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SCANNED JUN 0 1 2016

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

		The Sky Foundation					-3562136	
		street (or P 0 box number if mail is not delivered to street address Harbor Ave. SW	;)	Roo	om/surte		sone number (see instructions $5-938-8700$)
City	or town,	state or province, country, and ZIP or foreign postal code				C If exen	nption application is pending,	check here
Se	att						. ,,	
Ch	neck a		al return of a former pu	olic ch	arıty	D 1. Fo	reign organizations, check he	re
			nended return				reign organizations meeting th % test, check here and attach	
			me change			99.	% lest, check hele and attach	Computation
		ype of organization X Section 501(c)(3) exempt					ite foundation status was term n 507(b)(1)(A), check here	ainated under
			r taxable private foundat			ł		
		ket value of all assets at J Accounting m		Accr	uai	1	oundation is in a 60-month tei section 507(b)(1)(B), check h	_
	-	ear (from Part II, col (c), \$\Bigsis \text{46,641} \text{(Part I, column (c)}		. 1				
	: 16) rt	Analysis of Revenue and Expenses (The total of	i) must be on cash basis (a) Revenue an			·		(d) Disbursements
ra		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	1	(b) Net inv		(c) Adjusted net Income	for charitable purposes
		the amounts in column (a) (see instructions))	books					(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule	·/	000				
	2	Check ► ☐ If the foundation is not required to attach						
-	3	Interest on savings and temporary cash investme	nts	-+		1	1	
	4	Dividends and interest from securities		1				
-	5a ∟	Gross rents					·····	
enuever	Ь	Net rental income or (loss)						
5	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a						
לַ	b 7	Capital gain net income (from Part IV, line 2)				0		
-	7 8	Net short-term capital gain			***************************************		0	
	9	Income modifications						
1	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	52,	001		1	1	
\Box	13	Compensation of officers, directors, trustees, etc	1,	963				
	14	Other employee salaries and wages						
Apelloes	15	Pension plans, employee benefits		150		150	150	
	16a_	Legal fees (attach schedule)						
ן נ	ь	Accounting (बेर्ड क्षिक्ति) schedule) Stmt	1	300		300	300	
}	С	Other professional fees (attach schedule)						
֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	17	zinterest zaxes (attach schedule) (see instruktions)						
2		axes (attach schedule) (see instructions)						
	19	Depreciation (attach schedule) ah depletion						
2	20	OCCORGIDEN, UT		95		95	95	
Operating and Administrative E	21 L	Travel, conferences, and meetings Printing and publications		95		93		
<u> </u>	22 23	Other expenses (att sch) Stmt	2	352		352	352	
≝"	23 24	Total operating and administrative expenses.	_	J J Z		<u> </u>		
<u> </u>		Add lines 13 through 23	2.	860		897	897	1
be	25	Contributions, gifts, grants paid		500				2,5
ָ כ	26	Total expenses and disbursements. Add lines 24 and		360		897	897	2,5
	27	Subtract line 26 from line 12						
	a	Excess of revenue over expenses and disbursemen	nts 46,	641				
	b	Net investment income (if negative, enter -0-)				0		
	С	Adjusted net income (if negative, enter -0-)					0	

or	m 990	PF (2015) All The Sky Foundation		47-356213		Page 2
£	art I	Balance Sheets Attached schedules and amounts in the description columns and amounts only (See instructions	າກຸ	Beginning of year		d of year
T		Should be for entirely early (occurrence)		(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing			46 64	1 46 641
1	2	Savings and temporary cash investments			46,64	46,641
	3	Accounts receivable ▶				
1		Less allowance for doubtful accounts ▶				
ļ	4	Pledges receivable ▶				
1		Less. allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see				
ł		instructions)				
	7	Other notes and loans receivable (att. schedule)				
		Less. allowance for doubtful accounts ▶	0			
2	8	Inventories for sale or use				
Sets	9	Prepaid expenses and deferred charges				
Z	10a	Investments – U S and state government obligations (attach schedule)				
1	b	Investments – corporate stock (attach schedule)				
1	С	Investments – corporate bonds (attach schedule)				
1	11	Investments – land, buildings, and equipment basis				
1		Less accumulated depreciation (attach sch.)				
	12	Investments – mortgage loans				
	13	Investments – other (attach schedule)				
	14	Land, buildings, and equipment basis				
		Less accumulated depreciation (attach sch)		L		
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers – see the				
ĺ		instructions Also, see page 1, item I)		0	46,64	46,641
T	17	Accounts payable and accrued expenses				
	18	Grants payable				
S	19	Deferred revenue				
apilities	20	Loans from officers, directors, trustees, and other disqualified persons				
밂	21	Mortgages and other notes payable (attach schedule)				
]	22	Other liabilities (describe ▶)			
-	23	Total liabilities (add lines 17 through 22)		0		0
ヿ゙	-	Foundations that follow SFAS 117, check here	▶ □			
ဖွ		and complete lines 24 through 26 and lines 30 and 31.				
ၓၟႍ	24	Unrestricted				
癝	25	Temporarily restricted				
ŏ	26	Permanently restricted				
밀		Foundations that do not follow SFAS 117, check here	▶ X			
괴		and complete lines 27 through 31.	ت -			
Net Assets or Fund Balances	27	Capital stock, trust principal, or current funds				
S	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
ŝ	29	Retained earnings, accumulated income, endowment, or other funds			46,64	41
إك	30	Total net assets or fund balances (see instructions)		0	46,64	 1
킫	31	Total liabilities and net assets/fund balances (see				
	01	Instructions)		o	46,64	41
 	Part I		nces	<u> </u>		*
_		I net assets or fund balances at beginning of year – Part II, column (a), lii		ust agree with		
•		of-year figure reported on prior year's return)	\	•		1

46,641 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 46,641 4 Add lines 1, 2, and 3 5 5 Decreases not included in line 2 (itemize) ▶ 46,641 Form **990-PF** (2015) 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

47-3562136 Form 990-PF (2015) All The Sky Foundation Page 3 Capital Gains and Losses for Tax on Investment Income (b) How acquired (d) Date sold (a) List and describe the kind(s) of property sold (e.g., real estate, (c) Date acquired P -- Purchase (mo . dav. vr) (mo, day, yr) 2-story brick warehouse, or common stock, 200 shs MLC Co) D - Donation N/A b C d e (f) Depreciation allowed (h) Gain or (loss) (g) Cost or other basis (e) Gross sales price (e) plus (f) minus (g) plus expense of sale (or allowable) а b C d е Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col (h) gain minus col (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col (i) (I) F M V as of 12/31/69 Losses (from col (h)) as of 12/31/69 over col (j), if any а b C d е If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) 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 Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income Part V (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income) N/A If section 4940(d)(2) applies, leave this part blank Yes Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? 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 the instructions before making any entries (a) (d) Distribution ratio Base period years
Calendar year (or tax year beginning in) Adjusted qualifying distributions Net value of noncharitable-use assets (col (b) divided by col (c)) 2014 2013 2012 2011 2010 2 Total of line 1, column (d) 2 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 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5 4 Multiply line 4 by line 3 5 Enter 1% of net investment income (1% of Part I, line 27b) 6 Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 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.

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Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instr	uctio	ns)					
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1	•	ור					
	Date of ruling or determination letter (attach copy of letter if necessary—see instruction	ns)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			1_				
	here ▶ and enter 1% of Part I, line 27b							
С	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	<u> </u>			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			5				0
6	Credits/Payments							
а	2015 estimated tax payments and 2014 overpayment credited to 2015							
b	Exempt foreign organizations – tax withheld at source 6b							
С	Tax paid with application for extension of time to file (Form 8868) 6c							
d	Backup withholding erroneously withheld 6d 6d							
7	Total credits and payments Add lines 6a through 6d			7				
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				
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 2016 estimated tax ▶ Refund	led		11				
*****	rt VII-A Statements Regarding Activities							
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it						Yes	No
	participate or intervene in any political campaign?					1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see							1
	Instructions for the definition)?					1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials							
	published or distributed by the foundation in connection with the activities							
С	Did the foundation file Form 1120-POL for this year?					1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year							
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$			_				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed							
	on foundation managers > \$							
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?					2		X
	If "Yes," attach a detailed description of the activities							
3	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		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?					4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?				N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?					5		X
	If "Yes," attach the statement required by General Instruction T							
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	X	L
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	i Pa	rt XV		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶							
	WA							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General							
	(or designate) of each state as required by General Instruction G? If "No," attach explanation					8b	X	
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		x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their							
	names and addresses	Stn	ıt_	3		10	X	
						-arm Q(O DI	=

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

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 charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?

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)

4b Form 990-PF (2015)

X

3b

4a

N/A

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P	art VII-B . Statements Rega	rding Activities for Which Fo	orm 4720 May Be R	equired (cont	nued)	·····	·····	
5a	During the year did the foundation pa							
	(1) Carry on propaganda, or otherwis	se attempt to influence legislation (see	ction 4945(e))?	Y	es X No			
	(2) Influence the outcome of any spe	ecific public election (see section 4955	5), or to carry on,					
	directly or indirectly, any voter re			Y	'es X No			
	(3) Provide a grant to an individual for	or travel, study, or other similar purpos	ses?	Y	'es X No			
	(4) Provide a grant to an organizatio							
	section 4945(d)(4)(A)? (see instr			Y	'es 🛚 X No			
	(5) Provide for any purpose other that	•	ary, or educational	_	_			
	purposes, or for the prevention o		•		'es X No			
b	If any answer is "Yes" to 5a(1)–(5), d		y under the exceptions d	escribed in	_			
		current notice regarding disaster assis			N/A	5b		
	-	tice regarding disaster assistance che			▶ 🗍			
С	If the answer is "Yes" to question 5a(
Ť	because it maintained expenditure re			N/A N	'es No			
	If "Yes," attach the statement require		d)					
6a	Did the foundation, during the year, r							
-	on a personal benefit contract?				'es X No			
ь	Did the foundation, during the year, p	pay premiums, directly or indirectly, or	n a personal benefit contr	act?	[6b	Х	:
-	If "Yes" to 6b, file Form 8870	,,					T	
7a	At any time during the tax year, was	the foundation a party to a prohibited	tax shelter transaction?		es X No			
b	If "Yes," did the foundation receive a			ction?	_N/A	7b		
p,	art VIII Information About	Officers, Directors, Trustees	s, Foundation Man	agers, Highly	Paid Employe	es,		
•	and Contractors	,	•					
1	List all officers, directors, trustees,	foundation managers and their con	npensation (see instruc	tions).				
		·	(b) Title, and average	(c) Compensation	(d) Contributions to			
	(a) Name	and address	hours per week	(If not paid,	employee benefit plans and deferred		ense accour r allowances	
			devoted to position	enter -0-)	compensation			
sı	neryl Guyon	Seattle	Executive Di					
3:	229 Harbor Ave. SW	WA 98126	6.00	1,963	0	L		0
Jı	istin Laughery	Bremerton	Vice-Preside					
	82 Fern Leona Road	WA 983 <u>12</u>	0.50		0			0
A	ndrea Laughery	Bremerton	Secretary					
6	.82 Fern Leona Road	WA 98312	0.50	0	0			0
2	Compensation of five highest-paid	l employees (other than those inclu	ided on line 1 – see ins	tructions). If non	e, enter			
	"NONE."							_
			(b) Title, and average		(d) Contributions to employee benefit	(a) Evr	oense accour	nt
	(a) Name and address of each emplo	yee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		r allowances	
			devoted to position		compensation	<u> </u>		
N	DNE							
						Ь—		
				1				
						↓		
						Ь—		
						—		
						L		
Tota	number of other employees paid over	r \$50,000		·	_•			0
					F	orm 99	0-PF (20	J15)

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Part VIII	.Information About Officers, Directors, Trustees, Fo and Contractors (continued)	oundation Managers, Highly Paid E	mployees,
3 Five high	est-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		
Part IX-A	Summary of Direct Charitable Activities		
List the foundation organizations and	's four largest direct charitable activities during the tax year. Include relevant statistical information other beneficiaries served, conferences convened, research papers produced, etc.	mation such as the number of	Expenses
1 N/A			
2			
3			
4			
			<u> </u>
Part IX-B	Summary of Program-Related Investments (see II	nstructions)	Τ'
	argest program-related investments made by the foundation during the tax year on lines 1 ar	nd 2	Amount
1 N/A			
2			
_			
All other program-	related investments. See instructions		
3			
			I

Total. Add lines 1 through 3

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

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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

Enter 1% of Part I, line 27b (see instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Form **990-PF** (2015)

4

5

6

2,500

Form 990-PF (2015) All The Sky Foundation Part XIII .Undistributed Income (see instructions) (a) (b) (c) (d) 2014 2015 Years prior to 2014 Corpus Distributable amount for 2015 from Part XI, 453 Undistributed income, if any, as of the end of 2015 a Enter amount for 2014 only **b** Total for prior years 20 , 20 ___ , 20___ Excess distributions carryover, if any, to 2015 a From 2010 **b** From 2011 c From 2012 d From 2013 e From 2014 Total of lines 3a through e Qualifying distributions for 2015 from Part XII, 2,500 line 4 ▶ \$ a Applied to 2014, but not more than line 2a **b** Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) 453 d Applied to 2015 distributable amount 2,047 e Remaining amount distributed out of corpus Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 2,047 a Corpus Add lines 3f, 4c, and 4e. Subtract line 5 **b** Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b Taxable amount - see instructions Undistributed income for 2014. Subtract line 4a from line 2a Taxable amount - see instructions f Undistributed income for 2015 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2016 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) Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2016. 2,047 Subtract lines 7 and 8 from line 6a Analysis of line 9. 10 Excess from 2011 Excess from 2012 Excess from 2013 Excess from 2014 2,047 Excess from 2015

N/A

3 Grants and Contributions Paid During the	e Year or Approved for	Future Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
Room One	l .	Ĭ		
315 Lincoln Street				2,000
Twisp WA 98856				2,000
Girl Up - United Nations Fo 1750 Pennsylvania Ave.	oundation			
Washington DC 20006				500
		1		
			1	
		ļ		
			,	
Total	<u> </u>		▶ 3a	2,500
b Approved for future payment		T		
N/A				
		1		
	<u> </u>			
Total			▶ 3b	<u> </u>

	(VI-A , Analysis of Income-Producing ss amounts unless otherwise indicated		ed business income	Exclude	d by section 512, 513, or 514	
-		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
_	am service revenue			 		
a				1		
				 		
				1		·
				<u> </u>		
,						
'	and and contracts from any analysis			 	<u> </u>	<u> </u>
	ees and contracts from government agencies			 		
	bership dues and assessments est on savings and temporary cash investments	-		-		
	ends and interest from securities			 		1
	ental income or (loss) from real estate:					
	Pebt-financed property			†		
	lot debt-financed property					
	ental income or (loss) from personal property			1		<u> </u>
	Investment income			1		
	or (loss) from sales of assets other than inventory			1		
	ncome or (loss) from special events					
	s profit or (loss) from sales of inventory					
	revenue a					
b						
е						
12 Subto	otal. Add columns (b), (d), and (e)		(0	1
13 Total.	. Add line 12, columns (b), (d), and (e)				13 _	1
	sheet in line 13 instructions to verify calculations)					
Part X						
Line N ▼	Explain below how each activity for which inc accomplishment of the foundation's exempt					
N/A		purposes (other than	by providing funds it	such po	ilposes) (See ilistruct	10115 /
	-					
-				_	- · -	
						
			-			
			-			
				_		
	_					

Part)		Information Reg		nsfers To an	d Transactio	ns and Relation	ships With No	oncharitable		
1 Did		nization directly or ind		e in any of the fol	lowing with any o	ther organization des	scribed		Yes	No
	•	01(c) of the Code (other		•	•	-				
	anization		, man 555	oo i (o)(o) oi gaii		onon ser, realing to	P • • • • • • • • • • • • • • • • • • •			ĺ
-	, =	om the reporting found	lation to a nor	ncharitable evem	nt organization o	;				
	Cash	on the reporting lound	ation to a nor	ichantable exem	pt organization o	•		1a(1)	i i	х
٠,	Other as	reate						1a(2)		X
	ner transa							10/2/		
		assets to a noncharit	abla avamat e	organization				16(1)	1	х
		es of assets from a no			on			1b(1)		X
					OII			1b(3)		X
		f facilities, equipment, sement arrangements		518				1b(4)		X
		~	•					1b(5)		X
		r loan guarantees ance of services or mi	omborobin or	fundraising color	tations			1b(6)	l —	X
		acilities, equipment, m	•	•				10		X
	_	r to any of the above i	-			nn (h) should always	show the fair man	·		
		goods, other assets, o	= 1	=						
		transaction or sharing								
(a) Lir	_	(b) Amount involved		of noncharitable exem				ns, and sharing arrangeme	ents	
I/A		(-,,	(0)							
• / • • •										
			-							
										
										
					·					
										
_										
										
										
			1	,						
			į –				,			
des	scribed in Yes," com	ation directly or indirect section 501(c) of the aplete the following sc	Code (other the	han section 501(c)(3)) or in sectio				es X	No
N/I) Name of organization		(b) Type of c	ingamization .		(c) Description of re	Hadonship		
	-									
										
										
		alties of perjury, I declare th						vledge and belief, it is true	∍,	
	correct, an	d complete Declaration of p	oreparer (other th	an taxpayer) is based	on all information of	which preparer has any kno	owledge	May the IRS discuss this r	eturn	\Box
ign lere	مر ا	Shery	Luzo	~	<i>5</i> /	12/16	Executi	with the preparer shown be (see instructions)? X	Yes	No
	Signa	ture of officer or trustee	U		Date		Title			
	Print/Typ	pe preparer's name			Preparer's signatur	е		Date	Check self-em	
aid		L. Nealson			1 1	2 1	ul	05/11/16	55,1-6111	F.0300
reparer	Firm's na		rg Law	Group,	PLLC	<i>y y</i>	PTIN	P01266	5509	
se Only	/ 			national		= 550		EIN ► 47-519		
	"""5 81	Seata		98188-4		- 550		206 24		
			/				Phone	no 200-24		

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.irs.gov/form990.

OMB No 1545-0047

2015

Employer identification number

All The Sky I	oundation		47-3562136
Organization type (check of	ne).		
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	X 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as	a private foundation	
	501(c)(3) taxable private foundation		
	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the	General Rule and a Special Rule	: See
_	filing Form 990, 990-EZ, or 990-PF that received, during t r property) from any one contributor Complete Parts I and ntributions		
Special Rules			
regulations under se 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ tections 509(a)(1) and 170(b)(1)(A)(vi), that checked Scheothat received from any one contributor, during the year, the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form	lule A (Form 990 or 990-EZ), Par otal contributions of the greater o	rt II, line of (1)
contributor, during t	described in section 501(c)(7), (8), or (10) filing Form 990 ne year, total contributions of more than \$1,000 exclusively all purposes, or for the prevention of cruelty to children or	y for religious, charitable, scientif	fic,
contributor, during the contributions totaled during the year for a	described in section 501(c)(7), (8), or (10) filing Form 990 the year, contributions exclusively for religious, charitable, more than \$1,000. If this box is checked, enter here the form exclusively religious, charitable, etc., purpose. Do not contribute to this organization because it received nonexclusively one during the year.	etc., purposes, but no such otal contributions that were recein omplete any of the parts unless t	oved the
990-EZ, or 990-PF), but it n	at is not covered by the General Rule and/or the Special F ust answer "No" on Part IV, line 2, of its Form 990, or che to certify that it does not meet the filing requirements of S	eck the box on line H of its Form	990-EZ or on its

Page 1 of 1

age 2

Name of organization

Employer identification number

47-<u>3</u>562136 All The Sky Foundation Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (c) (d) (a) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 1 Richard Rust Person P.O. Box 273 Payroli 52,000 Noncash Lakebay WA 98349 (Complete Part II for noncash contributions) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash \$ (Complete Part II for noncash contributions) (d) (a) (b) (c) Name, address, and ZIP + 4 Total contributions Type of contribution No. Person Payrol! \$ Noncash (Complete Part II for noncash contributions) (c) (d) (a) (b) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** Person Payroll Noncash \$ (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person Payroll Noncash \$ (Complete Part II for noncash contributions) (a) (b) (c) (d) Name, address, and ZIP + 4 No. Total contributions Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions)

ALLTHESKY All The Sky Foundation

Federal Statements

5/11/2016 10:10 AM

47-3562136 FYE: 12/31/2015

ng Fees
Accountir
Line 16b -
I, Line
Part
1 990-PF,
1 - Form
Statement

Description		Total	Inve	Net Investment	AC	Adjusted Net	Charitable Purpose
Indirect Accounting Fees	S	300	ş	300	တ	300	S
Total	ş	300	\$	300	8	300	\$
1613	ement 2 - En	Statement 2 - Form 090-DE Part I I ine 23 - Other Expenses	Jart I line	23 - Other	Fynances		

Description Total Investment supplies Adjusted Net Charitable Purpose Expenses Supplies 352 \$ \$ \$ Total \$ 352 \$ \$ 0	55 1	Statement 2 - Form 990-PF,	2 - Form 990-PF, Part I, Line 23 - Other Expenses	Expenses	
ies \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Description	Total	Net Investment	Adjusted Net	Charitable Purpose
ies 352 352 352 s 352 s 352		\ \ \ \	s	S	\$
\$ 352 \$ 352 \$	Expenses Supplies	352	352	352	
	Total		\$ 352	\$ 352	0

Contributors
- Substantial
11-A, Line 10
F, Part V
orm 990-F
Statement 3 - F

1	Address	
Name		Richard Rust

P.O. Box 273

Lakebay WA 98349

City, State, Zip