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# Form **990-PF**

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public.
Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

Fore	alen	dar year 2016 or tax year	beginning			<u>, and e</u>	nding		
Nar	ne of	foundation ,		_				A Employer identification	number
Tł	IE B	UNGIE FOUNDATION						27-2313989	
Nun	ber ar	nd street (or P O box number It	mail is not de	alivered to street	address)		Room/sulte	B Telephone number	
55	0 1	06TH AVE NE, SUIT	E 207					425-440-6862	
City	or to	wn, state or province, cou	intry, and ZI	P or foreign p	ostal code			C if exemption application is p	ending, check here
В	LLE	VUE, WA 98004							•
G	neck	all that apply:	Initial retur	n	Initial return of a	ormer public o	charity	D 1. Foreign organizations	s, check here
			Final return	1	Amended return				
			Address ch	ange	Name change			Foreign organizations me check here and attach co	eting the 85% test, proputation
HC	heck	type of organization:	x Sectio	n 501(c)(3) ex	cempt private foundation			E If private foundation sta	tus was terminated
	Sec	ction 4947(a)(1) nonexem	pt charitable	e trust 🔲	Other taxable private found	lation		under section 507(b)(1)	. [
I Fa	ır ma	rket value of all assets at e	nd of year	J Account	ng method: Cash	X Acci	ual	F If the foundation is in a	60-month termination
(fr	om F	Part II, col. (c), line 16)			ther (specify)			under section 507(b)(1)	
	\$	2,	235,840.	(Part I, colu	mn (d) must be on cash	basis)			
Pa	rt I	Analysis of Revenue an (The total of amounts in columnecessarily equal the amount	d Expenses mns (b), (c), ar ts in column (i	i nd (d) may not a) )	(a) Revenue and expenses per books		ivestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grant	ts, etc., rece	ived	2,683,645			N/A	
	2	Check If the foundation		to attach Sch B		ļ			
	3	interest on savings and tempo cash investments	orary		60	·	60.		
	4	Dividends and interest fro	m securitie:	S		<u> </u>			
	5a	Gross rents							
	Ь	Net rental income or (loss)				<u> </u>			
•	6a	Net gain or (loss) from sale of	assets not on	line 10		<u> </u>	<u> </u>		
2	b	Gross sales price for all assets on line 6a							<u> </u>
Revenue	7	Capital gain net income (from	Part IV, line 2)	1	<u> </u>	ļ	<u> </u>		
	8	Net short-term capital gai	n			<del> </del>			ļ
	9	Income modifications Gross sales less returns	1			<u> </u>			Ļ—.—.
		and allowances				<u> </u>			ļ
		Less Cost of goods sold			<del> </del> -	<u> </u>			<del> </del>
	1	Gross profit or (loss)				<del></del>			<del>}</del>
	11	Other income	h 44		2,683,705	<del> </del> -	60.		<del> </del>
	12	Total. Add lines 1 throug  Compensation of officers, dire			2,003,703	<del>'</del>	0.		0.
	14	Other employee salaries a		s, etc	100,260	┼			100,260.
		Pension plans, employee	-		23,546	<del> </del>	0.		23,546,
s_	160	Legal fees							
ens.	R	Account over D	ST	T 1	3,680		0.		3,680.
Š	_	Other professional fees	<b>સ</b>			1			
5	170	(nterest 7 2017	<b>31</b>						<del></del>
<b>6</b>	18	Taxes	ST1	AT 2	24		0.		0.
Operating and Administrative Ex	19-		許		2,104	$\cdot$	0.		
Ë	20)	Depreciation and depletion	لـ						
A	21	Travel, conferences, and							
pue	22	Printing and publications							
ŋ gu	23	Other expenses	STI	AT 3	24,081	•	0.	ļ	24,081.
rati	24	Total operating and adm			1	1		}	[
þe		expenses. Add lines 13 t			153,695	<del></del>	0.		151,567.
0	25	Contributions, gifts, grant			396,883	<del></del>			379,175.
	26	Total expenses and disb	ursements.						]
	_	Add lines 24 and 25			550,578	<del>                                     </del>	0.		530,742.
		Subtract line 26 from line							i
)	l .	Excess of revenue over expen			2,133,127	<del></del>		<del> </del>	<del> </del>
		Net investment income (				<del>                                     </del>	60.	<del></del>	<del> </del>
_		Adjusted net income (if n			a and instructions			N/A	Farm 000 DF (22.12)
6235	01 11	-23-16 LHA For Paper	WOLK KEOU	JUON ACI NOTIC	e, see instructions.				Form <b>990-PF</b> (2016)

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	=	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
LP	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	78,696.	2,235,840.	2,235,840.
		Accounts receivable			
		Less; allowance for doubtful accounts	3,906.		
	4	Pledges receivable ▶			
	}	Less: allowance for doubtful accounts			
	5	Grants receivable			<del> </del>
	6	Receivables due from officers, directors, trustees, and other			
	ł	disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
ά	8	Inventories for sale or use			<del></del>
Assets	i	Prepaid expenses and deferred charges	31.		
As		Investments - U.S. and state government obligations			
	ı	Investments - corporate stock			
		Investments - corporate bonds			
	Ι	Investments - land, buildings, and equipment basis	<del></del>		<del></del>
	١''		1		
	12	Less accumulated depreciation Investments - mortgage loans			
	13	Investments - other	<del></del>	<del></del>	<del></del>
	1	Land, buildings, and equipment; basis			<del></del>
	' -		19,812.	0.	0.
	15	Less accumulated depreciation  Other assets (describe	17,012.	<del>`</del>	
		Total assets (to be completed by all filers - see the	<del></del>		
	סי		102,445.	2,235,840.	2 225 940
_	17	Instructions. Also, see page 1, item I)	102,443.	2,233,040.	2,235,840.
		,		200.	
	18	Grants payable	<del></del>		
Liabilities	19	Deferred revenue			
Ē	20	Loans from officers, directors, trustees, and other disqualified persons			
Lia	21	Mortgages and other notes payable		<del></del>	
	22	Other liabilities (describe			
		Total liabilities (add lines 17 through 22)	0.	268.	
~	23	Total liabilities (add lines 17 through 22)	<del> </del>	200.	
	Į	Foundations that follow SFAS 117, check here			
S		and complete lines 24 through 26 and lines 30 and 31.			
ances	ι	Unrestricted	<del></del>	<del></del>	
<u> </u>	1	Temporarily restricted	<del> </del>	<del></del>	
Net Assets or Fund Bal	26	· —	<u> </u>		
Ę		•			
or -		and complete lines 27 through 31.	0.	١	
şţ	27	Capital stock, trust principal, or current funds	0.1	0.	
286	28	Paid-in or capital surplus, or land, bldg., and equipment fund	<del></del>		
¥.	29	Retained earnings, accumulated income, endowment, or other funds	102,445.	2,235,572.	
ž	30	Total net assets or fund balances	102,445.	2,235,572.	
		TALLIA III.	100 445	2 225 240	
_	31	Total liabilities and net assets/fund balances	102,445.	2,235,840.	
P	art	III Analysis of Changes in Net Assets or Fund E	Balances		
_					
1		I net assets or fund balances at beginning of year - Part II, column (a), line	: 30		
_	•	st agree with end-of-year figure reported on prior year's return)		1	102,445.
_		r amount from Part I, line 27a		2	2,133,127.
3		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	2,235,572.
		eases not included in line 2 (itemize)		5	0.
<u>6</u>	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	olumn (b), line 30		2,235,572.
					Form <b>990-PF</b> (2016)

Form 990-PF			FOUNDATION DISSES FOR TAX ON I	nvestment	Income			27	7-2313989	Pa Pa	ge 3
Partiv	(a) List and descr	be the k	nd(s) of property sold (e.g or common stock, 200 sh	., real estate,	income	(b) How a P - Pur D - Do	cquired chase	c) Date (mo., d	acquired ay, yr.)	(d) Date sold (mo., day, yr.	
1a											_
b	NONE	3									
С	•										
d						<u> </u>					
_ <del>e</del>				<del></del>		Щ_					
(e) G	iross sales price	(1)	Depreciation allowed (or allowable)		t or other basis xpense of sale				ain or (loss) s (f) minus (g	)	
_ <u>a</u>			<del></del>	<u> </u>		$\rightarrow$					
<u>b</u>											_
<u> </u>			<u> </u>	<del> </del>							
<u>d</u>				<del> </del>							
Complet	to anhy far accets chause	0.0010.10	column (h) and owned by	the foundation	on 19/21/60		(1)	- · · · · · · · · · · · · · · · · · · ·			
	.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (I)	_	col. (	k), but r	ol. (h) gain m not less than - (from col. (h)	·0-) or	
				<del>                                     </del>		-+-					_
<u>a</u> b				<del> </del>	<del></del>					<del></del>	
- <u>c</u>				<del> </del>							_
<u>d</u>				<del>                                     </del>							
				†							_
2 Capital ga	ain net income or (net ca	pital loss	If gain, also ente If (loss), enter -0	r in Part I, line )- in Part I, line		} 2					
	term capital gain or (los so enter in Part I, line 8,	•	ined in sections 1222(5) a			}					
	enter -0- ın Part I, lıne 8		74/8/ 77	<b>.</b>		<u> </u>	<u>l.                                    </u>				
Part V			Section 4940(e) for				ment inco	me			
(For optional	I use by domestic private	foundati	ons subject to the section	4940(a) tax on	net investment ir	ncome.)					
If section 49	40(d)(2) applies, leave th	us part bl	ank.								
Was the four	ndation liable for the sect	ion 4942	tax on the distributable ar			rıod?				Yes X	No
If "Yes," the f	oundation does not quali	ify under	section 4940(e). Do not co	omplete this pa	<u>rt</u>						
1 Enter the		each colu	mn for each year; see the i	nstructions bei	ore making any e	entries.			<del></del>		
Calendary	(a) Base period years year (or tax year beginnir	ng in)	(b) Adjusted qualifying dis		Net value of no	(c) oncharitable			Distribut (col. (b) divid	d) tion ratio ed by col. (c))	
	2015			557,535.			476,414			1.170	
	2014		<del></del>	292,362.			821,015	<del>↓</del>		.356	
	2013			354,063.			1,125,599			.314	
	2012			288,494.			1,376,996		<del></del>	.209	
	2011			168,986.			914,723	┾┈		.184	740
	ine 1, column (d)							2		2,235	177
_	distribution ratio for the s dation has been in exister	-	se period - divide the total s than 5 years	on line 2 by 5,	or by the number	r of years		3		.447	035
4 Enter the	net value of noncharitab	le-use as	sets for 2016 from Part X,	line 5				4	<u> </u>	314,6	02.
5 Multiply I	line 4 by line 3							5		140,6	38.
6 Enter 1%	of net investment incom	ne (1% o	f Part I, line 27b)					6		<del></del>	1.
7 Add lines	5 and 6							7		140,6	39.
8 Enter qua	alifying distributions from	n Part XII	, line 4					8		530,7	42.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

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	rt VI Excise Tax Based on Investment Income (Section 4940)			948	- see i	<u>nstrı</u>	ıctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here land enter				<b>!</b>			
	Date of ruling or determination letter: (attach copy of letter if necessary)	s <u>sary</u> -see instruc	tions)					
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	x and enter 1	% }	1				1.
	of Part I, line 27b							
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of	of Part I, line 12, o	ol. (b).	'	1			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other	ers enter -0-)		2	ľ			0.
3	Add lines 1 and 2			3				1.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Other	ers enter -0-)		4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	•		5				1.
	Credits/Payments:							
	2016 estimated tax payments and 2015 overpayment credited to 2016	6a						
	Exempt foreign organizations - tax withheld at source	6b		i '	ľ			
	Tax paid with application for extension of time to file (Form 8868)	6c		1	ĺ			
	Backup withholding erroneously withheld	6d		1	]			
	Total credits and payments. Add lines 6a through 6d			7	[			٥.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attach	and		8				
_	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	icu		9	<del>                                     </del>			1.
	·			10	├			<u> </u>
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		l Dadwada d		<del> </del>			
	Enter the amount of line 10 to be: Credited to 2017 estimated tax  Int VII-A   Statements Regarding Activities		Refunded	11	L			
							V	- NO
18	During the tax year, did the foundation attempt to influence any national, state, or local legislat	tion or did it parti	cipate or intervene	ın		<b></b> -	Yes	
	any political campaign?					1a		<u>x</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes					1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	d copies of any	materials publisi	ned or				
	distributed by the foundation in connection with the activities							
	Did the foundation file Form 1120-POL for this year?					10		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year							
	(1) On the foundation. > \$ 0. (2) On foundation managers.	<b>▶</b> \$	0.					
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditu	ire tax imposed o	n foundation					
	maпagers. ► \$0.							
2	Has the foundation engaged in any activities that have not previously been reported to the IRS	5?				2		Х
	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 ins	strument, articles	of incorporation, o	ır				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	5				3		Х
48	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	•				48		x
b	If "Yes," has it filed a tax return on Form 990-T for this year?			N/	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?					5		Х
	If "Yes," attach the statement required by General Instruction T							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	ier:						
	By language in the governing instrument, or							
	By state legislation that effectively amends the governing instrument so that no mandatory is	directions that co	nflict with the state	law				
	remain in the governing instrument?					6	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp	olete Part II. col	(c), and Part XV	,		7	х	
			• • •					
88	Enter the states to which the foundation reports or with which it is registered (see instructions	s) NONE			'		Ì	'
	. , , , , , , , , , , , , , , , , , , ,	·					ı	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Atto	orney General (or	designate)					
_	of each state as required by General Instruction G? If "No," attach explanation	•	STATEMENT 4			8b	ļ	х
9	Is the foundation claiming status as a private operating foundation within the meaning of section			ndar	1			
•	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," coi					9	- 1	x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule	•				10		<u>x</u>
<u></u>	and any position become observations continued to during the any year in 165, attach a schiedule	isong tion names a	110 auti 00005		For	m <b>990</b>	-PF	
							1	/

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Pá	art 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	ł		}	i
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	ļ	11	1	х
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	х	
	Website address ► N/A	_			
14	The books are in care of SHAWN TAYLOR Telephone no	<b>▶</b> 425-440-68	62		
	Located at ▶ 550 106TH AVENUE NE, SUITE 207, BELLEVUE, WA	ZIP+4 ▶9800	14		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			<b></b>	
	and enter the amount of tax-exempt interest received or accrued during the year	15	N,	/A	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,			Yes	Ño
	securities, or other financial account in a foreign country?		16		х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	<u> </u>			
	foreign country				!
P	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
18	a During the year did the foundation (either directly or indirectly);	T T			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	res X No		ĺĺ	i
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				i
	a disqualified person?	res 🗓 No	ı	ľ	ı
		res No		1	ı
		res X No			ı
	(5) Transfer any income or assets to a disqualified person (or make any of either available				
		res X No		ì	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	]	ł		
	if the foundation agreed to make a grant to or to employ the official for a period after	İ	,		
		res X No		l f	
	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)?	1	1b	1	х
	Organizations relying on a current notice regarding disaster assistance check here	▶┌┐┟			
4	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		- 1		
	before the first day of the tax year beginning in 2016?	İ	10	1	x
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	<u> </u>			
_	defined in section 4942(j)(3) or 4942(j)(5)):	l l	- 1		
,	a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginni	nn l	- 1		
	ta di tanàna mandritry ny taona 2008–2014. Ilay kaominina dia kaominina dia kaominina dia kaominina dia kaomini	res X No	ł		
	If "Yes," list the years • , , ,			l	
1	b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect	. <del>.</del>	ſ		
,	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attac		- 1	1	
	statement - see instructions.)	N/A	2ь		
	c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	· · · · · · · · · · · · · · · · · · ·	<del></del> -		
		}	1	1	
3:	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	Į.		ı	
		es X No	J	1	
ı	b if "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons a	1	- }		
	May 26 1969: (2) the lanse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to		ŀ		

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,

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

Form 4720, to determine if the foundation had excess business holdings in 2016)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

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

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Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					T
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	s X No	- 1	1
(2) Influence the outcome of any specific public election (see section 4955); or	r to carry on, directly or indire				
any voter registration drive?		Ye	s X No	1	ì
(3) Provide a grant to an individual for travel, study, or other similar purposes?		Y6	s X No	- {	ļ
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			- 1	ľ
4945(d)(4)(A)? (see instructions)		Ye	s X No	1	ľ
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				İ
the prevention of cruelty to children or animals?		Ye	es 🗓 No	[	
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify und	ler the exceptions described i	ın Regulations			- }
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	ere				1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it mainta	ined	[		Į
expenditure responsibility for the grant?	N	/A Ye	s L No [		J
If "Yes," attach the statement required by Regulations section 53 4945	5-5(d).		ł	ŀ	- 1
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on				i
a personal benefit contract?		Ye	s X No	1	1
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		Ļ	6b	X
If "Yes" to 6b, file Form 8870.				- 1	ĺ
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Part VIII Information About Officers, Directors, Trustore Paid Employees, and Contractors		ınagers, Highly —————	/		
1 List all officers, directors, trustees, foundation managers and their	<del></del>	1 - X			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) l accou allo	xpense int, other wances
	<del> </del>		- components		
SEE STATEMENT 5		0.	0.	1	0.
	<u> </u>				
	. — — — —				
				]	
		j j		]	
				<u> </u>	
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) 0		
(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	accou	xpense int, other wances
AUSTIN SCHLICTMAN - 550 106TH AVENUE	FOUNDATION PROJECT	COORDINATOR			
NE, SUITE 207, BELLEVUE, WA 98004	40.00	64,589.	8,945.	L	0.
				[	
		<b></b>		<u> </u>	
		}		}	
		ļ <u>-</u>	<u> </u>	<u> </u>	
		)			
		L		L	
Total number of other employees paid over \$50,000					0

Part VIII Information About Officers, Directors, Trustees, Four Paid Employees, and Contractors (continued)	idation managers, riigniy	
3 Five highest-paid independent contractors for professional services. If none, e	nter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<del>-</del>	
Total number of others receiving over \$50,000 for professional services		<b>▶</b> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant s	tatistical information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers	produced, etc.	
1		
SEE STATEMENT 6		101,222.
2	-	
		0.
3		
4		
Part IX-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax yea	r on lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<b>&gt;</b>	0.

Part X Minimum Investment Return (All domestic foundations must comp		instructions.)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purp		
Average monthly fair market value of securities	1a	<u>0.</u>
b Average of monthly cash balances	1b	319,393.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	16	319,393.
e Reduction claimed for blockage or other factors reported on lines 1a and	1	
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	319,393.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instruc	ctions) 4	4,791.
5 Net value of noncharitable-use assets, Subtract line 4 from line 3. Enter here and on Part V, line	e 4 5	314,602.
6 Minimum investment return. Enter 5% of line 5	6	15,730.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) proforeign organizations check here and do not complete this part.)	vate operating foundations and certain	
1 Minimum investment return from Part X, line 6	1	15,730.
2a Tax on investment income for 2016 from Part VI, line 5	1.	
b Income tax for 2016. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2c	1.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	15,729.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	15,729.
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	15,729.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	] - ]	
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	530,742.
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., pur	rposes 2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII,	, line 4 4	530,742.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
income. Enter 1% of Part I, line 27b	5	1.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	530,741.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calcula 4940(e) reduction of tax in those years.	ating whether the foundation qualifies for the s	ection

Form **990-PF** (2016)

Page 9

# Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Dictributable amount for 2016 from Part XI		70210 \$1101 to 2010		
1 Distributable amount for 2016 from Part XI,				15,729.
line 7		<del></del>		13,723,
2 Undistributed income, if any, as of the end of 2016			0.	Ì
Enter amount for 2015 only     Total for prior years:	· ·		ļ	<del> </del>
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2016:				<del> </del>
•				
a From 2011 123,332. b From 2012 219,730.				
<u> </u>				1
dFrom 2014 251, 333.				
e From 2015 533,722.	1 405 046			
f Total of lines 3a through e	1,425,946.			<del> </del>
4 Qualifying distributions for 2016 from				
Part XII, line 4: ►\$ 530, 742.				ĺ
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus			!	
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount			·	15,729.
e Remaining amount distributed out of corpus	515,013.	l		
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,940,959.			}
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				<del></del>
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				<del></del>
amount - see instructions	1	0.		
e Undistributed income for 2015. Subtract line			<del></del>	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract	·	<del></del>	<del>``</del>	
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				0.
7 Amounts treated as distributions out of	<del></del>	<del></del>		<u> </u>
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 2011			<del></del>	
•	123,332.			
not applied on line 5 or line 7	123,332.		<del></del>	
9 Excess distributions carryover to 2017.	1,817,627.	!		
Subtract lines 7 and 8 from line 6a	1,017,027.		<del> </del>	
10 Analysis of line 9:				
a Excess from 2012 219,730. b Excess from 2013 297,829.				
	1			
e Excess from 2016 515, 013.		<u> </u>	<u> </u>	L

Part XIV Private Operating F	oundations (see ins	tructions and Part VII	A, question 9)	N/A				
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating						
foundation, and the ruling is effective fo	r 2016, enter the date of th	ne ruling	▶ }					
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)								
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		T			
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total			
investment return from Part X for			<del></del>	<del></del>	<del></del>			
each year listed	<del></del>				<del> </del>			
b 85% of line 2a	ļ			<del> </del>				
c Qualifying distributions from Part XII,					1			
line 4 for each year listed								
d Amounts included in line 2c not	1	ı			<b>†</b>			
used directly for active conduct of				1	ł			
exempt activities								
e Qualifying distributions made directly			1					
for active conduct of exempt activities.					l			
Subtract line 2d from line 2c					]			
3 Complete 3a, b, or c for the								
alternative test relied upon:  a "Assets" alternative test - enter:					ł			
(1) Value of all assets				{	}			
• •			<del></del>					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					}			
b "Endowment" alternative test - enter				<del></del>	<del></del>			
2/3 of minimum investment return								
shown in Part X, line 6 for each year					}			
listed	<del> </del>				<del> </del>			
c "Support" alternative test - enter:					[			
(1) Total support other than gross investment income (interest,					ł			
dividends, rents, payments on								
securities loans (section		'		1				
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				<u>L</u>				
(4) Gross investment income								
Part XV   Supplementary Info			if the foundation	had \$5,000 or me	ore in assets			
at any time during t	he year-see instr	uctions.)						
1 Information Regarding Foundation	n Managers:							
a List any managers of the foundation wh	o have contributed more f	than 2% of the total contr	ibutions received by the	foundation before the clo	se of any tax			
year (but only if they have contributed n	nore than \$5,000). (See se	ection 507(d)(2).)	-		•			
NONE								
b List any managers of the foundation wh	o own 10% or more of the	e stock of a corporation (	or an equally large portio	n of the ownership of a p	artnership or			
other entity) of which the foundation ha								
NONE								
2 Information Regarding Contribut	ion Grant Gift Loan	Scholarship etc. Pr	oorame:					
Check here ► x if the foundation of				nt accent unsolicited requ	agete for funde. If			
the foundation makes gifts, grants, etc.								
a The name, address, and telephone num	<del>`</del>		- <del> </del>		<del></del>			
a The hame, address, and telephone hum	Dei Oi e-iliali addiess oi ti	ne person to whom appli	cations should be addres	scu,				
b The form in which applications should b	a cultimated and informat	ion and materials they all	ionly include:					
b The form in which applications should t	e submitted and informat	ion and materials mey si	iouiu inciuue.					
c Any submission deadlines:		<del></del>						
o Any Submission deadines.								
d Any restrictions or limitations on award	s, such as by geographica	l areas, charitable fields.	kınds of institutions, or o	ther factors:				
,	20 0 1		, 3, G					

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of recipient any foundation manager Name and address (home or business) or substantial contributor a Paid during the year NONE PC: 509(A)(1) 350.ORG GENERAL SUPPORT 20 JAY ST, SUITE 732 DR (2) BROOKLYN, NY 11201 390. AIDS/LIFECYCLE NONE PC: 509(A)(1) GENERAL SUPPORT 1035 MARKET STREET, SUITE 400 OR (2) SAN FRANCISCO, CA 94103 250. NONE PC: 509(A)(1) ALLIANCE FOR EDUCATION GENERAL SUPPORT 509 OLIVE WAY, SUITE 500 OR (2) SEATTLE, WA 98101-2556 200. NONE PC: 509(A)(1) AMERICAN BIRD CONSERVANCY GENERAL SUPPORT OR (2) P.O. BOX 249 THE PLAINS, VA 20198 50. AMERICAN CANCER SOCIETY NONE PC: 509(A)(1) GENERAL SUPPORT PO BOX 22478 DR (2) OKLAHOMA CITY, OK 73123 35. SEE CONTINUATION SHEET(\$) 379,175. Total **b** Approved for future payment NONE Total **▶** 3b

Page 12

Part XVI-A	Analysis	of income-	Producing	<b>Activities</b>
	Allalyon			

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income	Exclu	ided by section 512, 513, or 514	(e)
•	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:			-		
<u> </u>	<del></del>		<u> </u>		
δ	<u> </u>		-	<del></del>	<del></del>
<u> </u>	<b></b>		<del> </del> -		<del></del>
·	<u> </u>		├	<del>  </del>	<del></del>
·	<u> </u>			<del> </del>	<del></del>
T	<del></del>		├		
g Fees and contracts from government agencies				<del> </del>	<del> </del>
2 Membership dues and assessments	L	<del></del>		<del></del>	
3 Interest on savings and temporary cash			14	60.	
Investments	<b></b>		1.0		<del></del>
4 Dividends and interest from securities	<del></del>		-		<del></del>
5 Net rental income or (loss) from real estate:	<del></del>			<del></del>	<del></del>
a Debt-financed property			├	<del> </del>	<del></del>
b Not debt-financed property	<b></b>		├──	<del></del>	<del></del>
6 Net rental income or (loss) from personal	ļ			Í	
property	<del></del>	<del></del>	-	<del> </del>	<del></del>
7 Other investment income	<u> </u>	<u> </u>	}	<del> </del>	<del></del>
8 Gain or (loss) from sales of assets other			1		
than inventory	<u> </u>		├	<u> </u>	
9 Net income or (loss) from special events	<u> </u>		}	<del></del>	<del> </del>
10 Gross profit or (loss) from sales of inventory	<u> </u>	<del></del>	<del> </del>		<del></del>
11 Other revenue:					
<u> </u>	<b></b>		}		<del> </del>
b			<del> </del>	<del> </del>	
<u> </u>	<u> </u>		├	<del></del>	
d	<u> </u>		_		
6		0.			
12 Subtotal. Add columns (b), (d), and (e)	L	<u> </u>	L	60.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	60.
(See worksheet in line 13 instructions to verify calculations.)		<del></del>			
Part XVI-B Relationship of Activities to	o the Acc	omplishment of Ex	cemp	ot Purposes	
Explain below how each activity for which incor the foundation's exempt purposes (other than to			contri	buted importantly to the accon	nplishment of
				<del></del>	
				<del></del>	<del></del>
<del></del>		<del></del>			
<del></del>					<del></del>
<del> </del>					
<del></del>					_ <del>-</del>
<del>+</del>					
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<del></del>			_		
<del></del>				<del></del>	
<del></del>		_			
				_	

orm 99	0-PF (20	16) THE BUNG	GIE FOUNDATION	<u> </u>			27-2313	989	Pa	ige 13
Part :	XVII	Information Re Exempt Organ		sfers To a	and Transactions a	and Relation	ships With Nonc	haritable		
1 Did	the org	anization directly or indir	rectly engage in any	of the followin	g with any other organization	on described in sec	tion 501(c) of		Yes	No
the	Code (d	other than section 501(c)	)(3) organizations) o	r in section 52	7, relating to political organ	izations?		)		
		rom the reporting founda								
(1)	Cash	,						1a(1)		х
	Other							1a(2)		x
٠.		actions:								
		of assets to a noncharital	ble exempt organiza	tion				15(1)		x
٠.		ases of assets from a noi						10(2)	-	x
, ,		of facilities, equipment,		o. gamzacon				1b(3)		х
• •		ursement arrangements						15(4)		x
		or loan guarantees						1b(5)		x
• • •		mance of services or me	emhership or fundral	isina salicitatia	inc			1b(6)		X
٠.		facilities, equipment, ma	•	=				10(0)		X
	-		-		dule. Column ( <b>b)</b> should alv	wave chow the fair	market value of the good		l	<u> </u>
or	services	given by the reporting fo	oundation. If the fou	ndation receive	ed less than fair market valu				cio,	
		the value of the goods,				<del></del>				
(a)Line n	0 1	(b) Amount involved	(c) Name of		exempt organization	(d) Descripto	on of transfers, transactions,	end sharing arr	angeme	nts.
	4_		<u> </u>	N/A		<del></del>				
	4-	<del> </del>	ļ			<del></del>				
	_ _		ļ			<del> </del>	<del></del>			
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	<del>-</del>		ļ. <u></u> .							
	4		<u> </u>							
	_		<u> </u>							
			<u> </u>							
ın s	section (	dation directly or indirect 501(c) of the Code (other mplete the following sch	r than section 501(c		or more tax-exempt organi ion 527?	zations described		Yes	x	] No
		(a) Name of org	ganization		(b) Type of organization		(c) Description of relation	onship		
		N/A								
						ļ — — — —				
					<del></del>	<del> </del>	<del></del>			
		<del>/-/-</del>	<del>/</del>			}				
	Under	penalties of perjury, I declare	that I have examined th	ıs return, ıncludir	g accompanying schedules and	statements, and to th	e best of my knowledge			
Sign Here					n taxpayer) is based on all inform	nation of which prepar	er has any knowledge	May the IRS d return with the shown below	prepare	er l
	Sign	ature of officer or trustee	<del></del>		Date Date	PRESIDENT Title		X Yes		No
	1 5,911	Print/Type preparer's na		Preparer's s		Date	Check If PT	N .		
		13po proparor a lic		1, 10, 2, 0, 3, 3			self- employed			
Paid	]	KATHRYN J. ONG		KATHRYN J	ONG	08/28/17	, ,	00746598		
Prep	arer l	Firm's name CLARI	K NUBER		<del></del>		Firm's EIN ▶ 91-1			
در -	أماسه	, ,					1, "" > = 1			

Phone no. (425)454-4919

Firm's address > 10900 NE 4TH STREET, SUITE 1700 BELLEVUE, WA 98004

#### 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.lrs.gov/form990.

OMB No 1545-0047

2016

Name of the organization		Employer identification number				
_ THE	BUNGIE FOUNDATION	27-2313989				
Organization type (check or	ne):					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
	527 political organization					
Form 990-PF	x 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
Note: Only a section 501(c)	s covered by the <b>General Rule</b> or a <b>Special Rule</b> . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule. See instructions.				
General Rule						
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor	• • •				
Special Rules						
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990 EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990 EZ), Part II, line 13, 16a, ir, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amoundine 1. Complete Parts I and II	, or 16b, and that received from				
year, total contribu	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.					
year, contributions is checked, enter h purpose. Don't cor	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from exclusively for religious, charitable, etc., purposes, but no such contributions totaled mater the total contributions that were received during the year for an exclusively religious implete any of the parts unless the <b>General Rule</b> applies to this organization because it is, etc., contributions totaling \$5,000 or more during the year	nore than \$1,000 If this box s, charitable, etc.,				
but it must answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (F Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fe the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	• • • • • • • • • • • • • • • • • • • •				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

THE BUNGIE FOUNDATION

27-2313989

THE BUNG	IE FOUNDATION		2313989
Part i	Contributors (See instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	. (b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BUNGIE AEROSPACE CORPORATION  550 106TH AVE NE, STE 207  BELLEVUE, WA 98004	\$1,914,108.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	CHILD'S PLAY CHARITY  8040 161ST AVE NE  REDMOND, WA 98052	\$	Person X Payroll  Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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 Oncash Occash (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 Payroll Noncash (Complete Part II for noncash contributions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Name of organization

Employer identification number

THE BUNGTE FOUNDATION

THE BUNG	TE FOUNDATION	7-2313383	
Part II	Noncash Property (See instructions). Use duplicate copies of Part II if a	additional space is needed	
(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
į		\$	
(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
		}   \$	
622462 10 10	0.10		m 990 990-F7 or 990-PE) (2016)

Part III	FOUNDATION		27-2313989				
raitin	Exclusively religious, charitable, etc., c the year from any one contributor. Comple	te columns (a) through (e) and the following his glous, charlable, etc., contributions of \$1,000 or less for	tion 501(c)(7), (8), or (10) that total more than \$1,000 for ne entry. For granizations				
(a) No.			<del> </del>				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		-					
-		(e) Transfer of gift	<del></del>				
	Transferee's name, address	and ZIP + 4	Relationship of transferor to transferee				
-	Transferee 3 harrie, address	, directivity	notationism of gansteror to dansieroe				
1:							
(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						
Γ-							
-							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
:							
	(e) Transfer of gift						
		(e) Transfer of gift	<del></del>				
-	Transferee's name, address		Relationship of transferor to transferee				
	Transferee's name, address		Relationship of transferor to transferee				
	Transferee's name, address		Relationship of transferor to transferee				
(a) No. from Part I	Transferee's name, address  (b) Purpose of gift		Relationship of transferor to transferee  (d) Description of how gift is held				
(a) No. from Part I		, and ZIP + 4					
(a) No. from Part I		, and ZIP + 4					
(a) No. from Part I		, and ZIP + 4					
(a) No. from Part I		, and ZIP + 4					
(a) No. from Part I		(c) Use of gift  (e) Transfer of gift					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift  (e) Transfer of gift	(d) Description of how gift is held				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift  (e) Transfer of gift	(d) Description of how gift is held				

Part XV Supplementary Informatio				
3 Grants and Contributions Paid During the	Year (Continuation)			
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
AMERICAN CIVIL LIBERTIES UNION	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
FOUNDATION	İ	DR (2)		
125 BROAD STREET, 18TH FLOOR				2 050
NEW YORK, NY 10004	<del>                                     </del>	<del> </del>		2,950
AMERICAN DIABETES ASSOCIATION	NONE	PC: 509(A)(1)	GENERAL SUPPORT	,
1701 N. BEAUREGARD STREET		OR (2)	1	<b>.</b>
ALEXANDRIA, VA 22311	<del> </del>		<del> </del>	200
AMERICAN DIABETES ASSOCIATION	NONE	PC: 509(A)(1)	GENERAL SUPPORT	!
1701 N. BEAUREGARD STREET	İ	OR (2)		
ALEXANDRIA, VA 22311		<del> </del>	<del> </del>	100
AMERICAN LUNG ASSOCIATION	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
822 JOHN STREET		OR (2)		
SEATTLE, WA 98109		<u> </u>	<u> </u>	540
AMERICAN RED CROSS	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
431 18TH STREET NW		OR (2)		
WASHINGTON, DC 20006	<del></del>	<del> </del>	<del> </del>	50
AMERICAN SOCIETY FOR THE PREVENTION	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
OF CRUELTY TO ANIMALS		OR (2)		
424 E. 92ND ST				
NEW YORK, NY 10128	<del> </del>			45,
ANNA SCHINDLER FOUNDATION	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
6700 S. STATELINE RD.		OR (2)		
POST FALLS, ID 83854		<del> </del>		5,000
	1			
ARCHDIOCESE OF SEATTLE	NONE	1	GENERAL SUPPORT	
710 9TH AVE SEATTLE, WA 98104		OR (2)		400
SEATTLE, WA JOING	<del></del>	<del> </del>		400.
ASCENDING LIGHTS LEADERSHIP NETWORK	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
P.O. BOX 27790		OR (2)		
LOS ANGELES, CA 90027	<del> </del>	<del> </del>	ļ	600.
BELLEVUE SCHOOLS FOUNDATION	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
12241 MAIN ST.		DR (2)		
BELLEVUE, WA 98005	<del></del>		<u> </u>	250.
Total from continuation sheets				378,250.

Part XV Supplementary Informatio				<del></del>
3 Grants and Contributions Paid During the		<del></del>	<del></del>	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
BENNETT ELEMENTARY PTSA WALKATHON	NONE	PC: 509(A)(1)	GENERAL SUPPORT	l
301 151ST PLACE NE		OR (2)	1	
BELLEVUE, WA 98007	<del> </del>		<del> </del>	200
BEREA COLLEGE	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
209 CHESTNUT ST		DR (2)		
BEREA, KY 40403			-	50
BLUE SKY CHURCH	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
1720 130TH AVE NE		OR (2)		
BELLEVUE, WA 98005	+			1,000.
BOYS & GIRLS CLUB	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
209 100TH AVE NE		OR (2)		
BELLEVUE, WA 98004	<del> </del>	<del> </del>	<del> </del>	5,000.
BOYS & GIRLS CLUB	NONE	PC: 509(A)(1)	AUCTION ITEMS	
209 100TH AVE NE		OR (2)	Ì	
BELLEVUE, WA 98004			<del> </del>	92.
BRAIN INJURY ALLIANCE OF WASHINGTON	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
P.O. BOX 3044		OR (2)	-	
SEATTLE, WA 98114		<del> </del>		25.
BREAST CANCER RESEARCH FOUNDATION	NONE	PC: 509(A)(1)	GENERAL SUPPORT	II.
60 EAST 56TH STREET, 8TH FLOOR		OR (2)		11
NEW YORK, NY 10022	<del>- </del>	<del> </del>	<del> </del>	1,000.
BRIGHT HORIZONS FOUNDATION FOR	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
CHILDREN 105 WESTWOOD PL STE 125		OR (2)		
BRENTWOOD, TN 37027-5039	<del></del>	<del> </del>		50.
BRIGHT WATER SCHOOL COMMUNITY FUND	NONE	PC. 509(A)(1)	GENERAL SUPPORT	
1501 10TH AVE E SUITE 100	, and a	OR (2)	SEMBRAL SUFFURI	
SEATTLE, WA 98102	<del> </del>	ļ · ·	-	154.
CASCADIANOW	NONE	PC: 509(A)(1) OR (2)	GENERAL SUPPORT	
4128 INTERLAKE AVE N SEATTLE, WA 98103-8152		J* \2/		100.
Total from continuation sheets	<del></del>	<del></del>		

Part XV Supplementary Informatio				
3 Grants and Contributions Paid During the		<del></del>	<del></del>	<del></del>
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	oma is priori	<u> </u>
	L	500/5		
CATO INSTITUTE	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
1000 MASSACHUSETTS AVE, NW WASHINGTON, DC 20001-5403	Ì	DR (2)		100
MADRIAGION, DC 20001-3403	<del></del>	<del> </del>	<del> </del>	100.
	}			
CENTER FOR INTERNATIONAL POLICY	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
2000 M STREET NW SUITE 720	1	OR (2)		
WASHINGTON, DC 20036		<u> </u>		100.
	1	1		
CRIMED BOD PERSONICHTIE BICUMS	NONE	DO: 500/33/13	CHARLES AND COMM	
CENTER FOR REPRODUCTIVE RIGHTS 199 WATER STREET	NONE	PC: 509(A)(1) OR (2)	GENERAL SUPPORT	
NEW YORK, NY 10038	}	pi: (2)		1,000.
	<del> </del>	<del>                                     </del>		<del> </del>
		İ	1	
CENTER ON CONTEMPORARY ART	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
114 3RD AVE SE		OR (2)		
SEATTLE, WA 98104	<del></del>	<del> </del>	<del>                                     </del>	60.
		1		
CHAPTER	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
13633 SE 26TH STREET	100.2	DR (2)	DENEME BOTTON	
BELLEVUE, WA 98005				150.
			† - · · · · · · · · · · · · · · · · · ·	
		1		
CHARITOCRACY CORPORATION	NONE	Į.	GENERAL SUPPORT	
PO BOX 7241		OR (2)		
KILL DEVIL HILLS, NC 27948	+	<del> </del>	<del> </del>	65.
CHARITY: WATER	NONE	PC: 509(A)(1)	GENERAL SUPPORT	İ
40 WORTH ST., SUITE 330	Ì	OR (2)		
NEW YORK, NY 10013				1,000.
	}	1		1
CUTOLOG CONSERVITE FORD BURD	NOVE	DG 500(3)(1)	Thursday Gundana	1
CHICAGO COMMUNITY BOND FUND 2527 N MARSHFIELD AVE	NONE	OR (2)	GENERAL SUPPORT	
CHICAGO, IL 60614		J. (2)		50.
	<del>                                     </del>	T		<del>                                     </del>
	}	1		1
CHILD'S PLAY	NONE	PC: 509(A)(1)	GENERAL SUPPORT	1
8040 161ST AVE NE #418	i	OR (2)		1
REDMOND, WA 98052	<del> </del>	<del> </del>	<del> </del>	700.
		]		
CHILD'S PLAY	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
8040 161ST AVE NE #418	1	OR (2)		}
REDMOND, WA 98052		<u> </u>		12,932.
Total from continuation sheets				

	FOUNDATION		27-2313	
Part XV Supplementary Information				<del></del>
3 Grants and Contributions Paid During the	If recipient is an individual,	<del></del>	<del></del>	<del> </del>
Recipient  Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Number and address (nome of Sasmoso)	or substantial contributor	recipient	<del>                                     </del>	
CHILD'S PLAY	NONE	PC: 509(A)(1)	AUCTION ITEMS	
8040 161ST AVE NE #418		OR (2)		
REDMOND, WA 98052	<del> </del>	<del> </del>	<del> </del>	73
CHILDREN'S MIRACLE NETWORK HOSPITALS	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
205 W. 700 S	Ì	OR (2)		
SALT LAKE CITY, UT 84101	<del> </del>	<del>                                     </del>	<del> </del>	890
CUOTOMA MONTELLED DOGA	TOWE	DG 500(2)(1)	anner anner	
CHRISTA MCAULLIFE PTSA 23823 NE 22ND ST	NONE	PC: 509(A)(1) OR (2)	GENERAL SUPPORT	
SAMMAMISH, WA 98074		DR (2)	<u> </u>	100
CLINTON FOUNDATION	NONE	PC: 509(A)(1)	GENERAL SUPPORT	1
610 PRESIDENT CLINTON AVE.	1	DR (2)		
LITTLE ROCK, AR 72201	<u> </u>	<del> </del>	<del> </del>	300
CLOUD MOUNTAIN FARM CENTER	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
6906 GOODWIN ROAD	NONE	DR (2)	GENERAL SUFFORT	
EVERSON, WA 98247		J. (2)		100
CONGREGATIONS FOR THE HOMELESS	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
2650 148TH AVENUE SE SUITE 202		DR (2)		
BELLEVUE, WA 98007	<u> </u>	<del>                                     </del>		400
CROHN'S & COLITIS FOUNDATION OF	NONE	PC: 509(A)(1)	GENERAL SUPPORT	II
AMERICA		DR (2)	u .	1
733 3RD AVE #510 NEW YORK, NY 10017				1,000
NEW TORK, NI TOOT?		<del> </del>		1,000
DENSHO	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
1416 S. JACKSON ST.		OR (2)		
SEATTLE, WA 98144	<del> </del>	<del> </del>	<del> </del>	100
DOCTORS WITHOUT BORDERS	MOME	DC. E09/31/11	GENERAL SUPPORT	
333 SEVENTH AVENUE, 2ND FLOOR	NONE	OR (2)	GEMERAL SUPPURT	
NEW YORK, NY 10001-5004				600
DONORSCHOOSE ORG	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
134 WEST 37 STREET, 11 FLOOR		OR (2)		
NEW YORK, NY 10018	<del></del>	<u> </u>		200
Total from continuation sheets				

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Foundation Purpose of grant or any foundation manager or substantial contributor Amount status of contribution Name and address (home or business) recipient NONE PC: 509(A)(1) DOWNTOWN EMERGENCY SERVICES CENTER GENERAL SUPPORT 515 3RD AVENUE DR (2) SEATTLE, WA 98104 250. DRUM MAJORS OF SOUTHERN CALIFORNIA NONE PC: 509(A)(1) GENERAL SUPPORT 1570 CORIANDER DRIVE #C OR (2) COSTA MESA, CA 92626 125. EASTSIDE BABY CORNER NONE PC: 509(A)(1) GENERAL SUPPORT OR (2) PO BOX 712 ISSAQUAH, WA 98027 500. NONE PC: 509(A)(1) EINSTEIN PTSA GENERAL SUPPORT 18025 NE 116TH ST OR (2) REDMOND, WA 98052 95. ELECTRONIC FRONTIER FOUNDATION NONE PC: 509(A)(1) GENERAL SUPPORT DR (2) 815 EDDY STREET SAN FRANSISCO, CA 94109 1,100. EQUALITY FLORIDA NONE PC: 509(A)(1) GENERAL SUPPORT 17518 NE 98TH WAY OR (2) REDMOND, WA 98052 730. EVERGREEN HEALTHCARE FOUNDATION NONE PC: 509(A)(1) GENERAL SUPPORT 12040 NE 128TH ST MSC 5 DR (2) KIRKLAND, WA 98034-3013 150. NONE FAIRBANKS FAMILY IN AMERICA PC: 509(A)(1) GENERAL SUPPORT OR (2) 511 EAST STREET 50. DEDHAM, MA 02026 FARESTART NONE PC: 509(A)(1) GENERAL SUPPORT DR (2) 700 VIRGINIA ST SEATTLE, WA 98101 1,000. NONE PC: 509(A)(1) GENERAL SUPPORT FREST OR (2) 605 SW 108TH ST SEATTLE, WA 98146 50. Total from continuation sheets

Part N Supplementary Informat				
3 Grants and Contributions Paid During th		·		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
	ļ.			<b>]</b>
FESTIVAL OF TREES AUTISM GUILD	none	PC: 509(A)(1)	GENERAL SUPPORT	
7900 SE 28TH STREET		OR (2)	1	
MERCER ISLAND, WA 98040		<del> </del>	<del> </del>	23,000
		1		
FOOD LIFELINE	NONE	PC: 509(A)(1)	GENERAL SUPPORT	1
1702 NE 150TH ST	j	OR (2)	ì	Ì
SHORELINE, WA 98155		<del> </del>	<del> </del>	25.
	}	1		1
FOSTER KINSHIP	NONE	PC: 509(A)(1)	GENERAL SUPPORT	(
4344 W CHEYENNE	i	OR (2)		i
N. LAS VEGAS, NV 89032				999.
FRED HUTCHINSON CANCER RESEARCH	NONE	PC: 509(A)(1)	GENERAL SUPPORT	İ
CENTER	[""	OR (2)	Daniel Borrow	1
1100 FAIRVIEW AVE N			1	
SEATTLE, WA 98109-4433				100.
FRED HUTCHINSON CANCER RESEARCH	NONE	PC: 509(A)(1)	GENERAL SUPPORT	Ì
CENTER	ì	OR (2)	}	
PO BOX 19024, J5-200 SEATTLE, WA 98109-1024				83.
BBATTEL, NA 30103-1024		†	<del></del>	83.
FRIENDS OF 88-5 FM	NONE		GENERAL SUPPORT	
2601 4TH AVENUE, SUITE 150 SEATTLE, WA 98121		OR (2)	1	50
SBATTUE, WA 70121		<del>                                     </del>	<del> </del>	50.
	}		•	}
GEEKGIRLCON	NONE	PC: 509(A)(1)	GENERAL SUPPORT	Į.
815 1ST AVENUE, SUITE #315 SEATTLE, WA 98104-1404		DR (2)		350
SEATING, NA JOIVE-1404		<del> </del>	<del></del>	350.
GEORGIA TECH ALUMNI ASSOCIATION	NONE		GENERAL SUPPORT	]
190 NORTH AVE NW		DR (2)	1	150
ATLANTA, GA 30313-2550	<del></del>	+	<del> </del>	150.
GIVEWELL	NONE	Į.	GENERAL SUPPORT	[
182 HOWARD STREET #208		DR (2)		
SAN FRANCISCO, CA 94105	<del></del>	<del> </del>	+	300.
GOSPEL FOR ASIA	NONE		GENERAL SUPPORT	
1116 ST THOMAS WAY		DR (2)	1	
WILLIS POINT, TX 75169			<del></del>	1,000.
Total from continuation sheets				<u></u> _

	FOUNDATION	<del></del>	27-23139	703
Part XV Supplementary Information		<del>_</del>		
3 Grants and Contributions Paid During the Recipient	If recipient is an individual,	<del>1</del>	<del>                                     </del>	
	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	<u></u>	
<u> </u>				
GRASSROOTS INTERNATIONAL	NONE	PC: 509(A)(1)	GENERAL SUPPORT	i
179 BOYLSTON STREET, 4TH FLOOR BOSTON, MA 02130		OR (2)		100
boblok, Mr 02130	<del> </del>	<del> </del>	<del> </del>	
HEDGEBROOK	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
216 1ST AVE S. SUITE 251		OR (2)		
SEATTLE, WA 98104		<del> </del>		60
HOLY FAMILY PARISH SCHOOL	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
13727 NE 135TH PL		OR (2)		
KIRKLAND, WA 98034			<del> </del>	400
HOMEWARD PET ADOPTION AGENCY 13132 NE 177TH PLACE PO BOX 2293	NONE	PC: 509(A)(1) OR (2)	GENERAL SUPPORT	
WOODINVILLE, WA 98072		DK (2)		1,050
		<del>                                     </del>		
HOPELINK	NONE	PC: 509(A)(1)	GENERAL SUPPORT	· 
10675 WILLOWS ROAD NE, SUITE 275		OR (2)		
REDMOND, WA 98052		<del> </del>	<del> </del>	300
HUMAN SOCIETY OF SEATTLE	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
13212 SE EASTGATE WAY		OR (2)		(10
BELLEVUE, WA 98005		<del> </del>	<del> </del>	610
INTERNATIONAL RESCUE COMMITTEE	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
122 EAST 42ND STREET		OR (2)	Shirt Borrows	
NEW YORK, NY 10168-1289		ļ	ļ	150
			}	
ISLANDWOOD	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
4450 BLAKELY AVENUE NE		DR (2)		
BAINBRIDGE ISLAND, WA 98110-2257		<del> </del>	<del> </del>	150
ISSAQUAH FOOD AND CLOTHING BANK	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
179 1ST AVE SE		OR (2)	DERMAN SUFFORI	
ISSAQUAH, WA 98027		<u> </u>		295
		1		
JOHN MUIR ELEMENTARY PTSA	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
14012 132ND AVE NE	(	OR (2)	Ţ	
KIRKLAND, WA 98034		i		25.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount any foundation manager or substantial contributor status of Name and address (home or business) recipient JUVENILE DIABETES RESEARCH FOUNDATION NONE PC: 509(A)(1) GENERAL SUPPORT 26 BROADWAY 14TH FLOOR OR (2) NEW YORK, NY 10004 65. PC: 509(A)(1) KCTS9 NONE GENERAL SUPPORT OR (2) 401 MERCER ST SEATTLE, WA 98109 50. KENNETH BUTLER MEMORIAL SOUP KITCHEN NONE PC: 509(A)(1) GENERAL SUPPORT DR (2) 202 E. MAIN ST. GREENFIELD, IN 46140 500. PC: 509(A)(1) KEXP NONE GENERAL SUPPORT 472 1ST AVE N DR (2) SEATTLE, WA 98109 210. KIDSOUEST CHILDREN'S MUSEUM NONE PC: 509(A)(1) GENERAL SUPPORT 4091 FACTORIA MALL SE DR (2) BELLEVUE, WA 98006 100. KING FM 98.1 NONE PC: 509(A)(1) GENERAL SUPPORT OR (2) 10 HARRISON ST, SUITE 100 SEATTLE, WA 98109 120. KITSAP HUMANE SOCIETY NONE PC: 509(A)(1) GENERAL SUPPORT 9167 DICKEY ROAD NW OR (2) SILVERDALE, WA 98383 250. KNKX NONE PC: 509(A)(1) GENERAL SUPPORT 2601 4TH AVENUE, SUITE 150 DR (2) SEATTLE, WA 98121 85. KUOW PUGET SOUND PUBLIC RADIO NONE PC: 509(A)(1) GENERAL SUPPORT OR (2) 4518 UNIVERSITY WAY NE, SUITE 310 SEATTLE, WA 98105 1,560. LAMBDA LEGAL DEFENSE AND EDUCATION NONE PC: 509(A)(1) GENERAL SUPPORT OR (2) FUND, INC. 120 WALL STREET, 19TH FLOOR NEW YORK, NY 10005 150. Total from continuation sheets

Part XV Supplementary Informatio				
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	- Contaious on	
				_
LOS ALTOS ROTARY ENDOWMENT FUND	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
P.O. BOX 794		OR (2)		
LOS ALTOS, CA 94002	<u> </u>	<u></u>		900.
	İ			
LOS ALTOS ROTARY ENDOWMENT FUND	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
PO BOX 794		OR (2)		
LOS ALTOS, CA 94022				900.
WARE A MEGIC COMPONENTS		500(3)(4)		
MAKE-A-WISH FOUNDATION 811 1ST AVE #520	NONE	DR (2)	GENERAL SUPPORT	
SEATTLE, WA 98104		DR (2)		45,000.
	<del></del>	<del>                                     </del>	<del>                                     </del>	10,000.
MAKE-A-WISH FOUNDATION	NONE	PC: 509(A)(1)	HOSTING SICK CHILDREN	
811 1ST AVE #520 SEATTLE, WA 98104		OR (2)	AND FULFILLING WISHES	120 004
SEATIDE, WA FOLLY	<del>                                     </del>	<del> </del>	<del> </del>	130,984.
		1		
MANOS UNIDAS INTERNATIONAL	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
21023 33RD DR. SE		DR (2)		
BOTHELL, WA 98021		<del>}</del>	<del> </del>	98.
		1		
MANOS UNIDAS INTERNATIONAL	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
21023 33RD DR. SE		OR (2)		
BOTHELL, WA 98021	<del> </del>	<del> </del>		36,500.
		ĺ		
MANOS UNIDAS INTERNATIONAL	NONE	PC: 509(A)(1)	AUCTION ITEMS	
21023 33RD DR. SE		OR (2)		
BOTHELL, WA 98021	<del> </del>	<del> </del>	<del> </del>	681.
	[	1	į į	
MARY'S PLACE	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
PO BOX #1711		OR (2)		
SEATTLE, WA 98111				400.
		1		
MERCY USA	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
44450 PINETREE DRIVE, SUITE 201,		OR (2)		
PLYMOUTH, MI 48170				100.
		]		
MORRISON CENTER	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
60 CHAMBERLAIN RD		OR (2)	DOLLOW!	
SCARBOROUGH, ME 04074				50.
Total from continuation sheets				

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager or substantial contributor Name and address (home or business) recipient NONE MOVEMBER FOUNDATION PC: 509(A)(1) GENERAL SUPPORT P.O. BOX 1595 DR (2) CULVER CITY, CA 90232 75. NAACP LEGAL DEFENSE AND EDUCATION NONE PC: 509(A)(1) GENERAL SUPPORT FUND DR (2) 40 RECTOR STREET, 5TH FLOOR NEW YORK, NY 10005 350. NATIONAL ASSOCIATION FOR URBAN DEBATE NONE PC: 509(A)(1) GENERAL SUPPORT **LEAGUES** DR (2) 200 S. MICHIGAN AVE. SUITE 1040 CHICAGO, IL 60804 100. NATIONAL FOREST FOUNDATION NONE PC: 509(A)(1) GENERAL SUPPORT BLDG 27, STE 3, FORT MISSOULA RD OR (2) MISSOULA, MT 59804 50. NATIONAL IMMIGRATION LAW CENTER NONE PC: 509(A)(1) GENERAL SUPPORT OR (2) 3435 WILSHIRE BLVD., STE. 2850 LOS ANGELES, CA 90010 250. NATIONAL MULTIPLE SCLEROSIS SOCIETY NONE PC: 509(A)(1) GENERAL SUPPORT 733 THIRD AVENUE 3RD FLOOR DR (2) NEW YORK, NY 10017 1,155. NATIONAL MULTIPLE SCLEROSIS SOCIETY NONE PC: 509(A)(1) GENERAL SUPPORT 733 THIRD AVENUE 3RD FLOOR OR (2) NEW YORK, NY 10017 490. NATIONAL PARKS CONSERVATION NONE PC: 509(A)(1) GENERAL SUPPORT ASSOCIATION DR (2) 1200 5TH AVE STE 1118 SEATTLE, WA 98101-1127 100. NATIONAL RESOURCES DEFENSE COUNCIL NONE PC: 509(A)(1) GENERAL SUPPORT 40 WEST 20TH STREET SUITE 300 OR (2) NEW YORK, NY 10011 545. NONE PC: 509(A)(1) NO KID HUNGRY GENERAL SUPPORT DR (2) 1030 15TH STREET, NW, SUITE 1100 W WASHINGTON, DC 20005 25. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or contribution show any relationship to any foundation manager or substantial contributor Amount status of Name and address (home or business) recipient NONE NORTH CITY CO-OP PRESCHOOL PC: 509(A)(1) GENERAL SUPPORT 816 NE 190TH ST DR (2) SHORELINE, WA 98155 120. NORTHWEST SCHOONER SOCIETY NONE PC: 509(A)(1) GENERAL SUPPORT DR (2) P.O. BOX 75421 SEATTLE, WA 98175 1,000. OLIVE CREST NONE PC: 509(A)(1) GENERAL SUPPORT 2500 116TH AVE. NE, SUITE 1 DR (2) BELLEVUE, WA 98004 100. PC: 509(A)(1) ONE BOTHELL NONE GENERAL SUPPORT PO BOX 1151 DR (2) BOTHELL, WA 98041 553. OPEN WINDOW SCHOOL NONE PC: 509(A)(1) GENERAL SUPPORT OR (2) 6128 168TH PLACE SE BELLEVUE, WA 98006 750. OVERLAKE CHRISTIAN CHURCH NONE PC: 509(A)(1) GENERAL SUPPORT 9900 WILLOWS ROAD DR (2) REDMOND, WA 98052 1,000. PANTHERA CORPORATION NONE PC: 509(A)(1) GENERAL SUPPORT 8 WEST 40TH STREET, 18TH FLOOR OR (2) NEW YORK, NY 10018 1,000. PASADO'S SAFE HAVEN NONE PC: 509(A)(1) GENERAL SUPPORT OR (2) P.O. BOX 171 SULTAN, WA 98294 60. PAWS NONE PC: 509(A)(1) GENERAL SUPPORT PO BOX 1037 OR (2) LYNNWOOD, WA 98046 30. NONE PBS FOUNDATION PC: 509(A)(1) GENERAL SUPPORT 2100 CRYSTAL DRIVE, THIRD FLOOR OR (2) ARLINGTON, VA 22202 500. Total from continuation sheets

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Yo	ear (Continuation)  If recipient is an individual,	<del></del>	<del></del>	
Recipient  Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome or business)	or substantial contributor	recipient	<u> </u>	
PLANNED PARENTHOOD FEDERATION OF	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
AMERICA	}	OR (2)	}	
123 WILLIAM STREET, 10TH FLOOR	B			
NEW YORK, NY 10038	<del> </del>	<del> </del>	<del> </del>	5,010.
DODENY OF AV	hrown	DG 500(3)(1)	anymnik aynnana	
P.O. BOX 18504	NONE	PC: 509(A)(1) OR (2)	GENERAL SUPPORT	
DENVER, CO 80218	1	) (2)		185.
	<del> </del>	<del> </del>	<del> </del>	
PRO PUBLICA	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
155 AVENUE OF THE AMERICAS 13TH FLOOR	İ	OR (2)		
NEW YORK, NY 10013	<u> </u>	<u> </u>	<del> </del>	100.
QUEEN ANNE ELEMENTARY PTSA	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
411 BOSTON ST		OR (2)		
SEATTLE, WA 98109		<del> </del>	<del> </del>	1,000.
		500(1)(1)		!
RAINN 1220 L STREET, NW. SUITE 505	NONE	PC: 509(A)(1) OR (2)	GENERAL SUPPORT	
WASHINGTON, DC 20005		DK (2)		200.
REEL GRRLS	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
4408 DELRIDGE WAY SW		OR (2)		
SEATTLE, WA 98106		ļ	ļ	60.
RONALD MCDONALD HOUSE CHARITIES	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
5130 40TH AVE NE		OR (2)		
SEATTLE, WA 98105		<del> </del>	<del> </del>	575.
RONALD MCDONALD HOUSE CHARITIES	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
5130 40TH AVE NE SEATTLE, WA 98105		OR (2)		13,718.
bantille, mi solos	<u> </u>	<del> </del>		13,710.
ROSE HILL PRESBYTERIAN CHURCH	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
12202 NE 90TH ST		OR (2)		II
KIRKLAND, WA 98033		ļ	<del> </del>	750.
	}			h
RUSSIAN CHAMBER MUSIC	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
1200 FIFTH AVENUE, SUITE 1300		OR (2)		
SEATTLE, WA 98101-3151	<u></u>	<del></del>		50.
Total from continuation sheets		<del></del>		

Part XV Supplementary Information 3 Grants and Contributions Paid During the You			Т	
Recipient	If recipient is an individual,	<del>T</del>	<del></del>	
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	<del> </del>	
,	}	}	1	
SAKYA MONASTERY OF TIBETAN BUDDHISM	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
108 NW 83RD ST		OR (2)	1	
SEATTLE, WA 98117	<del> </del>	<del> </del>	<del> </del>	150
SAVE A FORGOTTEN EQUINE	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
16509 164TH AVE NE		DR (2)	1	
NOODINVILLE, WA 98072	<del> </del>	<del>}</del>	<del> </del>	100
SAVE THE CHILDREN FOUNDATION	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
501 KINGS HIGHWAY EAST, SUITE 400		OR (2)		4.00
FAIRFIELD, CT 06825	<del> </del>	<del> </del>	<del> </del>	100
		1		
SCARECROW PROJECT	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
5030 ROOSEVELT WAY NE SEATTLE, WA 98105		OR (2)		50
SEATINE, WA 90103	<del> </del>	1	<del> </del>	
		500/23/43		
SEATTLE ANIMAL SHELTER 2061 15TH AVE. W.	NONE	PC: 509(A)(1) OR (2)	GENERAL SUPPORT	
SEATTLE, WA 98119		DR (2)		30
		1		
SEATTLE CANCER CARE ALLIANCE	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
825 EASTLAKE AVENUE E	10.12	OR (2)		
SEATTLE, WA 98109-1023	<u> </u>	ļ		60
SEATTLE CENTER FOUNDATION	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
305 HARRISON STREET		OR (2)		
SEATTLE, WA 98109	<del> </del>	<del> </del>	<del> </del>	150
	ļ			
SEATTLE CHILDRENS HOSPITAL FOUNDATION	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
4800 SAND POINT WAY NE		OR (2)	1	
SEATTLE, WA 98105	<del> </del>	<del> </del>	<del> </del>	2,000
SEATTLE CHILDRENS HOSPITAL FOUNDATION 4800 SAND POINT WAY NE	NONE	PC: 509(A)(1) OR (2)	GENERAL SUPPORT	
4800 SAND POINT WAY NE SEATTLE, WA 98105		FR (2)		20,281
,	<del>                                     </del>	†	<del>                                     </del>	
CPARTIE OUTINDENC MOCRETARI POMBINATOR	NONE	PC: 509(A)(1)	POLITOMENT DONATIONS TO	
SEATTLE CHILDRENS HOSPITAL FOUNDATION 4800 SAND POINT WAY NE	NOTE .	DR (2)	EQUIPMENT DONATIONS TO AUTISM CENTER	
SEATTLE, WA 98105				367
Total from continuation sheets	<del></del>			

Part XV Supplementary Informatio  3 Grants and Contributions Paid During the				<del>,</del>
Recipient	If recipient is an individual,	Τ		<del> </del>
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
•				
SEATTLE NORTH APP PTA	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
2311 N 45TH STREET #257		OR (2)		1
SEATTLE, WA 98103	<del> </del>	<del> </del>	<del>                                     </del>	1,00
		1		
SEATTLE SHAKESPEARE COMPANY	NONE	PC: 509(A)(1)	GENERAL SUPPORT	}
PO BOX 19595		OR (2)		
SEATTLE, WA 98109	<del></del>			2,00
SEATTLE UNION GOSPEL MISSION	NONE		GENERAL SUPPORT	
PO BOX 202 SEATTLE, WA 98111		DR (2)		7!
JARTIMA, WA JOITE		<del> </del>		
DEVOSE ET EVEN	NONE	DG: E00(3)(1)	GENERAL GURRORE	
SEMPER FI FUND 325 COLLEGE BLVD, SUITE 102 PMB 609	NONE	OR (2)	GENERAL SUPPORT	
OCEANSIDE, CA 92057		j (2)		1
				<del></del>
SHUNPIKE	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
220 2ND AVE S, STE 102	100.2	DR (2)	DENEMED BOTTON	ĺ
SEATTLE, WA 98104				1,00
				1
SIERRA CLUB FOUNDATION	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
2101 WEBSTER ST SUITE 1300		OR (2)		
DAKLAND, CA 94612		ļ		70
SNOQUALMIE ELEMENTARY PTSA	NONE	1	GENERAL SUPPORT	
39801 SE PARK ST		OR (2)	Į į	
ENOQUALMIE, WA 98065	<del> </del>	<del> </del>		42
SOUTHERN POVERTY LAW CENTER	NONE	PC: 509(A)(1) OR (2)	GENERAL SUPPORT	
400 WASHINGTON AVENUE MONTGOMERY, AL 36104		DR (2)		1,10
	<del> </del>	<del>                                     </del>		
SPARROW HOSPITAL FOUNDATION	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
1215 E MICHIGAN AVE		DR (2)	DOLFORT	
LANSING, MI 48912				200
		}		_
SPECIAL BUNNY	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
32047 NE 94TH ST	1	OR (2)		
CARNATION, WA 98014		<del></del>	<u></u>	80

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Foundation Purpose of grant or show any relationship to any foundation manager or substantial contributor Amount status of contribution Name and address (home or business) recipient ST. JUDE CHILDREN'S RESEARCH HOSPITAL NONE PC: 509(A)(1) GENERAL SUPPORT 262 DANNY THOMAS PLACE OR (2) MEMPHIS, TN 38105 5,158. ST. JUDE CHILDREN'S RESEARCH HOSPITAL PC: 509(A)(1) GENERAL SUPPORT OR (2) 262 DANNY THOMAS PLACE MEMPHIS, TN 38105 1,673. STACK UP.ORG NONE PC: 509(A)(1) GENERAL SUPPORT OR (2) 5877 COMMERCE STREET OFFICE 103 PITTSBURGH, PA 15206 3,024. NONE PC: 509(A)(1) STANWOOD CAMANO ROTARY FOUNDATION GENERAL SUPPORT PO BOX 1754 DR (2) STANWOOD, WA 98292 1,000. PC: 509(A)(1) STEVENS ELEMENTARY PTA NONE GENERAL SUPPORT DR (2) 1242 18TH AVENUE E 850. SEATTLE, WA 98112 SUMMER SEARCH NONE PC: 509(A)(1) GENERAL SUPPORT 1109 1ST AVE #205 OR (2) SEATTLE, WA 98101 100. NONE PC: 509(A)(1) SUNSET LAKE CAMP BOAT DONATION PO BOX 90 DR (2) WILKESON, WA 98396 ٥. THE AGAINST MALARIA FOUNDATION US NONE PC: 509(A)(1) GENERAL SUPPORT OR (2) 310 W 20TH STREET, SUITE 300 2,000. KANSAS CITY, MO 64108 PC: 509(A)(1) THE CAIR PROJECT NONE GENERAL SUPPORT PO BOX 17121 DR (2) SEATTLE, WA 98127 500. THE CANCER CENTER AT THE CHILDREN'S NONE PC: 509(A)(1) GENERAL SUPPORT HOSPITAL OF PHILADELPHIA DR (2) 3401 CIVIC CENTER BLVD PHILADELPHIA, PA 19104 50. Total from continuation sheets

PartXV Supplementary Information				<b>,</b>
3 Grants and Contributions Paid During the Y		<del></del>	<del>,</del>	<del> </del>
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		<u> </u>
THE CHURCH OF JESUS CHRIST OF	NONE	PC: 509(A)(1)	GENERAL SUPPORT	}
LATTER-DAY SAINTS		OR (2)		ļ
CORPORATION OF THE PRESIDENT, 50 E				
NORTH TEMPLE, ROOM 1521 SALT LAKE				
CITY, UT 84150	<del> </del>	<del> </del>	<del> </del>	990
		Ì		1
THE CULTURE PROJECT INTERNATIONAL	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
P.O. BOX 86		OR (2)	1	}
WYNNEWOOD, PA 19096	<u> </u>	<del> </del>		500
		1		1
THE FIELD MUSEUM OF CHICAGO	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
1400 S. LAKE SHORE DRIVE	ł	OR (2)		j
CHICAGO, IL 60605				250
THE LEUKEMIA & LYMPHOMA SOCIETY	NONE	PC: 509(A)(1)	GENERAL SUPPORT	•
123 NW 36TH ST. SUITE 100	NONE	DR (2)	GENERAL SUPPORT	
SEATTLE, WA 98107		Pik (2)	1	500
<del></del>	<del> </del> -	<del>                                     </del>	<del> </del>	1
THE MELANOMA INTERNATIONAL FOUNDATION	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
250 MAPLE FLOWER RD	[	DR (2)		
GLENMOORE, PA 19343	<del> </del>	<del></del>	<del> </del>	50
THE NATIONAL HOTLINE FOR DOMESTIC	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
VIOLENCE		OR (2)		
P.O. BOX 161810		1		
AUSTIN, TX 78716		<u> </u>		50
				ĺ
THE RIGHT QUESTION INSTITUTE	NONE	PC: 509(A)(1)	GENERAL SUPPORT	j
1140 CONNECTICUT AVE NW #700		OR (2)	}	
WASHINGTON, DC 20036	<u> </u>	1	<u> </u>	100
		1		}
THE TREVOR PROJECT	NONE	PC: 509(A)(1)	GENERAL SUPPORT	1
PO BOX 69232		OR (2)		ì
WEST HOLLYWOOD, CA 90069				50.
THE VERMONT FOODBANK	NONE	BC. 509/A\/1\	GENERAL SUPPORT	
33 PARKER RD	TOME	DR (2)	SEMERAL SUPPURT	}
BARRE, VT 05641		[ ```	<b>\</b>	150.
<del></del>		1		
		500/11/41		{
TICKET TO DREAM FOUNDATION	NONE	)	GENERAL SUPPORT	{
2207 PLAZA DRIVE #200 ROCKLIN, CA 95765		OR (2)		35
Total from continuation sheets	<del></del>	4	<del></del>	25.
- otal florii Colliniaarioli siicers				<u> </u>

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount any foundation manager or substantial contributor status of Name and address (home or business) recipient NONE PC: 509(A)(1) GENERAL SUPPORT TREEHOUSE FOR KIDS 2100 24TH AVE. S., SUITE 200 DR (2) SEATTLE, WA 98144 208. U.S. FRIENDS OF THE DAVID SHELDRICK NONE PC: 509(A)(1) GENERAL SUPPORT WILDLIFE TRUST DR (2) 25283 CABOT ROAD SUITE 101 LAGUNA HILLS, CA 92653 1,000. PC: 509(A)(1) UNICEF USA NONE GENERAL SUPPORT DR (2) 125 MAIDEN LANE NEW YORK, NY 10038 475. UNION OF CONCERNED SCIENTISTS NONE PC: 509(A)(1) GENERAL SUPPORT DR (2) TWO BRATTLE SO. CAMBRIDGE, MA 02138-3780 400. NONE PC: 509(A)(1) USA FOR UNHCR GENERAL SUPPORT 1775 K STREET, NW, SUITE 290 OR (2) WASHINGTON, DC 20006 100. WASHINGTON ENVIRONMENTAL COUNCIL NONE PC: 509(A)(1) GENERAL SUPPORT 1402 THIRD AVE, SUITE 1400 DR (2) SEATTLE, WA 98101 150. WASHINGTON FERRET RESCUE AND SHELTER NONE PC: 509(A)(1) GENERAL SUPPORT DR (2) (WFRS) 12514 128TH LANE NE KIRKLAND, WA 98034 600. WASHINGTON STATE UNIVERSITY NONE PC: 509(A)(1) GENERAL SUPPORT OR (2) FOUNDATION 255 E. MAIN STREET, SUITE 201 PO BOX 641927 PULLMAN, WA 99164 250. WASHINGTON TRAILS ASSOCIATION NONE PC: 509(A)(1) GENERAL SUPPORT 705 SECOND AVE, SUITE 300 OR (2) SEATTLE, WA 98104 1,300. WASHINGTON WILDLIFE & RECREATION NONE PC: 509(A)(1) GENERAL SUPPORT DR (2) COALITION 1402 THIRD AVENUE, SUITE 507 SEATTLE, WA 98101 150. Total from continuation sheets

PartXV Supplementary Information		·		
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
WARRE ORO	NONE	PC - 509/31/11	COMEDAI CHDDODT	1
WATER.ORG 117 WEST 20TH STREET, SUITE 203	NONE	PC: 509(A)(1) OR (2)	GENERAL SUPPORT	}
KANSAS CITY, MO 64108-1909		JK (2)		650.
	<del></del>	<del> </del>		
				j
WE CARE SOLAR	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
2150 ALLSTON WAY, SUITE 340		OR (2)		}
BERKELEY, CA 94704	<del></del>	<b></b>	<del> </del>	50.
				j
WIKIMEDIA FOUNDATION	NONE	PC: 509(A)(1)	GENERAL SUPPORT	]
149 NEW MONTGOMERY STREET, FLOOR 6		OR (2)	DANIEL BOTTOM	}
SAN FRANCISCO, CA 94105	}			480.
		]		i
WOLF HAVEN INTERNATIONAL	NONE	PC: 509(A)(1)	GENERAL SUPPORT	İ
3111 OFFUT LAKE RD. SE		OR (2)		1
TENINO, WA 98589	<del> </del>	<del> </del>	<del>}</del>	125.
WOODINVILLE FAMILY PRESCHOOL	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
P.O. BOX 125		OR (2)		
WOODINVILLE, WA 98072		<u> </u>		200.
WORLD VISION	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
34834 WEYERHAEUSER WAY S	NONE	OR (2)	BUNDAU BOLLOKI	ĺ
FEDERAL WAY, WA 98001				1,240.
WORLD WILDLIFE FUND	NONE	PC: 509(A)(1)	GENERAL SUPPORT	1
1250 24TH STREET, N.W. WASHINGTON, DC 20037	1	OR (2)		210.
WASHINGTON, DC 20037	<del> </del>	<del> </del>	<del></del> -	210.
WORLDBUILDERS	NONE	PC: 509(A)(1)	GENERAL SUPPORT	)
PO BOX 186		OR (2)		}
STEVENS POINT, WI 54481			<del> </del>	20.
				Ì
YMCA OF GREATER SEATTLE	NONE	PC: 509(A)(1)	GENERAL SUPPORT	
909 FOURTH AVE		OR (2)		
SEATTLE, WA 98104				1,000.
			T	
VOLUME THE POORIS	HOME	DG: 500/71/41	COVER AT AVERAGE	
YOUTH IN FOCUS 2100 24TH AVE, S. SUITE 310	NONE	PC: 509(A)(1) DR (2)	GENERAL SUPPORT	
SEATTLE, WA 98144				1,000.
Total from continuation sheets	<del></del>	<del></del>	<del></del>	<del></del>
		<del></del>		

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of recipient Purpose of grant or contribution Amount Name and address (home or business) YOUTHCARE NONE PC: 509(A)(1) GENERAL SUPPORT OR (2) 2500 NE 54TH ST SEATTLE, WA 98105 2,060. ZTA FOUNDATION NONE PC: 509(A)(1) GENERAL SUPPORT 3450 FOUNDERS ROAD OR (2) INDIANAPOLIS, IN 46268 107. Total from continuation sheets

ACCOUNTI	NG FEES	S	TATEMENT 1
(A) EXPENSES PER BOOKS		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
3,680.	0.	<del></del>	3,680
3,680.	0.		3,680,
TAX	ES	S	TATEMENT 2
(A) EXPENSES PER BOOKS		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
24.	0.		0.
24.	0.		0.
OTHER E	XPENSES	S	ratement 3
(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
9,493. 3,347.			9,493. 3,347.
11,241.	0.		11,241.
	(A) EXPENSES PER BOOKS  3,680.  TAX  (A) EXPENSES PER BOOKS  24.  24.  OTHER E  (A) EXPENSES PER BOOKS	(A) (B) EXPENSES NET INVEST- PER BOOKS MENT INCOME  3,680. 0.  TAXES  (A) (B) EXPENSES NET INVEST- PER BOOKS MENT INCOME  24. 0.  OTHER EXPENSES  (A) (B) EXPENSES NET INVEST- MENT INCOME  (B)  (B) EXPENSES NET INVEST- MENT INCOME	(A) (B) (C) EXPENSES NET INVEST- PER BOOKS MENT INCOME  3,680. 0.  TAXES  (A) (B) (C)  XAME  TAXES  (B) (C)  ADJUSTED  ADJUSTED  ADJUSTED  ADJUSTED  NET INCOME  24. 0.  OTHER EXPENSES  (A) (B)  (C)  ADJUSTED  ADJUSTED  NET INCOME  (C)  ADJUSTED  NET INCOME  (C)  ADJUSTED  NET INCOME  (A) (B)  EXPENSES  OTHER EXPENSES  (A) (B)  EXPENSES  NET INVEST-  ADJUSTED  NET INCOME

### EXPLANATION

WASHINGTON STATE REQUIRES FILING FOR PRIVATE FOUNDATIONS WHEN INVESTMENT ASSETS ARE \$250,000 OR GREATER. SINCE THE BUNGIE FOUNDATION ONLY HOLDS CASH, IT IS BELOW THIS FILING THRESHOLD. AS A RESULT, NO FILING IS REQUIRED WITH THE STATE THIS YEAR.

	ST OF OFFICERS, DETERMINED IN STREET		STAT	EMENT 5
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
ONDRAUS JENKINS 550 106TH AVENUE NE, SUITE 207 BELLEVUE, WA 98004	PRESIDENT 0.50	0.	0.	0,
PETE PARSONS 550 106TH AVENUE NE, SUITE 207 BELLEVUE, WA 98004	DIRECTOR 0.50	0.	0.	0.
ZACH RUSSELL 550 106TH AVENUE NE, SUITE 207 BELLEVUE, WA 98004	DIRECTOR 0.50	0.	0.	0.
JAMES MCQUILLAN 550 106TH AVENUE NE, SUITE 207 BELLEVUE, WA 98004	VICE PRESIDENT 0.50	0.	0.	0.
SHAWN TAYLOR 550 106TH AVENUE NE, SUITE 207 BELLEVUE, WA 98004	TREASURER 0.50	0.	0.	0.
CHRISTINE EDWARDS 550 106TH AVENUE NE, SUITE 207 BELLEVUE, WA 98004	DIRECTOR 0.50	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.
FORM 990-PF SUMMARY OF DI	RECT CHARITABLE AG	CTIVITIES	STATE	EMENT 6

## ACTIVITY ONE

THE IPADS FOR KIDS PROGRAM AT SEATTLE CHILDREN'S HOSPITAL LAUNCHED IN 2012. IN 2016, THE PROGRAM SERVED MORE THAN 10,000 PATIENTS WITHIN ALL INPATIENT UNITS OF THE HOSPITAL, BOTH BY LOANING CUSTOMIZED IPADS TO PATIENTS STAYING IN THE HOSPITAL, AS WELL AS PROVIDING IPADS TO HOSPITAL STAFF TO USE IN THEIR DIRECT INTERVENTIONS WITH PATIENTS. HOSPITAL STAFF INCLUDES CHILD LIFE SPECIALISTS, MUSIC THERAPY, ART THERAPY, AND RECREATION THERAPY.

							EXPENSES
то	FORM	990-PF,	PART	IX-A,	LINE	1	101,222
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2016 DEPRECIATION AND AMORTIZATION REPORT

FORM	FORM 990-PF PAGE 1			İ	Ì		990-PF							
Asset	Description	Date Acquired	Method	Life	Noc>	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	11 (D) PONTOON BOAT	07/01/12 SL		10.00	16	30,480.	<del>_</del> _			30,480.	10,668.		2,104.	12,772.
	* TOTAL 990-PF PG 1 DEPR					30,480.				30,480.	10,668.		2,104.	12,772.
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628111	628111 04-01-16			]		(D) - Asset disposed	pesoc		*	ITC, Salvage,	Bonus, Comm	nercial Revita	* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone	tion, GO Zone