Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052

2016

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Fo	r calen	ndar year 2016 or tax year beginning		16, and			, 20
		undation				er identification numb	er
		OUNDATION			45-6 <u>6</u> 57	7506	
Nı	ımber an	d street (or P O box number if mail is not delivered to street address)	Roo	m/suite	B Telephor	ne number (see instruct	ions)
		ARBOR AVENUE SW #600			206-230	-5924	
Cı	ty or tow	n, state or province, country, and ZIP or foreign postal code			C If exemp	tion application is pend	ing, check here ▶ 🗌
SEATTLE, WA 98126							
G	Check		of a former publ	ic charity	D 1. Foreig	n organizations, check	here . ▶ 🗌
		☐ Final return ☐ Amended			2. Foreig	n organizations meeting	g the 85% test,
		Address change Name cha				here and attach computed foundation status was	
Н		type of organization: Section 501(c)(3) exempt p				07(b)(1)(A), check here	. ►
ᆜ		on 4947(a)(1) nonexempt charitable trust					
ı		narket value of all assets at J Accounting method f year (from Part II, col. (c),	: Lai Cash 📋	Accruai		ndation is in a 60-mont ction 507(b)(1)(B), chec	
	line 16		on each bacie l		under se	ction 507 (b)(1)(b), chec	Kilele .
12	art I	<u></u>		Т -	<u> </u>		(d) Disbursements
-	are.	amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment	(c) Adjusted net	for chantable
		the amounts in column (a) (see instructions).)	books	"	ncome	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	100,000.0				
8	2	Check ▶ ☐ If the foundation is not required to attach Sch. B					PER SE
3	3	Interest on savings and temporary cash investments		5	6		
77 73	4	Dividends and interest from securities	31,12	7	31,127		
3	5a	Gross rents					
~	b	Net rental income or (loss)					
Revenue	6a	Net gain or (loss) from sale of assets not on line 10					
	b	Gross sales price for all assets on line 6a					
	7	Capital gain net income (from Part IV, line 2)			0.00		
	8	Net short-term capital gain					
3 0 1	9	Income modifications				PARTY CONTROL OF THE PARTY OF T	
~	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold	0.00				
	11	Other income (attach schedule)	0.00	7 3/2/2/24			
	12	Total. Add lines 1 through 11	131,133.00	31	,133.00	0.00	
_	13	Compensation of officers, directors, trustees, etc.	101,133.0	1	7 23 3 . 0 0		STATE OF THE PARTY
seuses	14	Other employee salaries and wages		<u> </u>			
ä	15	Pension plans, employee benefits		<u> </u>			
	16a	Legal fees (attach schedule)	CEIVE				
EX	b		- IATT	O 2	,956.00		
.≝	C	Other professional fees (attach schedule) Otherest	C 1 C 2017	13			
ī	17		0 1 0 701/				····
J <u>i</u>	18	Taxes (attach schedule) (see instructions)					
Έ	19	Depreciation (attach schedule) and depletion	DEN, UT				
₫	20	Occupancy					
Ē	21	Travel, conferences, and meetings		 			
a	22	Printing and publications	-	 			
ing	23 24	Other expenses (attach schedule)		+			
ati	~~	Add lines 13 through 23		1 -	956 99	0.00	
Operating and Administrative	25	Contributions, gifts, grants paid	0.00 53,780.00		,956.00	0.00	53,780.00
ō	26	Total expenses and disbursements. Add lines 24 and 25	53,780.00		,956.00	0.00	53,780.00
_	27	Subtract line 26 from line 12:	53,780.00		, 330.00	0.00	33,760.00
	a	Excess of revenue over expenses and disbursements	77,353.00	_			
	b	Net investment income (if negative, enter -0-) .			.177.00		
	C	Adjusted net income (if negative, enter -0-)					

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D	art II	Attached schedules and amounts in the description column	Beginning of year		End o	of year
F	art II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Valu	ue	(c) Fair Market Value
	1	Cash—non-interest-bearing				
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ►				STATE OF THE STATE OF
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				-
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶				
	1	Less: allowance for doubtful accounts ▶				
ts	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
Ä	10a	Investments—U.S. and state government obligations (attach schedule)				
	ь	Investments—corporate stock (attach schedule)	1,054,239	1,131,	592	
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis ▶				
		Less: accumulated depreciation (attach schedule) ▶				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment: basis ▶				
		Less: accumulated depreciation (attach schedule) ▶				
İ	15	Other assets (describe ▶)				
	16	Total assets (to be completed by all filers—see the				
		instructions. Also, see page 1, item I)	1,054,239.00	1,131,592	.00	0.00
	17	Accounts payable and accrued expenses				
s	18	Grants payable				
tie	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
ial	21	Mortgages and other notes payable (attach schedule)				
_	22	Other liabilities (describe ►)				
	23	Total liabilities (add lines 17 through 22)	0.00	0	.00	
S		Foundations that follow SFAS 117, check here ▶ □				
lances		and complete lines 24 through 26 and lines 30 and 31.				
an	24	Unrestricted	1,054,239	1,131,	592	
3al	25	Temporarily restricted				
P	26	Permanently restricted				
'n.		Foundations that do not follow SFAS 117, check here ▶ □				
ī		and complete lines 27 through 31.				
Net Assets or Fund Ba	27	Capital stock, trust principal, or current funds				
et	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
155	29	Retained earnings, accumulated income, endowment, or other funds				
jt/	30	Total net assets or fund balances (see instructions)	1,054,239.00	1,131,592	.00	
Ň	31	Total liabilities and net assets/fund balances (see				
Da		instructions)	1,054,239.00	1,131,592	.00	
	rt III	Analysis of Changes in Net Assets or Fund Balances	mn (a) line 20 (t ogroc with		
•		I net assets or fund balances at beginning of year—Part II, colu- of-year figure reported on prior year's return)				1 054 055 55
_					1	1,054,239.00
_		r amount from Part I, line 27a		1	2	77,353.00
3					3	
		lines 1, 2, and 3			4	1,131,592.00
5	Decr	reases not included in line 2 (itemize) ► I net assets or fund balances at end of year (line 4 minus line 5)—I	Port II. solvery 45 "		5	1 121 500 55
0	iota	i net assets of futio balances at end of year (line 4 minus line 5)—	rait II, column (0), III	IE 3U	6	1,131,592.00

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)				(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a						
<u>b</u>				 		
С_				 		
<u>d</u>				 		
е_				<u> </u>		J
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis ense of sale		ain or (loss) s (f) minus (g)
<u>a</u>						
b_						
<u> </u>			<u> </u>			
<u>d</u> _		 				
е_	Complete only for assets sho	owing gain in column (h) and owned	by the foundation	on 12/31/69	(I) Cours (C	al (h) asın surus
	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) F M V as of 12/31/69 (j) Adjusted basis (k) Excess of col (i) over col (j), if any		s of col (i)	col (k), but n	ol. (h) gain minus ot less than -0-) or (from col. (h))	
а						
b						
С						
d						
е_						·
2	Capital gain net income o	nringt canital incel ?	also enter in Pa , enter -0- in Pa		2	
3	If gain, also enter in Part	in or (loss) as defined in sections I, line 8, column (c) (see instructions in the column column).			3	
Part		der Section 4940(e) for Redu		let Investment Ir	come	
Nas th		section 4942 tax on the distribut t qualify under section 4940(e). D			se period?	☐ Yes ☐ No
1	Enter the appropriate am	ount in each column for each yea	ar; see the instru	uctions before maki	ng any entries	•
Cale	(a) Base penod years ndar year (or tax year beginning ir	(b) Adjusted qualifying distributions	s Net value of	(c) f nonchantable-use asse	ts Di	(d) stribution ratio) divided by col (c))
	2015			1,054,23	39	0.0000
	2014			1,002,84	19	0.0000
	2013			950,64	16	0.0000
	2012			801,82	21	0.0000
	2011			230,40	03	0.0000
2	Total of line 1, column (d)			2	0.0000
3	Average distribution ratio	for the 5-year base period—divi dation has been in existence if le	de the total on I	ine 2 by 5, or by th	е	
	•		·			
4	Enter the net value of nor	ncharitable-use assets for 2016 f	rom Part X, line	5	4	
5	Multiply line 4 by line 3				5	0.00
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6	282.00
7	Add lines 5 and 6				7	282.00
8		ons from Part XII, line 4				53,780.00
	If line 8 is equal to or gre Part VI instructions.	ater than line 7, check the box in	n Part VI, line 1b	, and complete tha	it part using a	1% tax rate. See the

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instr	uctio	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)							
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check		282	0.0				
_	here ► X and enter 1% of Part I, line 27b							
С	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-)			<u> </u>				
3	Add lines 1 and 2		282	00				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			-				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	LIZING!	282	00				
6	Credits/Payments: 2016 estimated tax payments and 2015 overpayment credited to 2016 6a		Park	ع ج				
a b	Exempt foreign organizations—tax withheld at source 6b	76						
C	Tax paid with application for extension of time to file (Form 8868) . 6c							
ď	Backup withholding erroneously withheld 6d							
7	Total credits and payments. Add lines 6a through 6d	- Anna	0	00				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached							
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9		282	00				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10		0	00				
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax ► Refunded ► 11		0	00				
	VII-A Statements Regarding Activities	455,000,000	-	F & 1				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No X				
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b		х				
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.							
С	Did the foundation file Form 1120-POL for this year?	1c		Х				
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$							
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$							
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X				
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		Х				
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	<u> </u>	X				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	200	X				
•	If "Yes," attach the statement required by General Instruction T.							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or		20.5					
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 	6	X					
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	 -				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			11 150				
				2				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	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 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"							
	complete Part XIV	9	<u> </u>	Х				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	x					

Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		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		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	<u> </u>
	Website address ► N/A			
14	The books are in care of ▶ John Wherry Telephone no. ▶ 206-2	<u> 30 - 59</u>	24	
15	Located at ▶ 1661 Harbor Avenue SW #600, Seattle, WA ZIP+4 ▶ 98126 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here			▶ 🗆
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authorit		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	nichtente	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name o the foreign country ▶			
Part	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
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here ▶□			100
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?			
	If "Yes," list the years ▶ 20, 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)	2b		X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. > 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	9		
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a]	Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		X

Part	VII-B Statements Regarding Activities	for V	Vhich Form	4720	May Be R	lequire	d (contii	nued)		
5a	During the year did the foundation pay or incur a	ny amo	ount to:							
	(1) Carry on propaganda, or otherwise attempt t(2) Influence the outcome of any specific public	c electi	ion (see secti	on 495	55); or to c	arry on,	Yes	X No)	
	directly or indirectly, any voter registration dr	ive?					☐ Yes	X No		-
	(3) Provide a grant to an individual for travel, stu(4) Provide a grant to an organization other than	n a cha	ritable, etc.,	organiz	ation desc	ribed in	ı	X No		
								X No		
	(5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to compare the prevention of cruelty the crue the prevention of cruelty the prevention of cruelty the crue the prevention of cruelty the crue the prevention of cruelty the cruelt	hildrer	or animals?				☐Yes	X No		; ;
b	b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?									
	Organizations relying on a current notice regarding							▶□		
С	If the answer is "Yes" to question 5a(4), does t because it maintained expenditure responsibility							□ No		
	If "Yes," attach the statement required by Regula									
6a	Did the foundation, during the year, receive any on a personal benefit contract?		directly or inc			emiums 	☐ Yes	X No		
b	Did the foundation, during the year, pay premium If "Yes" to 6b, file Form 8870.	ns, dire	ectly or indire	ctly, on	a personal	benefit	contract	? .	6b	Х
7a	At any time during the tax year, was the foundation a						Yes		The second lines in the second	
b	If "Yes," did the foundation receive any proceeds								7b	<u> </u>
Part	VIII Information About Officers, Direct and Contractors	tors,	rustees, F	ounda	tion wan	agers,	nigniy r	ald E	mpioyees,	
1	List all officers, directors, trustees, foundation	n mana	agers and th	eir con	pensation	ı (see iı	nstruction	ns).		
		(b) Title	e, and average	(c) Co	mpensation	(d) (Contributions	to	(e) Expense ac	count.
	(a) Name and address		rs per week ed to position		ot paid, ter -0-)		yee benefit perred compe		other allowa	
	Wherry	Trus	tee						1	
	Harbor Avenue SW #600				0			0		0
Seatt	tle, Washington 98126				ļ					
Polly	y Lau	Trus	tee							
	Harbor Avenue SW #600				0			0		0
Seatt	tle, Washington 98126									
2	Compensation of five highest-paid employee "NONE."	s (oth	er than thos	se incl	uded on li	ne 1—	see instr	uction	s). If none,	enter
((a) Name and address of each employee paid more than \$50,00	0	(b) Title, and a hours per v devoted to p	veek "	(c) Comper		(d) Contribution employee plans and documents	benefit eferred	(e) Expense ac other allowa	count,
NONE										
			<u> </u>							
			<u>}</u>]	
			,							
						- -				
Total i	number of other employees paid over \$50,000 .	<u> </u>	<u> </u>		<u> </u>			. ▶		

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3 Fiv	e highest-paid independent contractors for professional services (see instructions). If none, enter "NO	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
		<u> </u>
		
		
Total num	ber of others receiving over \$50,000 for professional services	
		 -
Part IX-	Summary of Direct Charitable Activities	
	oundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of ons and other beneficianes served, conferences convened, research papers produced, etc	Expenses
1 NON		
		<u> </u>
2		
		
3		
4		
4		
Part IX-	Summary of Program-Related Investments (see instructions)	
	the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 NON	3	
	······	
2		
All -45-		
	program-related investments. See instructions	
3		
Total Add	I lines 1 through 3	0.0
. 3 500 11 / 10/0		Form 990-PF (2016

Part		ign fo	undations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	1,054,239.00
b	Average of monthly cash balances	1b	1,031,233.00
C	Fair market value of all other assets (see instructions)	1c	
ď	Total (add lines 1a, b, and c)	1d	1,054,239.00
e	Reduction claimed for blockage or other factors reported on lines 1a and		1,031,233.00
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,054,239.00
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	15,813.00
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,038,426.00
6	Minimum investment return. Enter 5% of line 5	6	51,921.00
Part 2	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations check here ► □ and do not complete this part.)	ound	ations
1	Minimum investment return from Part X, line 6	1	51,921.00
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.00
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	51,921.00
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	51,921.00
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	1 1	
	line 1	7	51,921.00
Part	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	100	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	53,780.00
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	} }	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	53,780.00
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	282.00
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	53,498.00
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	g whe	ther the foundation
	qualifies for the section 4940(e) reduction of tax in those years.		000 55
			Form 990-PF (2016)

alt	VIII Olidistributed income (see instructi	0115)	,		
1	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
	line 7	建设工工工工工工工工工工工工工工工工工工工工工工工工工工工工工工工工工工工工			51,921.00
2	Undistributed income, if any, as of the end of 2016:				
a	Enter amount for 2015 only	SARAT AND THE STREET		FEST RESERVED	
b	Total for prior years: 20,20,20				Library Const.
3	Excess distributions carryover, if any, to 2016:				
a	From 2011				
b	From 2012				
d	From 2014		第一章读示范		
u	From 2015				
f	Total of lines 3a through e	0.00			
4	Qualifying distributions for 2016 from Part XII,				
	line 4: ▶ \$ 53,780.00				
а	Applied to 2015, but not more than line 2a .				
b	Applied to undistributed income of prior years			4.200	CONTRACTOR OF THE
	(Election required—see instructions)				
C	Treated as distributions out of corpus (Election		被加州的		
	required—see instructions)				
d	Applied to 2016 distributable amount	学进步的			
е	Remaining amount distributed out of corpus		A STATE OF THE STA		
5	Excess distributions carryover applied to 2016	white was well and the second seconds with the			Chi. College de College Colleg
	(If an amount appears in column (d), the same				
^	amount must be shown in column (a).) Enter the net total of each column as				
6	indicated below:	可多证定 的			
-	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.00			
b	Prior years' undistributed income. Subtract	0.00			
_	line 4b from line 2b		0.00		
c	Enter the amount of prior years' undistributed				
•	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed			是在这种主义	
ď	Subtract line 6c from line 6b. Taxable				
	amount—see instructions		0.00		
e	Undistributed income for 2015. Subtract line				
	4a from line 2a. Taxable amount—see instructions	建筑规模			
		**************************************	RESERVANT OF A	0.00	是是一个的。 1000年
f	Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2017				51,921.00
7	Amounts treated as distributions out of corpus	25-4/18, 12 and the first for the first of the	1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CONTRACTOR OF THE CONTRACTOR	8-34 S. A. S.
•	to satisfy requirements imposed by section	1	And the second		的。这些智慧
	170(b)(1)(F) or 4942(g)(3) (Election may be	1	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		
	required—see instructions)				
8	Excess distributions carryover from 2011 not		,	و و و و و و و و و و و و و و و و و و و	10 6
	applied on line 5 or line 7 (see instructions) .			, , , , , , , , , , , , , , , , , , , ,	A
9	Excess distributions carryover to 2017.				7 7
	Subtract lines 7 and 8 from line 6a	0.00	(), A .	<u></u>	14.
10	Analysis of line 9:	P11 P1 - 12 1		, , , , , , , , , , , , , , , , , , , ,	र प्राप्त विकास
а	Excess from 2012	· · · · ·		· ' ,	
b	Excess from 2013	` .		- '	,
C	Excess from 2014	[1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
đ	Excess from 2015	∫ ,		, ,	
е	Excess from 2016	1	,		

Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question 9)		
1a	If the foundation has received a ruling	or determination	letter that it is a j	onvate operating		
	foundation, and the ruling is effective for					
b	Check box to indicate whether the four	ndation is a private	operating foundat	ion described in sec	ction	3) or 🔲 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
	each year listed					0.00
b	85% of line 2a	0.00	0.00	0.00	0.00	0.00
С	Qualifying distributions from Part XII, line 4 for each year listed					0.00
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0.00
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	0.00	0.00	0.00	0.00	0.00
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test—enter.					
	(1) Value of all assets(2) Value of assets qualifying under	, , , , , , , , , , , , , , , , , , , ,				0.00
b	section 4942(j)(3)(B)(i)					0.00
С	of minimum investment return shown in Part X, line 6 for each year listed					0.00
J	(1) Total support other than gross investment income (interest, dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)					0.00
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0.00
	(3) Largest amount of support from an exempt organization					0.00
	(4) Gross investment income					0.00
Part	Supplementary Information any time during the year—			e foundation ha	d \$5,000 or mo	ere in assets at
1	Information Regarding Foundation					
а	List any managers of the foundation was before the close of any tax year (but of					by the foundation
	Wherry, Polly Lau					
b	List any managers of the foundation ownership of a partnership or other er				, , ,	ge portion of the
NONE	<u> </u>					
2	Information Regarding Contribution Check here ► 🗓 if the foundation unsolicited requests for funds. If the fother conditions, complete items 2a, the second terms of the conditions is the second terms of the conditions in the second terms of the conditions is the second terms of the conditions of the conditions is the second terms of the conditions is the second terms of the conditions of the conditions is the second terms of the conditions of the	only makes contri oundation makes (butions to presel	ected charitable o		
а	The name, address, and telephone nu		dress of the perso	n to whom applica	tions should be ac	ldressed:
b	The form in which applications should	be submitted and	information and r	naterials they shou	ld include:	
С	Any submission deadlines:			·		
d	Any restrictions or limitations on aw factors:	ards, such as by	geographical are	eas, charitable fiel	ds, kinds of insti	tutions, or other

Total

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual Recipient Foundation show any relationship to Purpose of grant or status of **Amount** any foundation manager contribution Name and address (home or business) recipient or substantial contributor a Paid during the year 1. The Fuller Center for Housing 701 S. Martin Luther King Blvd. Americus, GA 31719 NOT PF Support of Operations 12,480.00 Zigen Fund 213037, 39th Avenue, Suite 355 Bayside, New York 11361 12,000.00 NOT PF Support of Operations Habitat for Humanity 121 Habitat St. Americus, GA 31709 NOT PF Support of Operations 5,800.00 4. Red Cross 2025 E. Street, NW Washington, DC 20006 NOT PF Support of Operations 2,000.00 Salvation Army P.O. Box 9219 Seattle, WA 98109 NOT PF Support of Operations 1,000.00 6. Child Haven 316 Broadway Seattle, WA 98122 NOT PF Support of Opeations 1,000.00 ReWa 4008 Martin Luther King Jr., Way S Seattle, WA 98108 NOT PF Support of Operations 500.00 Central Asia Institute P.O. Box 7209 Bozeman, MT 59771 NOT PF Suppport of Operations 500.00 Northwest Harvest P.O. Box 12272 Seattle, WA 98102 NOT PF Support of Operations 500.00 Total **b** Approved for future payment

3b

0.00

Part XV

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual Recipient Foundation show any relationship to Purpose of grant or status of Amount any foundation manager contribution Name and address (home or business) recipient or substantial contributor a Paid during the year 10. Alzheimer's North Tower, 100 W. Harrison St. N200 Seattle, WA 98119 NOT PF Support of Operations 2,000.00 11. Doctors Without Borders 333 Seventh Avenue, 2nd Floor New York, New York 10001 NOT PF Support of Operations 5,000.00 Heifer International 1 Would Avenue Little Rock, ARK 72202 NOT PF Support of Operations 1,000.00 13. Firelight P.O. Box 953 Santa Cruz, CA 95061 NOT PF Support of Operations 10,000.00 53,780.00 **b** Approved for future payment

0.00

3b

	gross amounts unless otherwise indicated.		siness income	Excluded by sect	ion 512, 513, or 514	
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
	Program service revenue:	ļ		 		
a Ł		ļ		 	<u></u>	
		ļ		 		
	, 			 		ļ
	<u> </u>	<u> </u>		 -		
f						
,	Food and contracts from accordance	<u> </u>		 		<u> </u>
2 1				 		
	Membership dues and assessments nterest on savings and temporary cash investments					
	Dividends and interest from securities					
	let rental income or (loss) from real estate:					
		REPRESENT MENTS	STATE CONTRACTOR OF THE STATE OF			
	Debt-financed property	 				
	let rental income or (loss) from personal property		,			
	Other investment income	 				
	Gain or (loss) from sales of assets other than inventory			 		
	let income or (loss) from special events					
	Gross profit or (loss) from sales of inventory					
						
·· t						· · · · · · · · · · · · · · · · · · ·
-						
Č						
-						·
12 5	Subtotal. Add columns (b), (d), and (e)	Medical	0.00		0.00	0.00
		STANK BOOKS OF PART AND ACCOUNT AND		- Seeding True - Court of Water		
13 7	otal, Add line 12, columns (b), (d), and (e)				13	0.00
					13	0.00
See w	orksheet in line 13 instructions to verify calculation	s.)			13	0.00
See w	orksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
See w Part	orksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
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See w Part Line	orksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		

Form **990-PF** (2016)

	Exempt	Organizations					
1			engage in any of the for section 501(c)(3) organ				No
а	Transfers from the	reporting foundation	to a noncharitable exen	npt organization	of.		
_	(1) Cash			, p 3		1a(1)	X
	• •		• •		•		X
	(2) Other assets		•			. 1a(2)	Λ
b	Other transactions						
	(1) Sales of assets	s to a noncharitable ex	empt organization			. 1b(1)	X
	(2) Purchases of a	assets from a nonchari	table exempt organizat	ion		1b(2)	X
		ties, equipment, or oth				. 1b(3)	X
	(4) Reimbursemer			•		1b(4)	X
	• •	_		• •	• • •	1b(5)	X
	(5) Loans or loan	₹					
			ship or fundraising solic			. 1b(6)	X
С			ists, other assets, or pa			1c	X
ď						d always show the fair m	
	value of the goods	s, other assets, or sen	rices given by the repo	rting foundation	If the foundation	received less than fair m	ıarke
	value in any transa	action or sharing arran	gement, show in colum	n (d) the value of	the goods, othe	r assets, or services recei	ived
(a) Line			charitable exempt organizatio			nsactions, and sharing arrangeme	
(-,		(-)			<u>'</u>		
							——
			_ 				
				{			
					·		
							
							
							
		-					
							
2a b	described in section		affiliated with, or related (other than section 501 e				No
	(a) Name of o		(b) Type of orga	nization	(c) De	scription of relationship	
	(a) Name of o	Tganization	(b) Type of orga	I I Lation	(6) 250	somption of relationship	
			 		 		
			<u> </u>				
		• • • • • • • • • • • • • • • • • • • •					
	Under penalties of pen	ury. I declare that I have exami	ned this return, including accom	panying schedules and	statements, and to the	best of my knowledge and belief, if	t is true
Sign	1 ' . ' .		than taxpayer) is based on all inf				
	' 	\	18/11/11	T.	1-	May the IRS discuss this with the preparer shown	
Here			5/11/19	1 / lus	the	(see instructions)? \(\text{Yes}	
	Signature of officer of		Date	Title			
Paid	Print/Type prep	parer's name	Prepare synatyle		Date	Check If PTIN	
	Thomas W	V. Nelson		Λ	19-417	self-employed PO13805	28
	arer	► Hodgson Russ I	1 p - / V / V V V	<u> </u>	T Eine		<u> </u>
Jse	Only Firm's name	140 Pearl Street	Suite 100 Duffeld	New Vork	14202 Firm	s EIN ▶	

Information Regarding Transfers To and Transactions and Relationships With Noncharitable

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

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

OMB No 1545-0047

2016

Employer identification number

JWPL	FOUNDATION		45-6657606
Organi	zation type (check or	ne):	
Filers o	of:	Section:	
Form 9	90 or 990-EZ	501(c)() (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a p	rivate foundation
		☐ 527 political organization	
Form 9	90-PF		
		4947(a)(1) nonexempt charitable trust treated as a private	e foundation
		☐ 501(c)(3) taxable private foundation	
	Only a section 501(c)(7	covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General	ral Rule and a Special Rule. See
Genera	l Rule		
X	For an organization or more (in money o contributor's total co	filing Form 990, 990-EZ, or 990-PF that received, during the y r property) from any one contributor. Complete Parts I and II. ontributions.	rear, contributions totaling \$5,000 See instructions for determining a
Special	Rules		
	regulations under se 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that rections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A that received from any one contributor, during the year, total the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-	(Form 990 or 990-EZ), Part II, line contributions of the greater of (1)
	contributor, during the	described in section 501(c)(7), (8), or (10) filing Form 990 or 990 ne year, total contributions of more than \$1,000 exclusively for all purposes, or for the prevention of cruelty to children or anin	religious, charitable, scientific,
	contributor, during to contributions totaled during the year for a General Rule applie	described in section 501(c)(7), (8), or (10) filing Form 990 or 99 he year, contributions exclusively for religious, charitable, etc. I more than \$1,000. If this box is checked, enter here the total in exclusively religious, charitable, etc., purpose. Don't complets to this organization because it received nonexclusively religioned during the year	, purposes, but no such I contributions that were received ete any of the parts unless the ious, chantable, etc., contributions
Caution	n: An organization tha	t isn't covered by the General Rule and/or the Special Rules d	

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

JWPL F	OUNDATION	45	-6657606
Part I	Contributors (See instructions). Use duplicate co	pies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	John Wherry 1661 Harbor Avenue SW #600 Seattle, Washington 98126	\$ 100,000.00	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
i		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization

JWPL FOUNDATION

Employer identification number
45-6657606

Part II	Noncash Property (See instructions). Use duplicate co	opies of Part II if additional spa	ce 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
		\$	
(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
		 \$	
1		-	

Employer identification number

JWPI.	FOINDA	アチハト

Part III

INDATION 45-6657606

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

c	ontributions of \$1,000 or less for th	ne year. (Enter this infor	mation once. S	al of <i>exclusively</i> religious, charitable, etc see instructions.) ► \$	
a) No. from Part I	Use duplicate copies of Part III if additional space is needed. (b) Purpose of gift (c) Use of gift			(d) Description of how gift is held	
		(e) Transfer	of aift		
	Transferee's name, address, ar		_	nship of transferor to transferee	
i) No. from Part I	(b) Purpose of gift	(c) Use of g	ift	(d) Description of how gift is held	
	Transferee's name, address, ar	(e) Transfer		nship of transferor to transferee	
) No.	(h) Durance of sife	(2) Llog of a	.:r6	(d) Description of hour sift is held	
art I	(b) Purpose of gift (c) Use of gift			(d) Description of how gift is held	
	Transferee's name, address, ar	(e) Transfer		nship of transferor to transferee	
) No. rom art I	(b) Purpose of gift (c) Use		ift	(d) Description of how gift is held	
	(e) Transfer of gift				
	Transferee's name, address, ar	nd ZIP + 4	Relation	nship of transferor to transferee	

(10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and

JWPL FOUNDATION 1661 HARBOR AVENUE SW, #600 SEATTLE WA 98126

EIN: 45-6657506

ATTACHMENT TO FORM 990-PF (2016)

Part I, Line 16a

Accounting Expense: Hodgson Russ LLP

Buffalo, NY

\$2,956

Part VII-A, Line 10

Substantial contributors:

John Wherry, 1661 Harbor Avenue SW, #600, Seattle, Washington 98126

047091.00013 Business 16362897vi