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SCANNED MAR 0 3 2017

Form **990-PF**

EXTENDED TO MAY 15, 2017

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.

OMB No 1545-0052

A Employer identification number GBORGE T. WELLCH TESTAMENTARY TRUST P.O. BOX 1796 City or town, state or grower, country, and ZP or foreign postal code P.O. BOX 1796 City or town, state or grower, country, and ZP or foreign postal code P.O. BOX 1796 City or town, state or grower, country, and ZP or foreign postal code P.O. BOX 1796 City or town, state or grower, country, and ZP or foreign postal code P.O. BOX 1796 City or town, state or grower, country, and ZP or foreign postal code P.O. BOX 1796 City or town, state or grower, country, and ZP or foreign postal code P.O. BOX 1796 City or town, state or grower, country, and ZP or foreign postal code P.O. BOX 1796 City or town, state or grower, country, and ZP or foreign postal code P.O. BOX 1796 City or town, state or grower, country, and ZP or foreign postal code P.O. BOX 1796 City or town, state or grower, country, and ZP or foreign postal code P.O. BOX 1796 City or town, state or grower, country, and ZP or foreign postal code P.O. BOX 1796 City or town, state or grower, country, and ZP or foreign postal code P.O. BOX 1796 City or town, state or grower, country, and ZP or foreign postal code P.O. BOX 1796 City or town, state or grower, country, and zero or cash bases P.O. Contributions, grifts, grower, country, and zero or cash bases P.O. Contributions, grifts, grower, contribution in the contribution of the state of the contribution of the contribution of the state of the contribution of t				m 990-PF and its separate 1 . 2015				Open to Public Inspection
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Final return				Initial return of a fo	ormer public char	utv	D 1 Foreign organization	c check here
Check type of organization:	u	moon	=======================================		Affici pablic chai	ıty	1. Foreign organization	s, check here
H. Check type of organization: Section 1947(a) \tau nonexample characteristic from Part II, col. (c), ine 16) Section 1947(a) \tau nonexample characteristic from Part II, col. (c), ine 16) Other (sepachly) Other (sepachly) Other (sepachly) Section 1947(a) Other (sepachly) Other (s							2. Foreign organizations me	eeting the 85% test,
Section 4947(a) 1) nonexempt charable trust □ Other texable provate boundation where section 507(b)(1)(A), check here □ I fair market value of all assets and of year □ J Accounting method: □ Cash □	н (heck						
Far market value of all assets at end of year (from Part II, cot. (c), line 16) S 3,719,254, (Part II, column (d) must be on cash bases) Part II, Analysis of Revenue and Expenses (a) Revenue and Expenses (a) Revenue and Expenses (b) Revenue and Expenses (c) Revenue and Expenses (c) Revenue and Expenses (c) Revenue and Expenses (d) Revenue and Expenses (e) Revenue and Expenses (e) Revenue and Expenses (from Part II, column (d) must be on cash bases) (e) Net investment (from Part III, column (d) must be on cash bases) (from Part III, column (d) must be on cash bases on cash bases) (from Part III, column (d) must be on cash bases on cas	Ï				ation			
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2 Check ► X X Let Newtokins sol required to stack Sch 8 violence for accounts and temporary 4.8 . 48 . STATEMENT 1 5a Gross remis		1					N/A	
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D Net rental income or (loss) 122,979.		1				, , , , , ,		
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c Adjusted net income (if negative, enter -0-)		1		11,4710	182	364		
7 723501		ľ			104	, , , , , , , ,	N/A	
Form SMI-PF 2015	523		LHA For Paperwork Reduction Act Notice, see	instructions				Form 990-PF (2015)

For	m 99	0-PF (2015) GEORGE T. WELCH TESTAME			5024318 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
느	ui t	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		4,620.	4,620. 60,351.
	2	Savings and temporary cash investments	29,145.	60,351.	60,351.
	3	Accounts receivable ►			
	ļ	Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
	}	Less: allowance for doubtful accounts ▶		ļ	
	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		{	
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As] -	Investments - U.S. and state government obligations			
	1	Investments - corporate stock STMT 7	2,711,873.	2 233 330	2,305,170.
	l	Investments - corporate bonds STMT 8	821,477.	1,345,132.	1,348,916.
	ł	Investments - Land, buildings, and equipment basis	021,4//	1,343,134.	1,340,310.
	' '				
	40	Less accumulated depreciation			
	1	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis		Í	
	١	Less accumulated depreciation		100	
	ľ	Other assets (describe PREPAID TAXES	3,844.	197.	197.
	16	Total assets (to be completed by all filers - see the	2 - 6 6 2 2 2	2 542 522	
	-	instructions. Also, see page 1, item I)	3,566,339.	3,643,630.	3,719,254.
	1	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
je	21	Mortgages and other notes payable			
	22	Other liabilities (describe)			
			_	_	
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
တ		and complete lines 24 through 26 and lines 30 and 31			
ည	24	Unrestricted			
aga	25	Temporarily restricted			
8	26	Permanently restricted			
Š	ļ	Foundations that do not follow SFAS 117, check here			
Ä		and complete lines 27 through 31.			
Net Assets or Fund Balances	27	Capital stock, trust principal, or current funds	1,961,566.	1,961,566.	
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ž	29	Retained earnings, accumulated income, endowment, or other funds	1,604,773.	1,682,064.	
ž	30	Total net assets or fund balances	3,566,339.	3,643,630.	
			2 566 220	2 542 522	
_	31	Total liabilities and net assets/fund balances	3,566,339.	3,643,630.	
P	art	III Analysis of Changes in Net Assets or Fund B	alances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
٠		st agree with end-of-year figure reported on prior year's return)		11	3,566,339.
2		r amount from Part I, line 27a	2	77,291.	
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	3,643,630.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	3,643,630.
					Form 990-PF (2015)

	n 990-PF (2015) GEORGE T. WELCH TESTAMENTARY TRUST 91-602 art'VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	4318 instru	ctio	Page 4 ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		3,6	47.
	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-)			0.
3	Add lines 1 and 2		3,6	47.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u>0.</u>
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		<u>3,6</u>	<u>47.</u>
	Credits/Payments:			
	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 3,844.			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld 6d			
	Total credits and payments. Add lines 6a through 6d		3,8	44.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9		1	97.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2016 estimated tax 197. Refunded 11		<u>+</u>	0.
	Enter the amount of line 10 to be Credited to 2016 estimated tax 197. Refunded 11 art VII-A Statements Regarding Activities			<u> </u>
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Vas	No
	any political campaign?	1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	- <u>''</u>		
	distributed by the foundation in connection with the activities	1 '		}
	Did the foundation file Form 1120-POL for this year?	1c		x
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	10		
	(1) On the foundation. ► \$ 0 • (2) On foundation managers. ► \$ 0 •	- }		
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	1		}
	managers. ►\$ 0.	1		
	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		_X_
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			ļ
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			}
	By language in the governing instrument, or			ļ
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			ļ
	remain in the governing instrument?	6	X	
1	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	X	
۵.	Enter the states to which the foundation reports or with which it is registered (see instructions)			
υa	WA	}		
b	olf the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
-	of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		X
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
		orm 99 0)-PF	

Form **990-PF** (2015)

X

3b

4a

N/A

Form 4720, to determine if the foundation had excess business holdings in 2015.)

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

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

orm 990-PF (2015) GEORGE T. WELCH TESTAMEN			<u>91-60243</u>	18 Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (continu	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))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	or to carry on, directly or indire			
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		X Ye	s No	1 1
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section	_		1 1
4945(d)(4)(A)? (see instructions)			s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t			
the prevention of cruelty to children or animals?			s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations	}	_
section 53.4945 or in a current notice regarding disaster assistance (see instru	•			5b X
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi				
expenditure responsibility for the grant?		I/A L Ye	s No	
If "Yes," attach the statement required by Regulations section 53 494:	, ,		ĺ	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		s X No	
a personal benefit contract?	organal hanafit contract?	J Y6	S LAL NO	6b X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p if "Yes" to 6b, file Form 8870.	Dersonal Denemi Contract?		 	6b X
7a At any time during the tax year, was the foundation a party to a prohibited tax s	halter transaction?		s X No	
b. If "Yes," did the foundation receive any proceeds or have any net income attributions.		16	·	7b
Part VIII Information About Officers, Directors, Trust		nagers Highly		70
Paid Employees, and Contractors				
List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
BAKER BOYER BANK	TRUSTEE			
P.O. BOX 1796]			<u> </u>
VALLA WALLA, WA 99362	7.00	39,533.	0.	0.
				}
		İ		1
] (
		1		
		}		1
	1	L L HALONE II		L
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter "NONE."	(d) Contributions to	(a) Evnence
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other
MONT	devoted to position		compensation	allowances
NONE	}]
	 	 		
	1			
	 	 		
	1			
		 		
	1			
		<u> </u>		
 	1	[
Total number of other employees paid over \$50,000	<u> </u>	·		0
			Form	990-PF (2015)

	-6024	318 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 N/A		
	_	
2		
2	7	
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	T	Amount
1 <u>N/A</u>	_	
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	-	0.

**

523561

	art X		
L	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	3,549,050.
b	Average of monthly cash balances	1b	3,549,050. 56,374.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	3,605,424.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	1 1	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,605,424.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	54,081.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,551,343.
6	Minimum investment return. Enter 5% of line 5	6	177,567.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	nd certain	
	foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	177,567.
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.)]	
C	Add lines 2a and 2b	2c	3,647.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	173,920.
4	Recoveries of amounts treated as qualifying distributions	4	2,225.
5	Add lines 3 and 4	5	176,145.
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	176,145.
P	art XII Qualifying Distributions (see instructions)		
	Gadinying Distributions (see instituctions)		
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	103,651.
b	Program-related investments - total from Part IX-B	1b	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:	(
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	103,651.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	IT	
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	103,651.

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4940(e) reduction of tax in those years.

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

Part XIII Undistributed Income (see instructions)

Form 990-PF (2015)

		· · · · · · · · · · · · · · · · · · ·		
	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,	Обіраб	100/3 prior to 2014	2014	2013
line 7				176,145.
2 Undistributed income, if any, as of the end of 2015				170/1450
a Enter amount for 2014 only			0.	
b Total for prior years:				
b rotal for prior yours.		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010 10,860.			1	
b From 2011 181, 541.				
c From 2012 169,938.	•			
d From 2013				
e From 2014 1,904.				
f Total of lines 3a through e	364,243.			
4 Qualifying distributions for 2015 from	301/2131			
Part XII, line 4 ⁻ ►\$103,651.				
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)	,	0.	11	
c Treated as distributions out of corpus				<u></u>
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				103,651.
e Remaining amount distributed out of corpus	0.			100,0021
5 Excess distributions carryover applied to 2015	72,494.			72,494.
(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:		ì		
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	291,749.			
b Prior years' undistributed income. Subtract	271,1270			
line 4b from line 2b		0.		
c Enter the amount of prior years'		<u>``</u>		
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable			· · · · · · · · · · · · · · · · · · ·	
amount - see instructions		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				
be distributed in 2016				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
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	291,749.			
10 Analysis of line 9:				
a Excess from 2011 119,907.				
b Excess from 2012 169,938.				
c Excess from 2013				
d Excess from 2014 1,904.				
e Excess from 2015				
			•	C 000 DE (0045)

Form 990-PF (2015) GEORGE Part XIV Private Operating F		TESTAMENTARY			24318 Page 10
				N/A	
1 a If the foundation has received a ruling of)		
foundation, and the ruling is effective for			▶ └	7.040()(0)	240(1/5)
b Check box to indicate whether the found		erating foundation described		4942(j)(3) or49	942(j)(5)
2 a Enter the lesser of the adjusted net	(a) 2015	(b) 2014	Prior 3 years (c) 2013	(d) 2012	(e) Total
income from Part I or the minimum	(2) 2010	(6) 2014	(6) 2013	(4)2012	(e) rotar
investment return from Part X for	ļ				
each year listed					
b 85% of line 2a	}		+		
c Qualifying distributions from Part XII, line 4 for each year listed	1		1		,
d Amounts included in line 2c not	 				
]				Ì
used directly for active conduct of					1
exempt activities e Qualifying distributions made directly		- 			
for active conduct of exempt activities.					ĺ
Subtract line 2d from line 2d	}				}
3 Complete 3a, b, or c for the				 	
alternative test relied upon:					
a "Assets" alternative test - enter:(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:	Ì				
(1) Total support other than gross	1				}
investment income (interest,	,				
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					<u> </u>
(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	<u> </u>		<u> </u>		<u> </u>
Part XV Supplementary Info			y if the foundatio	n had \$5,000 or m	ore in assets
at any time during t	ne year-see ii	nstructions.)			
1 Information Regarding Foundation	_				
a List any managers of the foundation where year (but only if they have contributed representation)			ntributions received by th	ne foundation before the clo	se of any tax
, , , ,	note man \$5,000). (See Section 507 (u)(2).)			
NONE					
b List any managers of the foundation who other entity) of which the foundation ha			n (or an equally large por	tion of the ownership of a p	artnership or
••	Sa 10 % of greater in	HGI GOL			
NONE				_ 	
	only makes contribut	ions to preselected charitabl	e organizations and does		
the foundation makes gifts, grants, etc.	(see instructions) to	individuals or organizations	under other conditions,	complete items 2a, b, c, and	1 d.
a The name, address, and telephone num	ber or e-mail addres	s of the person to whom app	plications should be addr	essed:	
SEE STATEMENT 9					
b The form in which applications should l	se submitted and inf	ormation and materials they	should include:		
c Any submission deadlines:				· · · · · · · · · · · · ·	
d Any restrictions or limitations on award	s, such as by geogra	iphical areas, charitable field	s, kinds of institutions, o	r other factors:	
			,		
523601 11-24-15					Form 990-PF (2015)

GEORGE T. WELCH TESTAMENTARY TRUST 91-6024318 Page 11 Form 990-PF (2015) Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Purpose of grant or Foundation Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year TOTAL COMMUNITY GRANTS SEE STATEMENT SEE STATEMENT SEE STATEMENT WALLA WALLA COUNTY WALLA WALLA, WA 99362 9,250. TOTAL EDUCATIONAL GRANTS SEE STATEMENT SEE STATEMENT SEE STATEMENT WALLA WALLA COUNTY WALLA WALLA, WA 99362 43,287, TOTAL MEDICAL GRANTS SEE STATEMENT SEE STATEMENT SEE STATEMENT WALLA WALLA COUNTY 44,989. WALLA WALLA, WA 99362 Total ➤ 3a 97_526. b Approved for future payment NONE Total **▶** 3b Form 990-PF (2015)

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelate	d business income	Exclude	d by section 512, 513 or 514	(e)	
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income	
	3333		 			
ab						
	1 1					
c					·	
d						
e	-					
Fees and contracts from government agencies	_				······································	
Membership dues and assessments	-					
3 Interest on savings and temporary cash						
investments			14	48.		
4 Dividends and interest from securities			14	95,770.	·	
5 Net rental income or (loss) from real estate:			+	337.700		
a Debt-financed property				-		
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property						
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory			18	122,979.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:						
a REFUND OF PRIOR YEAR	_					
b GRANTS	_		01	2,225.		
C	_					
d						
e	_					
12 Subtotal. Add columns (b), (d), and (e)		0		221,022.		
13 Total. Add line 12, columns (b), (d), and (e)				13	221,022.	
(Con workshoot in line 12 instructions to verify coloulations	١					

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).							
. +								
-								
+								
-								

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Part`XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

	T								
(a) Line no (b) Amount involved (c) Name of noncharitable exempt organization					on	(d) Description	of transfers, transaction	ons, and sharing arrangem	ents
			N/A		··	<u> </u>	·		
		<u> </u>				l			
		<u> </u>						·	
		ļ							
	ļ	ļ				ļ			
		ļ				ļ			
	<u></u>	<u> </u>				<u> </u>			
	e foundation directly or indire ection 501(c) of the Code (oth	•	•		t organiza	ations described		Yes X	∑ No
	es," complete the following sc		. ,,						
	(a) Name of or	ganization		(b) Type of organ	ızatıon	((c) Description of re	elationship	
	N/A								
1	Sign dura di officer-or-trusle	The second secon	s return, includin eparer (other than	g accompanying schentaxpayer) is based or Date	dules and si	tatements, and to the tion of which prepared TRUST Title	best of my knowledge has any knowledge OFFICER	May the IRS discuss return with the prepa shown below (see in X Yes	arer .
	Print/Type preparer's r	name -	Preparer's si	gnature ' '		Date	Check if	PTIN	
•	THOMAS M	O'BRIEN,	1		!	1	self- employed		
Paid	CPA			M O'BRI	EN, C	2/13/17		P00072704	<u> </u>
Preparer Use Only Firm's name ► CLIFTONLARSONALLEN LI			LLP			Firm's EIN ► 4	1-0746749		
	Firm's address ▶ 1	110 NORTH	CENTER	PARKWAY			 		
	1	ENNEWICK,					Phone no. 50	9-735-1561	Ĺ
							,	Form 990-PF	

GEORGE T. WELCH TESTAMENTARY TRUST
Part IV | Capital Gains and Losses for Tax on Investment Income

_ئيا	Capital dallio and Ed			Lucia.		
	(a) List and 2-story bi	I describe the kind(s) of property sol rick warehouse; or common stock, 2	d, e g., real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
10		DED SECURITIES		D - Dollation		00/20/16
						09/30/16
	PUBLICALLY TRA		TIME ON			09/30/16
		TAL GAIN DISTRIB	UTION			09/30/16
	COMMON TRUST F					09/30/16
	COMMON TRUST F					09/30/16
f	COMMON TRUST F	UND F			ļ	09/30/16
g						
h					}	
- 1					 	
					 	
k						
						
m	<u> </u>				ļ	
n					 	
_0			,		ــــــــــــــــــــــــــــــــــــــ	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(e) t) Gain or (loss) blus (f) minus (g)	
a	92,728.		97,537.			-4,809.
b	1,937,515.		1,919,121.			18,394.
C	73,213.					73,213.
d			2,846.			-2,846.
e	47,583.					47,583.
f			8,556.			-8,556.
g			, , , , , , , , , , , , , , , , , , , ,			
h						
1						
1						
k						
ī						
m						
n						
0						
	Complete only for assets shown	ng gain in column (h) and owned by	the foundation on 12/31/69	(I) Los	sses (from col. (h))	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess	of col. (h) gain òver not less than "-0-")	col. (k),
_		23 01 12/0 1/03	Over cor. (j), if any	·····		4 000
<u>a</u>						-4,809.
b						18,394.
<u>c</u>				······································		73,213.
d						-2,846.
e						47,583.
f						<u>-8,556.</u>
<u>g</u> _						
<u>h</u> _						
<u> </u>						
<u>.k</u>						
<u> </u>			 			
m		 				
<u>n</u>		 	 			
0		L				
2	Capital gain net income or (net ca	apital loss) { If gain, also ente If (loss), enter *-(r in Part I, line 7)-" in Part I, line 7	2		122,979.
3	Net short-term capital dain or (lo:	ss) as defined in sections 1222(5) ar	, i			
	If gain, also enter in Part I, line 8,	column (c).	\-\frac{\frac{1}{2}}{2}			
	If (loss), enter "-0-" in Part I, line	8	J	3	N/A	

FORM 990-PF INTERE	ST ON SAVING	S AND T	EMPORA	RY CASH	INVESTMENTS	STATEM	ENT 1
SOURCE			(A) VENUE BOOKS		(B) INVESTMENT INCOME	(C ADJU NET I	STED
BB MONEY MARKET PRI	NCIPAL		4	8.	48.		
TOTAL TO PART I, LI	NE 3		4	8.	48.		
FORM 990-PF	DIVIDENDS	AND INT	EREST	FROM SEC	URITIES	STATEM	ENT 2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	IS	(A) REVENUE PER BOOK		ST- AD	(C) JUSTED INCOME
BAKER BOYER BANK COMMON TRUST FUND DIVIDENDS BAKER BOYER BANK	6,725.		0.	6,72	5. 6,7	25.	
COMMON TRUST FUNDS INTEREST VARIOUS SECURITIES	21,360.		0.	21,36	0. 21,3	60.	
DIVIDENDS	67,685.		0.	67,68	5. 67,6	85.	
TO PART I, LINE 4	95,770.		0.	95,77	0. 95,7	770.	=====
FORM 990-PF		OTHER	INCOM	<u> </u>		STATEM	ENT 3
DESCRIPTION			REV	A) ENUE BOOKS	(B) NET INVEST MENT INCOM	'- ADJ	C) USTED INCOME
REFUND OF PRIOR YEA	R GRANTS			2,225.		0.	
TOTAL TO FORM 990-P	F, PART I, I	INE 11		2,225.		0.	

,				
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
ACCTG & TAX PREP	3,000.	2,400.		600.
TO FORM 990-PF, PG 1, LN 16B	3,000.	2,400.		600.
FORM 990-PF	TAX	ES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
EXCISE TAX ON NET INVESTMENT INCOME	3,647.	0.		0.
TO FORM 990-PF, PG 1, LN 18 =	3,647.	0.		0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
WA STATE FILING FEES	25.	0.		25.
TO FORM 990-PF, PG 1, LN 23	25.	0.		25.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 7
DESCRIPTION		ВС	OK VALUE	FAIR MARKET VALUE
DODGE & COX INTERNATIONAL STO BLACK ROCK EQUITY DIVIDEND FO COLUMBIA CONTRARIAN CORE FUND MATTHEWS ASIA DIVIDEND FUND IVY MID CAP GROWTH FD DFA US VECTOR EQ DFA GLOBAL REAL ESTATE	NND CL A		386,085. 147,637. 209,928. 97,257. 154,236. 271,876. 58,736.	369,597. 147,902. 260,896. 112,976. 147,204. 260,503. 73,617.

GEORGE T. WELCH TESTAMENTARY TRUST		91-6024318
DFA INTERNATIONAL CORE EQUITY DFA EMERGING MARKETS CORE EQUITY DFA US LARGE CAP VALUE INSTITUTIONAL	410,570. 64,334. 432,671.	409,772. 74,984. 447,719.
TOTAL TO FORM 990-PF, PART II, LINE 10B	2,233,330.	2,305,170.
FORM 990-PF CORPORATE BONDS		STATEMENT 8
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
DFA SHORT DUR INSTL DODGE & COX INCOME FUND FEDERATED TOTAL RETURN BOND FUND DFA FIVE YEAR GLOBAL FIXED INSTITUTIONAL	112,620. 357,570. 357,570. 517,372.	112,981. 354,754. 356,291. 524,890.
TOTAL TO FORM 990-PF, PART II, LINE 10C	1,345,132.	1,348,916.

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

9

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

J T LIEUALLEN, BAKER BOYER BANK P.O. BOX 1796 WALLA WALLA, WA 99362

TELEPHONE NUMBER

NAME OF GRANT PROGRAM

509-525-2000

GEORGE T. WELCH GRANTS/SCHOLARSHIPS

FORM AND CONTENT OF APPLICATIONS

APPLICATION LETTER STATING ACADEMIC PLANS OR OTHER NEED, AND STATEMENT OF RESOURCES AND EXPENSES.

ANY SUBMISSION DEADLINES

FEB 15, MAY 15, AUG 15 AND NOV 15 MEDICAL REQUESTS; MAY 1 FOR ACADEMIC REQUESTS AND JULY 31 COMM REQ

RESTRICTIONS AND LIMITATIONS ON AWARDS

RESIDENT OF WALLA WALLA COUNTY, WASHINGTON

91-6024318 FYE 9-30-2016

George T. Welch Testamentary Trust Schedule to support Form 990-PF, Part XV, Line 3 Grants and Contributions paid during the year

Recipient	Relation	Relationship	Status	Purpose of Grant	Amount
Community Grants PROVIDENCE ST MARY FOUNDATION HELPLINE CARNEGIE PICTURE LAB WHITMAN COLLEGE	Z Z Z Z	N/A N/A N/A N/A	5555	SIDS PREVENTION UTILITY ASSISTANCE PROGRAM SUPPORT OF PICTURE LAB MENS BASKETBALL CAMP	2,500.00 2,500.00 2,500.00 1,750.00
Total Co	Total Community Grants				9,250 00
Educational Grants					
CARLA KITTS	Ž	A/N	_	EDUCATONAL EXPENSES	1,333 00
DESTINY ARMS	Z	A/A	_	EDUCATONAL EXPENSES	4,000 00
LYRIC ARMS	Z	N/A	_	EDUCATONAL EXPENSES	4,000 00
JOLISE ELSINGHORST	Z	N/A	_	EDUCATONAL EXPENSES	4,000 00
AMANDA MELIAH	Z	₹	_	EDUCATONAL EXPENSES	4,000 00
MCKENZIE PALMER	Z	₹	_	EDUCATONAL EXPENSES	4,000.00
JASON SCHAFER-ENTRENA	Z	A/N	_	EDUCATONAL EXPENSES	4,000 00
CLARISSA VANCE	Z	₹	_	EDUCATONAL EXPENSES	4,000 00
MARISSA ELSINGHORST	Z	N/A	_	EDUCATONAL EXPENSES	1,954.00
MIA GARCIA	Z	N/A	_	EDUCATONAL EXPENSES	4,000 00
CODY KELLER	Z	A/A	_	EDUCATONAL EXPENSES	4,000 00
CHRISTIAN MORENO	Z	N/A	_	EDUCATONAL EXPENSES	4,000 00

43,287 00

Total Educational Grants

George T. Welch Testamentary Trust Schedule to support Form 990-PF, Part XV, Line 3 Grants and Contributions paid during the year

91-6024318 FYE 9-30-2016

	Recipient	Relationship	Status	Purpose of Grant	Amount
Medical Grants		<u>.</u>	-		900
		X /X		MEDICAL EXPENSES	00 000,1
ADELMINA SILLEN		N/A	_	MEDICAL EXPENSES	200.00
ALEX BEZU		V/A	_	MEDICAL EXPENSES	95.00
ALEXEY KHRAPOV		N/A	_	MEDICAL EXPENSES	1,000 00
ANGELA DETAR		N/A	_	MEDICAL EXPENSES	290 00
ARTHUR BURCH		N/A	_	MEDICAL EXPENSES	500.00
BARBARA TOLLEY		N/A	_	MEDICAL EXPENSES	300.00
BIBIANO VASQUEZ-ARELLANO		N/A		MEDICAL EXPENSES	261 00
BRADFORD JOHNSON		A/N	_	MEDICAL EXPENSES	1,500 00
BRIE DANNON		N/A	_	MEDICAL EXPENSES	95 00
CANDACE COBB		N/A	_	MEDICAL EXPENSES	1,160 00
CARLOS DELGADO		A/A	_	MEDICAL EXPENSES	650 00
CARRON LAUGHERY		N/A	_	MEDICAL EXPENSES	800.00
CHERENE KRIEGER		A/N	_	MEDICAL EXPENSES	1,855 00
CHERYL WALKER BENSON		A/N	_	MEDICAL EXPENSES	940.00
CORRINE MCCOY		A/A	_	MEDICAL EXPENSES	750 00
CRYSTAL ADAMSON		A/A	_	MEDICAL EXPENSES	1,250 00
DANA JORDAN		N/A	-	MEDICAL EXPENSES	500.00
DANIELLE MCMAHAN		N/A	_	MEDICAL EXPENSES	550.00
DEISY WILLIAMS		N/A	_	MEDICAL EXPENSES	507 00
DONALD BISSONETTE		A/A	-	MEDICAL EXPENSES	1,000 00
DONALD WHEELER		A/A	_	MEDICAL EXPENSES	314 00
DORA NEUMAN		A/A	_	MEDICAL EXPENSES	800.00
DOUGLAS GOOD		N/A		MEDICAL EXPENSES	1,231 00
FAYE KIRKWOOD		A/A	_	MEDICAL EXPENSES	500.00
GEORGE BURVILLE		A/A	_	MEDICAL EXPENSES	975.00
GORDON BARNETT		N/A	_	MEDICAL EXPENSES	488 00
JACYNTHE SONNE		A/A	_	MEDICAL EXPENSES	750 00
JERIMEE MONIZ		A/A	_	MEDICAL EXPENSES	850.00
JOE GOINS		N/A	-	MEDICAL EXPENSES	260 00
JOHN TEWEY		A/A	-	MEDICAL EXPENSES	422 00
JOHNNY STEGALL		N/A	_	MEDICAL EXPENSES	323.00
JOSE M VILLALOBOS		N/A	_	MEDICAL EXPENSES	650 00
JUDITH DYKSTRA		N/A	_	MEDICAL EXPENSES	350 00
KATHLEEN HILL		N/A	_	MEDICAL EXPENSES	200.00

George T. Welch Testamentary Trust Schedule to support Form 990-PF, Part XV, Line 3 Grants and Contributions paid during the year

Total Medical Grants

44,989 00

Reciplent	Relationship	Status	Purpose of Grant	Amount
KATHY GOLAY	N/A	_	MEDICAL EXPENSES	650.00
KAYLA BARNETT	N/A	-	MEDICAL EXPENSES	650 00
KENNETH NANTZ	A/A	_	MEDICAL EXPENSES	200 00
LAUREN HANEY	A/A	_	MEDICAL EXPENSES	488 00
LILLIAN ALDRIDGE	A/A	_	MEDICAL EXPENSES	349.00
LORAN GODDEN	A/A	_	MEDICAL EXPENSES	500.00
LUCIA NUNEZ	A/A	_	MEDICAL EXPENSES	1,150.00
MARIYA BEZU	A/A	_	MEDICAL EXPENSES	1,200 00
MARTIN MILES	A/A	_	MEDICAL EXPENSES	800 00
MARY DANIELS	A/A	_	MEDICAL EXPENSES	1,250.00
MATTHEW BAKER	A/A	_	MEDICAL EXPENSES	400 00
MICHAEL DONNELLY	A/N	_	MEDICAL EXPENSES	335 00
MICHAEL SENNING	A/A	_	MEDICAL EXPENSES	277 00
MICHELE WEBB	N/A	_	MEDICAL EXPENSES	278 00
NELLIE MESSINGER	A/A	-	MEDICAL EXPENSES	364 00
NORMA COOPER	A/A	_	MEDICAL EXPENSES	500.00
PATICIA O'NEIL	A/A	_	MEDICAL EXPENSES	300 00
PATRICIA MARCH	A/A	_	MEDICAL EXPENSES	210.00
PHILOMENA SHIELL	N/A	-	MEDICAL EXPENSES	200 00
RAMON MONTERO	N/A		MEDICAL EXPENSES	1,500 00
REBECCA MEEKS	N/A	_	MEDICAL EXPENSES	200 00
RENDIE BURKS	A/A	_	MEDICAL EXPENSES	650 00
RICHARDO TORRES	N/A	-	MEDICAL EXPENSES	650.00
ROBERT STACEY	A/A	-	MEDICAL EXPENSES	300 00
ROSHAWN DETAMORE	N/A	_	MEDICAL EXPENSES	200 00
RUBY BRADSHAW	A/A	-	MEDICAL EXPENSES	650.00
SALLYANNE EGGERS	N/A	_	MEDICAL EXPENSES	350 00
SHARON MCMULLEN	A/A		MEDICAL EXPENSES	1,250 00
SHEILA KERN	N/A	_	MEDICAL EXPENSES	00 006
SHIRLEY SNOWARDT	N/A	-	MEDICAL EXPENSES	00 009
TODD DAMS	N/A	-	MEDICAL EXPENSES	613 00
TROY OSTBOE	A/A	-	MEDICAL EXPENSES	1,382.00
WENDY FORSYTH	A/N	-	MEDICAL EXPENSES	527.00