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Form **990-PF**

Department of the Treasury
Internal Revenue Service

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*.**

OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015

Name of foundation
THE BUNGIE FOUNDATION

A Employer identification number
27-2313989

Number and street (or P O box number if mail is not delivered to street address)
550 106TH AVE NE SUITE 207

Room/suite

B Telephone number (see instructions)
(425) 440-6862

City or town, state or province, country, and ZIP or foreign postal code
BELLEVUE, WA 98004

C If exemption application is pending, check here ▶ ☐

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

H Check type of organization ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end of year *(from Part II, col (c), line 16)* ▶$ 102,445

J Accounting method ☐ Cash ☑ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

Part I **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))*

			(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1	Contributions, gifts, grants, etc , received (attach schedule)	5,016			
	2	Check ▶ ☐ if the foundation is **not** required to attach Sch B				
	3	Interest on savings and temporary cash investments	430	430		
	4	Dividends and interest from securities				
	5a	Gross rents				
	b	Net rental income or (loss) _____				
	6a	Net gain or (loss) from sale of assets not on line 10				
	b	Gross sales price for all assets on line 6a _____				
	7	Capital gain net income (from Part IV, line 2)		0		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)				
	12	**Total.** Add lines 1 through 11	5,446	430		
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc	0	0		0
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
	16a	Legal fees (attach schedule)				
	b	Accounting fees (attach schedule)	3,440	0		3,440
	c	Other professional fees (attach schedule)				
	17	Interest				
	18	Taxes (attach schedule) (see instructions)	11	0		0
	19	Depreciation (attach schedule) and depletion	3,048	0		
	20	Occupancy				
	21	Travel, conferences, and meetings				
	22	Printing and publications				
	23	Other expenses (attach schedule)	145,243	0		145,243
	24	**Total operating and administrative expenses.** Add lines 13 through 23	151,742	0		148,683
	25	Contributions, gifts, grants paid	408,956			408,856
	26	**Total expenses and disbursements.** Add lines 24 and 25	560,698	0		557,539
	27	Subtract line 26 from line 12				
	a	**Excess of revenue over expenses and disbursements**	-555,252			
	b	**Net investment income** (if negative, enter -0-)		430		
	c	**Adjusted net income** (if negative, enter -0-)				

Part II **Balance Sheets** Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

			Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	634,048	78,696	78,696
	3	Accounts receivable ▶ 3,906			
		Less allowance for doubtful accounts ▶	789	3,906	3,906
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less allowance for doubtful accounts ▶			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges		31	31
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	c	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)			
	14	Land, buildings, and equipment basis ▶ 30,480			
		Less accumulated depreciation (attach schedule) ▶ 10,668	22,860	19,812	19,812
	15	Other assets (describe ▶)			
	16	**Total assets**(to be completed by all filers—see the instructions Also, see page 1, item I)	657,697	102,445	102,445
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	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	
Net Assets or Fund Balances		**Foundations that follow SFAS 117, check here** ▶ ☐ **and complete lines 24 through 26 and lines 30 and 31.**			
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here ▶ ☑ **and complete lines 27 through 31.**			
	27	Capital stock, trust principal, or current funds	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	657,697	102,445	
	30	**Total net assets or fund balances**(see instructions)	657,697	102,445	
	31	**Total liabilities and net assets/fund balances**(see instructions)	657,697	102,445	

Part III **Analysis of Changes in Net Assets or Fund Balances**

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	657,697
2	Enter amount from Part I, line 27a	2	-555,252
3	Other increases not included in line 2 (itemize) ▶	3	0
4	Add lines 1, 2, and 3	4	102,445
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)—Part II, column (b), line 30	6	102,445

Part IV Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr)	Date sold (d) (mo , day, yr)
1a			
b			
c			
d			
e			

	(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a				
b				
c				
d				
e				

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or (l) Losses (from col (h))
	(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
a				
b				
c				
d				
e				

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 }	2	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)
If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☑ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	292,362	821,015	0 356098
2013	354,063	1,125,599	0 314555
2012	288,494	1,376,996	0 209510
2011	168,986	914,723	0 184740
2010	59,226	985,289	0 060110

2	**Total** of line 1, column (d)	2	1 125013
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 225003
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5	4	476,414
5	Multiply line 4 by line 3	5	107,195
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	4
7	Add lines 5 and 6	7	107,199
8	Enter qualifying distributions from Part XII, line 4	8	557,539

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 the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

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 here ▶ ☑ and enter 1% of Part I, line 27b	1	4
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	0
3	Add lines 1 and 2	3	4
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	4
6	Credits/Payments		
a	2015 estimated tax payments and 2014 overpayment credited to 2015 — 6a		
b	Exempt foreign organizations—tax withheld at source — 6b		
c	Tax paid with application for extension of time to file (Form 8868) — 6c		
d	Backup withholding erroneously withheld — 6d		
7	Total credits and payments Add lines 6a through 6d	7	0
8	Enter any **penalty** for underpayment of estimated tax Check here ☐ if Form 2220 is attached	8	
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶	9	4
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶	10	
11	Enter the amount of line 10 to be **Credited to 2015 estimated tax** ▶ **Refunded** ▶	11	

Part VII-A Statements Regarding Activities

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?	1b		No
	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*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year **(1)** On the foundation ▶ $ 0 **(2)** On foundation managers ▶ $ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities*	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*	3		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T*	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • 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	Yes	
7	Did the foundation have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col (c), and Part XV*	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ _____			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? *If "No," attach explanation*	8b		No
9	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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? *If "Yes," complete Part XIV*	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses*	10		No

Part VII-A 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 ▶ N/A

14 The books are in care of ▶ SHAWN TAYLOR Telephone no ▶ (425) 440-6862

Located at ▶ 550 106TH AVENUE NE SUITE 207 BELLEVUE WA ZIP+4 ▶ 98004

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 ▶ 15

16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? 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 ▶	16		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

			Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			
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 ☑ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☑ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☑ Yes ☐ 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)? ☐ Yes ☑ 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 ☑ No			
b	If any answer is "Yes" to 1a(1)–(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	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, 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))			
a	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? ☐ Yes ☑ No			
	If "Yes," list the years ▶ 20____, 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____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☑ No			
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		
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		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required *(Continued)*

5a	During the year did the foundation pay or incur any amount to				
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes	☑ No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes	☑ No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes	☑ No		
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions)	☑ Yes	☐ No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes	☑ No		
b	If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?			5b	Yes
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐				
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	☐ Yes	☐ No		
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)				
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes	☑ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			6b	No
	If "Yes" to 6b, file Form 8870				
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes	☑ No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			7b	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week **(b)** devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	Expense account, **(e)** other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than $50,000	Title, and average hours per week **(b)** devoted to position	**(c)** Compensation	Contributions to employee benefit plans and deferred **(d)** compensation	Expense account, **(e)** other allowances
NONE				

Total number of other employees paid over $50,000 ▶ 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 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		

Total number of others receiving over $50,000 for professional services. . . . . ▶ 0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 THE IPADS FOR KIDS PROGRAM AT SEATTLE CHILDREN'S HOSPITAL LAUNCHED IN 2012 IN 2015, THE PROGRAM SERVED MORE THAN 10,000 PATIENTS WITHIN ALL INPATIENT UNITS OF THE HOSPITAL, BOTH BY LOANING CUSTOMIZED IPADS TO PATIENTS STAYING IN THE HOSPITAL, AS WELL AS PROVIDING IPADS TO HOSPITAL STAFF TO USE IN THEIR DIRECT INTERVENTIONS WITH PATIENTS HOSPITAL STAFF INCLUDES CHILD LIFE SPECIALISTS, MUSIC THERAPY, ART THERAPY, AND RECREATION THERAPY	93,709
2 THE BUNGIE FOUNDATION PURCHASED A PONTOON BOAT IN 2012 TO SOLELY BE USED BY CHARITY CHILDREN'S CAMPS AFFILIATED WITH CHILDREN'S HOSPITALS AND ASSOCIATE FOUNDATIONS IN 2015, THE BOAT WAS USED AT THE SEATTLE CHILDREN'S HOSPITAL STANLEY STAMM SUMMER CAMP FOR DISABLED AND SICK KIDS, SERVING APPROXIMATELY 150 CHILDREN	16,492
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions 3	
Total. Add lines 1 through 3 . . . . . ▶	0

Part X **Minimum Investment Return**
(All domestic foundations must complete this part. Foreign foundations,see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes			
a	Average monthly fair market value of securities		1a	0
b	Average of monthly cash balances		1b	483,669
c	Fair market value of all other assets (see instructions)		1c	0
d	**Total** (add lines 1a, b, and c)		1d	483,669
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e 0		
2	Acquisition indebtedness applicable to line 1 assets		2	0
3	Subtract line 2 from line 1d		3	483,669
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)		4	7,255
5	**Net value of noncharitable-use assets.**Subtract line 4 from line 3 Enter here and on Part V, line 4		5	476,414
6	**Minimum investment return.**Enter 5% of line 5		6	23,821

Part XI **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.)

1	Minimum investment return from Part X, line 6		1	23,821
2a	Tax on investment income for 2015 from Part VI, line 5	2a 4		
b	Income tax for 2015 (This does not include the tax from Part VI)	2b		
c	Add lines 2a and 2b		2c	4
3	Distributable amount before adjustments Subtract line 2c from line 1		3	23,817
4	Recoveries of amounts treated as qualifying distributions		4	0
5	Add lines 3 and 4		5	23,817
6	Deduction from distributable amount (see instructions)		6	0
7	**Distributable amount**as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1		7	23,817

Part XII **Qualifying Distributions** (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes			
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26		1a	557,539
b	Program-related investments—total from Part IX-B		1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the			
a	Suitability test (prior IRS approval required)		3a	
b	Cash distribution test (attach the required schedule)		3b	
4	**Qualifying distributions.**Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4		4	557,539
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)		5	4
6	**Adjusted qualifying distributions.**Subtract line 5 from line 4		6	557,535

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				23,817
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2015				
a From 2010 53,839				
b From 2011 123,332				
c From 2012 219,730				
d From 2013 297,829				
e From 2014 251,333				
f **Total** of lines 3a through e	946,063			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ $ 557,539				
a Applied to 2014, but not more than line 2a			0	
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 2015 distributable amount				23,817
e Remaining amount distributed out of corpus	533,722			
5 Excess distributions carryover applied to 2015	0			0
(If an amount appears in column (d), the same amount must be shown in column (a).)				
6 **Enter the net total of each column as indicated below:**				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,479,785			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				0
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)	0			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	53,839			
9 **Excess distributions carryover to 2016.** Subtract lines 7 and 8 from line 6a	1,425,946			
10 Analysis of line 9				
a Excess from 2011 123,332				
b Excess from 2012 219,730				
c Excess from 2013 297,829				
d Excess from 2014 251,333				
e Excess from 2015 533,722				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling. . . . . ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon **a** "Assets" alternative test—enter **(1)** Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
c "Support" alternative test—enter **(1)** Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the organization had $5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ▶ ☑ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or email address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

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

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year* See Additional Data Table				
Total . . . . . ▶ **3a**				408,856
b *Approved for future payment*				
Total . . . . . ▶ **3b**				0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments. . . .					
3 Interest on savings and temporary cash investments			14	430	
4 Dividends and interest from securities. . .					
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.					
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					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e). .		0		430	0
13 **Total.** Add line 12, columns (b), (d), and (e).				13	430

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

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

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

			Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a	Transfers from the reporting foundation to a noncharitable exempt organization of			
	(1) Cash	1a(1)		No
	(2) Other assets	1a(2)		No
b	Other transactions			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
	(3) Rental of facilities, equipment, or other assets	1b(3)		No
	(4) Reimbursement arrangements	1b(4)		No
	(5) Loans or loan guarantees	1b(5)		No
	(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No

d If the answer to any of the above is "Yes," complete the following schedule Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received

(a) Line No	(b) Amount involved	(c) Name of nonchantable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☑ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

******	2016-11-09	******
Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below (see instr)? ☑ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
KATHRYN J ONG		2016-11-08		P00746598

Firm's name ▶ CLARK NUBER

Firm's EIN ▶ 91-1194016

Firm's address ▶ 10900 NE 4TH STREET SUITE 1700 BELLEVUE, WA 98004

Phone no (425) 454-4919

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
HAROLD RYAN 550 106TH AVENUE NE SUITE 207 BELLEVUE, WA 98004	PRESIDENT 0 50	0	0	0
BRENT ABRAHAMSEN 550 106TH AVENUE NE SUITE 207 BELLEVUE, WA 98004	SECRETARY 0 50	0	0	0
ONDRAUS JENKINS 550 106TH AVENUE NE SUITE 207 BELLEVUE, WA 98004	DIRECTOR 0 50	0	0	0
PETE PARSONS 550 106TH AVENUE NE SUITE 207 BELLEVUE, WA 98004	DIRECTOR 0 50	0	0	0
ZACH RUSSELL 550 106TH AVENUE NE SUITE 207 BELLEVUE, WA 98004	DIRECTOR 0 50	0	0	0

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
ACADEMY OF AMERICAN POETS 75 MAIDEN LANE STE 901 NEW YORK,NY 10038	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	225
ADOPTTOGETHER 251 W CENTRAL AVE 278 SPRINGBORO,OH 45066	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	4,000
AGAINST MALARIA FOUNDATION 310 W 20TH ST SUITE 300 KANSAS CITY,MO 64108	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	200
ALLIANCE FOR EDUCATION 509 OLIVE WAY SUITE 500 SEATTLE,WA 981012556	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	100
ALS ASSOCIATION 1275 K STREET NW SUITE 250 WASHINGTON,DC 20005	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	250
ALS ASSOCIATION 1275 K STREET NW SUITE 250 WASHINGTON,DC 20005	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	3,058
AMERICAN DIABETES ASSOCIATION 1701 NORTH BEAUREGARD STREET ALEXANDRIA,VA 22311	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	350
AMERICAN LUNG ASSOCIATION 55 WEST WACKER DRIVE SUITE 1150 CHICAGO,IL 60601	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	740
AMERICAN REFUGEE COMMITTEE 615 1ST AVE NE SUITE 500 MINNEAPOLIS,MN 554132681	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	115
ANNA SCHINDLER FOUNDATION 6700 S STATELINE RD POST FALLS,ID 83854	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	5,000
ARCHDIOCESE OF SEATTLE 710 9TH AVE SEATTLE,WA 98104	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	617
ARTSWEST PLAYHOUSE 4711 CALIFORNIA AVE SW SEATTLE,WA 98116	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	120
ASCENDING LIGHTS LEADERSHIP NETWORK PO BOX 27790 LOS ANGELES,CA 90027	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	500
BELLEVUE FIREFIGHTERS COMMUNITY SUPPORT FOUNDATION 766 BELLEVUE WAY SE BELLEVUE,WA 98004	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	25
BELLEVUE FIREFIGHTERS COMMUNITY SUPPORT FOUNDATION 766 BELLEVUE WAY SE BELLEVUE,WA 98004	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	5,000
Total . . . . . ▶ **3a**				408,856

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
BELLEVUE SCHOOL FOUNDATION PO BOX 40644 BELLEVUE,WA 98015	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	100
BEN FRANKLIN PTA 1304 SOUTH FAWCETT AVE SUITE 300 TACOMA,WA 98402	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	50
BENNET ELEMENTARY SCHOOL 17900 NE 16TH ST BELLEVUE,WA 98008	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	200
BIG CLIMB 2015 123 NW 36TH ST 100 SEATTLE,WA 98107	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	200
BOYS & GIRLS CLUB 209 100TH AVE NE BELLEVUE,WA 98004	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	5,250
BOYS AND GIRLS CLUB 209 100TH AVE NE BELLEVUE,WA 98004	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	1,064
BREAST CANCER RESEARCH FOUNDATION 60 EAST 56TH STREET 8TH FLOOR NEW YORK,NY 10022	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	250
BUCKY BEAVER 13803 115TH AVENUE NE KIRKLAND,WA 98034	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	400
BUILDON PO BOX 16741 STAMFORD,CT 06905	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	856
BUILDON PO BOX 16741 STAMFORD,CT 06905	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	2,676
CARL SANDBURG PTSA 12801 84TH AE NE KIRKLAND,WA 98024	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	125
CASCADIANOW RAIN CITY POETRY SLAM PROJECT 4128 INTERLAKE AVE N SEATTLE,WA 98103	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	1,000
CATHOLIC COMMUNITY SERVICES 100 23RD AVENUE S SEATTLE,WA 98144	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	100
CEDAR RIVER CLINICS 106 EAST E STREET YAKIMA,WA 98901	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	375
CENTER FOR BIOLOGICAL DIVERSITY PO BOX 710 TUCSON,AZ 85702	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	1,000
Total . . . . . ▶ **3a**				408,856

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
CHAPTER 13633 SE 26TH STREET BELLEVUE,WA 98005	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	100
CHILD'S PLAY CHARITY 8040 161ST AVE NE REDMOND,WA 98052	NONE	PC 509(A) (1) OR (2)	AUCTION ITEMS	1,671
CHILD'S PLAY 8040 161ST AVE NE PMB 418 REDMOND,WA 98052	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	2,500
CHILDREN'S MIRACLE NETWORK HOSPITALS 205 W 700 S SALT LAKE CITY,UT 84101	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	300
CHIMPANZEE SANCTUARY NORTHWEST PO BOX 952 CLE ELUM,WA 98922	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	175
CLASSICAL KING FM 981 10 HARRISON STREET SUITE 100 SEATTLE,WA 98109	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	240
CODEORG 1301 5TH AVE SUITE 1225 SEATTLE,WA 98101	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	100
CONSERVATION NW 1829 10TH AVE W SUITE B SEATTLE,WA 98119	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	500
CREEKSIDE ELEMENTARY SCHOOL 20777 SE 16TH ST SAMMAMISH,WA 98075	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	150
CYSTIC FIBROSIS FOUNDATION 6931 ARLINGTON ROAD 2ND FLOOR BETHESDA,MD 20814	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	400
DEMOCRACY NOW 207 W 25TH ST FLOOR 11 NEW YORK,NY 10001	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	1,000
DESIRING GOD 2112 BROADWAY STREET NE SUITE 150 MINNEAPOLIS,MN 55413	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	150
DIRECT RELIEF 27 S LA PATERA LANE SANTA BARBARA,CA 93117	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	50
DIRECT RELIEF 27 S LA PATERA LANE SANTA BARBARA,CA 93117	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	50,000
DOCTORS WITHOUT BORDERS 333 7TH AVENUE 2ND FLOOR NEW YORK,NY 10001	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	1,150
Total . . . . . ▶ **3a**				408,856

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
DONORSCHOOSEORG 134 WEST 37TH STREET 11TH FLOOR NEW YORK,NY 10018	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	595
DONORSCHOOSEORG 134 WEST 37TH STREET 11TH FLOOR NEW YORK,NY 10018	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	515
DRUZE ORPHANS AND CHARITABLE ORG 247 WEST 38TH STREET STE 207 NEW YORK,NY 10018	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	500
EARTH JUSTICE 50 CALIFORNIA STREET SUITE 500 SAN FRANCISCO,CA 94111	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	1,100
EAST BAY SANCTUARY COVENANT PO BOX 4670 BERKELEY,CA 94704	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	1,000
EASTSIDE BABY CORNER 1510 NW MAPLE ST PO BOX 712 ISSAQUAH,WA 98027	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	240
ELECTRONIC FRONTIER FOUNDATION 815 EDDY STREET SAN FRANCISCO,CA 94109	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	1,300
EMFOZZING ENTERPRISES INC 510 LAKE BLVD 161 DAVIS,CA 95616	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	500
EVERGREEN HEALTH FOUNDATION 12040 NE 128TH STREET MS-5 KIRKLAND,WA 98034	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	150
EXTRA LIFE 205 W 700 S SALT LAKE CITY,UT 84101	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	100
FAIR - FAIRNESS AND ACCURACY IN REPORTING 124 WEST 30TH STREET SUITE 201 NEW YORK,NY 10001	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	500
FESTIVAL OF TREES AUTISM GUILD 7900 SE 28TH STREET MERCER ISLAND,WA 98040	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	2,480
FESTIVAL OF TREES AUTISM GUILD 7900 SE 28TH STREET MERCER ISLAND,WA 98040	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	22,550
FOOD LIFELINE 1702 NE 150TH ST SHORELINE,WA 98155	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	100
FOSTER KINSHIP 11833 ORENSE DR LAS VEGAS,NV 89138	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	1,100
Total . . . . . ▶ **3a**				408,856

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
FRED HUTCHINSON CANCER RESEARCH CENTER PO BOX 19024 J5-200 SEATTLE,WA 981091024	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	320
FRED HUTCHINSON CANCER RESEARCH CENTER PO BOX 19024 J5-200 SEATTLE,WA 981091024	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	15,180
FREEHOLD THEATER LAB 2222 2ND AVE STE 200 SEATTLE,WA 98121	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	600
GEORGIA TECH ALUMNI ASSOCIATION 190 NORTH AVE NW ATLANTA,GA 303132550	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	150
GOSPEL FOR ASIA 1116 ST THOMAS WAY WILLS POINT,TX 75169	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	3,184
GRAND RIDGE ELEMENTARY PTSA 1739 NE PARK DRIVE ISSAQUAH,WA 98029	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	100
GSBA SCHOLARSHIP 400 EAST PINE STREET SUITE 322 SEATTLE,WA 98122	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	257
HABITAT FOR HUMANITY SEATTLE-KING COUNTY 560 NACHES AVE SW SUITE 110 RENTON,WA 98057	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	100
HOLY FAMILY PARISH SCHOOL 7300 120TH AVENUE NE KIRKLAND,WA 98033	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	5,050
HOME AT LAST PROJECT INC PO BOX 884 OAKLAND,FL 34760	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	500
HOMEWARD PET PO BOX 2293 WOODINVILLE,WA 98072	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	200
HOPELINK PO BOX 3577 REDMOND,WA 980733577	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	2,523
HUMANE SOCIETY OF THE UNITED STATES 2100 L STREET NW WASHINGTON,DC 20037	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	125
INTERNATIONAL RESCUE COMMITTEE 122 EAST 42ND STREET NEW YORK,NY 10168	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	1,000
INTERNATIONAL RHINO FOUNDATION 201 MAIN STREET SUITE 2600 FORT WORTH,TX 76102	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	100
Total . . . . . ▶ **3a**				408,856

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
ISSAQUAH FOOD AND CLOTHING BANK 179 1ST AVE SE ISSAQUAH,WA 98027	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	5
ISSAQUAH SCHOOLS FOUNDATION PO BOX 835 ISSAQUAH,WA 98027	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	240
JUBILEE WOMEN'S CENTER 620 18TH AVE E SEATTLE,WA 98112	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	500
KCTS 9 TELEVISION 401 MERCER STREET SEATTLE,WA 98109	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	120
KEXP 113 DEXTER AVE N SEATTLE WA 98109 SEATTLE,WA 98102	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	121
KHAN ACADEMY PO BOX 1630 MOUNTAIN VIEW,CA 94042	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	500
KUOW 4518 UNIVERSITY WAY NE SUITE 310 SEATTLE,WA 98105	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	1,100
MAKE-A-WISH FOUNDATION 811 1ST AVE 520 SEATTLE,WA 98104	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	250
MAKE-A-WISH FOUNDATION 811 1ST AVE 520 SEATTLE,WA 98104	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	36,845
MAKE-A-WISH FOUNDATION 811 1ST AVE 520 SEATTLE,WA 98104	NONE	PC 509(A) (1) OR (2)	HOSTING SICK CHILDREN AND FULFILLING WISHES	67,712
MAKING HEADWAY FOUNDATION 115 KING STREET CHAPPAQUA,NY 10514	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	1,000
MANOS UNIDAS INTERNATIONAL 21023 33RD DR SE BOTHELL,WA 98021	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	1,455
MANOS UNIDAS INTERNATIONAL 21023 33RD DR SE BOTHELL,WA 98021	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	3,148
MERCY CORPS PO BOX 2669 DEPT W PORTLAND,OR 97208	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	1,000
MOUNTAINS TO SOUND GREENWAY 911 WESTERN AVE SUITE 203 SEATTLE,WA 98104	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	50
Total . . . . . ▶ **3a**				408,856

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MOVEMBER FOUNDATION PO BOX 1595 CULVER CITY,CA 90232	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	202
NATIONAL MULTIPLE SCLEROSIS SOCIETY 192 NICKERSON ST SUITE 100 SEATTLE,WA 98109	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	874
NEW CENTURY THEATRE COMPANY 1515 12TH AVE STE A SEATTLE,WA 98122	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	500
NEW YORK PUBLIC RADIO 160 VARICK STREET NEW YORK,NY 10013	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	100
NORTHWEST HARVEST PO BOX 12272 SEATTLE,WA 98102	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	100
NORTHWEST SCHOONER SOCIETY PO BOX 75421 SEATTLE,WA 98175	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	200
OPEN WINDOW SCHOOL 6128 168TH PLACE SE BELLEVUE,WA 98006	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	300
OPERATION SACK LUNCH PO BOX 4128 SEATTLE,WA 98194	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	150
OUTREACH AND RESOURCE SERVICES FOR WOMEN VETERANS PO BOX 30857 SEATTLE,WA 98113	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	50
PACIFIC SCIENCE CENTER 200 SECOND AVE N SEATTLE,WA 98109	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	1,200
PANTHERA 8 WEST 40TH STREET 18TH FLOOR NEW YORK,NY 10018	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	1,000
PHINNEY NEIGHBORHOOD ASSOCIATION 6532 PHINNEY AVE N SEATTLE,WA 98103	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	300
PINE LAKE MIDDLE SCHOOL 3200 228TH AVE SE SAMMAMISH,WA 98075	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	150
PIONEERS 10123 WILLIAM CAREY DR ORLANDO,FL 32832	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	900
PLANNED PARENTHOOD FEDERATION OF AMERICA INC 434 WEST 33RD STREET NEW YORK,NY 10001	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	1,200
Total . . . . . ▶ **3a**				408,856

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
POLAR PLUNGE - SPECIAL OLYMPICS MINNESOTA 100 WASHINGTON AVENUE SOUTH SUITE 550 MINNEAPOLIS,MN 55401	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	50
PREVENT CANCER FOUNDATION 1600 DUKE STREET SUITE 500 ALEXANDRIA,VA 22314	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	150
REACH COMMUNITY CHURCH 3502 NE 124TH ST KIRKLAND,WA 98034	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	9,530
RICHMOND SPCA 2519 HERMITAGE ROAD RICHMOND,VA 23220	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	25
RONALD MCDONALD HOUSE CHARITIES 5130 40TH AVE NE SEATTLE,WA 98105	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	400
RONALD MCDONALD HOUSE CHARITIES 5130 40TH AVE NE SEATTLE,WA 98105	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	34,575
SEATTLE ARTS AND LECTURES 205 S FINDLAY STREET SEATTLE,WA 98018	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	285
SEATTLE CANCER CARE ALLIANCE PO BOX 19023 SEATTLE,WA 981091023	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	60
SEATTLE CHILDREN'S HOSPITAL 4800 SAND POINT WAY NE SEATTLE,WA 98105	NONE	PC 509(A) (1) OR (2)	EQUIPMENT DONATIONS TO AUTISM CENTER	14,956
SEATTLE CHILDREN'S HOSPITAL PO BOX 5371 SEATTLE,WA 98145	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	11,383
SEATTLE CHILDREN'S HOSPITAL PO BOX 5371 SEATTLE,WA 98145	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	30,000
SEATTLE GOSPEL UNION MISSION PO BOX 202 SEATTLE,WA 98111	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	240
SEATTLE HUMANE SOCIETY 13212 SE EASTGATE WAY BELLEVUE,WA 98005	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	110
SEATTLE SEAHAWKS WOMEN'S ASSOCIATION 12 SEAHAWKS WAY RENTON,WA 98056	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	180
SEATTLE SHAKESPEARE COMPANY PO BOX 19595 SEATTLE,WA 98109	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	4,065
Total . . . . . ▶ **3a**				408,856

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
SHARE OUR STRENGTH NO KID HUNGRY 1730 M STREET NW WASHINGTON,DC 20036	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	250
SIERRA CLUB FOUNDATION 85 SECOND STREET SUITE 750 SAN FRANCISCO,CA 94105	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	600
SOLID GROUND 1501 N 45TH ST SEATTLE,WA 981036708	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	612
SPARROW FOUNDATION - HARRISON MAMMOGRAPHY ENDOWMENT 1215 E MICHIGAN AVE LANSING,MI 48912	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	75
SPECIAL BUNNY 32047 NE 94TH ST CARNATION,WA 98014	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	60
SPIRITRIDGE ELEMENTARY PTSA 16401 SE 24TH STREET BELLEVUE,WA 98008	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	100
ST JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS,TN 38105	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	60
STANWOOD CAMANO ROTARY FOUNDATION PO BOX 1754 STANWOOD,WA 98292	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	1,047
STEP BY STEP PO BOX 488 MILTON,WA 98354	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	110
SUSANNAH WHITE'S THREE FEET OF SUNSHINE 3421 W LAURELHURST DRIVE NE SEATTLE,WA 98105	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	100
TAKE ME HOME PET RESCUE 561 W CAMPBELL ROAD SUITE 303 RICHARDSON,TX 75080	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	500
TEENTIX 305 HARRISON STREET SEATTLE,WA 98109	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	226
THE AMERICAN CANCER SOCIETY 250 WILLIAMS STREET NW ATLANTA,GA 30303	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	100
THE AMERICAN RED CROSS AMERICAN RED CROSS NATIONAL HEADQUARTERS 2025 E STREET NW WASHINGTON,DC 20006	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	680
THE CHURCH OF JESUS CHRIST OF LATTER-DAY SAINTS CORPORATION OF THE PRESIDENT 50 E NORTH TEMPLE ROOM 1521 SALT LAKE CITY,UT 84150	NONE	PC 509(A)(1) OR (2)	GENERAL SUPPORT	4,425
Total . . . . . ▶ **3a**				408,856

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
THE EVERGREEN STATE COLLEGE FOUNDATION 2700 EVERGREEN PKY NW L1113 OLYMPIA,WA 985050001	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	100
THE LEUKEMIA & LYMPHOMA SOCIETY 1311 MAMARONECK AVENUE SUITE 310 WHITE PLAINS,NY 10605	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	800
THE NOAH CENTER 31300 BRANDSTROM ROAD STANWOOD,WA 98292	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	1,000
THE RIGHT QUESTION INSTITUTE INC VIA NETWORK FOR GOOD 1140 CONNECTICUT AVENUE NW SUITE 700 WASHINGTON,DC 20036	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	100
THE SEATTLE PUBLIC LIBRARY FOUNDATION 1000 FOURTH AVE SEATTLE,WA 98104	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	100
TICKET TO DREAM FOUNDATION PO BOX 7070 CITRUS HEIGHTS,CA 95621	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	200
UNHCR 1775 K STREET NW SUITE 290 WASHINGTON,DC 20006	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	100
UNICEF USA 125 MAIDEN LANE NEW YORK,NY 10038	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	1,100
UNION OF CONCERNED SCIENTISTS 2 BRATTLE SQUARE CAMBRIDGE,MA 02138	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	1,000
UNITED WAY 720 2ND AVE SEATTLE,WA 98104	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	500
US FRIENDS OF DAVID SHELDRICK WILDLIFE TRUST 201 NORTH ILLINOIS STREET 16TH FLOOR - SOUTH TOWER INDIANAPOLIS,IN 46204	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	500
USA FOR UNHCR 50 KENT STREET BROOKLYN,NY 11222	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	195
WASHINGTON ENVIRONMENTAL COUNCIL 402 3RD AVE STE 1400 SEATTLE,WA 981012179	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	100
WASHINGTON TRAILS ASSOCIATION 705 SECOND AVE STE 300 SEATTLE,WA 98104	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	1,000
WHITTIER PTA SEATTLE COUNCIL 1320 NW 75TH ST SEATTLE,WA 98117	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	100
Total . . . . . ▶ **3a**				408,856

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
WIKIMEDIA FOUNDATION INC 149 NEW MONTGOMERY 3RD FLOOR SAN FRANCISCO,CA 94105	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	560
WORLD VISION 34834 WEYERHAEUSER WAY SOUTH FEDERAL WAY,WA 980639716	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	5,017
WORLD WILDLIFE FUND 1250 24TH STREET NW WASHINGTON,DC 20037	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	155
WORLDBUILDERS PO BOX 186 STEVENS POINT,WI 54481	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	102
WWF 1250 24TH STREET NW WASHINGTON,DC 20037	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	100
YEAR UP 2607 2ND AVE SEATTLE,WA 98121	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	250
YEAR UP 2607 2ND AVE SEATTLE,WA 98121	NONE	PC 509(A) (1) OR (2)	GENERAL SUPPORT	5,000
Total . . . . . ▶ **3a**				408,856

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TY 2015 Accounting Fees Schedule

Name: THE BUNGIE FOUNDATION

EIN: 27-2313989

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	3,440	0		3,440

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Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2015 Depreciation Schedule

Name: THE BUNGIE FOUNDATION

EIN: 27-2313989

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
PONTOON BOAT	2012-07-01	30,480	7,620	SL	10 000000000000	3,048	0		

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TY 2015 Explanation of Non-Filing with Attorney General Statement

Name: THE BUNGIE FOUNDATION

EIN: 27-2313989

Statement: WASHINGTON STATE REQUIRES FILING FOR PRIVATE FOUNDATIONS WHEN INVESTMENT ASSETS ARE $250,000 OR GREATER. SINCE THE BUNGIE FOUNDATION ONLY HOLDS CASH AND ACCOUNTS RECEIVABLE, IT IS BELOW THIS FILING THRESHOLD. AS A RESULT, NO FILING IS REQUIRED WITH THE STATE THIS YEAR.

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TY 2015 Land, Etc. Schedule

Name: THE BUNGIE FOUNDATION

EIN: 27-2313989

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
PONTOON BOAT	30,480	10,668	19,812	

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TY 2015 Other Expenses Schedule

Name: THE BUNGIE FOUNDATION

EIN: 27-2313989

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROGRAM ACTIVITIES	19,270	0		19,270
INSURANCE	9,393	0		9,393
MISCELLANEOUS	14,972	0		14,972
STAFFING	101,608	0		101,608

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TY 2015 Taxes Schedule

Name: THE BUNGIE FOUNDATION

EIN: 27-2313989

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	11	0		0

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Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

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*

OMB No 1545-0047

2015

Name of the organization
THE BUNGIE FOUNDATION

Employer identification number
27-2313989

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 private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

☑ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

☐ 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, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children 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 If 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 THE BUNGIE FOUNDATION

Employer identification number 27-2313989

Part I **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BUNGIE INC 550 106TH AVE NE STE 207 BELLEVUE, WA 98004	$ 5,016	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Name of organization THE BUNGIE FOUNDATION

Employer identification number 27-2313989

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
		$	
(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
		$	

Name of organization
THE BUNGIE FOUNDATION

Employer identification number
27-2313989

Part III *Exclusively* **religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of** ***exclusively*** **religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this information once. See instructions.) ▶ $**

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			

(e) Transfer of gift

Transferee's name, address, 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
-			

(e) Transfer of gift

Transferee's name, address, 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
-			

(e) Transfer of gift

Transferee's name, address, 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
-			

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee