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DLN: 93491256001286

OMB No 1545-0052

Form 990-PF

Department of the Treasury

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.

Open to Public

▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf. Internal Revenue Service Inspection For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015 A Employer identification number Name of foundation 83-0380273 BTelephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) PO Box 1836 (425) 275-5342 **C** If exemption application is pending, check here City or town, state or province, country, and ZIP or foreign postal code Lynnwood, WA 98046 G Check all that apply Initial return Initial return of a former public charity **D 1.** Foreign organizations, check here Final return Amended return $\textbf{2.} \ \ \text{Foreign organizations meeting the } 85\%$ Name change Address change test, check here and attach computation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation **J**Accounting method Cash 🔽 Accrual IFair market value of all assets at end If the foundation is in a 60-month termination Cother (specify) under section 507(b)(1)(B), check here of year (from Part II, col. (c), (Part I, column (d) must be on cash basis.) line 16) ►\$ 416,218 Part I Analysis of Revenue and Expenses Disbursements Revenue and Net investment Adjusted net for charitable (The total of amounts in columns (b), (c), and (d) may not expenses per ıncome necessarily equal the amounts in column (a) (see (b) (c) purposes income books (d) (cash basis only) instructions)) Contributions, gifts, grants, etc , received (attach 1 237,000 2 Check ► ☐ If the foundation is **not** required to attach 3 Interest on savings and temporary cash investments 4,535 4,535 4,535 Dividends and interest from securities Gross rents 5a Net rental income or (loss) _ b Net gain or (loss) from sale of assets not on line 10 6a Revenue b Gross sales price for all assets on line 6a 65,669 Capital gain net income (from Part IV, line 2) . . Net short-term capital gain . . . 8 Income modifications . . . 10a Gross sales less returns and allowances Less Cost of goods sold b Gross profit or (loss) (attach schedule) . . C 11 Other income (attach schedule) Total. Add lines 1 through 11 245,454 8,454 4,535 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages . . . 15 Pension plans, employee benefits . . Operating and Administrative Expenses Legal fees (attach schedule). 16a Accounting fees (attach schedule). . . . 夗 6,031 1,508 b Other professional fees (attach schedule) . 愎 300 c **17** 1 45 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion . 20 Occupancy 21 Travel, conferences, and meetings. 22 Printing and publications. . 囫 2.697 23 Other expenses (attach schedule). 24 Total operating and administrative expenses. 1.508 Add lines 13 through 23 . . . 9.073 155,600 155,600 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 164,673 1,508 155,600 25 27 Subtract line 26 from line 12 80,781 Excess of revenue over expenses and disbursements a 6,946 Net investment income (if negative, enter -0-) Adjusted net income(if negative, enter -0-)

| Pa | rt II | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
|-----------|--------|---|-----------------------|------------------|-----------------------|
| | 1 | Cash—non-interest-bearing | 285,433 | | |
| | 2 | Savings and temporary cash investments | 1,815 | | |
| | 3 | Accounts receivable | | | |
| | | Less allowance for doubtful accounts | | | |
| | 4 | Pledges receivable • | | | |
| | - | Less allowance for doubtful accounts 🕨 | | | |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | | 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 | | | |
| Assets | 10a | Investments—U S and state government obligations (attach schedule) | | | |
| | ь | Investments—corporate stock (attach schedule) | | | |
| | С | Investments—corporate bonds (attach schedule) | | | |
| | 11 | Investments—land, buildings, and equipment basis ▶ | | | |
| | | Less accumulated depreciation (attach schedule) ▶ | | | |
| | 12 | Investments—mortgage loans | | | |
| | 13 | Investments—other (attach schedule) | 48,189 | 204,582 | 204,582 |
| | 14 | Land, buildings, and equipment basis 🕨 | | | |
| | | Less accumulated depreciation (attach schedule) ▶ | | | _ |
| | 15 | O ther assets (describe 🟲) | | | |
| | 16 | Total assets(to be completed by all filers—see the | | | |
| | | ınstructions Also, see page 1, item I) | 335,437 | 416,218 | 416,218 |
| | 17 | Accounts payable and accrued expenses | | | |
| | 18 | Grants payable | | | |
| ě | 19 | Deferred revenue | | | |
| abilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| Lia | 21 | Mortgages and other notes payable (attach schedule) | | | |
| _ | 22 | Other liabilities (describe 🟲) | | | |
| | 23 | Total liabilities(add lines 17 through 22) | | 0 | |
| S | | Foundations that follow SFAS 117, check here 🕨 🦵 | | | |
| æ | | and complete lines 24 through 26 and lines 30 and 31. | | | |
| Balance | 24 | Unrestricted | | | |
| Ва | 25 | Temporarily restricted | | | |
| Fund | 26 | Permanently restricted | | | |
| Fu | | Foundations that do not follow SFAS 117, check here 🕨 🔽 | | | |
| ō | | and complete lines 27 through 31. | | | |
| £\$ | 27 | Capital stock, trust principal, or current funds | | | |
| Assets | 28 | Paid-in or capital surplus, or land, bldg , and equipment fund | | | |
| | 29 | Retained earnings, accumulated income, endowment, or other funds | 335,437 | , | |
| Net | 30 | Total net assets or fund balances(see instructions) | 335,437 | <u> </u> | |
| | 31 | Total liabilities and net assets/fund balances(see instructions) | 335,437 | 416,218 | |
| Pa | rt III | | | , , | |
| 1 | | Total net assets or fund balances at beginning of year—Part II, column (| | - I I | |
| | | with end-of-year figure reported on prior year's return) | | | 335,437 |
| 2 | | Enter amount from Part I, line 27a | | | 80,781 |
| 3 | | Other increases not included in line 2 (itemize) | | 3 | |
| 4 | | Add lines 1, 2, and 3 | | | 416,218 |
| 5 | | Decreases not included in line 2 (itemize) ► | | _ 5 | |
| 6 | | Total net assets or fund balances at end of year (line 4 minus line 5)—Pa | art II, column (b), l | ne 30 . 6 | 416,218 |

| | | | f property sold (e g , re mmon stock, 200 shs | • | How acquire P—Purchas (b) D—Donation | | ate acquired mo , day, yr) | Date sold (d) (mo , day, yr) |
|-------------|---|-----------------|--|----------------------------|---------------------------------------|------------|--|---|
| 1a | See Additional Data | Table | | | | | | |
| b | | | | | | | | |
| С С | | | | | | | | |
| d | | | | | | 1 | | |
| е | | | | | | | | |
| (e | e) Gross sales price | (| Deprectation allowe f) (or allowable) | | t or other basis expense of sale | | | n or (loss) . (f) minus (g) |
| a | See Additional Data | Table - | | | | | | |
| ь | | | | | | | | |
| | | | | | | | | |
| d | | | | | | | | |
| e | | | | | | | | |
| | | | | | 12/21/60 | | - (0.1 | |
| | mplete only for assets s | snowing gain | Adjusted basis | | cess of col (i) | \dashv , | | (h) gain minus ot less than -0-) or |
| (i) | FMV as of 12/31/69 | | (j) as of 12/31/69 | | rcol (j), if any | (1) | | (from col (h)) |
| a | See Additional Data | Table | | | | | | |
| ь | | | | | | | | |
| | | | | | | | | |
| d | | | | | | | | |
| <u>_</u> _ | | | | | | + | | |
| | | | r | If gaın, also enter | Dawt I line 7 | | | |
| 2 | Capital gain net inco | me or (net ca | oital loss) | If (loss), enter -0- | | 2 | | 3,919 |
| 3 | Net short-term capit | al gaın or (los | s) as defined in sectio | ns 1222(5) and (6 |) | | | |
| | If gain, also enter in l in Part I, line 8 . | Part I, line 8, | column (c) (see ınstru | ctions) If(loss), e | nter -0- |) 3 | | -638 |
| Part | V Qualification L | Jnder Sect | ion 4940(e) for R | educed Tax or | Net Investm | | icome | |
| (For opt | cional use by domestic pon 4940(d)(2) applies, | orivate founda | tions subject to the se | | | | | |
| | foundation liable for th the foundation does n | | | | | eriod? | | ┌ Yes ┌ No |
| 1 En | ter the appropriate amo | unt in each co | olumn for each year, s | ee instructions bef | ore making any er | tries | | |
| | (a) period years Calendar or tax year beginning in) | Adjusted q | (b) ualifying distributions | (c) Net value of noncha | ritable-use assets | | (d) Distributio (col (b) divideo | n ratio |
| | 2014 | | 131,614 | | 82,519 | | | 1 59495 |
| | 2013 | | 106,420 | | 118,195 | | | 0 90038 |
| | 2012 | | 66,117 | | 126,815 | | | 0 52137 |
| | 2011 | | 107,143 | | 144,898 | | | 0 73944 |
| | 2010 | | 125,760 | | 337,362 | | | 0 37278 |
| 2 | Totalof line 1, column | n (d) | | | | 2 | <u> </u> | 4 128908 |
| 3 | | | -year base period—di has been in existence | | | 3 | | 0 825782 |
| 4 | | | e-use assets for 2015 | | | 4 | | 120,662 |
| 5 | Multiply line 4 by line | 3 | | | | 5 | | 99,641 |
| 6 | Enter 1% of net inve | stment incom | e (1% of Part I, line 2 | 7b) | | 6 | | 69 |
| 7 | | | | | F | 7 | | 99,710 |

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

Enter qualifying distributions from Part XII, line 4.

the Part VI instructions

155,600

8

| | 990-PF (2015) t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), | 940(e) | or 4948—s | ee nad | e 18 of | the inst | ructio | | age 4 |
|-----|--|-----------|---------------|-------------|------------|----------|----------|------------------------|--------------|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here | | , 01 15 10 5 | ue pug \ | 0 10 0. | the mot | Tuctio | | |
| 10 | and enter "N/A" on line 1 | ļ | | | | | | | |
| | Date of ruling or determination letter | | | \ | | | | | |
| | (attach copy of letter if necessary-see instructions) | | | | | | | | |
| Ь | Domestic foundations that meet the section 4940(e) requirements in Part V, | , check | | J | 1 | | | | 69 |
| | here Fand enter 1% of Part I, line 27b | | | | | | | | |
| С | All other domestic foundations enter 2% of line 27b Exempt foreign organizations and I line 12, col (b) | ations 6 | enter 4% of | | | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable four | ndation | s only Oth | ers | 2 | | | | |
| 3 | enter -0-) Add lines 1 and 2 | | | | 3 | | | | 69 |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four | ndation | s only Oth | ers | ب | | | | |
| • | enter -0-) | | , | 0.0 | 4 | | | | |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, e | nter - 0 |) | | 5 | | | | 69 |
| 6 | Credits/Payments | | | | | | | | |
| а | 2015 estimated tax payments and 2014 overpayment credited to 2015 | 6a | | | | | | | |
| 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 | | | | | | | |
| 7 | Total credits and payments Add lines 6a through 6d | | | | 7 | | | | |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2 | 2220 is | attached | | 8 | | | | |
| 9 | $\textbf{Tax due.} If the total of lines 5 and 8 is more than line 7, enter \textbf{amount owed} \ .$ | | | | 9 | | | | 69 |
| 10 | Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amoun | it over | paid | | 10 | | | | |
| 11 | Enter the amount of line 10 to be Credited to 2015 estimated tax | | Refunded | | 11 | | | | |
| Par | t VII-A Statements Regarding Activities | | | | | | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state | e, or loc | al legislati | on or d | ıd | | | Yes | No |
| | it participate or intervene in any political campaign? | | | | | | 1a | \longmapsto | No |
| Ь | Did it spend more than \$100 during the year (either directly or indirectly) for p | politica | l purposes | (see Ir | ıstructı | ons | | | |
| | for definition)? | • • • | | | | - | 1b | | No |
| | If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities | and co | pries of any | materia | ils | | | | |
| _ | published or distributed by the foundation in connection with the activities. 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) impos | | | | | • | 10 | | NO |
| u | (1) On the foundation \blacktriangleright \$ (2) On foundation managers | | | | | | | | |
| e | Enter the reimbursement (if any) paid by the foundation during the year for poli | | | | nosed | | | | |
| | on foundation managers * \$ | icicui c | Apendicure | cax min | ,03Cu | | | | |
| 2 | Has the foundation engaged in any activities that have not previously been rep | ported | to the IRS? | | | | 2 | | No |
| _ | If "Yes," attach a detailed description of the activities. | , , , , , | | | | | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in it | ts aove | ernina instri | ıment. | articles | 5 | | | |
| | of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conf | - | _ | - | | | 3 | | No |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more d | | | | | | 4a | | No |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | | | | | | 4b | | No |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction du | | | | | | 5 | | No |
| | If "Yes," attach the statement required by General Instruction T. | | | | | | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 49 | 45) sa | tisfied eithe | er | | | | | |
| | By language in the governing instrument, or | | | | | | | | |
| | By state legislation that effectively amends the governing instrument so th | nat no n | nandatory c | irectio | ns | | | | |
| | that conflict with the state law remain in the governing instrument? | | | | | | 6 | Yes | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? | ?If "Yes | s," complete | Part II | , col. (c |), | | | |
| | and Part XV. | | | | | | 7 | Yes | |
| 8a | Enter the states to which the foundation reports or with which it is registered ($\boldsymbol{.}$ | see ins | structions) | | | | | | |
| _ | ►WA | | | | | | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99 | | | | ⊊ 7 | | 0.1 | | |
| _ | General (or designate) of each state as required by General Instruction G? If | · | • | | | | 8b | | No |
| 9 | Is the foundation claiming status as a private operating foundation within the r | | _ | | | | | | |
| | or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (s If "Yes," complete Part XIV | ee mst | LIUCTIONS 10 | rail) | (1 ^), | | 9 | | No |
| 10 | Did any persons become substantial contributors during the tax year? <i>If "Yes,</i> | " attach | a schedule | listina | their n | ames | <u> </u> | $\vdash \vdash \vdash$ | 140 |
| | and addresses. | | | _ | | | 10 | Yes | |
| | | | | | | | | | |

| Pai | Statements Regarding Activities (continued) | | | |
|-----|--|-----|-------|----|
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the | | | |
| | meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11 | | No |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had | | | |
| | advisory privileges? If "Yes," attach statement (see instructions) | 12 | ↓ | No |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Yes | |
| | Website address ► <u>N/A</u> | | | |
| 14 | The books are in care of ▶Sharon Ebelt Telephone no ▶(425 | 275 | -5342 | |
| | Located at 16108 Ash Way Suite 201 Lynnwood WA ZIP+4 98087 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here | | ▶ □ | - |
| 10 | and enter the amount of tax-exempt interest received or accrued during the year | • | - , | |
| | | | | |
| 16 | At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over | 16 | Yes | No |
| | a bank, securities, or other financial account in a foreign country? | 10 | | No |
| | See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country | | | |
| | | | | |
| Pal | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | T |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1a | During the year did the foundation (either directly or indirectly) | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | | | |
| | for the benefit or use of a disqualified person)? | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | | | |
| | if the foundation agreed to make a grant to or to employ the official for a period | | | |
| | after termination of government service, if terminating within 90 days) | | | |
| 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)) | | | |
| а | At the end of tax year 2015, did the foundation have any undistributed income (lines 6d | | | |
| | and 6e, Part XIII) for tax year(s) beginning before 2015? | | | |
| | If "Yes," list the years > 20 | | | |
| 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 | | No |
| С | 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 | | | |
| За | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at | | | |
| L. | any time during the year? | | | |
| D | 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 | | No |
| 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 |

| Par | t VIII-B Statements Re | egardır | ig Activities for | Wh | ich Form 4720 | мау | Be Required (<i>Cont</i> | inue | 1) | |
|-------|---|---------------|--|--------|-------------------------|--------|-----------------------------------|---------|------------|---------|
| 5a | During the year did the founda | atıon pay | or incurany amoun | t to | | | | | | |
| | (1) Carry on propaganda, or o | therwise | attempt to influence | e leg | ıslatıon (section 49 | 45(e |)) [?] | No | | |
| | (2) Influence the outcome of | any spec | ıfıc publıc electıon (| sees | section 4955), or to | carı | гу | | | |
| | on, directly or indirectly, a | any votei | registration drive?. | | | | \ Yes \ | √ No | | |
| | (3) Provide a grant to an indiv | vıdual for | travel, study, or oth | ersi | mılar purposes? | | ┌ Yes ┡ | √ No | | |
| | (4) Provide a grant to an orga | anızatıon | other than a charıta | ble, e | etc , organization de | scrib | oed | | | |
| | ın section 4945(d)(4)(A) | ? (see ins | structions) | | | - | \ Yes \ | √ No | | |
| | (5) Provide for any purpose o | ther than | religious, charitable | e, sc | ientific, literary, or | | | | | |
| | educational purposes, or | for the pr | evention of cruelty t | o ch | ıldren or anımals?. | | | No | | |
| b | If any answer is "Yes" to 5a(| 1)-(5), d | ıd any of the transac | tions | fail to qualify under | the | exceptions described in | | | |
| | Regulations section 53 4945 | or in a c | urrent notice regard | ıng d | lisaster assistance | (see | ınstructions)? | | 5b | No |
| | Organizations relying on a cu | rrent not | ice regarding disast | eras | sistance check here | e | | _ | | |
| C | If the answer is "Yes" to ques | stion 5a(| 4), does the foundat | ion c | laım exemption from | n the | | | | |
| | tax because it maintained exp | penditure | responsibility for th | ie gra | ant? | - | T Yes 🖟 | √ No | | |
| | If "Yes," attach the statement i | required b | y Regulations section | n 53. | 4945–5(d). | | | | | |
| 6a | Did the foundation, during the | year, re | ceive any funds, dire | ctly | or indirectly, to pay | prer | niums on | | | |
| | a personal benefit contract?. | | | | | | Yes | √ No | | |
| b | Did the foundation, during the | year, pa | y premiums, directly | orı | ndırectly, on a perso | nal l | benefit contract? | | 6b | No |
| | If "Yes" to 6b, file Form 8870. | | | | | | | | | |
| 7a | At any time during the tax ye | ar, was tl | ne foundation a party | / to a | prohibited tax shel | ter tı | ransaction? Yes | √ No | | |
| b | If yes, did the foundation rece | eive any | proceeds or have an | y net | t income attributable | e to t | he transaction? | | 7b | No |
| Dat | 3 : N V A B B B B | | ficers, Directors | , Tr | ustees, Founda | tio | n Managers, Highly | Paid | Employ | ees, |
| | and Contractor | | | | | | | | | |
| | List all officers, directors, trus | stees, for | ındation managers a | nd t | heir compensation (| see i | | Г | | |
| | | | Title, and average | (c) | Compensation(If | | (d) Contributions to | l e | xpense a | ccount. |
| | (a) Name and address | (h) | hours per week devoted to position | | not paid, enter -0-) | | mployee benefit plans | | ther allov | • |
| | | | · | | • | and | deferred compensation | | | |
| | Sundquist | Pres 3 0 0 | ;/Treas | | 0 | | | | | |
| | 5 N 130th Suite 310 tle, WA 98133 | 3 00 |) | | | | | | | |
| | ia Sundquist | Sac | retary | | 0 | | | | | |
| | 5 N 130th Suite 310 | 3 00 | • | | | | | | | |
| | tle, WA 98133 | | | | | | | | | |
| Diane | Sundquist | Vice | President | | 0 | | | | | |
| 115! | 5 N 130th Suite 310 | 2 00 |) | | | | | | | |
| | tle, WA 98133 | | | | | | | | | |
| | Compensation of five highest- | paid emp | loyees (other than t | those | e included on line 1– | -see | | nter "N | IONE." | |
| | (a) | | Title, and aver | | | | Contributions to employee benefit | | xpense a | ccount |
| Nan | ne and address of each employ more than \$50,000 | ee paid | hours per wee (b) devoted to posi | | (c) Compensatio | n | plans and deferred | | ther allow | • |
| | more than \$50,000 | | (b) devoted to posi | LIUII | | | (d) compensation | | | |
| NON | E | | | | | | | | | |
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| Part VIII Information About Officers, Directors, Trusto and Contractors (continued) | | |
|--|--|------------------|
| 3 Five highest-paid independent contractors for professional services (| | E" |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| otal number of others receiving over \$50,000 for professional services. | | • |
| Part IX-A Summary of Direct Charitable Activities | | |
| ist the foundation's four largest direct charitable activities during the tax year. Include rele | evant statistical information such as the number | of Expenses |
| rganizations and other beneficiaries served, conferences convened, research papers prod | uced, etc | Lxpelises |
| 1 | | |
| 2 | | |
| 3 | | |
| 4 Part IX-B Summary of Program-Related Investments (| see instructions) | |
| Describe the two largest program-related investments made by the foundation during | • | A mount |
| 1 | the tax year on lines I and 2 | Amount |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| All other program-related investments See instructions | | |
| 3 | | |
| | | |
| | | |
| Total. Add lines 1 through 3 | | • |

| Pa | (All domestic foundations must complete this part. Foreign foundations, see instruction | s.) | |
|-----|--|----------|--------------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., | <u> </u> | |
| | purposes | | |
| а | A verage monthly fair market value of securities | 1a | 118,548 |
| b | A verage of monthly cash balances | 1b | 3,952 |
| c | Fair market value of all other assets (see instructions) | 1c | 0 |
| d | Total (add lines 1a, b, and c) | 1d | 122,500 |
| e | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | |
| 3 | Subtract line 2 from line 1d | 3 | 122,500 |
| 4 | Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see | | |
| | ınstructions) | 4 | 1,838 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 | 5 | 120,662 |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 6,033 |
| Pai | t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and ceil check here ► ☐ and do not complete this part.) | rtaın f | oreign organizations |
| 1 | Mınımum ınvestment return from Part X, line 6 | 1 | 6,033 |
| 2a | Tax on investment income for 2015 from Part VI, line 5 2a 69 | | |
| b | Income tax for 2015 (This does not include the tax from Part VI) 2b | | |
| c | Add lines 2a and 2b | 2c | 69 |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 5,964 |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | 5,964 |
| 6 | Deduction from distributable amount (see instructions) | 6 | |
| 7 | Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 | 7 | 5,964 |
| | Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | _ | |
| а | Expenses, contributions, gifts, etc —total from Part I, column (d), line 26 | 1a | 155,600 |
| | 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 | | l . |
| 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 | 155,600 |
| 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 | 69 |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 155,531 |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years | er the | foundation qualifies for |

| P | art XIII Undistributed Income (see ins | tructions) | | | | |
|----|--|---------------|----------------------------|-------------|-------------|-------|
| | | (a) Corpus | (b) Years prior to 2014 | (c) 2014 | (d) 2015 | |
| 1 | Distributable amount for 2015 from Part XI, line 7 | | | | | 5,964 |
| | Undistributed income, if any, as of the end of 2015 | | | | | |
| a | | | | | | |
| | Total for prior years 20, 20, 20 | | | | | |
| | | | | | | |
| a | From 2010 | .7 | | | | |
| b | From 2011 | | | | | |
| c | From 2012 | 2 | | | | |
| d | 100.53 | 70 | | | | |
| e | From 2014 | '8 | | | | |
| f | Total of lines 3a through e | 496,819 | | | | |
| | Qualifying distributions for 2015 from Part | | | | | |
| | XII, line 4 🕨 \$ 155,600 | | | | | |
| а | Applied to 2014, but not more than line 2a | | | | | |
| | Applied to undistributed income of prior years | | | | | |
| | (Election required—see instructions) | | | | | |
| С | Treated as distributions out of corpus (Election required—see instructions) | 0 | | | | |
| d | Applied to 2015 distributable amount | | | | | 5,964 |
| е | Remaining amount distributed out of corpus | 149,636 | | | | |
| 5 | Excess distributions carryover applied 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 Subtract line 5 | 646,455 | | | | |
| 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 | | | | | |
| е | Undistributed income for 2014 Subtract line | | | | | |
| | 4a from line 2a Taxable amount—see | | | | | |
| _ | instructions | | | | | |
| 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) | | | | | |
| 8 | Excess distributions carryover from 2010 not | 108,917 | | | | |
| ٥ | applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2016. | | | | | |
| 9 | Subtract lines 7 and 8 from line 6a | 537,538 | | | | |
| 10 | Analysis of line 9 | | | | | |
| | Excess from 2011 99,91 | 2 | | | | |
| b | Excess from 2012 | -2 | | | | |
| c | Excess from 2013 100,55 | 70 | | | | |
| d | Excess from 2014 127,55 | 8 | | | | |
| е | Excess from 2015 149,63 | 36 | | | | |

| | Private Operating Foundat | • | | | 19) | |
|------------|---|---------------------|------------------------|----------------------|----------------------|------------|
| 1a | If the foundation has received a ruling or determ | | | | | |
| | foundation, and the ruling is effective for 2015, | | | | | |
| | Check box to indicate whether the organization | | ting foundation de | | 1 4942(j)(3) or | 4942(j)(5) |
| 2a | Enter the lesser of the adjusted net income from Part I or the minimum | Tax year | | Prior 3 years | | (e) Total |
| | investment return from Part X for each | (a) 2015 | (b) 2014 | (c) 2013 | (d) 2012 | |
| | year listed | | | | | |
| b 8 | 35% 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 | | | | | |
| а | "Assets" alternative test—enter | | | | | |
| | (1) Value of all assets | | 1 | | | |
| | (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b | "Endowment" alternative test— enter 2/3 | | 1 | | | |
| - | 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 | | | | | |
| Pa | rt XV Supplementary Information (C | | | e organizatio | n had \$5,000 o | r more in |
| | assets at any time during the | <u>year—see ins</u> | tructions.) | | | |
| L a | Information Regarding Foundation Managers: List any managers of the foundation who have co | ontributed more th | nan 2% of the tota | ıl contributions rec | eived by the found | lation |
| | before the close of any tax year (but only if they | | | | | ideloli |
| | | | | | | |
| b | List any managers of the foundation who own 10 | | | | large portion of th | е |
| | ownership of a partnership or other entity) of wh | ich the loundation | inas a 10% or gre | eaterinterest | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Total Control Control Control City | Cabalanak | :t- B | | | |
| 2 | Information Regarding Contribution, Grant, Gift | | | | | |
| | Check here ► ✓ If the foundation only makes counsolicited requests for funds. If the foundation | | | | | |
| | other conditions, complete items 2a, b, c, and d | | its, etc. (see ilisti) | actions) to marvia | dais of organizatio | iis uiidei |
| | | | | | | |
| а | The name, address, and telephone number or e | mail address of th | e nerson to whom | annlications shou | ld he addressed | |
| u | The name, address, and telephone number of el | man address of th | e person to whom | applications shou | ia be addressed | |
| | | | | | | |
| | | | | | | |
| b | The form in which applications should be submi | tted and informat | ion and materials t | they should includ | e | |
| | | | | | | |
| | | | | | | |
| C | Any submission deadlines | | | | | |
| | | | | | | |
| _ | A | | | | | |
| d | Any restrictions or limitations on awards, such factors | as by geographic | aı areas, charitabl | e neias, kinds of ii | nstitutions, or othe | Γ |

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 155,600 **b** Approved for future payment

| Form 990-PF (2015) Part XVI-A Analysis of Income-Produc | ing Activitie | es | | | Page 12 |
|---|----------------------|-----------------------|-----------------------|--------------------|---|
| Enter gross amounts unless otherwise indicated | Unrelated bu | usiness income | Excluded by section | n 512, 513, or 514 | (e) Related or exempt |
| 1 Program service revenue | (a) Business code | (b) A mount | (c) Exclusion code | (d) A mount | function income (See instructions) |
| a b | | | | | |
| c | | | | | |
| d | | | | | |
| e f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| Membership dues and assessments Interest on savings and temporary cash investments | | | | | |
| Dividends and interest from securities | | | 14 | 4,535 | |
| Net rental income or (loss) from real estate a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| Net rental income or (loss) from personal property | | | | | |
| Other investment income | | | | | |
| Gain or (loss) from sales of assets other than inventory | | | 18 | 3,919 | |
| Net income or (loss) from special events Gross profit or (loss) from sales of inventory | | | | | |
| Other revenue a | | | | | |
| b | | | | | |
| c | | | | | |
| d e | | | | | |
| Subtotal Add columns (b), (d), and (e). | | | | 8,454 | |
| Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify | | | : | 13 | 8,454 |
| art XVI-B Relationship of Activities to | | plishment of I | Exempt Purpos | es | |
| Explain below how each activity for whether the accomplishment of the foundation's instructions) | | | | | |
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| Part | XVI | | rmation R charitable | | | | | saction | ns and | Relationships | With | | | |
|---------------------|---------|--------------------------|-------------------------|------------------------|-----------|-------------|---|------------------|-----------|--|---------------------|------------------------|----------|-----|
| | | rganızatıor | directly or i | ındırectly (| engage | ın any of t | the following wi | | | nization described relating to polition | | | Yes | No |
| | | tions? | , | | | ()() | , | | , | J . | | | | |
| a Tra | nsfer | s from the | eporting fou | ndation to | a nonc | harıtable e | exempt organiz | ation of | | | | | | |
| (1) | Cas | h | | | | | | | | | | 1a(1) | | No |
| (2) | Oth | er assets. | | | | | | | | | | 1a(2) | | No |
| | | nsactions | | | | | | | | | | () | | |
| (1) | Sale | s of assets | to a noncha | rıtable ex | empt or | ganızatıoı | n | | | | | 1b(1) | | No |
| | | | | | | | | | | | | 1b(2) | | No |
| | | | | | | | | | | | | $\overline{}$ | | No |
| | | | | | | | | | | | | 1b(4) | | No |
| | | | | | | | | | | | | 1b(5) | | No |
| | | | | | | | | | | | | 1b(6) | | No |
| | | | | | | | | | | | | 1c | | No |
| | _ | | | _ | | | | | | ould always show | | | <u>_</u> | 110 |
| | iny tra | ansaction o | | angement | , show | n column | | of the goo | ods, othe | received less thai rassets, or servio of transfers, transact | ces receive | ed | | ıts |
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| des | cribe | d in section complete | | he Code (d schedule | | an sectioi | ated to, one or not | ın sectı | | | otion of relati | | s 🔽 | Νο |
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| Sign | the | best of my | | and belief, | ıt ıs tru | ıe, correct | | Declar | | mpanying schedul reparer (other tha | an taxpaye May t | r) is bas he IRS di | sed on | all |
| Here | | Signature | of officer or t | rustee | | | Date | -) | | | below | he prepa | | |
| | | 1 | | | I | | | T ₂ . | | To | | nstr)? ✓ | Yesi N | 10 |
| | | 1 | e preparer's Eastham | name | Prepa | rer's Sıgn | ature | Date | | Check if self- employed ► | PTIN | 000687 | '30 | |
| Paid Prep Use | areı | Firm's na Eastham | Foster CPAs | s PS | | | | 1 | | Firm's EIN ► | 1 | | | |
| Only | | 2020 EI | Capitan Way | Suite 100 |) Evere | tt, WA 98 | 3208 | | | Phone no (425 | 5)338-10: | L O | | |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

| 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) | (b) How acquired P—Purchase D—Donation | Date acquired (c) (mo , day, yr) | (d) Date sold (mo , day, yr) |
|---|--|-----------------------------------|--|
| 2015 shares Baird Intermediate | Р | 2015-01-01 | 2015-03-02 |
| 20 shares IShares Core Total US | Р | 2015-01-27 | 2015-06-10 |
| 135 shares JPMorgan US Equity | Р | 2015-03-02 | 2015-06-23 |
| 5 shares IShares Core Total US | Р | 2015-01-27 | 2015-08-05 |
| 20 shares IShares Core Total US | Р | 2015-01-27 | 2015-08-12 |
| 30 shares IShares Core Total US | Р | 2015-01-01 | 2015-09-02 |
| 17 shares IShares Core Total US | Р | 2015-01-12 | 2015-10-05 |
| 20 shares Vanguard 500 Index Fund | Р | 2015-03-17 | 2015-10-20 |
| 200 shares Metropolitan West | Р | 2015-01-27 | 2015-11-10 |
| 60 shares Gotham Absolute Return Fund | Р | 2015-01-12 | 2015-12-08 |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

| (e) Gross sales price | Deprectation allowed (f) (or allowable) | Cost or other basis (g) plus expense of sale | Gain or (loss) (h) (e) plus (f) minus (g) |
|-----------------------|---|--|---|
| 22,467 | | 22,595 | -128 |
| 2,162 | | 2,238 | -76 |
| 2,063 | | 2,044 | 19 |
| 544 | | 559 | -15 |
| 2,192 | | 2,238 | -46 |
| 3,265 | | 3,349 | -84 |
| 1,862 | | 1,890 | -28 |
| 3,750 | | 3,843 | -93 |
| 2,150 | | 2,206 | -56 |
| 766 | | 819 | -53 |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 | | | Gains (Col (h) gain minus |
|---|---|--|--|
| (i) F M V as of 12/31/69 | A djusted basis (j) as of 12/31/69 | Excess of col (1) (k) over col (j), if any | col (k), but not less than -0-) or (I) Losses (from col (h)) |
| | | | -128 |
| | | | -76 |
| | | | 19 |
| | | | -15 |
| | | | -46 |
| _ | | | -84 |
| | | | -28 |
| | | | -93 |
| | | | -56 |
| | | | -53 |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

| 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) | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
|---|--|---|-------------------------------|
| 45 shares John Hancock | Р | 2015-01-27 | 2015-12-08 |
| 375 shares JPMorgan US Equity | Р | 2015-01-05 | 2015-12-08 |
| 25 shares Principal Midcap Fund | Р | 2015-01-12 | 2015-12-08 |
| 12 shares IShares Core Total US | Р | 2011-10-13 | 2015-01-06 |
| 70 shares Vanguard Morgan Growth | Р | 2014-01-27 | 2015-03-02 |
| 10 shares Vanguard 500 Index Fund | Р | 2013-08-05 | 2015-08-05 |
| 8 shares IShares Core Total US | Р | 2011-10-13 | 2015-10-05 |
| 15 shares IShares Core Total US | Р | 2011-10-13 | 2015-10-20 |
| 15 shares Vanguard 500 Index Fund | Р | 2014-01-01 | 2015-12-02 |
| Capital Gain Dividends | | | |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

| (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) |
|-----------------------|---|--|---|
| 502 | | 501 | 1 |
| 5,520 | | 5,623 | -103 |
| 562 | | 538 | 24 |
| 1,333 | | 1,310 | 23 |
| 5,834 | | 5,394 | 440 |
| 1,941 | | 1,576 | 365 |
| 876 | | 873 | 3 |
| 1,644 | | 1,637 | 7 |
| 2,888 | | 2,517 | 371 |
| | | | 3,348 |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 | | | Gains (Col (h) gain minus |
|---|---|--|--|
| (i) F M V as of 12/31/69 | A djusted basıs (j) as of 12/31/69 | Excess of col (1) (k) over col (j), if any | col (k), but not less than -0-) or (I) Losses (from col (h)) |
| | | | 1 |
| | | | -103 |
| | | | 24 |
| | | | 23 |
| | | | 440 |
| | | | 365 |
| | | | 3 |
| | | | 7 |
| | | | 371 |
| | | | |

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

| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | A mount |
|--|---|-------------------------|--|---------|
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | contribution | |
| a Paid during the year | | | | |
| Alliance Defense Fund 15100 N 90th Street Scottsdale, AZ 85260 | | | Advocate for the right of people to freely live out their faith | 10,000 |
| American Family Association PO Box Drawer 2440 Tuppelo, MS 38803 | | | A dvance faith, family and freedom in the culter from a Judeo Christian worldview | 2,000 |
| Bobby Matthews PO Box 167 Phuentsholing, Bhutan IN | | | Aıd for family welfare to families in India | 2,500 |
| Family Policy Institute of WA 16108 Ash Way Suite 111A Lynnwood, WA 98087 | | | Public policy advocate for formation, growth, and endurance of families | 42,000 |
| Family Research Council 801 G Street NW Washington, DC 20001 | | | A dvance faith, family, and freedom in public policy and the culture from a christian worldview, promoting | 15,000 |
| Good News Charitable Society Kanjikuzhy Kottayam, Kerala 686 004 IN | | | Nursery School | 8,000 |
| India Gospel Outreach PO Box Rancho Cucamonga, CA 91729 | | | Deliver care in some of the most distressed regions of the world | 5,000 |
| IPC Theological Seminary 50 Favorite Lane Jericho, NY 11753 | | | Funding for portion of the Office Block and Library at the school | 17,000 |
| Pregnancy Resource Center 4310 Hoyt Ave Everett, WA 98203 | | | Support celebration of life campaign | 2,000 |
| Regerate Org of Implore H No 81 Dıgha, Patna IN | | | Deliver care and food to some of Indias needest areas | 3,600 |
| Rescue Freedom International PO Box 77 Kirkland, WA 98083 | | | Rescue and restoration of suriviors of human trafficking | 2,500 |
| South Asia Advocates PO Box 2993 Kirkland, WA 98083 | | | Improve lives through literacy programs, leadership development and job skills training | 5,000 |
| The Good Shepherd Ministries Flat 12 Shelter Bldg St Anthonys Chembur, Mumbai 400071 IN | | | Daycare, orphanages, and pastor support | 33,000 |
| Seattle Union Gospel Mission PO Box 202 Seattle, WA 98111 | | | Provide emergency care and long term recovery services to homeless people in Seattle | 5,000 |
| The Voice of the Martyrs PO Box 443 Bartlesville,OK 74005 | | | Provide support of persecuted christians through practical and spirtual assistance | 2,000 |
| Total | | | ▶ 3a | 155,600 |

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

| CIMI DECIT TUTE ACTUAL CONTRACT | anto ana contributions | . a.a zaring | and real of Approved for a | atare rayment |
|---|---|-------------------------|--|---------------|
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | A mount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| Sound Choice Pharmaceutical Institu 1749 Dexter Ave N Seattle, WA 98109 | | | End human trafficking and exploitation for biomedical research | 1,000 |
| Total | | | ▶ 3a | 155,600 |

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491256001286

TY 2015 Accounting Fees Schedule

Name: Natan Foundation

EIN: 83-0380273

Software ID: 15000324

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|----------|--------|--------------------------|------------------------|---|
| | 6,031 | 1,508 | 0 | 0 |

TY 2015 Explanation of Non-Filing with Attorney General Statement

Name: Natan Foundation

EIN: 83-0380273

Software ID: 15000324

Software Version: 2015v2.0

Statement: The State of Washington does not require a copy of 990-PF to be

filed with the State's Attorney General's Office.

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491256001286

TY 2015 Investments - Other Schedule

Name: Natan Foundation

EIN: 83-0380273

Software ID: 15000324

| Category/ Item | Listed at Cost or FMV | Book Value | End of Year Fair Market Value |
|----------------|-----------------------|------------|----------------------------------|
| | AT COST | 204,582 | |

TY 2015 Other Expenses Schedule

Name: Natan Foundation

EIN: 83-0380273

Software ID: 15000324

| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|---------------|-----------------------------------|--------------------------|---------------------|--|
| A dvisor Fees | 2,476 | | | |
| Licenses | 40 | | | |
| Postage | 171 | | | |
| Supplies | 10 | | | |

TY 2015 Other Professional Fees Schedule

Name: Natan Foundation

EIN: 83-0380273

Software ID: 15000324

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|--------------------------|--------|--------------------------|------------------------|---|
| O ther Professional Fees | 300 | 0 | 0 | 0 |

TY 2015 Substantial Contributors Schedule

Name: Natan Foundation

EIN: 83-0380273

Software ID: 15000324

| Name | Address |
|--------------------------|---|
| David Sundquist | 16108 Ash Way 201 Lynnwood, WA 98087 |
| Krıstı Sundquist | 16108 Ash Way 201 Lynnwood, WA 98087 |
| Larry Sundquist | 16108 Ash Way 201 Lynnwood, WA 98087 |
| Joseph Pallıkızhakkethıl | 800 Craig St Irving,TX 75060 |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491256001286 |
|--------------------------------------|-----------------|---------------------|
| | | |

TY 2015 Taxes Schedule

Name: Natan Foundation

EIN: 83-0380273

Software ID: 15000324

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|--------------|--------|--------------------------|------------------------|---|
| O ther Taxes | 45 | | | |

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As Filed Data -

DLN: 93491256001286

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OMB No 1545-0047

OND 10 1343-004

Schedule B

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

Department of the Treasury Internal Revenue Service

Natan Foundation

Name of the organization

Schedule of Contributors

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

2015

Employer identification number

| | | | 83-0380273 | | |
|---|---|--|--|--|--|
| Organ | ization type (check or | ne) | | | |
| Filers | of: | Section: | | | |
| Form 990 or 990-EZ | | 501(c)() (enter number) organization | | | |
| | | | ı | | |
| | | □ 527 political organization | | | |
| Form 9 | 90-PF | √ 501(c)(3) exempt private foundation | | | |
| | | | | | |
| | | 501(c)(3) taxable private foundation | | | |
| Note. (| |), (8), or (10) organization can check boxes for both the General Rule and a Sp | pecial Rule See instructions | | |
| IZ | | filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions any one contributor. Complete Parts I and II. See instructions for determining a | | | |
| Specia | ıl Rules | | | | |
| Γ | under sections 509(a) received from any one | escribed in section $501(c)(3)$ filing Form 990 or 990-EZ that met the $33^1\beta\%$ support of the section $501(c)(3)$ filing Form 990 or 990-EZ, part expectation and 5000 form 990 or 990-EZ, part expectation and 5000 form 990-EZ, line 1. Complete Parts I and II. | II, line 13, 16a, or 16b, and that | | |
| Γ | during the year, total of | escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive contributions of more than \$1,000 exclusively for religious, charitable, scientific 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 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 | | | outions totaled more than \$1,000 lf usively religious, charitable, etc, ause it received nonexclusively | | |

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)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

Name of organization Natan Foundation Employer identification number 83-0380273

| 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 | David Sundquist 16108 Ash Way 201 | | Person Payroll | 다 |
| | Lynnwood, WA 98087 | \$ 80,000 | Noncash (Complete Part II f | or noncash |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of cont | ribution |
| 2 | Kristi Sundquist 16108 Ash Way 201 | | Person Payroll | 디 |
| | Lynnwood, WA 98087 | \$ 90,000 | Noncash (Complete Part II f | or noncash |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of cont | ribution |
| 3 | Larry Sundquist | | Person Payroll | ᅜ |
| | 16108 Ash Way 201 Lynnwood, WA 98087 | \$ 60,000 | Noncash | , |
| | Lynnwood, WA 98087 | | (Complete Part II f contributions) | or noncash |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of cont | ribution |
| | | | Person Payroll | Г Г |
| | | \$ | Noncash (Complete Part II f | or noncash |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of cont | ribution |
| | | | Person Payroll | Г |
| | | \$ | Noncash | , L |
| | | | (Complete Part II f contributions) | or noncash |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of cont | ribution |
| | | | Payroll | , |
| | | \$ | Noncash (Complete Part II f | or noncash |
| | | | contributions) | |

| Name of organization Natan Foundation | | Employer identification n | Employer identification number | |
|---|---|--|--------------------------------|--|
| Natali Foulldatioi | | 83-0380273 | | |
| 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 | |
| | 412 | (c) | | |
| (a) No.from Part I | (b) Description of noncash property given | FMV (or estimate) (see instructions) | (d) Date received | |
| (a) | (b) | (c) | (d) | |
| No.from Part I | Description of noncash property given | FMV (or estimate) (see instructions) | Date received | |
| | | \$ | | |
| (a) No.from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received | |
| | | <u> </u> | | |
| (a) No.from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received | |
| | | <u> </u> | | |
| (a) No.from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received | |
| | | <u> </u> | | |
| | | | | |

| Schedule B (I | Form 990, | 990-EZ, or | 990-PF) | (2015) |
|---------------|-----------|------------|---------|--------|
|---------------|-----------|------------|---------|--------|

| Name of organizati Natan Foundation | on | | nployer identification number |
|---|---|---|--|
| total me line ent of \$1,00 | vely religious, charitable, etc., contribution ore than \$1,000 for the year from any of the second or the year from any of the second of the second of the year. (Enter this infole licate copies of Part III if additional space is | one contributor. Complete colur III, enter the total of <i>exclusively</i> mation once. See instructions. | nns (a) through (e) and the following religious, charitable, etc., contributions |
| (a) No.from Part I | (b) Purpose of gift | (c) Use of gift (d) Description of how gift | |
| - | | | |
| | Transferee's name, address, an | (e) Transfer of gift | 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 ZIP4 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 ZIP4 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, an | (e) Transfer of gift d ZIP4 F | Relationship of transferor to transferee |
| | | | |
| | | | |