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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

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

For	calen	dar year 2015 or tax year beginning)15, and		Torm990pr. Mast	, 20
		Indiation		, 10, and		r identification number	
GΑ	LLOW	AY FAMILY FOUNDATION				91-211066	•
		d street (or P O box number if mail is not delivered to street address)	Ro	om/suite	B Telephor	e number (see instruct	
403	MADIS	SON N		230		206-780-9989	1
City	City or town, state or province, country, and ZIP or foreign postal code					tion application is pend	
		GE ISLAND, WA 98110	U II CACIND	non approar on to pend	ing, ancok notes		
		all that apply. Initial return Initial return	D 1. Ecreto	n organizations, check	here 🏲 🦳		
_		☐ Final return ☐ Amended			1	"	بيت
		☐ Address change ☐ Name char	nge			n organizations meeting here and attach compu	
Н	Check	type of organization: Section 501(c)(3) exempt p	nvate foundatio	n	E if private	foundation status was	terminated under 🗌
		n 4947(a)(1) nonexempt charitable trust Other tax			section 5	07(b)(1)(A), check here	▶ []
~		parket value of all assets at J Accounting method			E if the four	ndation is in a 60-mont	h 40
	end of	year (from Part II, col. (c), Other (specify)				ction 507(b)(1)(B), check	
	line 16		on cash basis.)		}		=-
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per		t investment ncome	(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see instructions).)	books				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	170,0	50	126 j	, 10 m	
	2	Check ► ☐ if the foundation is not required to attach Sch. B	to " is the	3 , 3	- 125 (1 2 m	State of the state	100
	3	Interest on savings and temporary cash investments	7:	50	750	0	· 1/2 4/2
	4	Dividends and interest from securities	17,8	26	17,826	0	* **
	5a	Gross rents		0	0	0	
	b	Net rental income or (loss) 0	****	37.73	, , , , , , , , , , , , , , , , , , ,	13, 20, 3	mar St. Jan St. St. Tank
ne	6a	Net gain or (loss) from sale of assets not on line 10	5,9	57			٠,٠٠٠
eu	b	Gross sales price for all assets on line 6a 0			11/ 1/2		541
Revenue	7	Capital gain net income (from Part IV, line 2)	-1,5-		5,957		<u> </u>
Œ	. 8	Net short-term capital gain		1000		1 0	4
	, 9	Income modifications	1 12	100		OF GR	
	10a	Gress sales less returns and allowances 0 Less Cost of goods sold 0	***			0	
	b		<u> </u>	0		100	16 151
	C	Gross profit or (loss) (attach schedule)			***************************************	0	/3/
	11	Other income (attach schedule)	194,51	0	0	1000	
	13	Compensation of officers, directors, trustees, etc.	194,30	0	24,533 0	8	7
الله ال	14	Other employee salaries and wages		0	0	0	0 0
> šr	15	Pension plans, employee benefits		0	0	0	0
Expense	16a	Legal fees (attach schedule)	3.	45	0	0	0
	b	Accounting fees (attach schedule)		30	0	0	0
₹/	c	Other professional fees (attach schedule)		0	0	0	0
	17	Interest		0	0	0	0
ž.	18	Taxes (attach schedule) (see instructions)	21	82	0	0	0
≥ E	19	Depreciation (attach schedule) and depletion		0	0	0	
	20	Occupancy		0	0	0	0
	21	Travel, conferences, and meetings		0	0	0	0
₩	22	Printing and publications		0	0	0	0
	23	Other expenses (attach schedule)		25	0	0	0
F	24	Total operating and administrative expenses.					
ا ا		Add lines 13 through 23	1,18		0	0	0
ွဲ့ဝိ	25	Contributions, gifts, grants paid	15,6				15,649
<u></u>	26 27	Total expenses and disbursements. Add lines 24 and 25	16,8		0	0 :>>	15,649
Operating and Administral	,	Subtract line 26 from line 12:	27	();(%<	_ ^2	1 man	-2320
Ę	a	Excess of revenue over expenses and disbursements	177,7	52		1,71,77	
) ()	b	Net investment income (if negative, enter -0-) .			24,533	x //	***************************************

For Paperwork Reduction Act Notice, see instructions.

Cat. No 11289X

Form 990-PF (2015)

		Attached schedules and amounts in the description column	Beginning of year	End o	f year
Part II		Balance Sheets 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	157,285	9,885	9,885
1	2	Savings and temporary cash investments	0	0	0
ı	3	Accounts receivable ► NA	p+ "	24	1
1		Less: allowance for doubtful accounts ▶ NA	0	0	0
	4	Pledges receivable ► NA			/L 2
- 1		Less: allowance for doubtful accounts ▶ NA	0	0	0
	5	Grants receivable	0	0	0
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)	0	0	0
	7	Other notes and loans receivable (attach schedule) NA	The state of the s		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		Less. allowance for doubtful accounts ▶ NA	0	o	0
ţ	8	Inventories for sale or use	0	0	0
Assets	9	Prepaid expenses and deferred charges	0	0	0
As	10a	Investments—U.S. and state government obligations (attach schedule)	0	0	0
	b	Investments - corporate stock (attach schedule)	259,994	585,146	502,472
	С	Investments—corporate bonds (attach schedule)	14,063	14,063	13,875
	11	Investments—land, buildings, and equipment, basis ▶ NA	1 7 1 - 1 min	٠١, ٠, ٠, ١, ٠, ١	
į		Less, accumulated depreciation (attach schedule) ▶ NA		0	0
	12	Investments—mortgage loans	0	0	0
i	13	Investments—other (attach schedule)	0	0	0
	14	Land, buildings, and equipment basis ▶ NA	2134 461		
		Less: accumulated depreciation (attach schedule) ▶ NA		o o	0
	15		0	0	0
	16	Other assets (describe NA) Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	431,342	609,094	526,232
	17	Accounts payable and accrued expenses	0	0	14.3
LA.	18	Grants payable	0	0	· */5.4 -
<u> </u>	19	Deferred revenue	0	0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	0	0	
ar	21	Mortgages and other notes payable (attach schedule)	0	0	
	22	Other liabilities (describe ► NA)	0	0	1 2 × 100
	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here . >			
ĕ		and complete lines 24 through 26 and lines 30 and 31.			And and
ě	24	Unrestricted	0	0	and the second
und Balances	25	Temporarily restricted	0	0	
, E	26	Permanently restricted	0	0	The state of the s
Š		Foundations that do not follow SFAS 117, check here ▶ ☑			, , , , , , , , , , , , , , , , , , ,
1		and complete lines 27 through 31.			· · · · · · · · · · · · · · · · · · ·
Net Assets or	27	Capital stock, trust principal, or current funds	264,608	264,608	The state of the s
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			nt S.
SS	29	Retained earnings, accumulated income, endowment, or other funds	166,734	344,486	4527
₹	30	Total net assets or fund balances (see instructions)	431,342	609,094	
Ž	31	Total liabilities and net assets/fund balances (see			
-		instructions)	431,342	609,094	*********
	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		al net assets or fund balances at beginning of year-Part II. colu		- 1	
		-of-year figure reported on prior year's return)			431,342
		er amount from Part I, line 27a		2	177,752
3					0
4	. ~	filmes 1, 2, and 3		4	609,094
5	Uec Total	reases not included in line 2 (itemize) ► NA al net assets or fund balances at end of year (line 4 minus line 5)—	Part II. column (b) 1	5 pe 30 e	0
	11716	armer adopte or rund barances at one or year fine 4 minus line 5)-	ne 30 6	609,094	

Part	IV Capital Gains and	Losses for Tax on Investm	ent li	ncome				
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-stary brick warehouse, or common stock, 200 shs. MLC Co.)			(b) How acquired P—Purchase D—Donation		Date acquired no , day, yr.)	(d) Date sold (ino., day, yr)		
<u>1a</u>	PUBLICLY TRADED SECUR	NTIES						
<u>b</u>								<u></u>
c						ļ		
<u>d</u>				·				
e					1		***	L
	(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis nse of sale			in or (loss) (f) minus (g)
<u>a</u>	74,997				69,040		·····	5,95
<u>b</u>								
<u>c</u>								
<u>d</u>								
<u>e</u>	Complete only for assets sho	wing gain in column (h) and owned t	ny the f	oundation	on 12/31/69			
		(i) Adjusted basis			s of col. (n			il. (h) gain minus il less than -C-) o r
	fi) F M V. as of 12/31/69	as of 12/31/69			(i), if any			from col. (h))
a								
<u>b</u>								
c								
e						 		·····
2	Capital gain net income of			nter in Pa -0- in Pai	rt I, line 7			
_	Not alread torm constal and					2		5,957
3		n or (loss) as defined in sections I, line 8, column (c) (see instruc						
		· · · · · · · · · · · · · · · · · · ·				3		C
Part		er Section 4940(e) for Redu					ome	
Was t		e this part blank. section 4942 tax on the distribut qualify under section 4940(e). D				oase į	period?	☐ Yes ☑ No
1	Enter the appropriate amo	ount in each column for each yea	ır; see	the instru	ictions before m	aking	any entries.	
	(a) Base period years	(b)		·	(c)			(d)
Cal	endar year (or tax year beginning in)	Adjusted qualifying distributions		Net value of	noncharitable-use a	ssets		tribution ratio divided by col. (c))
	2014	15	5,500		37	0,775		0 0418
	2013		0		24	2,595		0.0000
	2012		3,050			0,613		0 0783
	2011 2010		5,450			8,797		0.0295 ,
	2010		3,750		22	5,269		0.1054
2	Total of line 1, column (d)						2	0.2550
3		for the 5-year base period—divid				the		0.2300
	number of years the found	lation has been in existence if le	ss tha	n 5 years			3	0.0510
4	Enter the net value of non	charitable-use assets for 2015 fr	om Pa	art X, line	5	•	4	422,888
5	Multiply line 4 by line 3				•		5	21,566
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)) .				6	245
7	Add lines 5 and 6 .						7	21,811
								-3/911
8		ns from Part XII, line 4				that p	8 art using a 1	15,649 % tax rate See the
	Part VI instructions.				•	•	J	

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instru	ctio	ns)		
1a	Exempt operating foundations described in section 4940(d)(2), check here ► ☐ and enter "N/A" on line 1.	7				
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)					
b						
	here ► ☐ and enter 1% of Part I, line 27b					
Ç	Part I, line 12, col. (b).	ا به معر الأ	1 ",			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0			
3	Add lines 1 and 2		491			
4	Subtrile A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		491			
6	Credits/Payments:	ř .	a XLAY			
a	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 0	100	1 - 1/2	٠		
b	Exempt foreign organizations—tax withheld at source	1	'	16.62		
c d				43,4		
7	Total credits and payments. Add lines 6a through 6d	- A ^T TA 2-	~]	الأرب		
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		0			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		491			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10		0			
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ Refunded ▶ 11		0			
Part \			91			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	38 ×	Yes	No		
	participate or intervene in any political campaign?	1a		1		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b		✓		
	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.					
	Did the foundation file Form 1120-POL for this year?	10	أنستت	13 % 1		
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			· /		
	(1) On the foundation. ▶ \$ NA (2) On foundation managers. ▶ \$ NA	10,	. 42%.	. "		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ NA		, -0.5	r.		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	·	<i>-</i>		
	If "Yes," attach a detailed description of the activities,	1. 3	mie.	. %.		
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	` .	~; ~,		
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		1		
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b				
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		<u> </u>		
	If 'Yes," attach the statement required by General Instruction T	1	, ,	3.		
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		. •	, <u>**</u>		
	 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that 	1 ~ 1	, j	***		
	conflict with the state law remain in the governing instrument?	1	122	1,7		
	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	1			
	Enter the states to which the foundation reports or with which it is registered (see instructions)	-	2.4.J			
	WASHINGTON			3		
ь	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	1	, T		
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	W	-	· ,.		
	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"	1 ***		· 1		
	complete Part XIV	9	}	1		
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					
	names and addresses	10	1			

Part	VII-A 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		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified		 	İ
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		1	
,,,	Website address ► NA	1.0		ł
14	The books are in once of b. BRICE CALLOWAY	206-780	-0080	
•	Located at ► 403 MADISON N 230 BAINBRIDGE ISLAND, WA ZIP+4 ►	9811		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here.	301		
	and enter the amount of tax-exempt interest received or accrued during the year		•	- 1.0
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other author	itsz	Yes	No No
	over a bank, securities, or other financial account in a foreign country?	16	1.00	1
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name		, 15 · · ·	35
	the foreign country ▶		*	
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		Ĺ
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	1	Yes	No
1a	During the year did the foundation (either directly or indirectly):	36	1 .	1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No	-4	1	12
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			,
	disqualified person?	£ 3	1	
	(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 . No.	1. "		- 15 /4 :
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	15,0		
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	1 - ' ;	100	
	foundation agreed to make a grant to or to employ the official for a period after	1 30		-
	termination of government service, if terminating within 90 days)	\\5°	200	-1.
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	.		A -
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	, 2	1
	Organizations relying on a current notice regarding disaster assistance check here	5		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		, .	7 7
	were not corrected before the first day of the tax year beginning in 2015?	10		1
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)).			2
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and	*£.		ندب م د
	6e, Part XIII) for tax year(s) beginning before 2015?		. Mose	-
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	. Just	(2) 1000	,
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	一次		*: ´
	(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.)	1	-tak	· .
_		2b		
C	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 . 20	2 93	1	
3a	► 20 .20 .20 .20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			<i>y</i>
Sa		19 M	4,0	6,
			, ,	
ь	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or			فسدر
	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	-	1217	,
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			4
	foundation had excess business holdings in 2015.)	1 -		4 °.
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b 4a		
ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	70		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	-	1

(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	(e) Expense account
NONE				
Total number of other employees paid over \$50,000	· · · ·	<u> </u>	<u></u> ▶	

Part VIII	Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	on Managers, Highly Paid En	ployees,
3 Five	nighest-paid independent contractors for professional services (see i	nstructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
			
			
Total numb	er of others receiving over \$50,000 for professional services	<u> </u>	
Part IX-A	Summary of Direct Charitable Activities		
	Cummary of Direct Characteristics		
	idation's four largest direct charitable activities during the tax year. Include relevant statis s and other beneficianes served, conferences convened, research papers produced, etc.	stical information such as the number of	Expenses
1 NONE			
11.71177.			
2			
~	***************************************		
3			

4			
******	4546441 95 5000 767 5 5000 800 900 800 900 900 900 900 900 900		
Part IX-B	Summary of Program-Related Investments (see instruction	ns)	<u> </u>
Describe th	two largest program-related investments made by the foundation during the tax year on li-		Amount
1 NA	**************************************		
			i 1
******	*** ********* *************************	***************************************	
2			
			<u> </u>
All other pro	gram-related investments. See instructions.	,	
3 NA			
Total. Add I	nes 1 through 3		

Part	X Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign four	idations,
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	322,053
b	Average of monthly cash balances	1b	107,276
C	Fair market value of all other assets (see instructions)	1c	(
d	Total (add lines 1a, b, and c)	1d	429,328
e	Reduction claimed for blockage or other factors reported on lines 1a and	5.4	
	1c (attach detailed explanation)	1 1	
2	Acquisition indebtedness applicable to line 1 assets	2	C
3	Subtract line 2 from line 1d	3	429,328
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions) ,	4	6,440
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	422,888
6	Minimum investment return. Enter 5% of line 5	6	21,144
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating to and certain foreign organizations check here ► □ and do not complete this part.)	oundati	ons
1	Minimum investment return from Part X, line 6	1	21,144
2a	Tax on investment income for 2015 from Part VI, line 5	7.	
ь	Income tax for 2015. (This does not include the tax from Part VI.) 2b		
С	Add lines 2a and 2b	2c	491
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	20,653
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	20,653
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	20,653
	XII Qualifying Distributions (see instructions)	1	
1	Amounts paid (including administrative expenses) to accomplish charitable etc., purposes:	1	
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	15,649
b	Program-related investments—total from Part IX-B	1b	0
2			
_	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	0
4	Cash distribution test (attach the required schedule)	3b	0
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	-	15,649
•	Enter 1% of Part I, line 27b (see instructions)	_	_
6	Adjusted qualifying distributions. Subtract line 5 from line 4	5	0
J	Note. The amount on line 6 will be used in Part V, column (b) in subsequent years when calculating	<u></u>	15,649 er the foundation
	qualifies for the section 4940(e) reduction of tax in those years.		

Part	XIII Undistributed Income (see instructi	ons)			
1	Distributable amount for 2015 from Part XI.	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
	line 7	1.65.	TE CALL	7 7 7 7	20,65
2	Undistributed income, if any, as of the end of 2015	24 " 2 2 2 3 3 4 4 5		222	20,00
а	Enter amount for 2014 only		W 19	12,149	100
b	Total for pnor years: 20,20,20	17.00	0	, (A)	
3	Excess distributions carryover, if any, to 2015.			7 T T T	
a	From 2010	The state of the s	178.92		
b	From 2011	THE SHEET		· Sale	
c	From 2012		11/4		
d e	From 2013		(A)	4,70	
#	Total of lines 3a through e	TOTAL MICE OF			
4	Qualifying distributions for 2015 from Part XII,	0	Marie Carlo	3 7 3 S	Military J.
·	line 4' ▶ \$ 15,649		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
а	Applied to 2014, but not more than line 2a .	N. S.		47.440	
b	Applied to undistributed income of prior years			12,149	
	(Election required—see instructions)		n	(1) (1) (1) (1) (2) (2)	
C	Treated as distributions out of corpus (Election	A second	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- Anna 8 7	The same
	required—see instructions)	0			
đ	Applied to 2015 distributable amount	TO THE RESERVE		(3,500
е	Remaining amount distributed out of corpus	0	11/4		, work
5	Excess distributions carryover applied to 2015	0	To the state of	\$ 0°4.7	
	(If an amount appears in column (d), the same amount must be shown in column (a).)		A STATE OF		and the same of th
6	Enter the net total of each column as				which the
•	indicated below:		Joint Mary		
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	A COUNTY OF THE	A Property of the Man		With the second second
ь	Prior years' undistributed income. Subtract	ing out	22.2		
	line 4b from line 2b	The state of the s	0		Comment of
¢	Enter the amount of prior years' undistributed				The state of the state of
	income for which a notice of deficiency has			2 2.50	and the first
	been issued, or on which the section 4942(a)		Ī		in sold in the second
đ	tax has been previously assessed Subtract line 6c from line 6b. Taxable		0		2-20/14/14
•	amount—see instructions	The state of the s	0		
e	Undistributed income for 2014. Subtract line	·	, 757% (A)	14 -2/3	1, 1000
	4a from line 2a Taxable amount-see		Single State of the State of th	ļ.	
	instructions		J. G. K.	o	Parking St.
f	Undistributed income for 2015. Subtract lines	建筑建			
	4d and 5 from line 1. This amount must be distributed in 2016		Secretary of the second	741	
7		1 12 15 15 16 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		17,153
•	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)	o		The same state of the same sta	
8	Excess distributions carryover from 2010 not		Assert Assert	Million . The same	Salling Comment
_	applied on line 5 or line 7 (see instructions) .	0	7.7	All and a second	Service Anna
9	Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a		* - 150 Miles		
10	Analysis of line 9.	0			
10 a	Excess from 2011		and the second		
	Excess from 2012	A STATE STATE			And the state of t
	Excess from 2013 0				
	Excess from 2014 0				
e	Excess from 2015 0		and the state of t		A STATE OF THE STA
					Form 990-PF (2015)

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

NA

3 Grants and Contributions Paid During t		ed for Fu	ture Payment	
Recipient	If recipient is an individual.			1
	show any relationship to any foundation manager	status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business) a Paid during the year	or substantial contributor	recipient		
Rotary Club of Bainbridge Island		501(C)3	Microfinance Fund for Africa	13,500
P.O. Box 11286 • Bainbridge Kland,WA98110				
Bainbridge Island Land Trust		501(C)3	land acquisition project &	2,149
P.O. Box 10144 • Bainbridge Island, WA 98110			Wildlife Corridor Expansion	
	rich and a second			
,				
Total			▶ 3	15,649
b Approved for future payment				
		†		
		1		
	•			
~				
Total			> 3t)

Par	t XVI	 Analysis of Income-Producing Ac 	tivities				
Ente	r gros	s amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by section	on 512, 513, or 514	(e)
			(a)	(b)	(c)	(d)	Related or exempt
	D		Business code	Amount	Exclusion code	Amount	(See instructions.)
1	a a	ram service revenue.			-		
	b _						
	c						
	d -						
	e						
	1 -				†		
	gF	ees and contracts from government agencies					
2	-	bership dues and assessments					
3		est on savings and temporary cash investments			14	750	
4		lends and interest from securities			14	17,826	
5	Netr	ental income or (loss) from real estate:	. 3	vyř jest č.	166	Mary , , e la	J. J. J. A. M. J. J.
	a D	Debt-financed property					
	b N	lot debt-financed property					
6	Net r	rental income or (loss) from personal property		· · · · · · · · · · · · · · · · · · ·			
7	_	r investment income					
8		or (loss) from sales of assets other than inventory			18	5,957	
9		ncome or (loss) from special events				······································	
10		s profit or (loss) from sales of inventory			<u> </u>		
11		r revenue. a			ļ		
	p _		ļ 		 		
	<u>-</u>				-		\
	d ~				 		
		Add Add as book (a)	2 - 14 15		包括	04.533	
42	Cubi						
						24,533	
13	Tota	I. Add line 12, columns (b), (d), and (e)	,			13	
13 (See	Tota work	d. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	 ns.)		* * *		
13 (See Pa	Tota	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ns.) Accomplishm	ent of Exemp	t Purposes	13	24,533
13 (See Pa	Tota work rt XV	d. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	ns.) Accomplishm	ent of Exemp	t Purposes	13	24,533
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13 (See Pa	Tota work it XV e No.	II. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt put	ns.) Accomplishm	ent of Exemp	t Purposes	13	24,533
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Form 99	0-PF (2									e 13
Part	XVII			fers To and Transaction	ons and F	Relationship	s With Nonch	aritabl	e	
			rganizations					. - , ,,,,,, ,,,,,,		
1 a	in se orga	ction 501(c) of th	ne Code (other than se	ngage in any of the following ection 501(c)(3) organization a noncharitable exempt organization	ons) or in se	ection 527, rel			Yes	No ,
	(1) C	Cash						1a(1)	, ,	1
	• •	Other assets .				<i></i>		1a(2)		1
b	Othe	r transactions:							12.12.1°	
	(1) S	Sales of assets to	a noncharitable exem	npt organization				1b(1)		V
	(2) F	urchases of asse	ets from a nonchantat	ole exempt organization				1b(2)		1
	(3) F	Rental of facilities	, equipment, or other	assets	•			1b(3)		1
	(4) F	Reimbursement a	rrangements					1b(4)		1
	(5) L	oans or loan gua	arantees					1b(5)		✓_
	(6) F	Performance of se	ervices or membership	o or fundraising solicitation	ns			1b(6)		1
c	Shar	ing of facilities, e	equipment, mailing list	s, other assets, or paid em	ployees			1c		✓_
đ				" complete the following s						
				es given by the reporting f						
	value	s in any transacti	on or sharing arranger	ment, show in column (d) 1						
(a) Line	no.	(b) Amount involved	(c) Name of norcha	ritable exempt organization	(d) Descr	iption of transfers.	transactions, and s	haring arr	angemei	nts
N.F	1	·····			<u> </u>					
					 					
			<u></u>							
					1					
			<u> </u>		<u> </u>			_,		·

			 	, , , , , , , , , , , , , , , , , , , 	 					
								····		
					- 					
										
					 					
		o foundation div	noths or indicantly offil	iated with, or related to, or	1	o tay avamat	organizations			
Zü				her than section 501(c)(3))				m v	(7) A	
h			e following schedule.	ner man section of residen	0. 111 300110	511 GZ 1 · , .	• • •	res	V N	10
		(a) Name of organ		(b) Type of organization	,	(c)	Description of relat	nashin		
NA				(-, -)			The state of the s			
27										
	Und	er penalt es of penuty	declare that I have examined	this return, including accompanying	schedules and	statements, and to	the best of my know	eage and l	oelief, it i	s true
Sign Here				taxpayer) is based on all information	_	arer has any knowle	May the with the	IRS discu preparer ructions)?	d nwerla	elovi
	Sig	kk		Date III	·	Date		PIIN		
Paid		Print/Type prepare		Preparer's signature		Date	Check 🗸 if		_	
Prep			····			11-23-1			05278	0
Use	Only		DENNIS STONE CPA				rm's EIN ▶	27-433		
		Firm's address	611 S HAWTHORNE			<u> </u>	hone no.	253-332-	7864	

Schedule B

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

Schedule of Contributors

OMB No 1545-0047

Department of the Treasury

➤ 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. nternal Havenue Service Name of the organization Employer identification number

GALLOWAY FAMILY FOUNDATION 91-211066 Organization type (check one). Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF ✓ 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filling Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filling Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. 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, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of 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. If 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 \$_____

Caution, An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not most the filing requirements of Schedulc B (Form 990, 990-EZ, or 990-PF),

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Page 2 Name of organization Employer identification number **GALLOWAY FAMILY FOUNDATION** 91-211066 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person 1 1 Galfam Holdings, LLC Payroll \Box 170,050 Noncash 403 MADISON N #230 (Complete Part II for noncash contributions.) **BAINBRIDGE ISLAND, WA 98110** (c) (d) (a) Total contributions Type of contribution No. Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroli Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroli Noncash (Complete Part II for noncash contributions.) (b) (a) (d) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution

Person

Payroll Noncash (Complete Part II for noncash contributions)

Name of organization Employer identification number GALLOWAY FAMILY FOUNDATION 91-211066

Part II	Noncash Property (see instructions). Use duplicate copie	es of Part II if additional space	ce is needed.
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
n) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-		\$	
n) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Telephone to the control of the cont		\$	
n) No. From Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	

Part III

Employer identification number

^	A I		CIMI	A V	E A A AGO	v	FOUND	ATION
LЭ	m	. I.	.,	-	T MMILL		FULLINI	AUUN

91-211066

TANDE) TOURDATION	
Exclusively religious, charitable, etc., contributions to organizations described in	section 501(c)(7), (8), or
(10) that total more than \$1,000 for the year from any one contributor. Complete of	columns (a) through (e) and
the following line entry. For organizations completing Part III, enter the total of exclusion	vely religious, charitable, etc.
contributions of \$1,000 or less for the year. (Enter this information once. See instructions of \$1,000 or less for the year.)	ons.) 🕨 💲

(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
	T 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4 0-	Color Consulting and Association and Associations				
	Transferee's name, address, and ZIP +	, ne	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 Re	elationship 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						
4	Transferee's name, address, and ZIP +	4 R€	elationship of transferor to transferee				
1							
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(b) Purpose of gift		(d) Description of how gift is held				
(a) No. trom Part t	(b) Purpose of gift	(c) Use of gift (e) Transfer of gift	(d) Description of how gift is held				
	(b) Purpose of gift Transferee's name, address, and ZIP +	(e) Transfer of gift	(d) Description of how gift is held				
		(e) Transfer of gift					

GALLOWAY FAMILY FOUNDATION

91-211066 12/31/2015

PART I LINE 16a	a
Legal Fees	345
PART I LINE 16b	
Tax preparation	530
PART I LINE 18	a
EXCISE TAX-IRS	282
	282
PART I LINE 23	<u> </u>
STATE OF WASHINGTON	<u>25</u> 25
	23
PART II LINE 10b	ERA)/
2014 MV	FMV
STOCK AT&T	92,562
BLACKROCK CREDIT ALLOCATION INCOME TRUST	34,786
EQUITY COMMONWEALTH	31,058
EXXON MOBIL CORP	54,955
FITH ST ASSET MANAGEMENT	3,749
FLAHERTY & CRUMRINE/CLAYMORE PFD SEC INCOME COM	49,123
FLAHERTY & CRUMRINE/CLAYMORE TOTAL RETURN FD COM	19,170
JOHN HANCOCK INCOME FD CL END COM	12,502
KAYNE ANDERSON MLP INVES	167,886
NETFLIX INC	4,003
RALLYE SA NEUILLY ORD F	9,353
THAI FUND INC	23,325
,	502,472
PART II LINE 10C	
BONDS UNION PACIFIC	13,875