trustee	s, foundation managers	and t	heir compensation (see i	nstructions).			_
		Title, and average		Compensation(If		(d)			_
	(a) Name and address	hours per week	(not paid, enter		Contributions to		Expense account	•
		(b) devoted to position		-0-)		mployee benefit plans deferred compensation	(e)	other allowances	
ORIN	I SMITH	DIRECTOR		0		0			0
496	3 NE 85TH STREET	1 00							
	TTLE,WA 98115		ļ						_
	N SMITH	DIRECTOR		0		0			0
	3 NE 85TH STREET TTLE,WA 98115	1 00							
	Compensation of five highest-paid	l employees (other than	thos	e included on line 1–	See	instructions) If none e	ıter"	NONE "	_
						Contributions to		ITOTILE.	_
Na	(a) me and address of each employee ;	Title, and aver		(c) Compensatio	n	employee benefit		Expense account	•
	more than \$50,000	(b) devoted to pos				plans and deferred (d) compensation	(e)	other allowances	
100	N F					(u) compensation			_
	<u> </u>								
									_
									_
									—
									_
Tete	al number of other employees paid o					<u> </u> 			_
IOL	ar number of other employees paid (υνει φου,υυυ					ı		0

Part VIII Information About Officers, Directors, T and Contractors (continued)	rustees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional ser	vices (see instructions). If none, enter "NONE".	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
PINNACLE WEALTH MGT LLC (KEVIN SMITH)	INVESTMENT ADVISOR	144,176
4963 NE 85TH STREET SEATTLE, WA 981153913		
Total number of others receiving over \$50,000 for professional ser	vices	0
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Inc.	lude relevant statistical information such as the number of	Expenses
organizations and other beneficiaries served, conferences convened, research paper	ers produced, etc	2.1,
2		
3		
4		
Part IX-B Summary of Program-Related Investme	ents (see instructions)	
Describe the two largest program-related investments made by the foundation	during the tax year on lines 1 and 2	A mount
1		
2		
All other program-related investments See instructions		
3		
		-
Total. Add lines 1 through 3		
iotan naa mies i moughs i i i i i i i i i i i i i i i i i i i		1 0

Form 990-PF (2015) Part Y Minimum Investment Return

РŒ	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	Average monthly fair market value of securities	1a	21,022,714
b	Average of monthly cash balances	1b	6,365,485
c	Fair market value of all other assets (see instructions)	1c	1,318,258
d	Total (add lines 1a, b, and c)	1d	28,706,457
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	28,706,457
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ 0 of line 3 (for greater amount, see		
	ınstructions)	4	430,597
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	28,275,860
6	Minimum investment return. Enter 5% of line 5	6	1,413,793
Par	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► ☐ and do not complete this part.)	taın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	1,413,793
2a	Tax on investment income for 2015 from Part VI, line 5 2a 60,548		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b 336		
С	Add lines 2a and 2b	2c	60,884
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,352,909
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	1,352,909
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	1,352,909
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	764,275
b	Program-related investments—total from Part IX-B	1b	0
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	За	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	764,275
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	764,275
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

P	art XIIII Undistributed I	I ncome (see instru	ictions)			
			(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 fr	rom Part XI, line 7				1,352,909
2	Undistributed income, if any, as	of the end of 2015				
а	Enter amount for 2014 only				0	
Ь	Total for prior years 20,	. 20, 20		0		
3	Excess distributions carryover,					
а	From 2010	2,303,932				
b	From 2011	1,225,671				
C	From 2012	35,815				
d	From 2013	178,734				
	From 2014					
	Total of lines 3a through e		3,744,152			
4	Qualifying distributions for 2015					
	XII, line 4 🕨 \$					
	Applied to 2014, but not more th				0	
b	Applied to undistributed income (Election required—see instruction)	-		0		
c	Treated as distributions out of co		0			
Ī	required—see instructions)	• •				
	Applied to 2015 distributable an					764,275
	Remaining amount distributed or	·	0			
5	Excess distributions carryover a	• •	588,634			588,634
	(If an amount appears in column (same amount must be shown					
6	Enter the net total of each colu	mn as				
_	indicated below: Corpus Add lines 3f, 4c, and 4e	Subtract line E	3,155,518			
	Prior years' undistributed income		3,133,310			
D	line 4b from line 2b			0		
c	Enter the amount of prior years' i					
	income for which a notice of defic					
	been issued, or on which the sec	• • •		0		
_	tax has been previously assesse			· ·		
d	Subtract line 6c from line 6b Ta —see instructions			0		
۵	Undistributed income for 2014					
_	4a from line 2a Taxable amount					
	instructions				0	
f	Undistributed income for 2016					
	lines 4d and 5 from line 1 This a					0
7	be distributed in 2015					
•	corpus to satisfy requirements in					
	section 170(b)(1)(F) or 4942(g)					
	be required - see instructions).		0			
8	Excess distributions carryover f		1,715,298			
_	applied on line 5 or line 7 (see in	· · · · · · · · · · · · · · · · · · ·	1,713,290			
9	Excess distributions carryover to Subtract lines 7 and 8 from line 6		1,440,220			
10	Analysis of line 9	υα	, , = 20			
	Excess from 2011	1,225,671				
	Excess from 2012	35,815				
	Excess from 2013	178,734				
	Excess from 2014	·				
	Excess from 2015					

c Any submission deadlines

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

Form 990-PF (2015)				Page 11
Part XV Supplementary Inform		wayad far E	utura Daumant	
3 Grants and Contributions Paid	If recipient is an individual,		uture rayment	
Recipient Name and address (home or business)	show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
a Paid during the year	or substantial contributor	тестрісне		
See Additional Data Table				
Total		<u></u>	▶ 3a	762,000
b Approved for future payment	I			

Part XVI-A Analysis of Income-Produc	ing Activitie	s			Page 12
Enter gross amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	1 512, 513, or 514	(e) Related or exempt
1.0	(a)	(b)	(c)	(d)	function income (See
1 Program service revenue	Business code	A mount	Exclusion code	A mount	instructions)
a b					
c					
d					
e					
f g Fees and contracts from government agencies					
2 Membership dues and assessments					
Interest on savings and temporary cash investments			14	650	
Dividends and interest from securities			14	659 343,424	
Net rental income or (loss) from real estate					
a Debt-financed propertyb Not debt-financed property					
5 Net rental income or (loss) from personal					
property					
Other investment income			14	19,167	
Gain or (loss) from sales of assets other than inventory			18	1,483,262	
Net income or (loss) from special events			10	1,100,202	
Gross profit or (loss) from sales of inventory					
L Otherrevenue a _					
b					
c					
d e					
2 Subtotal Add columns (b), (d), and (e).		0		1,846,512	(
Total.Add line 12, columns (b), (d), and (e).			1	.3	1,846,512
(See worksheet in line 13 instructions to verify art XVI-B Relationship of Activities to		olishment of E	xempt Purpos	 es	
Explain below how each activity for wh	ıch ıncome ıs rej	ported in column ((e) of Part XVI-A c	ontributed importa	
the accomplishment of the foundation's instructions)	s exempt purpos	es (other than by	providing funds for	such purposes) (See
,					

Part	XVI	Information Re Noncharitable					sactio	ns and I	Relationships	With			
		organization directly or i	ndırectly (engage II	n any of t	the following wi						V	Na.
		501(c) of the Code (othe	er than se	ction 50	1(c)(3) c	organizations) (or in sec	tion 527,	relating to politic	al		Yes	No
_		tions?	dation to		awtable .								
		s from the reporting four h									la(1)		No
		erassets								H	la(1)		No
` '		ansactions									La(Z)		NO
		es of assets to a noncha	ritable ex	emnt ord	ianizatioi	n					1b(1)		No
		chases of assets from a								-	1b(2)		No
		tal of facilities, equipme								-	1b(3)		No
		nbursement arrangemen								<u> </u>	1b(4)		No
		ns or loan guarantees.								—	1b(5)		No
		rmance of services or m								<u> </u>	1b(6)		No
		of facilities, equipment, i								⊢	1c		No
	_	swer to any of the above	_							<u> </u>	cet val	ue	
	ny tr	ods, other assets, or se ansaction or sharing arra (b) Amount involved	angement	, show in	column		of the go	ods, other		ces received			ate.
(a) Line	. 110	(b) Amount involved	(c) Name	Of Horicia	mable exe	impt organization	(u)	Везеприон	or transfers, transact	ions, and share	ng anai	igenien	11.3
3 - 7- 4	.l	4- 4 4 41											
des	cribe	undation directly or indi d in section 501(c) of th complete the following : (a) Name of organization	ne Code (d schedule		n sectioi		'in secti			otion of relation	. ┌Ye	s 🔽	No
Sign	the	der penalties of perjury, best of my knowledge a ormation of which prepar	ınd belief,	ıt ıs true	e, correct						ıs bas	ed on	all
Here		*****				2016-06-23	<u> </u>	*****		return with the			
	<u> </u>	Signature of officer or t	rustee			Date	<u>, , , , , , , , , , , , , , , , , , , </u>	Title		below (see ins	tr)? 🔽	Yes N	10
		Print/Type preparer's ALLISON Z KOLLA		Prepare	er's Sıgn	ature	Date		Check if self- employed ►	PTIN POO	04580	30	
Paid Prepa Use	areı		CPAS P	LLC					Firm's EIN ► 4	6-4357116			
Only		Firm's address ► 10885 NE 4TH ST SU 98004	JITE 320	BELLEV	UE, WA				Phone no (425	5)462-8220)		

Form 990PF Part XV Line 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	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business	or substantial contributor	recipient		
a Paid during the year				
CENTER FOR REPRODUCTIVE RIGHTS 120 WALL STREET 14TH FLOOR NEW YORK,NY 10005	NONE	PUBLIC CHARITY- 501C(GENERAL FUND	4,000
CONSERVATION INTERNATIONAL 2011 CRYSTAL DRIVE STE 500 ARLINGTON,VA 22202	NONE	PUBLIC CHARITY- 501C(GENERAL FUND	250,000
EQUAL JUSTICE INITIATIVE 122 COMMERCE STREET MONTGOMERY,AL 36104	NONE	PUBLIC CHARITY- 501C(GENERAL FUND	4,000
HOT BREAD KITCHEN 1590 PARK AVENUE NEW YORK, NY 10029	NONE	PUBLIC CHARITY- 501C(ON-THE-JOB CULINARY TRAINING, ENGLISH FLUENCY, AND JOB PLACEMENT FOR THREE LOW INCOME YOUNG WOMEN	3,000
INDUSTRIAL PARK AT TRANSALTA-USA 1111 BIG HANAFORD ROAD CENTRALIA, WA 98531	NONE	PUBLIC CHARITY- 501C(GENERAL FUND	75,000
WASHINGTON STATE HERITAGE CENTER TRUST PO BOX 40222 OLYMPIA,WA 985040222	NONE	PUBLIC CHARITY- 501C(PUBLICATION OF SIMPLY WASHINGTON BOOKLET	2,500
MENTAL HEALTH ASSOCIATION OF SAN FRANCISCO 870 MARKET STREET SUITE 928 SAN FRANCISCO,CA 94102	NONE	PUBLIC CHARITY- 501C(GENERAL FUND	4,000
MERCYCORPS 45 SW ANKENY STREET PORTLAND,OR 97204	NONE	PUBLIC CHARITY- 501C(GENERAL FUND	7,000
PLYMOUTH HOUSING GROUP 2113 3RD AVENUE SEATTLE,WA 98121	NONE	PUBLIC CHARITY- 501C(GENERAL FUND	7,000
PLYMOUTH HOUSING GROUP 2113 3RD AVENUE SEATTLE,WA 98121	NONE	PUBLIC CHARITY- 501C(SPONSORSHIP	14,000
UNITED WAY OF KING COUNTY 720 SECOND AVENUE SEATTLE,WA 98104	NONE	PUBLIC CHARITY- 501C(THE MOTHER HOUSE FUND	50,000
THE CHEHALIS FOUNDATION PO BOX 1608 CHEHALIS,WA 98532	NONE	PUBLIC CHARITY- 501C(CHEHALIS EDUCATION FUND	41,500
UNITED WAY OF KING COUNTY 720 SECOND AVENUE SEATTLE,WA 98104	NONE	PUBLIC CHARITY- 501C(CAMPAIGN TO END HOMELESSNESS	100,000
UNIVERSITY OF WASHINGTON FOUNDATION BOX 359505 SEATTLE,WA 981959505	NONE	PUBLIC CHARITY- 501C(EVANS SCHOOL ENRICHMENT FUND - EVANS SCHOOL OF PUB POLICY & GOVERNANCE	100,000
WAKE FOREST BAPTIST MEDICAL CENTER PO BOX 571021	NONE	PUBLIC CHARITY- 501C(SMITH FAMILY FUND FOR PMP RESEARCH	100,000

TY 2015 Accounting Fees Schedule

Name: ORIN SMITH FAMILY FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	3,890	1,945		1,945

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TY 2015 Investments Corporate Stock Schedule

Name: ORIN SMITH FAMILY FOUNDATION

EIN: 20-0477535				
Name of Stock	End of Year Book Value	End of Year Fair Market Value		
DFA EMERGING MKTS SMALL CAP PORTFOLIO	224,208	223,168		
DFA EMERGING MKTS VALUE PORTFOLIO	147,398	106,306		
DFA EMERGING MKTS PORTFOLIO	216,822	193,247		
DFA INTL SMALL CAP VALUE PORTFOLIO	254,985	256,114		
DFA INTL SMALL COMPANY PORTFOLIO	303,183	311,953		
DFA INTL VALUE PORTFOLIO	384,918	318,853		
DFA LARGE CAP INTL PORTFOLIO	355,804	350,477		
DFA REAL ESTATE SECURITIES PORTFOLIO	841,907	1,100,802		
DFA US CORE EQUITY 2 (PURCHASED)	436,076	472,929		
DFA U.S. LARGE CAP VALUE PORTFOLIO	1,029,430	1,413,202		
DFA U.S. LARGE CO PORTFOLIO	790,466	1,245,936		
DFA U.S. SMALL CAP PORTFOLIO	343,056	469,333		
DFA U.S. SMALL CAP VALUE PORTFOLIO	289,204	332,254		
DFA TAX MANAGED US 5-10 (CONTRIBUTED)	2,428,776	2,227,249		
DFA TAX MANAGED US 5-10 (PURCHASED)	114,467	111,646		
DFA TAX MANAGED US MARKET (CONTRIBUTED)	1,822,100	1,725,500		
DFA TAX MANAGED US MARKET (PURCHASED)	30,375	29,638		
DFA US CORE EQUITY 2 (CONTRIBUTED)	2,296,925	3,597,196		
STARBUCKS CORPORATION	3,974,525	6,843,420		

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TY 2015 Investments - Other Schedule

Name: ORIN SMITH FAMILY FOUNDATION

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
CELLO FIXED INCOME FUND LTD	AT COST	1,000,000	1,318,258
COLUMBIA PACIFIC INCOME FUND II, LP	AT COST	512,706	512,477

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TY 2015 Legal Fees Schedule

Name: ORIN SMITH FAMILY FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	305	0		305

TY 2015 Other Expenses Schedule

Name: ORIN SMITH FAMILY FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK CHARGES	175	175		0
INVESTMENT FEES	144,176	144,176		0
FROM PASS-THROUGH ENTITY	4	4		0
WASHINGTON USER FEE	25	0		25

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TY 2015 Other Income Schedule

Name: ORIN SMITH FAMILY FOUNDATION

	Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
I	FROM PASS-THROUGH ENTITY	19,167	19,167	19,167

TY 2015 Taxes Schedule

Name: ORIN SMITH FAMILY FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX	2,207	2,207		0
EXCISE TAX	35,612	0		0

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As Filed Data -

DLN: 93491187002166

14: 00-101107002100

OMB No 1545-0047

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, 990-EZ, or 990-PF.

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

2015

Employer identification number

ORIN SMITH FAMILY FOUNDATION 20-0477535			20-0477535			
Organ	ization type (check	one)				
Filers	of:	Section:				
Form 9	90 or 990-EZ	□ 501(c)() (enter number) organization				
		☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation	n			
Form 9	90-PF	√ 501(c)(3) exempt private foundation				
		☐ 501(c)(3) taxable private foundation				
Gener ✓		n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions many one contributor. Complete Parts I and II. See instructions for determining a				
Specia	al Rules					
Γ	under sections 509(described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /3% supa)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Parne contributor, during the year, total contributions of the greater of (1) \$5,000 or porm 990-EZ, line 1 Complete Parts I and II	t II, line 13, 16a, or 16b, and that			
Γ	during the year, tota	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receiv contributions of more than \$1,000 exclusively for religious, charitable, scientification or animals. Complete Parts I, II, and III				
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
ORIN SMITH FAMILY FOUNDATION

Employer identification number 20-0477535

Part I	Contributors (see instructions) Use duplicate copies of Part I if	f additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
1	ORIN C SMITH 4963 NE 85TH STREET		Person Payroll	দ
	SEATTLE, WA 98115	\$ 973,360	Noncash (Complete Part II f	▽ or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person Payroll	Г Г
		\$	Noncash (Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person Payroll	Г
		\$	Noncash	,
			(Complete Part II f contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Γ
		\$	Payroll Noncash	Г -
			(Complete Part II f	I or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
	_		Person	Г -
		\$	Payroll Noncash	,
			(Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
	_		Person	Г
		\$	Payroll Noncash	Г -
			(Complete Part II f	l or noncash

Name of organization ORIN SMITH FAMILY FOUNDATION		Employer identification number		
KIN SMITH FA	MILY FOUNDATION	20-0477535		
Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed			
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
1	16,000 SHARES STARBUCKS CORPORATION (SBUX)	\$ 973,360	2015-12-29	
(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	
(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	
		<u> </u>		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
				

hedule B (Form 990,	990-EZ, or 990-PF) (2015)		Page 4
ne of organization IN SMITH FAMILY	FOUNDATION		Employer identification number
			20-0477535
total more line entry. of \$1,000 o	than \$1,000 for the year from any or	ne contributor. Complete co II, enter the total of <i>exclusiv</i> mation once. See instruction	ribed in section 501(c)(7), (8), or (10) that blumns (a) through (e) and the following ely religious, charitable, etc., contributions ns.) * \$
(a) .from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
. =			
	Transferee's name, address, and	(e) Transfer of gı d ZIP4	ft Relationship of transferor to transferee
(a) .from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
. =			
	Transferee's name, address, and	(e) Transfer of gi I ZIP4	ft Relationship of transferor to transferee
(a) .from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
. =			
	Transferee's name, address, and	(e) Transfer of gi IZIP4	ft Relationship of transferor to transferee
-			
(a) .from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
. =			
	Transferee's name, address, and	(e) Transfer of gi	ft Relationship of transferor to transferee
-			