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Form **990-PF** 

## EXTENDED TO AUGUST 15, 2016 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 For calendar year 2015 or tax year beginning and ending Name of foundation A Employer identification number THE PERROW FOUNDATION 91-1798883 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number P.O. BOX 245 360-851-9309 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here GIG HARBOR, WA 98335 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year J Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here ▶\$ <u>1,543,399.</u> (Part I, column (d) must be on cash basis) Analysis of Revenue and Expenses (d) Disbursements or charitable purposes (cash basis only) Part I (c) Adjusted net (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) ) expenses per books income N/A Contributions, gifts, grants, etc., received Check X if the foundation is not required to attach Sch B Interest on savings and temporary cash investments 59,131. 59,131. STATEMENT 1 Dividends and interest from securities 5a Gross rents h Net rental income or (loss) 20,915. 68 Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 566,285. 20,915. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss)  $3, \overline{211}$ . 11,200. STATEMENT 11 Other income 91,246. 83,257. Total. Add lines 1 through 11 0. 0. 0. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Administrative Expenses 16a Legal fees 3,750. 1,875. STMT 3 **b** Accounting fees 11,387 POSBARK STMT 4 c Other professional fees 17 Interest 18 Taxes 07142016 07 112**01**6 19 Depreciation and depletion 20 Occupancy <del>12 OGDEN</del> 21 Travel, conferences, and meetings 22 Printing and publications STMT 5 35 35. 23 Other expenses 24 Total operating and administrative <u>1,91</u>0. 15,172 expenses. Add lines 13 through 23 13,262 64,876. 64,876. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 80,048 66,786. 13,262 Add lines 24 and 25 27 Subtract line 26 from line 12: 11,198 & Excess of revenue over expenses and disbursements 69,995. b Net investment income (if negative, enter -0-) N/A

LHA For Paperwork Reduction Act Notice, see instructions.

c Adjusted net income (if negative, enter -0-)

91-1798883 Form 990-PF (2015) THE PERROW FOUNDATION Page 2 Beginning of year End of year Attached schedules and amounts in the description **Balance Sheets** Part II column should be for end-of-year amounts only (a) Book Value (b) Book Value (c) Fair Market Value 13,752 14,223 14,223. 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 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 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 1,279,756. 1,279,832. STMT 6 1,529,176. b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans -12,283 STMT 7 0. 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 1,281,225. 1,294,055. 1,543,399. instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0. 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted ► X Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 0 27 Capital stock, trust principal, or current funds 0. 28 Paid-in or capital surplus, or land, bldg., and equipment fund 1,294,055. 1,281,225. 29 Retained earnings, accumulated income, endowment, or other funds 1,281,225. 1,294,055. 30 Total net assets or fund balances 1,281,225. 1,294,055 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 1,281,225. 11,198. (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) BOOK/TAX DIFFERENCE ON INVESTMENT 3,726. 296,149. Decreases not included in line 2 (itemize) ► FEDERAL TAX PAYMENT 2,094. 1,294,055. 6\_Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 Form 990-PF (2015)

12210707 146892 77117

Part V Capital Gains a	and Lo	sses for Tax on Inv	vestment	Income						
(a) List and descr 2-story brick wa	ribe the ki rehouse;	nd(s) of property sold (e.g. or common stock, 200 shs.	, real estate, MLC Co.)		( <b>b</b> )     D	How ac - Purc - Dona	quired hase ation	(c) Date (mo., d		(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADE	SEC	CURITIES					P			
<u>b</u>										
<u>c</u>					_					
<u>d</u>					$\vdash$					
<u>e</u>		· · · · · · · · · · · · · · · · · · ·	<del></del>		<u> </u>					<u> </u>
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss s (f) minus	(g)
a 566,285.				545,37	0.					20,915.
<u>b</u>										
<u>c</u>					_					
_d										
<u>e</u>				10/04/00			-			
Complete only for assets showin									iol. (h) gain not less tha	
(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col. (1)			COL		(from col. (	
(1) 1 111111111111111111111111111111111		as 01 12/3 1/09	over	coi. (j), ii any						
<u>a</u>										20,915.
b										
С										
d										
e							<del></del>	<u> </u>		
		∫ If gain, also enter	ın Part I, line	7	ا (					
2 Capital gain net income or (net ca	pital loss)	)     { If (loss), enter -0-	ın Part I, line	7	゚゚゚	2				20,915.
3 Net short-term capital gain or (los	s) as defi	ned in sections 1222(5) and	d (6):		_					
If gain, also enter in Part I, line 8,	•	, ,	. ,-		- }					
If (loss), enter -0- in Part I, line 8  Part V Qualification U		·			لل	3			N/A	·
Was the foundation liable for the sect				•	iod2					Yes X No
1 Enter the appropriate amount in e					ntries.					
(a) Base period years Calendar year (or tax year beginnii	ים ווי)	(b) Adjusted qualifying dist	ributions	Net value of no	(c)		use assets		Distri	(d) bution ratio vided by col. (c))
2014	·9 ···/	11:	1,331.		1	.69	8,717	$\rightarrow$	(1000)	.065538
2013			4,712.				0,845			.070711
2012			8,706.				3,204			.050400
2011	1		8,140.	-			7,630			.013073
2010			7,025.				4,989			.023000
	•		•			•				.222722
<ul><li>2 Total of line 1, column (d)</li><li>3 Average distribution ratio for the 5</li></ul>	5-vaar ha	ca nariad - divida the total o	n line 2 hv 5	or by the number	of un	210		2		• 444 144
the foundation has been in exister	-	•	iii liile 2 by 5,	or by the number	or ye	ars		3		.044544
4 Enter the net value of noncharitab	le-use as	sets for 2015 from Part X, I	ine 5					4		1,591,349.
5 Multiply line 4 by line 3								_ 5	_	70,885.
6 Enter 1% of net investment incom	ne (1% of	Part I, line 27b)						6		700.
7 Add lines 5 and 6								7		71,585.
8 Enter qualifying distributions from	n Part XII,	line 4						8		66,786.
If line 8 is equal to or greater than See the Part VI instructions.	•		1b, and comp	elete that part usin	g a 1	% tax r	ate.		_	<u> </u>
523521 11-24-15		·								Form <b>990-PF</b> (2015

	990-PF (2015) THE PERROW FOUNDATION	<u> </u>	040/h	4040(a) or 4		17988		Fions	Page 4
	rt VI   Excise Tax Based on Investment Income (Section 4940				940 -	See ms	iruc	lions	<u> </u>
18	Exempt operating foundations described in section 4940(d)(2), check here   and er								
	Date of ruling or determination letter: (attach copy of letter if nec			l l	<u> </u>			4.	20
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	•	and enter	1%	1			.,4(	10.
	of Part I, line 27b								
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%			col. (b). ノ					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Oth	iers en	ter -0-)		2			,4(	0.
	Add lines 1 and 2				3			.,41	
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	ners er	nter -U-)		4	-	1	,4(	0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				5	<del>                                     </del>		.,41	<del>50.</del>
	Credits/Payments:	ا ما	1	1 200					
	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	+	1,280	4				
	Exempt foreign organizations - tax withheld at source	6b	1	415	┥				ĺ
	Tax paid with application for extension of time to file (Form 8868)	6c	+	413	┧				
	Backup withholding erroneously withheld	6d			<del></del> -			.,69	25
	Total credits and payments. Add lines 6a through 6d				7			., 0.	1.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attac	cnea		_	8			_	<u> </u>
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				9	<u> </u>		20	94.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		20	4 . Refunded	10			۷.	0.
	Enter the amount of line 10 to be: Credited to 2016 estimated tax  Tt VII-A   Statements Regarding Activities			z •   Ketunded	1 11	L			<del>••</del>
_	During the tax year, did the foundation attempt to influence any national, state, or local legisl	ation o	r did it na	rticipate or interver	a in	—Т	— Т	Yes	No
14	any political campaign?	auon o	i ulu it pai	ilicipate of interver	6 111	⊢	1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	00 (000	netrueti	one for the definition	n\2	⊢	1b		X
U							**		<del></del> -
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	СОРІ	es or any	materiais publism	eu or			i	
	distributed by the foundation in connection with the activities  Did the foundation file Form 1120-POL for this year?					-	10		<u> </u>
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	vear.				F	<del>'''</del>		<del></del>
•	(1) On the foundation. > \$ (2) On foundation managers.			0	•	l	I		
۵	Enter the reimbursement (if any) paid by the foundation during the year for political expendit				_	İ	ł		
ŭ	managers. > \$ 0.						ı	ŀ	
2	Has the foundation engaged in any activities that have not previously been reported to the IR	S?				-	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 in	strume	ent, article	s of incorporation.	or		Ì	l	
•	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change		•			-	3		<u></u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year						4a	Х	
b	If "Yes," has it filed a tax return on Form 990-T for this year?						4b	Х	
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 eit	her:				l	ı	]	
	By language in the governing instrument, or							i	
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory</li> </ul>	direct	ions that d	onflict with the sta	te law	<u> </u>			
	remain in the governing instrument?					L	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," con	nplete	Part II, c	ol (c), and Part X	V		7	Х	
							l		
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ns) 🕨							
	WA					1			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	torney	General (	or designate)		_			
	of each state as required by General Instruction G? If "No," attach explanation					_	8b	<u>X</u>	
9	Is the foundation claiming status as a private operating foundation within the meaning of sec				endar	_			
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," c	•				ļ.	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedul	e listing	their names	and addresses			10		X
						Form	ี รอบ		(2015)

523541 11-24-15

Form 990-PF (2015) THE PERROW FOUNDATION			91-17988	83	Page 6
Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be Re	equired <sub>(contin</sub>	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?		s X No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire	ctly,			
any voter registration drive?			s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?		s X No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio					
4945(d)(4)(A)? (see instructions)		□ v <sub>4</sub>	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses, or fo	<del></del>			1
the prevention of cruelty to children or animals?	, or oddoddonar parpoods, or re		es X No		1 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the excentions described i		.5		
section 53.4945 or in a current notice regarding disaster assistance (see instru		ii riogululions	N/A	5b	-[
Organizations relying on a current notice regarding disaster assistance check h	•		<b>₩</b> / <del>11</del>	30	+
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		nnd			1
expenditure responsibility for the grant?		/A \ \ \ \ \ \	es 🗆 No	1	
		/A	S NO	1	
If "Yes," attach the statement required by Regulations section 53.4945	• •				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		es X No		
a personal benefit contract?		Y6			X
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	+^-
If "Yes" to 6b, file Form 8870		<u> </u>	( <del>2</del> 7)	1	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y6	s X No		+
b If 'Yes," did the foundation receive any proceeds or have any net income attributed in the foundation About Officers. Directors. Trustometers are the foundation and the foundation and the foundation are the foundation are the foundation are the foundation are the foundation and the foundation are the foundation ar		Ill-bb.	N/A	7b	
Part VIII Information About Officers, Directors, Trusto Paid Employees, and Contractors	ees, roungation <b>w</b> ar	iagers, nignly			
1 List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E	xpense nt, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	accour	nt, other vances
ELIZABETH PERROW	PRESIDENT	Citter -0-7	compensation	0.101	7411000
P.O. BOX 245					
GIG HARBOR, WA 98335	1.00	0.	0.		0.
MICHAEL PERROW	VICE PRESIDEN		<u> </u>	$\vdash$	
P.O. BOX 245	VICE INDEDEN	ľ			
GIG HARBOR, WA 98335	1.00	0.	0.		0.
WADE PERROW	SECRETARY/TRE		0.	<del>                                     </del>	
P.O. BOX 245	DECKETARI/IRE	AANGA			
	1 00	ا م	_		•
GIG HARBOR, WA 98335	1.00	0.	0.		0.
CHRISTINE PERROW	VICE PRESIDEN	J.			
P.O. BOX 245	1 00		_		•
GIG HARBOR, WA 98335  2 Compensation of five highest-paid employees (other than those inc	1.00	0.	0.	L	0.
2 Compensation of five fightest-paid employees (other trian triose inc	T	nter NONE.	(d) Contributions to	(a) E	vnonco
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	accour	xpense nt, other vances
NONE					
	1				
·	1				
		· <del>-</del>		<u> </u>	
	1				
Total number of other employees paid over \$50,000			<u> </u>		0

orm 990-PF (2015) THE PERROW FOUNDATION	91-	L 798883 Page 7
Information About Officers, Directors, Trustees, Foundation No. Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NON	E.º	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<del></del>		
otal number of others receiving over \$50,000 for professional services		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info	ormation such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produced, et	C.	Expenses
N/A		
PartixEB Summary of Program-Related Investments	<u></u> <u>-</u> -	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 a	and 2.	Amount
N/A		
All other program-related investments. See instructions.		
Total. Add lines 1 through 3	<b>•</b>	0.
		Form <b>990-PF</b> (2015)

523561 11-24-15

	m 990-PF (2015) THE PERROW FOUNDATION	91-1798883	Page 8
LP	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, see instructions.)	)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a 1,060	,499.
b	Average of monthly cash balances	1b 18	,322.
c	Fair market value of all other assets	1c 536	,762.
đ	Total (add lines 1a, b, and c)	1d 1,615	,583.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3 1,615	,583.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4 24	,234.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5 1,591	,349.
6	Minimum investment return. Enter 5% of line 5	6 79	,56 <u>7</u> .
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	nd certain	
	foreign organizations check here 🕨 🔃 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1 79	,567.
2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015. (This does not include the tax from Part VI.)  2b 812.		
C	Add lines 2a and 2b	2c 2	,212.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3 77	,355.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5 77	,355.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7 77	,355.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a 66	786.
b	Program-related investments - total from Part IX-B	<u>1b</u>	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4 66	,786.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6 6	,786.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies for the section	

## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,	Corpus	Total o prior to 2011	2011	
line 7	<u>.                                    </u>			77,355.
2 Undistributed income, if any, as of the end of 2015			=	
a Enter amount for 2014 only	<del></del>		4,644.	
<b>b</b> Total for prior years:		•		
		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010				
<b>b</b> From 2011				
c From 2012				
d From 2013				
e From 2014				
f Total of lines 3a through e	<u> </u>			
4 Qualifying distributions for 2015 from Part XII, line 4: ▶\$ 66,786.				
			4,644.	
a Applied to 2014, but not more than line 2a			4,044.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		· ·		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)				62,142.
d Applied to 2015 distributable amount	0.			02,142.
e Remaining amount distributed out of corpus	0.	· ·		0.
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed		0.	<u>-</u>	
d Subtract line 6c from line 6b. Taxable				
amount - see instructions	<del></del>	0.		
e Undistributed income for 2014. Subtract line			_	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				15 212
be distributed in 2016				15,213.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)  8 Excess distributions carryover from 2010				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016.	•			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015				5 990 PE (0045)

523581 11-24-15

523611 11-24-15

Part XVI-A Analysis of Income-Prod	ucing Activities	<b>.</b>			
Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income		section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	
a	_				
b	_		<del> </del>		
c	_		<del>                                     </del>		<u> </u>
d	_		<del>↓                                    </del>		
e	_		<del> </del>		
f			<del>  </del>		<del></del>
g Fees and contracts from government agencies			+		<del> </del>
2 Membership dues and assessments			<del>  </del>		
3 Interest on savings and temporary cash					
Investments	<del>  </del>		14	59,131.	
4 Dividends and interest from securities			14	39,131.	· · ·
5 Net rental income or (loss) from real estate:		<del></del>	+ + -		
a Debt-financed property			<del>                                     </del>		
b Not debt-financed property			<del>                                     </del>		
6 Net rental income or (loss) from personal			1		
property  7 Other investment income	<del>                                     </del>		14	2,643.	
• • • • • • • • • • • • • • • • • • • •			<del>                                     </del>	2,043.	
8 Gain or (loss) from sales of assets other than inventory			18	20,915.	
9 Net income or (loss) from special events			+	20,5251	
10 Gross profit or (loss) from sales of inventory					<del></del>
11 Other revenue:					
a LEAF EQUIPMENT LEASING					
INCOME FUND III, LP	523000	7,989.	14	568.	
c	_	• •	1 1		
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		7,989.		83,257.	0
13 Total. Add line 12, columns (b), (d), and (e)	<del></del>			13	91,246
(See worksheet in line 13 instructions to verify calculations.)	)				
Part XVI-B Relationship of Activities	to the Accomp	olishment of Ex	empt Pur	poses	
Line No. Explain below how each activity for which in the foundation's exempt purposes (other than			Contributed	mportantly to the accomp	lishment of
				<del></del>	
				<u></u>	
					<del></del>
				· <del>-</del>	

523621 11-24-15

Part XV		ERROW FOU egarding Tran izations		N and Transactions a	nd Relationsh	91–1798 nips With Nonchari		<u>Pa</u>	ige 13
1 Did the	organization directly or indi	rectly engage in any	of the following	ng with any other organization	on described in sect	ion 501(c) of		Yes	No
	de (other than section 501(c)					• • • • • • • • • • • • • • • • • • • •			
a Transfe	ers from the reporting found:	ation to a noncharita	ble exempt or	ganization of:					İ
(1) Ca	sh						1a(1)		X
(2) Otl	her assets						1a(2)		X
<b>b</b> Other to	ransactions:								
(1) Sa	les of assets to a noncharita	ble exempt organiza	tion				1b(1)		X
(2) Pu	rchases of assets from a no	ncharitable exempt o	organization				1b(2)		X
(3) Re	ntal of facilities, equipment,	or other assets					1b(3)		X
(4) Re	imbursement arrangements						1b(4)		X
( <b>5</b> ) Lo	ans or loan guarantees						1b(5)		Х
(6) Pe	rformance of services or me	mbership or fundrai	sing solicitatio	ns			1b(6)		X
<b>c</b> Sharing	g of facilities, equipment, ma	uling lists, other asse	ets, or paid em	ployees			1c		X
or servi	nswer to any of the above is ices given by the reporting for (d) the value of the goods, (b) Amount involved	oundation. If the four other assets, or serv	ndation received.		ie in any transaction		ow in		
	<del>- · · · </del>	·′	N/A	<del>`</del>	<del></del>			J	
			·						
	<del></del>								
						<del> </del>			
	<u> </u>			<del></del>					
								-	
		ļ	_	<del></del>	<del></del>				
<del></del>				·	<del> </del>	<del></del>			
$\overline{}$					<del></del>	<del></del>			_
ın secti	oundation directly or indirect on 501(c) of the Code (other complete the following schi	r than section 501(c)			zations described		Yes	X	] No
	(a) Name of org	janization		(b) Type of organization		(c) Description of relations	nip		
	N/A				-				
		<del></del>							
Unc	der penalties of perjury, I declare t	hat I have examined this	return including	accompanying schedules and st	atements and to the he	et of my knowledge			
Sign Here	gnature of officer or trustee	Affete Decideration of pre		taxpayer) is based on all informa	PRESII	as any knowledge May retu sho	the IRS of the Irs of the Irs of	prepare (see inst	er :
	Print/Type preparer's na		Preparer's s	Date *	Title Date	Check If PTIN			
Paid	JODE BEAUV			EAUVAIS	07/07/16	self- employed	1428	963	
Prepare Use Onl	r Firm's name ► MOS				0 , , 0 , , 10	Firm's EIN ▶ 91-0			
223 <b>2</b> 111,	Firm's address ▶ 13				<del> </del>	222 ==		4.6.5	
	TA	COMA, WA	<b>98402-</b>	4205		Phone no. 253-57	2-4	T00	

Phone no. 253-572-4100 Form **990-PF** (2015)

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
HARBOR WILD WATCH	NONE	₽C	GENERAL OPERATIONS	
3110 JUDSON ST. PMB #99				
GIG HARBOR, WA 98335				500
MERCUON VALLEY LAND CONCERNATION	7077			
METHOW VALLEY LAND CONSERVANCY 315 RIVERSIDE PO BOX 71	NONE	PC	GENERAL OPERATIONS	
WINTHROP, WA 98862				1,000
		,		1,000
POINT DEFIANCE ZOO	NONE	PC	GENERAL OPERATIONS	
5400 N PEARL ST				
TACOMA, WA 98407				306
ROOM ONE	NONE	PC	GENERAL OPERATIONS	
РО ВОХ 222				
TWISP, WA 98856				500.
ST NICHOLAS SCHOOL 3555 EDWARDS DR	NONE	PC	GENERAL OPERATIONS	
GIG HARBOR, WA 98335				1,500.
or minden, with your				1,300.
TACOMA ART MUSEUM	NONE	₽C	GENERAL OPERATIONS	
1701 PACIFIC AVE				
TACOMA, WA 98402				6,050.
				•
UNIVERSITY OF PUGET SOUND	NONE	PC	GENERAL OPERATIONS	
1500 N. WARNER ST. PACOMA, WA 98416				10,000.
NEW PHOEBE HOUSE	NONE	₽C	GENERAL OPERTAIONS	
PO BOX 5242				
TACOMA, WA 98415				1,000.
GIG HARBOR TIDES SCHOLARSHIP	NONE	PC	GENERAL OPERATIONS	
FOUNDATION				
PO BOX 2674				
GIG HARBOR, WA 98335				1,000.
PENINSULA HAWKS SCHOLARSHIP FUND	NONE	₽C	GPNPPAL OPPRATIONS	
PO BOX 283	HORE		GENERAL OPERATIONS	
WAUNA, WA 98332				1,000.
Total from continuation sheets		·		30,126.

3 Grants and Contributions Paid During the	real (Ochundadon)	_		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	A
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
WINDERSON DAY GOVERNMENT THE				
HENDERSON BAY SCHOLARSHIP FUND 8402 SKANSIE AVE	NONE	PC	GENERAL OPERTAIONS	
GIG HARBOR, WA 98335				1,00
COMMUNITY FOUNDATION OF NC WA	NONE	PC	GENERAL OPERATIONS	
9 S. WENATCHEE AVE				
WENATCHEE, WA 98801				2,00
FRIENDS OF AMERICAN LAKE VETERANS	NONE	PC	GENERAL OPERATIONS	
GOLF COURSE				
PO BOX 99608				25
LAKEWOOD, WA 98493	-			25
SAFE STREETS	NONE	₽C	GENERAL OPERATIONS	
622 TACOMA AVE S, SUITE 1				
TACOMA, WA 98402				20
FOSS WATERWAY SEAPORT	NONE	PC	GENERAL OPERATIONS	
705 DOCK STREET		1		
TACOMA, WA 98402				50
TACOMA CHILDREN'S MUSEUM	NONE	PC	GENERAL OPERATIONS	
1501 PACIFIC AVENUE				
TACOMA, WA 98402				2
SEATTLE CHILDREN'S HOSPITAL				
PO BOX 5371	NONE	₽C	GENERAL OPERATIONS	
SEATTLE, WA 98145				30
SKANSI NET SHED FOUNDATION	NONE	PC	GENERAL OPERATIONS	
3110 JUDSON ST. PMB #108				<del>-</del> -
GIG HARBOR, WA 98335				50
GUARDIAN ANGELS	NONE	₽C	GENERAL OPERATIONS	
3555 EDWARDS DR			SEMERAL OPERATIONS	
GIG HARBOR, WA 98335				2,50
				-
Total from continuation sheets	<u> </u>	L	_L ,	

FORM 990-PF	DIVIDENDS	AND I	NTERE	ST FRO	OM SECU	RITIES	Sī	PATEMENT 1
SOURCE	GROSS AMOUNT		ITAL INS DENDS	RI	(A) EVENUE R BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOME
CHARLES SCHWAB TAXABLE	59,131	-		 ).	59,131	. 59,13	31.	
TO PART I, LINE 4	59,131		C	).	59,131	. 59,13	31.	
FORM 990-PF		ОТН	ER IN	COME			SI	FATEMENT 2
DESCRIPTION				(A) REVENU PER BOO		(B) NET INVEST- MENT INCOME		(C) ADJUSTED NET INCOME
LEAF EQUIPMENT INCOME GENESIS INCOMEE		FUND		:	173. 2,470.	2,470	).	
LEAF EQUIPMENT LEASIN	NG INCOME			,				
		LINE 1	1 <u> </u>		B,557. L,200.	3,211		
LEAF EQUIPMENT LEASIN III, LP TOTAL TO FORM 990-PF,					1,200.	·····	L. = =	TATEMENT 3
LEAF EQUIPMENT LEASIN			UNTIN	III NG FEES (I NET IN	1,200.	3,211 (C) ADJUSTEI	si	(D)
LEAF EQUIPMENT LEASING III, LP TOTAL TO FORM 990-PF		ACCO	UNTIN	II NG FEES (I NET IN MENT I	1,200. 3) WEST-	3,211 (C) ADJUSTEI	si	(D) CHARITABLE PURPOSES
LEAF EQUIPMENT LEASING III, LP  TOTAL TO FORM 990-PF,  FORM 990-PF  DESCRIPTION	, PART I,	ACCO (A) EXPENS: PER BO	UNTIN ES OKS	II NG FEES (I NET IN MENT I	L,200.	3,211 (C) ADJUSTEI	si	(D) CHARITABLE PURPOSES 1,875.
LEAF EQUIPMENT LEASING III, LP  TOTAL TO FORM 990-PF,  FORM 990-PF  DESCRIPTION  ACCOUNTING FEES	, PART I,	ACCO (A) EXPENS: PER BO	UNTIN ES OKS 750.	III	B) NVEST- INCOME  1,875.	3,211 (C) ADJUSTEI	Since the second	(D) CHARITABLE PURPOSES 1,875.
LEAF EQUIPMENT LEASING III, LP  TOTAL TO FORM 990-PF,  FORM 990-PF  DESCRIPTION  ACCOUNTING FEES  TO FORM 990-PF, PG 1,	, PART I,	ACCO (A) EXPENS: PER BO 3,	UNTIN ES OKS 750. OFESS	III	I,200.  S  NVEST- INCOME  1,875.  1,875.  FEES  NVEST-	3,211 (C) ADJUSTEI	STOP	(D) CHARITABLE PURPOSES  1,875.  1,875.  TATEMENT 4  (D)
LEAF EQUIPMENT LEASING III, LP  TOTAL TO FORM 990-PF  FORM 990-PF  DESCRIPTION  ACCOUNTING FEES  TO FORM 990-PF, PG 1,	, PART I,	ACCOMEXPENS: PER BOOK 3, 3, 2 CHER PROCESS PER BOOK 2 P	UNTIN ES OKS 750. OFESS	JONAL  SIONAL  NET IN MENT IN MENT IN	I,200.  S  NVEST- INCOME  1,875.  1,875.  FEES  NVEST-	(C) ADJUSTEI NET INCOM	STOP	(D) CHARITABLE PURPOSES  1,875.  1,875.  TATEMENT 4  (D) CHARITABLE

FORM 990-PF	OTHER E	XPENSES	STATEMENT 5			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
STATE OF WASHINGTON	35.	0.		35.		
TO FORM 990-PF, PG 1, LN 23	35.	0.		35.		

FORM 990-PF	CORPORATE STOCK		STATEMENT 6
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CHARLES SCHWAB INVESTMENTS		1,279,832.	1,529,176.
TOTAL TO FORM 990-PF, PART II,	LINE 10B	1,279,832.	1,529,176.
FORM 990-PF (	OTHER INVESTMENTS		STATEMENT 7
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
LEAF EQUIPMENT LEASING INCOME FUND COST		0.	0.
TOTAL TO FORM 990-PF, PART II, LINE 13		0.	0.