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Form 990-PF

For calendar year 2015 or tax year beginning

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 separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Na	me of	foundation			Α	Employe	er identification numb	er					
AS.	ASAM CHARITABLE TRUST Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions)												
			s)	Room	/suite B	Telephor	ne number (see instruc	tions)					
45	45	169TH AVE SE					•	•					
		own, state or province, country, and ZIP or foreign postal code			С	If exemp	tion application is pend	ing, check here					
		EVUE, WA 98006											
G		eck all that apply Initial return Initial return of a fo	ormer public chari	ty	D 1. Foreign organizations, check here								
		Final return Amended return		2. Foreign organizations meeting the 85% test,									
		Address change Name change					there and attach comp	· —					
Н	Che	eck type of organization X Section 501(c)(3) exempt private found	ation			E If private foundation status was terminated under							
	Sec	ction 4947(a)(1) nonexempt chantable trust Other taxable priva				•	ioundation status was io7(b)(1)(A), check here	. —					
<u> </u>	<u></u>	r market value of all assets at J Accounting method X Cash	Accrual					_					
•		of year (from Part II, col (c), Other (specify)					ndation is in a 60-mont ction 507(b)(1)(B), che	. —					
		16) > \$ 58,408. Part I, column (d) must be on cash be	asis)					S					
Pa		Analysis of Revenue and Expenses (The total of	T ·		(h) Not m.m.		(a) Advistad and	(d) Disbursements					
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue a expenses		(b) Net inve		(c) Adjusted net income	for chantable					
		the amounts in column (a) (see instructions))	books	P			moomo	purposes					
35	0`1	Contributions, gifts, grants, etc., received (attach schedule)	47,3	50	, ,			(cash basis only)					
Sun	2	Check ▶ ☐ If the foundation is not required to attach Sch B	21,3.		· · · · · · · · · · · · · · · · · · ·	-	· · · · · · · · · · · · · · · · · · ·						
	3	Interest on savings and temporary cash investments	(* * ,	2.	<u> </u>								
7≈7° €(*	4	Dividends and interest from securities	Ω'	<u>78.</u>									
<u>`</u> .	5 2	Gross rents		<i>7</i>									
12		Net rental income or (loss)	1	4	- ,	ν,		<u>'</u>					
ا ق َ		Net gain or (loss) from sale of assets not on line 10			5. 整建	, , ,	;;						
Revenue		Gross sales price for all assets on line 6a		,				,					
. Ø		Capital gain net income (from Part IV, line 2)	119900000000000000000000000000000000000										
2	8	Net short-term capital gain	17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		100	L60.							
53	٥	Income modifications	は一個などの	- Car			160.						
5	10 -	Gross sales less returns and allowances	14640.75%		1 1 7 2 7								
			" engineers "	, _{Fe}		V (,					
		Less Cost of goods sold Gross profit or (less) (attach schodule)	4		`	-							
		Gross profit or (loss) (attach schedule) Other income (attach schedule)					-						
	12	•	48,2	20		160	1.60						
\dashv	13	Total. Add lines 1 through 11	40,2.	<u> </u>	-	160.	160.						
	14	Compensation of officers, directors, trustees, etc						· · · · · · · · · · · · · · · · · · ·					
S	15	Other employee salaries and wages											
Expenses		Pension plans, employee benefits											
ē.		Legal fees (attach schedule)											
Щ		Accounting fees (attach schedule)											
. <u>\$</u>	17	Other professional fees (attach schedule)					· ············· ·						
fra	18	Taxes (attach schedule) (see instructions)	-										
iri	19	Depreciation (attach schedule) and depletica 16	<u> </u>										
돌	20												
ξ	21	Occupancy Travel, conferences, and meetings	-		-								
ä	22							<u> </u>					
Operating and Administrative	23	Printing and publications Other expenses (attach schedule)	<u> </u>				<u> </u>						
ī	24	Total operating and administrative expenses.						·					
윤	~~	Add lines 13 through 23											
-	25	Contributions, gifts, grants paid .					· · · · ·	25 606					
	26	Total expenses and disbursements. Add lines 24 and 25						35,606.					
\dashv	27	Subtract line 26 from line 12	,		 			35,606.					
		Excess of revenue over expenses and disbursements	40 0	3 V	<u> </u>								
		Net investment income (if negative, enter -0-)	48,2	<u> 30 ·</u>	! .	160	·						
		Adjusted net income (if negative, enter -0-)		* ,	ļ <u>:</u>	160.	1.00						
For		work Reduction Act Notice, see instructions.			l		160.	Form 990-PF(2015)					

P



Pa	rt II	Balance Sheets Attach schedules and amounts in the description column	s in the description column Begin					End o	of year	
		should be for end-of-year amounts only (See instructions.)	(a)	Book V	alue	(b)	Book Valu	ue	(c) Fair Market Value	
	1	Cash – non-interest-bearing		1	,740.		5,9	86.	5,986.	
	2	Savings and temporary cash investments .		5	,401.		4,9	01.	4,901.	
	3	Accounts receivable						,	1	
		Less allowance for doubtful accounts ▶								
	4	Pledges receivable ▶	1							
		Less allowance for doubtful accounts ▶	<u> </u>							
	5	Grants receivable								
	6	Receivables due from officers, directors, trustees, and other							_	
		disqualified persons (attach schedule) (see instructions)	l							
	7	Other notes and loans receivable (attach schedule) ▶								
		Less allowance for doubtful accounts ▶								
ţ	8	Inventories for sale or use								
Assets	9	Prepaid expenses and deferred charges								
Ą	10a	Investments – U S and state government obligations (attach schedule)								
	b	Investments – corporate stock (attach schedule)		39	,422.		47,5	21.	47,521.	
	С	Investments – corporate bonds (attach schedule)								
	11	Investments – land, buildings, and equipment basis ▶	7, "	•-						
		Less accumulated depreciation (attach schedule)						-		
	12	Investments – mortgage loans								
	13	Investments – other (attach schedule)								
	14	Land, buildings, and equipment basis ▶	1	-				_		
		Less accumulated depreciation (attach schedule) ▶								
	15	Other assets (describe	<u> </u>							
	16	Total assets (to be completed by all filers – see the instructions Also,	+							
		see page 1, item I)		46	,563.		58,4	റെ	58,408.	
	17	Accounts payable and accrued expenses .	†···		,	-	<u> </u>	-	507100.	
<i>(</i> 0	18	Grants payable .			•					
Liabilities	19	Deferred revenue								
Ξ	20	Loans from officers, directors, trustees, and other disqualified persons							,	
ap	21	Mortgages and other notes payable (attach schedule)	-					-	τ	
	22	Other liabilities (describe							20 (20 (20 (20 (20 (20 (20 (20 (20 (20 (
	23	Total liabilities (add lines 17 through 22)							Account	
_		Foundations that follow SFAS 117, check here							!	
Balances		and complete lines 24 through 26 and lines 30 and 31.								
2	24	Unrestricted		46	,563.		58,4	nα	_	
<u>=</u>	25	Temporarily restricted			<u>, 505 .</u>		<u> </u>	00.		
	26	Permanently restricted .							İ	
D D	~ ~	Foundations that do not follow SFAS 117, check here							1	
Fun		and complete lines 27 through 31.							b	
ō	27	Capital stock, trust principal, or current funds								
Š	28	Paid-in or capital surplus, or land, bldg, and equipment fund	\vdash						•	
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds		46	,563.		58,4	00	-	
AS	30	Total net assets or fund balances (see instructions)			, 563 . , 563 .		58,4			
ë	31	Total liabilities and net assets/fund balances	<u> </u>	- 40	, 303.		J0,4	08.		
Ž	"	(see instructions)		46	,563.		58,4	00		
Р	art I	· · · · · · · · · · · · · · · · · · ·		-10	, 303.		J0 , 4	00.		
1		tal net assets or fund balances at beginning of year – Part II, column (a), line 30		aaroo	with and a	of woor				
'		arrier assets or fund barances at beginning or year – Part II, column (a), line 30 are reported on prior year's return)	o (must	ayree	with GUG-C	n-year			16 562	
2	_	ter amount from Part I, line 27a						1	46,563.	
3								2	48,230.	
4		ner increases not included in line 2 (itemize)						3	04 700	
5		d lines 1, 2, and 3						4	94,793.	
6	-	creases not included in line 2 (iternize) tal net assets or fund balances at end of year (line 4 minus line 5) – Part II, colu	ıma /h\	line 2	n			5	04 703	
	. 10	tal net access or fame balances at end of year fine 4 fillings line 5) - Part II, cold	лин (D)	, mie 3				6	94,793. Form 990-PF(2015)	
UYA									rom 330-F F (2015)	

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Form 990-PF (2015) ASAM CHARITABLE TRUST

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Part VI	Excise Tax Based on Investment Income (Section 4940)	2) 4940	(h) 4940(a)	4	~ 4 ^	622	-		
1a ⊟		aj, 7370	<u>/(D/, +3+0(C/, </u>	or 4	948 -	see i	nstr	uctio	ons)
	exempt operating foundations described in section 4940(d)(2), check here	and enter "	'N/A" on line 1	$\overline{}$	1				$\overline{}$
D	Date of ruling or determination letter (attach copy of letter if nec	essary -	see instructions)	-	-			[
b C	comestic foundations that meet the section 4940(e) requirements in Part V, check			\ \ \	1				2.
h	ere ▶ X and enter 1% of Part I, line 27b			(
c A	Il other domestic foundations enter 2% of line 27b Exempt foreign organizations en	ter 4% of		J	<u> </u>				
Р	art I, line 12, col (b)								
2 T	ax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations o	nly Other	s enter -0-)		2				
3 A	dd lines 1 and 2				3				2.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations of		s enter -0-)		4				
5 T	ax based on investment income. Subtract line 4 from line 3 If zero or less, enter	r -0 -			5				2.
	Credit/Payments			1					Ì
	015 estimated tax payments and 2014 overpayment credited to 2015	6a				Ī			1
	xempt foreign organizations - tax withheld at source	6b]		•		
сТ	ax paid with application for extension of time to file (Form 8868)	6c]	-			
d B	ackup withholding erroneously withheld	6d							
7 T	otal credits and payments. Add lines 6a through 6d		•		7				
8 E	inter any penalty for underpayment of estimated tax. Check here 🔲 if Form 2220	ıs attache	d		8				
9 T	ax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	-		•	9				2
	overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount over	rpaid			10				0
	inter the amount of line 10 to be Credited to 2016 estimated tax		Refunded	•	11				0
Part V									
1a D	ouring the tax year, did the foundation attempt to influence any national, state, or loca	al legislatio	n or did it particip	ate or				Yes	No
	ntervene in any political campaign?						1a		X
	old it spend more than \$100 during the year (either directly or indirectly) for political p	ourposes (see Instructions f	or the					
	efinition)?				•	Ļ	1b		X
lf	the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and o	copies of a	any matenals pub	lished	or				
d	istributed by the foundation in connection with the activities								J
	old the foundation file Form 1120-POL for this year?	•				L	1 c		X
d E	inter the amount (if any) of tax on political expenditures (section 4955) imposed during	ng the yea	r						
=	1) On the foundation ▶ \$ (2) On foundation manage	_				. [
	nter the reimbursement (if any) paid by the foundation during the year for political ex	φenditure	tax imposed on fo	ounda	tion	1			
	nanagers > \$					1			
	las the foundation engaged in any activities that have not previously been reported to	the IRS?				Ļ	2		X
	"Yes," attach a detailed description of the activities								İ
	las the foundation made any changes, not previously reported to the IRS, in its gove	-							
ır	ncorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed c	opy of cha	anges			1	3		<u>X</u>
	hid the foundation have unrelated business gross income of \$1,000 or more during the	he year?				Ļ	4a		_X_
	"Yes," has it filed a tax return on Form 990-T for this year?					ļ	4b		
	Vas there a liquidation, termination, dissolution, or substantial contraction during the	уеаг?					5		X
	"Yes," attach the statement required by General Instruction T								
6 A	re the requirements of section 508(e) (relating to sections 4941 through 4945) satis	fied either							! !
	By language in the governing instrument, or								1
	By state legislation that effectively amends the governing instrument so that no many	andatory d	irections that con	flict					- 1
	with the state law remain in the governing instrument?					-	6		<u> </u>
	old the foundation have at least \$5,000 in assets at any time during the year? If "Yes			and P	art XV	' -	7	X	
	inter the states to which the foundation reports or with which it is registered (see ins	tructions)	•						
_	IA								i
	the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF	to the Atto	rney General (or o	tesign	ate) of			· <u></u> -	لـــا
	ach state as required by General Instruction G? If "No," attach explanation .					-	8b	X	 ,
	s the foundation claiming status as a private operating foundation within the meaning) for	-			<u></u> -
	alendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XI	v)7 If "Ye	es," complete Par	XIV		ļ	9		<u> </u>
	old any persons become substantial contributors during the tax year? f "Yes," attach a schedule listing their names and addresses.						4.5		
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Par	VII-A Statements Regarding Activities (continued)	1.	•	<u>,</u>		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning				Yes	No
	of section 512(b)(13)? If "Yes," attach schedule (see instructions)			11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified pers	on				
	had advisory privileges? If "Yes," attach statement (see instructions)			12		_X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applications.	ition?		13	_X	<u> </u>
	Website address ▶					
14	The books are in care of ▶ Andrew T. Chang Telephone no			31	71	
4-		+4 ▶ <u>98</u>	006			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		1	•)	▶ ∐
40	and enter the amount of tax-exempt interest received or accrued during the year	▶ _	15		Γ	T
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority				Yes	No
	over a bank, securities, or other financial account in a foreign country?		-	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes."					1
Dar	enter the name of the foreign country VII-B Statements Regarding Activities for Which Form 4720 May Be Require			<u></u>		<u> </u>
r ai	3	ea		1		T
1a	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
Ia	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or explanate or leaving of preparty with a discussified access?	□v	₽			l
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	∐ Yes	X No			1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	□v	X No		Ι,	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	∐ Yes	X No	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	∐ Yes	X No	,		ł
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	∐ Yes	▼ NO			
	the benefit or use of a disqualified person?	□v _{aa}	X No		, i	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	∐ Yes	₩ NO			
	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)	. Tyes	X No	l		
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regular	_	₩ MO			
•	section 53 4941(d)-3 or in a current notice regarding disaster assitance (see instructions)?	110115		1b		<u>-</u>
	Organizations relying on a current notice regarding disaster assitance check here		. 🗆	in.		ŀ
С	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	-	x
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	•				
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
а	At the end of the tax year 2015, did the foundation have any undistributed income (lines 6d and					i
	6e, Part XIII) for tax year(s) beginning before 2015?	Yes	X No			
	If "yes," list the years ▶	□.00	[22] 110			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)					į
	(relating to incorrect valuation of assets) to the year's undistributed income? (If appying section 4942(a)(2) to					
	all years listed, answer "No" and attach statement - see instructions)			2b	-	x
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			-==		
	b					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise					ŀ
	at any time during the year?	□Yes	X No			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or					1
	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				1	
	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	~	

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?

4a

3b

4a

4b

Part	VIII Statements Regarding Activitie	s for Which Form	4/20 May Be F	kequired (cont	inued)			
5a	During the year did the foundation pay or incur any amou	nt to						
	(1) Carry on propaganda, or otherwise attempt to influen	ce legislation (section 4	945(e))?	Yes	X No			,
	(2) Influence the outcome of any specific public election	(see section 4955), or t	o carry on,					
	directly or indirectly, any voter registration drive?			Yes	X No			
	(3) Provide a grant to an individual for travel, study, or of	her sımılar purposes?		Yes	X No			,
	(4) Provide a grant to an organization other than a charit	able, etc , organization o	lescribed in	_	_			,
	section 4945(d)(4)(A)? (see instructions)	•	•	Yes	X No			
	(5) Provide for any purpose other than religious, charitat	ole, scientific, literary, or	educational	_	_			
	purposes, or for the prevention of cruelty to children		•	L_] Yes	X No			·
b	If any answer is "Yes" to 5a(1)-(5), did any of the transa			cribed in		_	-~ -	ا ا
	Regulations section 53 4945 or in a current notice regard	•	•			5b		
	Organizations relying on a current notice regarding disas			•	Ш			'
С	If the answer is "Yes" to question 5a(4), does the founda	•	m the tax		—			
	because it maintained expenditure responsibility for the g	•		∐Yes	∐No			
•	If "Yes," attach the statement required by Regulations si	• •						
6a	Did the foundation, during the year, receive any funds, di	rectly or indirectly, to par	y premiums	Пv	₩			1
	on a personal benefit contract?	the or indicable on a non-	anal hanafit santus	∐Yes	X No		-	· '
b	Did the foundation, during the year, pay premiums, direct If "Yes" to 6b, file Form 8870	ny or morrecuy, on a per	sonai beneni contrac	,		6b		
7a	At any time during the tax year, was the foundation a part	ty to a prohibited tay she	Iter transaction?	Yes	X No		-	-
b	If "Yes," did the foundation receive any proceeds or have			_	22 110	7b		- '
	t VIII Information About Officers, Dir				v Paid		ove	<u></u>
	and Contractors				•	•	•	•
1	List all officers, directors, trustees, foundation man	agers and their compe	nsation (see instru	ctions).				
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions employee benefit		(e) Expe		
		devoted to position	enter -0-)	and deferred compe		other	allowai	nces
And		Trustee			İ			
	169th Ave SE Bellevue, WA 98006	04.00						
	ıa S Chang	Trustee			{			
4545	169th Ave SE Bellevue, WA 98006	04.00						
2	Compensation of five highest-paid employees (other	r than those included	on line 1 - see inst	nuctions) If none				
2	"NONE."	a than those included	OII IIII 1 - 200 III SE	actions). It none,	enter			
(a) N	ame and address of each employee paid more than \$50,000	(b) Title, and average	(c) Compensation	(d) Contributions	to	(e) Expe	ense ac	count
(-)	,	hours per week devoted to position	(-,	employee benefit and deferred compe			allowa	
		'						
					-			
		<u></u>					_	
			-					
	· · · · · · · · · · · · · · · · · · ·							
		<u></u>						
ratal :	number of other employees paid over \$50,000	L	L	L	_			
otal	iditiber of other employees paid over \$50,000				<u> </u>		00 DE	

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	hest-paid independent contractors for professional services (see instruc	tions). If none, enter "NONE."	
(a) Name and	address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
			
otal number of	others receiving over \$50,000 for professional services .		>
Part IX-A	Summary of Direct Charitable Activities		
rait IA-A	Summary of Direct Chantable Activities	<u> </u>	
List the foundati	on's four largest direct chantable activities during the tax year. Include relevant statistical id other beneficiaries served, conferences convened, research papers produced, etc	information such as the number of	Expenses
1			
			-
-			-
2			
			_
3			-
			–
4			
4			-
-			- }
Part IX-B	Summary of Program-Related Investments (see instru	ctions)	<u>-</u>
Describe the tw	o largest program-related investments made by the foundation during the tax year on line	es 1 and 2	Amount
1			_
			_
2			-
			-
	. I. I. and the safe of the sa		
All other progra	m-related investments. See instructions		
All other progra	m-related investments. See instructions		

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Form 990-PF (2015) ASAM CHARITABLE TRUST

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Part			
	see instructions)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes	£30	
а	Average monthly fair market value of securities	1a	47,856.
b	Average of monthly cash balances	1b	9,864.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	57,720.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	, 6 3 × 1	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	57,720.
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see instructions)	4	9,684.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	48,036.
6	Minimum investment return. Enter 5% of line 5	6	2,402.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operand certain foreign organizations check here ▶ ☐ and do not complete this part.	•	tions
1	Minimum investment return from Part X, line 6	1	2,402.
2a	Tax on investment income for 2015 from Part VI, line 5 . 2a	2.	
b	Income tax for 2015 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	2.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	2,400.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	2,400.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	2,400
Part	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	17.00	
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26.	1a	35,606
b	Program-related investments – total from Part IX-B	1b	
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		
а	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	35,606

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

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of

Form 990-PF(2015)

35,604.

5

Part I, line 27b (see instructions)

section 4940(e) reduction of tax in those years

Adjusted qualifying distributions. Subtract line 5 from line 4

Part	XIII Undistributed Incom-	e (see instruction	is)			
			(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from	Part XI,	Corpus	Years prior to 2014	2014	2015
	line 7					2,400.
2	Undistributed income, if any, as of t	he end of 2015	1.			
а	Enter amount for 2014 only .					1
b	Total for prior years		*			
3	Excess distributions carryover, if an	y, to 2015	•			
а	From 2010			-		
b	From 2011 .		,			
С	From 2012			ľ		
d	From 2013					
θ	From 2014					
f	Total of lines 3a through e.					
4	Qualifying distributions for 2015 from	m Part XII,				
	line 4 ▶ \$35,606.	_			. =	
а	Applied to 2014, but not more than I	ine 2a	, ,			
b	Applied to undistributed income of p	orior years				
	(Election required - see instructions)				
C	Treated as distributions out of corpu	us (Election				
	required - see instructions)					
d	Applied to 2015 distributable amour	nt				
e	Remaining amount distributed out o	f corpus .	35,606.			
5	Excess distributions carryover appli-	ed to 2015				
	(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:					
а	Corpus Add lines 3f, 4c, and 4e S	ubtract line 5	35,606.			
b	Prior years' undistributed income S	ubtract	٠			
	line 4b from line 2b					
С	Enter the amount of prior years' und	1				
	income for which a notice of deficier	· ,				
	been issued, or on which the section	n 4942(a)				
	tax has been previously assessed					
d	Subtract line 6c from line 6b Taxab	le				
	amount - see instructions					
е	Undistributed income for 2014 Sub					
	4a from line 2a Taxable amount - so	ee				
_	instructions .					
f	Undistributed income for 2015 Sub		,			
	4d and 5 from line 1 This amount n	nust be				
_	distributed in 2016 .					2,400.
7	Amounts treated as distributions ou					,
	to satisfy requirements imposed by					
	170(b)(1)(F) or 4942(g)(3) (Election	may be				
	required - see instructions)		·			
8	Excess distributions carryover from					
9	applied on line 5 or line 7 (see instru	•	<u> </u>			
9	Excess distributions carryover to	0 2016.	35 606			
40	Subtract lines 7 and 8 from line 6a		35,606.	 		
10	Analysis of line 9 Excess from 2011 .	ı				
a b	Excess from 2011 . Excess from 2012	<u> </u>				
C	Excess from 2012 Excess from 2013 .	-				
d	Excess from 2014					
u e	Excess from 2015	35,606.				
	=	<u>. 33,606.</u>	L	i		i

	0-PF (2015) ASAM CHARITABLE					25794 Page
art	XIV Private Operating Foundati	ons (see instru	ictions and Part \	/II-A, question 9)		
1a	If the foundation has received a ruling or dete	ermination letter that	t it is a private operatir	ng foundation, and		
	the ruling is effective for 2015, enter the date	of the ruling		•		
b	Check box to indicate whether the foundation	is a private operati	ng foundation describ	ed in section	4942(j)(3)	or 4942(j)(5)
2a	Enter the lesser of the adjusted net income	Tax year		Prior 3 years		(a) Tatal
	from Part I or the minimum investment	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	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					
ø	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			1		1
a	"Assets" alternative test- enter					1
-	(1) Value of all assets					
	(2) Value of assets qualifying under			<u> </u>		
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-enter 2/3 of minimum investment return shown in	\ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>				
	Part X, line 6 for each year listed			 	<u> </u>	
¢	"Support" alternative test - enter					
	(1) Total support other than gross invest-					
	ment income (interest, dividends, rents,			-		į
	payments on securities loans (section				l	
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or					
	more exempt organizations as provided					
	ın section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an					
	exempt organization					
	(4) Gross investment income			<u> </u>		<u> </u>
art	XV Supplementary Information	•	•	ne foundation ha	ad \$5,000 or mo	re in assets
	any time during the year- s		ıs.)			
1 1	nformation Regarding Foundation Manage	ers:				
	list any managers of the foundation who have			tributions received by	the foundation before	the close of any
t	ax year (but only if they have contributed more	than \$5,000) (See	e section 507(d)(2))			
	ist any managers of the foundation who own		•	(or an equally large po	ortion of the ownershi	p of a partnership
C	or other entity) of which the foundation has a 1	0% or greater intere	est			
2	nformation Regarding Contribution, Gran	t, Gift, Loan, Scho	larship, etc., Progra	ms:		
(Check here 🕨 🔀 if the foundation only mak	es contributions to j	preselected charitable	organizations and doe	es not accept unsolici	ted requests for
f	unds If the foundation makes gifts, grants, et	c (see instructions)) to individuals or orga	nizations under other	conditions, complete	tems 2a, b, c, and
a	The name, address, and telephone number or	e-mail address of ti	he person to whom ap	plications should be a	ddressed	
þ.	The form in which applications should be sub-	nitted and informati	on and materials they	should include		
			·			
C	Any submission deadlines					
						
d /	Any restrictions or limitations on awards, such	as by geographical	l areas, charitable field	ls, kinds of institutions	, or other factors	

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Y	If recipient is an individual,	Foundation		
	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year LHBC				
LIBC				
		POF	Church danahara ha manani 600d	6,000
			Church donation to general fund	0,000
LHBC				
		POF	Church building fund	4,200
Samaritan's Purse				
PO Box 3000				
Boone, NC 28607		PC	Missionaries	800
2000.				000
BiblicalTraining				
			}	
		POF	Bible Education	200
Prionsers for Christ				
riionsers for Christ				
		POF	Missionary support	500
Compassion International				
		POF	Support children in need	906
Send International				
PO Box 513			1	
Farmington , MI 48332		POF	Missionaries	3,600
				,
Desiring God				
PO Box 2901 Minneapolis, MN 55402		DOE		260
MINNEAPOIIS, MN 53402		POF	Missionary support	360
Total		1	▶ 3a	34,431
b Approved for future payment				· ·
		1		
Total			<u> </u>	
Total	<u> </u>		 b 3b	

•	s amounts unless otherwise indicated	Unrelated busi	ness income	Excluded by secti	on 512, 513, or 514	(e)
1 Prog	ram service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions
а						
b						
С						
ď						
e						
f						
gi	Fees and contracts from government agencies					
2 Mem	bership dues and assessments					
3 Inter	est on savings and temporary cash investments					
	dends and interest from securities				-	
	rental income or (loss) from real estate	- **				-
	Debt-financed property					
	Not debt-financed property					
	rental income or (loss) from personal property			1		1
	er investment income			†		
-	or (loss) from sales of assets other than inventory					
	ncome or (loss) from special events					
	ss profit or (loss) from sales of inventory			 		
	er revenue a					
				+		
				 		
						
- B	total Add columns (b), (d), and (e) .			.	-	
		<u> </u>				<u> </u>
	al. Add line 12, columns (b), (d), and (e)				13	
	ksheet in line 13 instructions to verify calculations)	Assamplishm	ont of Evan	nt Burnosse		
art X\	/I-B Relationship of Activities to the					
art X\	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ .ine No.	/I-B Relationship of Activities to the	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ .ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ .ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ .ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ .ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ .ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ .ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ .ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ .ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ .ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ .ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ .ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ .ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ .ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ ine No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment
art X\ Line No.	Relationship of Activities to the Explain below how each activity for which income	e is reported in colum	n (e) of Part XV	/I-A contributed imp	•	complishment

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

	1		corganization direction corection corections are corected to the corected are corected as the corected are corected as the corected are corected as the corected are corected as the corected are corected as the corected are corected as the corected are corected as the corected are corected as the corected are corected as the corected are corected as the corected are corected as the corected are corected as the corected are corected as the corected are corected as the corected are corected are corected as the corected are corected are corected as the corected are corected are corected as the corected are corected are corected as the corected are corected are corected as the corected are corected as the corected are corected are corected as the corected are corected as the corected are corected are corected as the corected are c	•		•		•	-	•		ın sec	tion sc) 1(C)	Y E		
	а	Transf	ers from the reporti	ing founda	ition to a non	charitabl	le exempt	t organiza	ition of						1a(1)		
			her assets												1a(2)		
	h		transactions														
			iles of assets to a n	noncharitat	ole exempt o	rnanizati	on								1b(1)	A THE GRAND AT	Scales 3
			rchases of assets		-	•		n						•	1b(2)		
						•	gariizatio	11								\vdash	
			ental of facilities, eq		or other asse			•						•	1b(3)	'	
			eimbursement arrar	-											1b(4)	<u> </u>	
		• •	ans or loan guaran												1b(5)	+	
		• •	erformance of service		•		_								1b(6)	<u> </u>	
	C		g of facilities, equip		-						•				1c	l	
	d		enswer to any of the		·-		-				•				-		
			issets, or services								fair market va	alue in	any tra	insaction	or shar	ing	
_			ement, show in col														
a)	Lin	e no (I	b) Amount involved	(c) I	Name of nonc	hantable	exempt or	ganization	1	(d) Descri	ption of transfe	ers, trar	saction	ns, and sh	anng ar	rangem	ents
		_															
				<u> </u>													
		-		 													
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				l													
2	а	(other	foundation directly than section 501(c)(3)) or in s	section 527?		elated to, o	one or mo	ore tax-e:	xempt organ	izations desc	ribed i	n secti	on 501(c [of the Yes		No
	b	IT "Yes	(a) Name of ora	-	edule	_	/b\ T-	una of ac-	100170b0	" Т	(=)	Doces	untion of	of roletic-	chie		
			(a) Name of org	ariiZaliOfi		+	(0) 1	ype of org	januzau0	<u> </u>	(c)	Descr	ιραση (of relation	eub	-	
					·· · · · · · · · · · · · · · · · · · ·	+											
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			·		-	 											
			der penalties of perjury										my know	wledge and	belief it	s true	
	gn ere		rrect and complete Dec	اکسا	reparer (other th	ian taxpaye	sr) is based of	on all inform		hich preparer h	as any knowledo	je		May the IF the prepar instruction	er shown		
] ' Sı	gnature of officer of 1				Pate	<u> </u>	′ Title	! 						res 🔀	No
Pa	id		Print/Type preparer	's name		Prep	arer's sign	nature	1		Date		Check	X if	PTIN		
		arer	Christoph	er H	Jo				<u> </u>		5-16-	16	self-e	mployed			
		Only			Financ								s EIN	▶26-	3018	3313	3
		•			245th	Way	NE					Phone				,	
			Redmond,	WA 98	3053							20	6-3	169 -	1284	4	
JYA																	F(2015)

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

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

Form 990-PF. 2015

Employer identification number

ASAM CHARITABLE TRUST			27	-6225794	
Organization type (check	one)				
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (er	nter number) organization			
	4947(a)(1) nonexen	mpt charitable trust not treat	ed as a private founda	ition	
	527 political organi	zation			
Form 990-PF	▼ 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	☐ 501(c)(3) taxable pr	rivate foundation			
Check if your organization Note. Only a section 501(or instructions		Rule or a Special Rule. on can check boxes for both	the General Rule and	a Special Rule See	
General Rule					
	or property) from any one	, or 990-PF that received, du e contributor Complete Parts			
Special Rules					
regulations under 13, 16a, or 16b, a	sections 509(a)(1) and 170 nd that received from any	(c)(3) filing Form 990 or 990 0(b)(1)(A)(vi), that checked sone contributor, during the y 990, Part VIII, line 1h, or (ii)	Schedule A (Form 990 ear, total contributions	or 990-EZ), Part II, line of the greater of(1)	
contributor, during	the year, total contribution	I(c)(7), (8), or (10) filing Formus of more than \$1,000 exclusive exclusive to childrorevention of cruelty to childronevention of cruelty to childrenevention usively for religious, ch	arıtable, scientific,		
contributor, during contributions tota during the year fo General Rule ap	g the year, contributions ex ed more than \$1,000 If the r an exclusively religious, c	i(c)(7), (8), or (10) filing Form colusively for religious, charita is box is checked, enter here haritable, etc., purpose Do i ecause it received <i>nonexclus</i>	able, etc , purposes, bu the total contributions not complete any of the	ut no such that were received e parts unless the	

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

Name of organization
ASAM CHARITABLE TRUST

Employer identification number

27-6225794

Parti	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	Andrew Chang 4545 169th Ave SE Bellevue, WA 98006	\$ <u>35,606.</u>	Person X Payroll Concash Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroli Noncash Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Oncash Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
			Person Payroll Noncash Complete Part II for noncash contributions)		

Name of organization

ASAM CHARITABLE TRUST

Employer identification number

27-6225794

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
		\$	

ASAM CHARITABLE TRUST

Name of organization

Employer identification number

27-6225794

Part	(10) that total more than \$1,000 for t	he year from any one contribut ons completing Part III, enter the e year (Enter this information one	total of exclusively religious, charitable, etc.		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-		(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		
	Transferee's name, address,	(e) Transfer of gift 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		