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Form 990-PF

Return of Private Foundation

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

OMB No. 1545-0052

2015
Open to Public Inspection

Form 990-PF (2015)

Department of the Treasury Internal Revenue Service ► Do not enter social security numbers on this form as it may be made public.

► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For calendar year 2015 or tax year beginning 2015, and ending , 20 A Employer identification number Name of foundation 91-1948479 LAYE WALKER FOUNDATION Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 5111 HARROR LANE 425-2650718 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ► WA 98203-1556 Everett. G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here. ☐ Amended return Final return 2. Foreign organizations meeting the 85% test, ☐ Name change ☐ Address change check here and attach computation E If private foundation status was terminated under H Check type of organization: Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here . . Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here . end of year (from Part II, col. (c), ☐ Other (specify) line 16) ► \$ 102,149 (Part I, column (d) must be on cash basis.) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment for chantable (c) Adjusted net amounts in columns (b), (c), and (d) may not necessarily equal expenses per books purposes (cash basis only) ıncome the amounts in column (a) (see instructions).) 3553 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ▶ ☐ if the foundation is **not** required to attach Sch. B 3 Interest on savings and temporary cash investments 1717 4 Dividends and interest from securities 1717 1717 Gross rents 5a Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . . 8 Net short-term capital gain 9 Income modifications Gross sales less returns and allowances 10a Less: Cost of goods sold . . . Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 14970 12 Total. Add lines 1 through 11 . . . 1717 13 Compensation of officers, directors, trustees, etc. Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Accounting fees (attach schedule) . . . and Administrative Other professional fees (attach schedule) . . B 17 64 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion . . 19 20 21 Travel, conferences, and meetings . . 23 Other expenses (attach schedule) Operating Total operating and administrative expenses. Add lines 13 through 23 6950 Contributions, gifts, grants paid 1717 Total expenses and disbursements. Add lines 24 and 25 1014 26 1717 Subtract line 26 from line 12: 27 7956 a Excess of revenue over expenses and disbursements **b** Net investment income (if negative, enter -0-) .

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

Page 2

Ðα	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year	Eı	nd of year	
<u> </u>	عبيعيا	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	2696	203	1 20	31
	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 (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶				
		Less: allowance for doubtful accounts ▶				
ts	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges		· · · · · · · · · · · · · · · · · · ·		
¥	10a	Investments—U.S. and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)	87421	100118	100 11	8
	C	Investments - corporate bonds (attach schedule)				
ļ	11	Investments—land, buildings, and equipment: basis ▶				
		Less: accumulated depreciation (attach schedule) ▶				
	12	Investments-mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment: basis ▶				
		Less: accumulated depreciation (attach schedule) ▶				
	15	Other assets (describe ►)				
	16	Total assets (to be completed by all filers-see the				
		instructions. Also, see page 1, item l)	70117	102149	7 / 1021	ન ૧
	17	Accounts payable and accrued expenses				
s	18	Grants payable				i
Liabilities	19	Deferred revenue				
ij	20	Loans from officers, directors, trustees, and other disqualified persons				i
ia	21	Mortgages and other notes payable (attach schedule)				į
-	22	Other liabilities (describe ►)				-
	23	Total liabilities (add lines 17 through 22)				ł
S		Foundations that follow SFAS 117, check here ▶ □				
ce		and complete lines 24 through 26 and lines 30 and 31.		_		1
Balances	24	Unrestricted	90117	102149	<u> </u>	İ
3al	25	Temporarily restricted				İ
	26	Permanently restricted				
Net Assets or Fund		Foundations that do not follow SFAS 117, check here ▶ □				f
L		and complete lines 27 through 31.				1
0,0	27	Capital stock, trust principal, or current funds				
et	28	Paid-in or capital surplus, or land, bldg., and equipment fund				ļ
SSI	29	Retained earnings, accumulated income, endowment, or other funds				1
t A	30	Total net assets or fund balances (see instructions)	90117	102140	<u> </u>	1
ž	31	Total liabilities and net assets/fund balances (see			_	f
		instructions)	71109	102149	<u> </u>	!
	rt III	Analysis of Changes in Net Assets or Fund Balances	(a) P 00 (A 1 1		
1		I net assets or fund balances at beginning of year—Part II, colu		- 1		
_		of-year figure reported on prior year's return)		L	1 901	
_		r amount from Part I, line 27a		_		56
3		er increases not included in line 2 (itemize)		<u> </u>		<u> </u>
4		lines 1, 2, and 3		<u>-</u>	4 102	149
5		reases not included in line 2 (itemize)	Dort II caluma (5) 1:		5	
6	rota	I net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (D), lii	ne 30	6 102	
					Form 990-PI	C (2015)

		the kind(s) of property sold (e.g., real esta ouse; 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)
1a	100 Sh	MICROSOFT		D		06-11-201
b_						
c						
d						
е_	· · · · · · · · · · · · · · · · · · ·	(f) Depreciation allowed	(a) Cost a	r other basis	(b) Ga	n or (loss)
	(e) Gross sales price	(or allowable)	1	ense of sale	(e) plus	(f) minus (g)
<u>a</u>	4634		ļ		4	634
b		<u> </u>				·
c d						
e						
	Complete only for assets s	howing gain in column (h) and owner	d by the foundation	n on 12/31/69	M Gains (Co	I. (h) gain minus
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exce	ss of col. (i) I. (j), if any	col. (k), but no	t less than -0-) or from col. (h))
а						
b						
С						
d						
е		<u> </u>	<u> </u>			
2	Capital gain net income	or inct conital local 3	n, also enter in Pa s), enter -0- ın Pa	3	2 4634	1
3	If gain, also enter in Pa	ain or (loss) as defined in sectior rt I, line 8, column (c) (see instr	uctions). If (loss), enter -0- in }		
		· · · · · · · · · · · · · · · · · · ·			3	
Part		nder Section 4940(e) for Reconvate foundations subject to the				
Nas t		ive tris part blank. he section 4942 tax on the distrib ot qualify under section 4940(e).			base period?	☐ Yes ☐ No
1		mount in each column for each y			akıng any entries.	
	(a) Base penod years	(b)		(c)	Die	(d) tribution ratio
Cale	endar year (or tax year beginning	in) Adjusted qualifying distribution	ons Net value	of nonchantable-use a		divided by col. (c))
	2014					······································
	2013					
	2012			· · · · · · · · · · · · · · · · · · ·		
	2011				<u> </u>	
	2010					
2 3	number of years the fou	d)	vide the total on less than 5 years	line 2 by 5, or by	the . 3	
<u>-</u>						
5	Multiply line 4 by line 3				. 5	
6		nent income (1% of Part I, line 27			- 6	
7	Add lines 5 and 6				7	
8		tions from Part XII, line 4 reater than line 7, check the box			. 8 that part using a	1% tax rate. See the

Part		<u>nstrı</u>	<u>ıctio</u> ı	<u>18)</u>			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			1			
j.	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) Demostic foundations that most the section 4940(s) requirements in Part V, check						
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 27b						
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)						
3	Add lines 1 and 2						
4	Subtitle A (Income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	··					
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0						
6	Credits/Payments:						
a	2015 estimated tax payments and 2014 overpayment credited to 2015 6a						
b	Exempt foreign organizations—tax withheld at source 6b						
c d	Tax paid with application for extension of time to file (Form 8868) . 6c Backup withholding erroneously withheld 6d]			
7 7	Total credits and payments. Add lines 6a through 6d						
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached						
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed						
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10						
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ Refunded ▶ 11						
Part	VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b		r			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials						
	published or distributed by the foundation in connection with the activities.			!			
C	Did the foundation file Form 1120-POL for this year?	1c		-			
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3					
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		-			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		V			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:						
	By language in the governing instrument, or			h			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that						
	conflict with the state law remain in the governing instrument?	6					
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	-				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General						
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b					
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or]				
	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"						
10	complete Part XIV	9					
1U	names and addresses	10	u				

Part	Statements Regarding Activities (continued)			
			Yes	No
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		~
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		-
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	~	\vdash
	Website address ►			
14	The books are in care of ▶ Telephone no. ▶			
• •	Located at ► ZIP+4 ►			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			▶ □
	and enter the amount of tax-exempt interest received or accrued during the year		•	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		-
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			
Dovt			_	<u> </u>
Part			Yes	No
10	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. During the year did the foundation (either directly or indirectly):		103	110
1a	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			1 1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes Yes			i
	(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			1 !
	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		
	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			نــــا
_	were not corrected before the first day of the tax year beginning in 2015?	1c		-
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)):			i
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and			1
	6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
þ	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		ļ
_	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20		
С	► 20 , 20 , 20 , 20			,
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			,
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or			1
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			!
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2015.)	3b	[·	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		V
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	- `	1

Part	VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	ployees,					
3							
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation					
	NONE						
Total	number of others receiving over \$50,000 for professional services						
Part	IX-A Summary of Direct Charitable Activities						
	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of anizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses					
1	SALUATION ARMY	2500					
_	Everett, WA	3500					
2	EVERETT, WA UNIVERSITY PRESTYTERIAN Church						
_	SEATTLE WA	1000					
3	BOY SCOUT of AMERICAN	540					
_	Everett wa						
4	ASSISTANCE LEAGUE OF EVERETT						
	EURRATT WA	500					
Part	IX-B Summary of Program-Related Investments (see instructions)						
Des	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount					
1	0.4138						
	GENERAL FUNDS	3500					
2	General Funds	1000					
	other program-related investments. See instructions	•					
3	outer program-related investments. See instructions	_					
5		2450					
Total	. Add lines 1 through 3	6950					
		Form 990-PF (2015					

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign fou	indations,
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	
b	Average of monthly cash balances	1b	2400
C	Fair market value of all other assets (see instructions)	1c	86000
ď	Total (add lines 1a, b, and c)	1d	88400
e	Reduction claimed for blockage or other factors reported on lines 1a and		00 (00
•	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	88400
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		00.0
	ınstructions)	4	1326
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	87074
6	Minimum investment return. Enter 5% of line 5	6	4354
Part		ounda	tions
1	Minimum investment return from Part X, line 6	11	4354
2a	Tax on investment income for 2015 from Part VI, line 5		<u> </u>
Ь	Income tax for 2015. (This does not include the tax from Part VI.)	1	
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4354
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	4354
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	4354
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	Г	····
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	7014
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	7014
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	7014
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculatin qualifies for the section 4940(e) reduction of tax in those years.	g whet	
			- 000 DE

G. , C	All Circistributed income (See instruction	J113)			
1	Distributable amount for 2015 from Part XI, line 7	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015 4354
2	Undistributed income, if any, as of the end of 2015:				1337
а	Enter amount for 2014 only				,
b	Total for prior years: 20 ,20 ,20		*		
3	Excess distributions carryover, if any, to 2015:				
а	From 2010 8903				;
b	From 2011	1			ı
С	From 2012		i		ļ
d	From 2013 8815	ĺ			1
е	From 2014				ì
f	Total of lines 3a through e	42755]	
4	Qualifying distributions for 2015 from Part XII, line 4: ▶ \$, , , , ,	:	-	!
а	Applied to 2014, but not more than line 2a .				ţ
	Applied to undistributed income of prior years				
	(Election required—see instructions)				1
C	Treated as distributions out of corpus (Election				
-	required—see instructions)				· ·
d	Applied to 2015 distributable amount				7014
e	Remaining amount distributed out of corpus	2,660			
5	Excess distributions carryover applied to 2015				2660
	(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	36012			
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			İ	
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				í
d	Subtract line 6c from line 6b. Taxable amount—see instructions				1
e	Undistributed income for 2014. Subtract line				
	4a from line 2a. Taxable amount-see				
	instructions				1
f	Undistributed income for 2015. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2016				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				1
	170(b)(1)(F) or 4942(g)(3) (Election may be				
_	required—see instructions)	•			·
8	Excess distributions carryover from 2010 not				ı
0	applied on line 5 or line 7 (see instructions) .				
9	Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	36012	į		1
10	Analysis of line 9:	56012			
	Excess from 2011 8330				
_	Excess from 2012				į į
þ	Excess from 2013				:
c d	Excess from 2014 3150				1
a e	Excess from 2015				ł
	2 3 60	<u> </u>			l l

Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question	9)	
1a	If the foundation has received a ruling foundation, and the ruling is effective for	or determination	letter that it is a	private operating		
b	Check box to indicate whether the four		_		ection	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	<u> </u>	Prior 3 years		
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
b c	85% of line 2a					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities			, , , , , , , , , , , , , , , , , , , ,		
е	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(2) Value of assets qualifying under					
b	section 4942(j)(3)(B)(i)					
С	Part X, line 6 for each year listed "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)				a :	
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part	XV Supplementary Information	on (Complete th	nis part only if	the foundation I	nad \$5,000 or m	ore in assets at
	any time during the year-	-see instruction	ns.)			
1	Information Regarding Foundation	Managers:				
а	List any managers of the foundation of before the close of any tax year (but of	nly if they have co	ontributed more t	han \$5 <u>,000</u>). (See :	section 507(d)(2).)	
	Terry F & SAN DE List any managers of the foundation	AL WALK	(e72			
b	ownership of a partnership or other ei					rge portion of the
	-0-	0 1000	0.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1			
2	Information Regarding Contribution Check here ▶ ☐ if the foundation unsolicited requests for funds. If the f other conditions, complete items 2a,	only makes controundation makes	ributions to prese	elected charitable	-	•
а	The name, address, and telephone nu	imber or e-mail ac	ddress of the pers	on to whom applic	cations should be a	addressed:
	5111 HARBOR LAVE					
b	The form in which applications should	l be submitted an	d information and	materials they sho	ould include:	
	Any submission deadlines:	·				
	Any submission deadlines:	 	-	. *** **		
d	Any restrictions or limitations on av factors:					
-	factors: educational, Char	lable, Rel	191005, Sc	restific /	LITERARY	Politica Poses Form 990-PF (2015)

Supplementary Information (continued)

Form 990-PF (2015)

Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual show any relationship to Recipient Foundation Purpose of grant or status of **Amount** any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year SALUATION ARMY 3200 POBOX 9219 SEATTLE, OF University Presty Terind 1000 SEATTLE, WA Boy scouts of America Everatt, WA 540 SAMIT UNICET de PAUL 500 POBOX 2269 Everatt wa ASSISTANCE LEAGUE 500 5107 EVERAREEN EVERETT WA BOCK INSTITUTE *ූ* උර BODI Redwood BLUD MOVATO CALIF 100 HAND IN HAND 14 E CASINO EVERETT 100 Judical WATCh 100 WA D.C 100 HOSPICE SAUAPNA, GA PAND MASS 200 77 LITH AVE 4950 -Approved for future payment olli - uw SEATLE , WA 6950

nter gr	oss amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by sect	ion 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exem function income (See instructions
l Pr	ogram service revenue:	<u> </u>		 		
a h				 		
C						
d				 		<u> </u>
е						
f				1	-	
g	Fees and contracts from government agencies			 	· · · · · ·	
2 M	embership dues and assessments					
Int	erest on savings and temporary cash investments					
Di	vidends and interest from securities					
Ne	et rental income or (loss) from real estate:	5.4	sgirt Miller	The state of	TOVAS AND	, 97
	Debt-financed property			ļ		
	Not debt-financed property					
	et rental income or (loss) from personal property					
	her investment income				· · · · · · · · ·	
	nin or (loss) from sales of assets other than inventory	ļ	· · · · · · · · · · · · · · · · · · ·	-		
	et income or (loss) from special events			 		
	ross profit or (loss) from sales of inventory					
_	her revenue: a			 		
b						
C						
d						
e S C	ibtotal. Add columns (b), (d), and (e)	t. , , ,				
		•		•	12	٠
3 To	otal. Add line 12, columns (b), (d), and (e)			•	13	
3 To	otal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculation	s.)			13	
3 To	otal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		mportantly to ti
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		Exempt Or	ganizations							
1	in sec			engage in any of the follo section 501(c)(3) organiza					Yes	No
а	Trans	fers from the rep	porting foundation to	o a noncharitable exempt	organization	of:				l
	(1) C	ash						1a(1)		
	(2) O	ther assets .		. .				1a(2)		
b	Other	transactions:								
	(1) S	ales of assets to	a noncharitable exe	empt organization				1b(1)		
				able exempt organization				1b(2)		
				er assets				1b(3)		
		•						1b(4)		
		oans or loan gua	-	. 				1b(5)		
	• •	•		nip or fundraising solicitat				1b(6)		
c				sts, other assets, or paid				1c		
d		~		s," complete the following				w the	fair m	narket
				ices given by the reportir						
	value	in any transaction	on or sharing arrang	ement, show in column (d) the value of	the goods,	other assets, or s	ervices	recei	ived.
(a) Lin	e no. (b) Amount involved	(c) Name of nonc	haritable exempt organization	(d) Descn	ption of transfer	s, transactions, and s	nanng an	angem	ents
				·						
-		-								
				· · · · · · · · · · · · · · · · · · ·						
						•				
										
·2a b	desc	ribed in section ses," complete the	501(c) of the Code (c e following schedule		3)) or in sectio	n 527?			s 🗆	No
		(a) Name of organ	nization	(b) Type of organiza	RION		(c) Description of relat	onsnip		
						 · · · · · · · · · · · · · · · · · 				

	T Dade		I dealers that I have averue	ed this return, including accompan	una sebedules and	statements and	to the best of my knowl	odgo and	holiof i	t ic thio
Sign	1	et, and complete. Decl	laration of preparer (other th	ed this return, including accompan ian taxpayer) is based on all inform	ation of which prepa	arer has any knov	vledge.			
_	'	- - 11	1.000	102/20/1	11.) (I.	May the	IRS disc preparer		
Here		1 -4-	otos	<u> </u>	Teto	- Joseph		ructions)?		
	Sign	ature of officer or tru Print/Type preparer		Preparer's signature	1100	Date		PTIN		
Paid		Frink type preparer	is naune	Freparer 5 Signature		Date	Check if	L IIIV		
Prep			·	<u>l</u>		1	self-employed	L		
Use	Only	Firm's name					Firm's EIN ▶			
Firm's address Phone no.						E 00	O DE	(0010		

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

Name of	the organization					/		dentificat	ion number
			WA	LKeiz	FOUNT	SALOP	91-	1948	3479
Organiz	Organization type (check one):								
Filers of	f:	Section	:						
Form 990 or 990-EZ									
	4947(a)(1) nonexempt charitable trust not treated as a private foundation								
		☐ 527	oolitical o	rganization					
Form 99	0-PF	2 501(c)(3) exen	npt private fo	undation				
		☐ 4947	(a)(1) nor	exempt char	ntable trust treat	ted as a private founda	ation		
		<u></u> 501(c)(3) taxal	ble private for	undation				
	•		•		-	ooth the General Rule a	and a Speci	al Rule. S	See
General	Rule								
V		y or property) from an			d, during the year, con Parts I and II. See inst			
Special	Rules								
	regulations unde 13, 16a, or 16b, a	r sections 50 and that rece	9(a)(1) and ived from	d 170(b)(1)(A) any one con	(vi), that checke stributor, during	990-EZ that met the 3ed Schedule A (Form 9the year, total contribution) Form 990-EZ, line	90 or 990-E utions of the	Z), Part I greater	ll, line of (1)
	contributor, durin	g the year, to	tal contri	butions of mo	ore than \$1,000	orm 990 or 990-EZ tha <i>exclusively</i> for religious children or animals. Con	s, chantable	e, scientifi	ic,
	contributor, durn contributions tota during the year for General Rule ap	ng the year, called more that or an exclusivation of the second in the s	ontributio in \$1,000 ely religio organizati	ons exclusively. If this box is bus, charitable on because it	ly for religious, on schecked, ente e, etc., purpose t received <i>none</i>	Form 990 or 990-EZ the charitable, etc., purpose there the total contribution. Do not complete any exclusively religious, charts.	es, but no sutions that work the parts of the parts aritable, etc.	such were rece s unless t	eived the

Name of organization

LANEWALKER

FOUNDATION

Employer identification number 91-1948479

Part I	Contributors (see instructions). Use duplicate copies of	f Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	TERRY FE SANDRAL. WALKER 5111 HARDOR LANE EVERETT, WA 98203-1556	\$ 13,253	Person Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization

LANG WALKER FOUNDATION

Employer identification number 91-1948479

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		
1	UNLQUARD HEALTH CARE EFT	\$ 13,253	Dec 4, 2015		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			

Nama of	 4	

Employer identification number

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

		ions completing Part III, ente	entributor. Complete columns (a) through (e) and ter the total of exclusively religious, charitable, etc on once. See instructions.) ► \$		
	Use duplicate copies of Part III if add	= -	• · · • · · • · · · · · · · · · · · · ·		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
1 41					
		(e) Transfer of gif	ft		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Part I					
		(e) Transfer of gif	ift		
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee		
(a) No.		(2) 110 - 4 - 16			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of gift				
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or