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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

Depar	tment	t of the Treasury reпue Service		lnformati	Do not enter s on about Fori	iociai secul n 990-PF a	rity numbers or nd its separate	n this form as instructions	is at www. <i>ir</i> s	age pub g.gov/fa	orm990pf.	Open to Publi	CINSPECTOR
		dar year 2016				, 2016		, and e			1, 2016	0 000000	
		foundation				·				A Emp	loyer identification	number	
GA	RY	E. MILGARD	FAMILY	FOUNDAT	'ION-CARI					81	-1292744		
Num	ber a	nd street (or PO t	box number if	mail Is not de	elivered to street	address)			Room/suite	B Tele	phone number	<u>-</u>	
		COMMERCE S							<u></u>	25	3-274-0121		
		own, state or pr A, WA 984		intry, and ZI	P or foreign p	ostal code				C If exe	emption application is pe	nding, check her	. ▶∟
		all that apply:		Initial retur	Π	In:	tial return of a f	ormer public (charity	D 1.F	oreign organizations,	check here	
				Final return	l	An	nended return			١.			
				Address ch	ange	☐ Na	me change			2. F	oreign organizations mee neck here and attach con	iting the 85% tes inputation	^{t,} ▶□
H C	heck	type of organiz	ation:	x Sectio	n 501(c)(3) ex	empt privat	e foundation			E If pr	vate foundation stati	us was termina	ited
\Box] Se	ction 4947(a)(1) nonexem _l	pt charitable	e trust	Other taxab	le private found	ation		und	er section 507(b)(1)(A), check here	ightharpoons
l Fa	ır ma	rket value of all	l assets at e	nd of year	J Account	-		Acc	rual	F If th	e foundation is in a 6	0-month termi	nation
		Part II, col (c),) MODIFIED			und	er section 507(b)(1)(B), check here	
						mn (d) mu:	st be on cash	basis)					
Pa	rt I	Analysis of R (The total of ame necessarily equi	ounts in colun	TIAS (D), (C), air	ia (a) may not		venue and es per books		rvestment ome	(c) Adjusted net income	(d) Disburs for charitable (cash bas	purposes
	1	Contributions,	gifts, grant	s, etc., rece	ived	g	1,447,108.				N/A		
	2			ıs not required t	o attach Sch B								
	3	Interest on saving cash investments	gs and tempo s	orary									
ĺ	4	Dividends and	ınterest fro	m securities	S		974,954.		975,040.	<u></u>	· · · · · · · · · · · · · · · · · · ·		
	5a	Gross rents									RECEI	ÆD	
	b	Net rental income	e or (loss)	_							2		
<u>o</u>	6a	Net gain or (loss) Gross sales price					197,935.				S NOV 2 0	2017 19	
eur	b	assets on line 6a	·		080,581.					1 1	D	\$ 8	
Revenue	_	Capital gain net i	•			ļ			190,211.	\vdash	OGDEN	, <u>ut </u>	
_	8	Net short-term		n						- Case			<u> </u>
	9 10a	Income modifi Gross sales less and allowances											
	b	Less Cost of goo	ods sold										
	C	Gross profit or	r (loss)			L		<u> </u>					
		Other income				<u> </u>		-	468 454	├			
	12	Total. Add line					92,619,997.		1,165,251.	1			104.054
	13	Compensation of			s, etc		124,254.	1	0.	 			124,254.
	14	Other employe		•		<u> </u>	47,700.	1	0.	1-			47,700.
es		Pension plans	, employee		AT 1	<u> </u>	61,540. 4,221.	<u> </u>	- 0.				61,372. 4,221.
		Legal fees	00		4T 2		4,221.		0.	 			4,359.
χb		Accounting fee Other professi			41 2 4T 3	<u> </u>	90,863.		90,863.	-			0.
Operating and Administrative Expens	17	Interest		511		 	20,000	1	,000,	-			
ativ	18	Taxes		STI	4T 4		52,329.		27,329.	<u>† </u>			0.
istr	19	Depreciation a	ind depletio				,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			<u> </u>	
Ę	20	Occupancy		•			2,041.	 	0.				2,041.
Adi	21	Travel, confere	ences, and i	meetings			1,682.		0.				1,682.
믿	22	Printing and p		J -			70.		0.	Ī			70.
1g a	23	Other expense		STI	1T 5		16,960.		193.				16,960.
atir	24	Total operatir		inistrative									
per		expenses. Ad	d lines 13 tl	hrough 23			406,019.	,	118,385.				262,659.
0	25	Contributions,	, gıfts, grant	ts paid			2,602,362.					2,	602,362.
	26	Total expense	es and disb	ursements.	•								
		Add lines 24 a	nd 25		<u> </u>		3,008,381.		118,385.	·		2,	865,021.
	27	Subtract line 2	26 from line	12:		,							<u></u>
		Excess of revenu					89,611,616.						
		Net investme				<u> </u>		1	1,046,866.	-		<u> </u>	
	C	Adjusted net i	income (if ne	egative, enter	-0-)					<u> </u>	N/A		

Form **990-PF** (2016)

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only 1 Cash - non-interest-bearing 87,726. 2 Savings and temporary cash investments 3,256,455. 3 Accounts receivable ► 3,717. Less; allowance for doubtful accounts ► 3,717.	87,726. 3,256,455. 3,717.
2 Savings and temporary cash investments 3,256,455. 3 Accounts receivable ► 3,717.	3,256,455.
3 Accounts receivable ► 3,717.	
	3,717.
Less: allowance for doubtful accounts 3,717.	3,717.
4 Pledges receivable ►	
Less: allowance for doubtful accounts	
5 Grants receivable	
6 Receivables due from officers, directors, trustees, and other	
disqualified persons	
7 Other notes and loans receivable	
Less: allowance for doubtful accounts	
g 8 Inventories for sale or use	
9 Prepaid expenses and deferred charges	
10a Investments - U.S. and state government obligations STMT 6 0. 442, 397.	442,397.
b Investments - corporate stock STMT 7 0. 77,192,140.	77,192,140.
c Investments - corporate bonds STMT 8 0. 2,562,230.	2,562,230.
11 Investments - land, buildings, and equipment basis	
Less accumulated depreciation	-
12 Investments - mortgage loans	
13 Investments - other STMT 9 0. 9,500,115.	9,500,115.
14 Land, buildings, and equipment; basis ▶	
Less accumulated depreciation	
15 Other assets (describe ►)	
16 Total assets (to be completed by all filers - see the	
instructions. Also, see page 1, item I) 0. 93,044,780.	93,044,780.
17 Accounts payable and accrued expenses 168.	
18 Grants payable	
g 19 Deferred revenue	
19 Deterred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable	
21 Mortgages and other notes payable	
22 Other liabilities (describe)	
23 Total liabilities (add lines 17 through 22) 0. 168.	
Foundations that follow SFAS 117, check here	
and complete lines 24 through 26 and lines 30 and 31.	
8 24 Unrestricted 93,044,612.	
25 Temporarily restricted	
26 Permanently restricted	
Foundations that do not follow SFAS 117, check here	
24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.	
27 Capital stock, trust principal, or current funds	
28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances 0. 93,044,612.	
29 Retained earnings, accumulated income, endowment, or other funds	
30 Total net assets or fund balances 0. 93,044,612.	
31 Total liabilities and net assets/fund balances 0. 93,044,780.	
Part III Analysis of Changes in Net Assets or Fund Balances	
1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30	
(must agree with end-of-year figure reported on prior year's return)	0.
2 Enter amount from Part I, line 27a	89,611,616.
3 Other increases not included in line 2 (itemize) UNREALIZED GAINS	3,432,996.
4 Add lines 1, 2, and 3	93,044,612.
5 Decreases not included in line 2 (itemize) 5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	93,044,612.

Part IV Capital Gains a	nd Losses for Tax on be the kind(s) of property sold (e		Income	(b)	How ac	quired	(c) Date a	coured	(d) Date sold
2-story brick war	ehouse; or common stock, 200 s	shs. MLC Co.)		P	- Purci - Dona		(mo., da		(mo., day, yr.)
1a PUBLICLY TRADED SECURI	TIES		•				ARIOU	5	VARIOUS
b POWERSHARES DB GOLD FU				 		D 1	ARIOU	S	VARIOUS
c CAPITAL GAINS DIVIDEND	<u>s</u>			-					
<u>d</u>				├-					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale					ain or (loss (f) minus	
a 992,383.		 	882,6	46.					109,737.
b			7,7	724.					<7,724.
c 88,198.									88,198,
<u>d</u>								_	
e			40 /04 /00						
Complete only for assets showing	· · · · · · · · · · · · · · · · · · ·	`						ol. (h) gaın ıot less tha	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any			00		(from col.	
<u>a</u>		-	(,,,				-		109,737,
<u>a</u>					_				<7,724.
c			-						88 198
d								_	- <u>·</u>
e								-	
0. 0	If gain, also en	ter in Part I, line	7	7	•				100 211
2 Capital gain net income or (net cap		-0- ın Part I, line	7	J	2	_			190,211.
3 Net short-term capital gain or (los	,	and (6):)					
If gain, also enter in Part I, line 8, or If (loss), enter -0- in Part I, line 8	olumin (c).			•	3			N/A	
Part V Qualification U	nder Section 4940(e) fo	or Reduced	Tax on Net	Inv	estn	nent Inc	ome		
(For optional use by domestic private	foundations subject to the sectio	п 4940(a) tax on	net investment in	ıcom	e.)				
If section 4940(d)(2) applies, leave th	s part blank.		RESTAT	ΓED	PUR	SUANT	TO TR	EAS. I	REG. 1.507-3
Was the foundation liable for the sect	on 4942 tay on the distributable :	amount of any ve	ear in the base nei	rınd?					Yes X No
If "Yes," the foundation does not quali			=						
1 Enter the appropriate amount in e				entrie	S.				
(a)	(b)			(c		_	T	Distri	(d) bution ratio
Base period years Calendar year (or tax year beginnir	g in) Adjusted qualifying (distributions	Net value of no	oncha	ritable-	use assets			vided by col. (c))
2015		4,692,940.				,012,343			.04991
2014		5,739,870.				,631,014	o		.06130
2013		4,084,275.				,609,905			.045570
2012		4,411,131.			-	,638,673			.051509
2011		4,091,453.			07	,860,631	+		.04656
2 Total of line 1, column (d)							2		.25487
3 Average distribution ratio for the 5	-vear hase period - divide the tot	al on line 2 by 5	or by the number	r of v	ears		F-		
the foundation has been in exister	-	_	-	U. j.	Jui 0		3		.05097
and room added the book in paristo.	,	***				•	_		
4 Enter the net value of noncharitab	e-use assets for 2016 from Part 1	X, line 5					4		91,197,337
5 Multiply line 4 by line 3							5		4,648,784
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)						6		27,260
7 Add lines 5 and 6							7		4,676,044
8 Enter qualifying distributions from	Part XII, line 4						8		2,865,021
If line 8 is equal to or greater than See the Part VI instructions.	,	ne 1b, and comp	olete that part usin	ıg a 1	% tax ı	rate.			

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	rt VI Excise Tax Based on Investment Income (Section 4940					(e), or 4	1948	- see i	nstru	ıctioı	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 📖 and er)	_				1
	Date of ruling or determination letter: (attach copy of letter if nec		٦.			l		l			
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	<u> </u>	Jar	nd enter	1%	•	1			20	937.
	of Part I, line 27b					ļ	İ				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Pa	rt I,	, line 12	, col. (b).	J		<u> </u>			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	hers e	nte	er -0-)			2				0.
3	Add lines 1 and 2						3	L		20	937.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. O	thers e	ente	er -0-)			4	<u></u>			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-						5			20	937.
6	Credits/Payments:										
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	L			25,000		į			i
b	Exempt foreign organizations - tax withheld at source	6b	4				1	ļ			į
C	Tax paid with application for extension of time to file (Form 8868)	6c	\downarrow			6,500	<u>.</u>	ŀ			
d	Backup withholding erroneously withheld	6d	<u> </u>					ļ			i
	Total credits and payments. Add lines 6a through 6d						_7	L		31	500.
8	Enter any penalty for underpayment of estimated tax. Check here 🔼 if Form 2220 is attai	ched					8	<u> </u>		_	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					>	_ 9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid						10			10	,563.
	Enter the amount of line 10 to be: Credited to 2017 estimated tax			10,5	63. Refu	ınded ►	11				0.
Pa	rt VII-A Statements Regarding Activities		_								
1a	During the tax year, did the foundation attempt to influence any national, state, or local legis	lation	or c	dıd ıt pa	rticipate o	r interven	e in			Yes	No
	any political campaign?								1a		Х
	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos						•		1b	L	х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities a	nd co	pie	es of an	y materia	als publis	hed or	•		Į	,
	distributed by the foundation in connection with the activities							'			
C	Did the foundation file Form 1120-POL for this year?								1c	L	Х
d	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the	-								•	
	(1) On the foundation. > \$ 0. (2) On foundation managers	.▶ \$	\$_	_,		0	<u>-</u>				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expendi	ture ta	X IF	mposed	on found	ation				i !	İ
	managers. > \$0.										
2	Has the foundation engaged in any activities that have not previously been reported to the If	357							2	<u> </u>	X
	If "Yes," attach a detailed description of the activities								1		1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing i		nen	nt, article	es of incor	poration,	or			-	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	es							3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	L)							4a		X_
p	If "Yes," has it filed a tax return on Form 990-T for this year?						N	/A	4b		<u> </u>
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?)							5		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 ei	ther:									
	By language in the governing instrument, or								1		1
	By state legislation that effectively amends the governing instrument so that no mandatory	y direc	ctio	ns that	conflict wi	th the stat	e 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," con	nplete	e P	Part II, c	ol (c), ar	nd Part X	V		7	х	<u> </u>
											}
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ns) 🕨	-		•						
	WA								1	1	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttorney	y G	ieneral (or designa	ate)					
	of each state as required by General Instruction G? If "No," attach explanation								8b_	х	<u> </u>
	Is the foundation claiming status as a private operating foundation within the meaning of se			, .	***	(5) for cal	endar			ł	}
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," c								9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedu	ile listin	ng th	heir name	s and addre	sses S	TMT 1	0	10	Х	

Pa	art VII-A Statements Regarding Activities (continued)	_		ugu u
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	}		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		x
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	
	Website address > www.garymilgardfamilyfoundation.org			
14	The books are in care of ► TREV COOKSON Telephone no. ► 253-274-0	121		
	Located at ► 1701 COMMERCE STREET, TACOMA, WA ZIP+4 ►986	02		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
	and enter the amount of tax-exempt interest received or accrued during the year	N/		
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,	$\overline{}$	Yes	No
	securities, or other financial account in a foreign country?	16		
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	1	Į	- 1
D,	foreign country art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u>.</u>
			Yes	No
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		162	140
- 14	a 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? Yes X No	l		į
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		1	1
	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? X Yes No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after	1		
	termination of government service, if terminating within 90 days.)			
١	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		x
	Organizations relying on a current notice regarding disaster assistance check here			
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2016?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		ļ	
	defined in section 4942(j)(3) or 4942(j)(5)):	} :		
i	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) beginning before 2016? Yes X No			
		1		
	If "Yes," list the years 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.) N/A	2b		
	c if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	İ		
	during the year?	1		
	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		
4	a 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		х
	Fo	rm 99 0)-PF	(2016)

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Part VII-B Statements Regarding Activities for Which I	orm 4720 May Be R	Required (continu	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ctly,		
any voter registration drive?		Ye	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes'	7	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
4945(d)(4)(A)? (see instructions)		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo	or		
the prevention of cruelty to children or animals?		Ye	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described in	n 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			
c if the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it maintail	ned		
expenditure responsibility for the grant?	N/	/A Ye	es L No	
If "Yes," attach the statement required by Regulations section 53 4945	5- <i>5(d)</i>			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		<u> </u>	es 🔼 No 📙	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	<i>y</i>	
				-
1 List all officers, directors, trustees, foundation managers and their	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
CHRISTINE ZEMANEK	PRESIDENT & CEO			
1701 COMMERCE STREET			ļ	
TACOMA, WA 98402	14.00	46,946.	9,305.	0.
CAR I MILGARD	SECRETARY/TREASURER			
1701 COMMERCE STREET		ĺ		ı
TACOMA, WA 98402	20,00	2,308.	11,814.	0.
KASEY MILGARD	VICE PRESIDENT			
1701 COMMERCE STREET				
TACOMA, WA 98402	40.00	37,500.	2,912.	0.
KIRBY MILGARD	VICE PRESIDENT			
1701 COMMERCE STREET		ļ.		
TACOMA, WA 98402	40.00	37,500.	2,846.	0.
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Control Marco to	(-) Evange
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
				ı
			L	
Total number of other employees paid over \$50,000				

Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation MORGAN STANLEY SMITH BARNEY HOLDINGS LLC - 1 NEW YORK PLAZA, 12TH FL., NEW YORK, NY 10004 INVESMENT MGMT 90,863	Part VIII Information About Officers, Directors, Trustees, Fo		92744 Page 7
(a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation MORGAN STANLEY SMITH BARNEY HOLDINGS LLC - 1 NEW YORK PLAZA, 12TH PL., NEW YORK, NY 10004 PNVESMENT MONT 90,863 Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount	Paid Employees, and Contractors (continued)	andation managers, mgmy	
MORGAN STANLEY SMITH BARNEY HOLDINGS LICC - 1 NEW YORK PLAZA, 12TH FL., NEW YORK, NY 10004 Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. Expenses N/A Part IX-B Summary of Program-Related investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount	3 Five highest-paid independent contractors for professional services. If none	, enter "NONE."	_
Total number of others receiving over \$50,000 for professional services Part IX-B Summary of Program-Related investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1	MORGAN STANLEY SMITH BARNEY HOLDINGS LLC - 1		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount	NEW YORK PLAZA, 12TH FL., NEW YORK, NY 10004	INVESMENT MGMT	90,863
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount			
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List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 N/A 2	Total number of others receiving over \$50,000 for professional services	<u> </u>	<u> </u>
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 N/A 2			
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount			Expenses
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount		as produced, etc.	
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount	I N/A		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount			
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount	2		
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Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount	3		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount			_
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount	4		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount			
	Part IX-B Summary of Program-Related Investments		
1 N/A 2 2 2		year on lines 1 and 2.	Amount
2	1 N/A		
2			
2			
	2	· · · · · · · · · · · · · · · · · · ·	

Form **990-PF** (2016)

Total. Add lines 1 through 3

1 Fair market value of assets not used (or held for use) directly in carryl	ng out charitable, etc., purposes;		
a Average monthly fair market value of securities	, ,, ,	18	77,383,123
b Average of monthly cash balances		1b	2,474,715.
c Fair market value of all other assets		1c	12,728,291,
d Total (add lines 1a, b, and c)		1d	92,586,129,
e Reduction claimed for blockage or other factors reported on lines 1a a	and	V. F. S. S.	· · · · · · · · · · · · · · · · · · ·
1c (attach detailed explanation)	1e	0.	
2 Acquisition indebtedness applicable to line 1 assets		2	0,
3 Subtract line 2 from line 1d		3	92,586,129,
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for	greater amount, see instructions)	4	1,388,792.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. El	nter here and on Part V, line 4	5	91,197,337.
6 Minimum investment return. Enter 5% of line 5 ADJUSTED FOR	SHORT TAX PERIOD	6	4,497,579
Part XI Distributable Amount (see instructions) (Section	on 4942(j)(3) and (j)(5) private operating	foundations and certain	
	mplete this part.)		
1 Minimum investment return from Part X, line 6		1	4,497,579.
2a Tax on investment income for 2016 from Part VI, line 5	2a	27,260.	
b Income tax for 2016. (This does not include the tax from Part VI.)	2b		
c Add lines 2a and 2b		2c	27,260
3 Distributable amount before adjustments. Subtract line 2c from line 1		3	4,470,319
4 Recoveries of amounts treated as qualifying distributions		4	0.
5 Add lines 3 and 4		5	4,470,319.
6 Deduction from distributable amount (see instructions)		6	0,
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter h	ere and on Part XIII, line 1	7	4,470,319.
Part XII Qualifying Distributions (see instructions)		<u> </u>	
Tart Air dualitying Distributions (see instructions)			
1 Amounts paid (including administrative expenses) to accomplish chair	ritable, etc., purposes:		
a Expenses, contributions, gifts, etc total from Part I, column (d), line	26	<u>1</u> a	2,865,021
b Program-related investments - total from Part IX-B		1b	0
2 Amounts paid to acquire assets used (or held for use) directly in carry	ying out charitable, etc., purposes	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	2,865,021
5 Foundations that qualify under section 4940(e) for the reduced rate of	f tax on net investment		
income. Enter 1% of Part I, line 27b		5	0
6 Adjusted qualifying distributions. Subtract line 5 from line 4		6	2,865,021
Note: The amount on line 6 will be used in Part V, column (b), in sub- 4940(e) reduction of tax in those years.	sequent years when calculating whether	the foundation qualifies for the	section

Form **990-PF** (2016)

RESTATED PURSUANT TO TREAS. REG. 1.507-3

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,				
line 7				4,470,319.
2 Undistributed income, if any, as of the end of 2016		-		
a Enter amount for 2015 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011		RESTATED	PURSUANT TO TREA	S. REG. 1.507-3
b From 2012				
c From 2013			1	
d From 2014				
e From 2015				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2016 from				ļ
Part XII, line 4: ►\$ 2,865,021.				
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) **	2,640,833.			
d Applied to 2016 distributable amount				224,188.
e Remaining amount distributed out of corpus	0.			
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;	:			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,640,833.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				4,246,131.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	2,640,833.			
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	0.		<u></u>	
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2012				
b Excess from 2013				
c Excess from 2014				
d Excess from 2015				
e Excess from 2016				

orm 990-PF (2016) GARY E. MIL Part XIV Private Operating Fo	GARD FAMILY FOUN		I A guestion (I)		1292744 Page 10
			11-A, question 9)	N/A	·
1 a If the foundation has received a ruling or		-			
foundation, and the ruling is effective for	•			4049(1)(0)	40.40(-)(5)
b Check box to indicate whether the found		ng touridation described		│ 4942(<u>j)(</u> 3) or │	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2016	(b) 2015	Prior 3 years (c) 2014	(d) 2013	(e) Total
income from Part I or the minimum	(4)2010	(0)2013	(6) 20 14	(0)2013	(6) 10141
investment return from Part X for					
each year listed					
b 85% of line 2a			<u> </u>		
c Qualifying distributions from Part XII,					
line 4 for each year listed		·			
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon; a "Assets" alternative test - enter;					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,	1				
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)		 	-	-	
(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			1		
an exempt organization		<u> </u>			
(4) Gross investment income		4 - 41-10	if the formulation	n had \$5 000	au mara in acceta
Part XV Supplementary Info			it the foundation	n nad \$5,000	or more in assets
at any time during t					
1 Information Regarding Foundation	•				
a List any managers of the foundation wh			itributions received by th	ne foundation before	the close of any tax
year (but only if they have contributed in	nore man \$5,000). (See s	Section 507 (u)(2).)			
NONE					
b List any managers of the foundation wh			ı (or an equally large por	tion of the ownership	o of a partnership or
other entity) of which the foundation ha	s a 10% or greater intere	SI.			
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan	, Scholarship, etc., I	Programs:		
	only makes contributions				
the foundation makes gifts, grants, etc.					o, c, and d.
a The name, address, and telephone num	ber or e-mail address of	the person to whom app	olications should be addr	essed:	
SEE STATEMENT 12					
b The form in which applications should t	e submitted and informa	ation and materials they	should include:		
c Any submission deadlines:			-		
d Any restrictions or limitations on award	e cuch se by accorde	nal areas chardoble field	e kinds of institutions of	r other factors:	
u Any resulctions or limitations on award	o, ouch as by yeographic	ai ai cas, chai kabic iiciu	ง, หมานอ vi มาอนเนเเขม ร , V	1 Other Idulo15.	

3 Grants and Contributions Paid During the Ye		Payment		
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		
a Paid during the year				
AMARA		PC: 509(A)(1)	PIERCE COUNTY CHILDREN	
5907 MARTIN LUTHER KING JR. WAY SOUTH		OR (A)(2)	IN FOSTER CARE	150 000
SEATTLE, WA 98118				150,000
BOYS & GIRLS CLUB OF SOUTH PUGET		PC: 509(A)(1)	ACES & PROTECTIVE	
SOUND 3875 S. 66TH STREET, SUITE 101		OR (A)(2)	FACTORS PROGRAM	
TACOMA, WA 98409				125,000
-				
CANINE HEALTH EDUCATION & WELFARE		PC: 509(A)(1)	MEDICAL CRANK	
9912 58TH STREET NW		DR (A)(2)	MEDICAL GRANT	
GIG HARBOR, WA 98335		,		20,000
CANANG TOP WING		DG 500/31/11	DEADY MO LEADY	
CARING FOR KIDS 237 ELDORADO AVE.	İ	PC: 509(A)(1) OR (A)(2)	READY TO LEARN, HOLIDAY FAIR	
FIRCREST, WA 98466		(, (,		50,000
COMMUNITIES IN SCHOOLS OF PENINSULA		PC: 509(A)(1)	SITE COORDINATION	
PO BOX 684		OR (A)(2)	PROGRAM	
VAUGHN, WA 98394				28,000
	UATION SHEET(S)		► 3a	2,602,362
b Approved for future payment				
NONE				
			†	
Total		<u> </u>	▶ 3b	
				000 DE (201

Part XVI-A Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated.	Unrelate	ed business income	Exclu	ded by section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		COGG		
<u> </u>			 -		
b					
<u> </u>			 -		
d			 		
e					
T			- -		
g Fees and contracts from government agencies			├		
2 Membership dues and assessments					
3 Interest on savings and temporary cash			ĺ		
Investments	 		14	974,954.	
4 Dividends and interest from securities 5 Net reatel prome or (lose) from real estates	\ 		1.	3/4,354.	<u> </u>
5 Net rental income or (loss) from real estate:			<u></u>		
a Debt-financed property			}		· · · · · · · · · · · · · · · · · · ·
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property	-		-		
7 Other investment income	<u> </u>		├		
8 Gain or (loss) from sales of assets other			1.0	107 025	
than inventory			18	197,935.	
9 Net income or (loss) from special events	<u> </u>		├		
10 Gross profit or (loss) from sales of inventory	<u> </u>		├		
11 Other revenue:			1		
å	<u> </u>		├		<u>. </u>
b			├		
<u> </u>		-	├		
d					
e		0.	├──	1,172,889.	0.
12 Subtotal. Add columns (b), (d), and (e)			<u> </u>	1,172,889.	1,172,889.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)				10_	
Part XVI-B Relationship of Activities to	o the Acc	omplishment of Ex	kemp	ot Purposes	
Line No. Explain below how each activity for which incort the foundation's exempt purposes (other than I			contri	buted importantly to the accor	nplishment of
the foundation's exempt purposes (other than it	by providing it	mus for such purposes).	_		
		-			
					
					
- 		· · · · · · · · · · · · · · · · · · ·			
					
				· · · -	
					
 		·		· -	
					
	<u>-</u> -				
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Form 990-PF (2016)

Part	XVII	Information Re Exempt Organ		sfers To a	and Transactions	and Relations	hips With Nor	ncharitab	e	
1 0	d the ord			of the followin	g with any other organization	nn described in sect	on 501(c) of	—т	IVas	No
					7, relating to political organ		011 30 1(0) 01		163	110
	•	rom the reporting found				nzations.		1	ł	i
		nom the reporting loaner	plion to a nonchanta	on exempt on	janization of.				J	x
•) Cash				•	•		1a(1	-	—
•) Other	•		•	•			. 1a(2	4	X
		sactions:						1.	.1	l
•	•	of assets to a noncharital	· ·					16(1		X
•	•	ases of assets from a no	•	organization				16(2	1	X
(3) Renta	of facilities, equipment,	or other assets		•			1b(3)[X
(4) Reiml	ursement arrangements						1b(4)	х
(5) Loans	or loan guarantees					,	1b(5	<u>) </u>	Х
(6) Perfor	mance of services or me	embership or fundral	sing solicitatio	ns	. ,	•	16(6]	X
c St	naring of	facilities, equipment, ma	dag lists, other asse	ets, or paid em	ployees			10	T	X
d 11	the answ	er to any of the above is	"Yes," complete the	following sche	dule Column (b) should al	ways show the fair of	narket value of the n	oods, other as	sels.	—
				-	ed less than fair market valu	' - '	•	-		
) the value of the goods,				,				
(a)Lino		(b) Amount involved			exempt organization	(d) Occambion	of transfers, transaction	ns, and shanno	arrangan:	enta
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	н/л		.,,				
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	ــــاــــــ		<u> </u>				· ·			
			•	-	or more tax-exempt organ	izations described				-,
ın	section	501(c) of the Code (othe	r than section 501(c)(3)) or in sect	ion 527?		,	Ye	3 <u>X</u>] No
b II	Yes, co	implete the following sch	edule							
		(a) Name of org	ganization		(b) Type of organization	ļ	(c) Description of re	lationship		
		N/A								
						†	·			
						1				
	Under	penallies of purary, I declare	that I have examined th	is roturn, includin	g accompanying achedules and	l statements, and to the	bost of my knowledge			
Sign	nnd be	lief, it is true, corest, and cor	mplete Declaration of pr	oparar (other tha	n tarpayer) is based on all infor	mation of which prepare	has any kno viedge	folum with	the prepar	rof
Here		(17)			ص الديابيا	opposent.		shown belo		¬' 1
	Z	-Zman	ir		11/13/11	PRESIDENT	L & CEO	_ LX_I Yo	8 L	7 No
	Silli	ature of officer or trustee		I Duranti di Li	Date	Title	Abadi IIII ii	DYW		
		Print/Type preparer's na	ame	Preparer's s	ignature	Date	Check if	PTIU		
				11	0.3		sell- employed			
Pald		JANE M. SEARING	<u>, </u>	Jakur 1	11-800119	11-14-17		P0000056	5	
Prep		Fum's name > CLARI	K NUBER, PS	7			Fam's EIN ▶ 91	-1194016		
Use	Only		1				l			
		Firm's address ▶ 109	OO NE 4TH STR	EET, SUIT	3 1700		I —			
BELLEVUE WA 98004										

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.lrs.gov/form990.

OMB No 1545-0047

Employer identification number

2016

GARY E. MILGARD FAMILY FOUNDATION-CARI 81-1292744 Organization type (check one): Section: Filers of: ____ 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (1 3/11 350, 330 E2, 61 3301 1) (2315)	rage -
Name of organization	Employer identification number
GARY E. MILGARD FAMILY FOUNDATION-CARI	81-1292744

AKI E.	MIDGARD FAMILI FOUNDATION-CART	01-	1232/44
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	GARY E MILGARD FAMILY FOUNDATION 1701 COMMERCE STREET TACOMA, WA 98402	\$91,447,108.	Person X Payroll
(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)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Omnicash 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)

GARY E. MILGARD FAMILY FOUNDATION-CARI

Employer identification number

81-1292744

art II	Noncash Property (See Instructions). Use duplicate copies of Part II if a	dditional space is needed	10000
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	PUBLICLY AND PRIVATELY HELD SECURITIES		
<u>1</u>			
		\$86,377,593.	VARIOUS
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I		(See instructions)	
		\$	_
(a) No.	, (p)	(c)	(d)
from	Description of noncash property given	FMV (or estimate) (See instructions)	Date received
Part I			
		\$	
(a)		(c)	4.0
No. from	(b) Description of noncash property given	FMV (or estimate) (See instructions)	(d) Date received
Part I		(occ mon donois)	
		\$	
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I		(See instructions)	
		\$	_
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I		(See instructions)	
		\$	

Schedule B	(Form 990, 990-EZ, or 990-PF) (2016)		Page 4				
Name of orga	nization		Employer identification number				
Part III	ILGARD FAMILY FOUNDATION-CARI Exclusively religious, charitable, etc., cor the year from any one contributor. Complete completing Part III, enter the total of exclusively religion	columns (a) through (e) and the following	81-1292744 Section 501(c)(7), (8), or (10) that total more than \$1,000 for gline entry. For organizations at or the year (Enterthis info once) \$ 5				
	Use duplicate copies of Part III if addition						
(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				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Parti							
į	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
	rransteree's name, address,	and 21P + 4	Relationship of transferor to transferee				
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
-	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee				
(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,		Relationship of transferor to transferee				
1							

Part XV Supplementary Information	n			
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
COURAGE CLASSIC		PC: 509(A)(1)	ROTARY ENDOWMENT FUND	
PO BOX 5296		OR (A)(2)	ĺ	
FACOMA, WA 98415	+	-		1,00
COURAGE360		PC: 509(A)(1)	EMPLOYMENT SERVICES	
3516 S. 47TH STREET, SUITE 205		OR (A)(2)	CONTINUUM	
FACOMA, WA 98409				15,00
ELEMENTS OF EDUCATION PARTNERS		PC: 509(A)(1)	STUDENTS OF 2017	
PO BOX 110555		OR (A)(2)	HAWAII	
TACOMA, WA 98411		<u> </u>	 	5,00
EMERGENCY FOOD NETWORK OF TACOMA-PIERCE COUNTY		PC: 509(A)(1) OR (A)(2)	CO-OP FOOD PURCHASE	
3318 92ND STREET SOUTH		(11, (1,		
LAKEWOOD, WA 98499				75,00
FIRST ASSEMBLY OF GOD LIFE CENTER		PC: 509(A)(1)	BACKPACKS AND SCHOOL	
1717 S. UNION AVE		OR (A)(2)	SUPPLIES	
TACOMA, WA 98405				20,34
FOOD BACKPACKS 4 KIDS		PC: 509(A)(1)	FB4K NUTRITION PROJECT	
PO BOX 173		OR (A)(2)	Dak Molkillon Problet	
VAUGHN, WA 98394		<u> </u>		10,00
FRANKIE'S FRIENDS		PC: 509(A)(1)	WA STATE HOPE FUND	
3000 BUSCH LAKE BLVD		OR (A)(2)		
TAMPA, FL 33614		1		25,00
FRIEND TO FRIEND AMERICA		PC: 509(A)(1)	MEET THE NEED FOR	
PO BOX 98766	1	OR (A)(2)	SENIORS	
DES MOINES, WA 98198			 	50,00
GREATER GIG HARBOR FOUNDATION		PC: 509(A)(1)	EMPLOYEE ALLOCATED	
6625 WAGNER WAY NW, SUITE 150		OR (A)(2)	FUNDING	
GIG HARBOR, WA 98335				10,00
GREATER LAKES MENTAL HEALTHCARE		PC: 509(A)(1)	EMERGENCY NEEDS FUND	
9330 59TH AVENUE SW		OR (A)(2)	THE PARTY OF THE P	
LAKEWOOD, WA 98499				35,00
Total from continuation sheets				2,229,36

Part XV 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	Contribution	
HOPESPARKS		PC: 509(A)(1)	KIDS CAN'T WAIT	
6424 N 9TH STREET		OR (A)(2)	HEALING HEARTS	
TACOMA, WA 98406				200,00
LUTHERAN COMMUNITY SERVICES NW		PC: 509(A)(1)	SENIOR SUPPORT	
4040 SOUTH 188TH STREET, NO 300		OR (A)(2)	SERVICES	
SEATAC, WA 98188	-	1		75,000
MOUNTAIN VIEW COMMUNITY CENTER		PC: 509(A)(1)	BACKPACKS AND SCHOOL	
3505 122ND AVE. E.		OR (A)(2)	SUPPLIES	
EDGEWOOD, WA 98372				3,98
MULTICARE HEALTH FOUNDATION		PC: 509(A)(1)	BEHAVIORAL HEALTH	
РО ВОХ 5296		OR (A)(2)	HOSPITAL	
TACOMA, WA 98405				500,00
MULTICARE HEALTH FOUNDATION		PC: 509(A)(1)	MARY BRIDGE ADOLESCENT	
PO BOX 5296		OR (A)(2)	BEHAVIORAL	
TACOMA, WA 98405				30,00
N.W. FURNITURE BANK		PC: 509(A)(1)	FURNISHING HOMES	
PO BOX 307		OR (A)(2)	PROGRAM	
WAUNA, WA 98395	 			25,00
NEIGHBORHOOD CLINIC		PC: 509(A)(1)	HEALTH CARE FOR	
1323 SOUTH YAKIMA AVE. TACOMA, WA 98405		OR (A)(2)	UNDERSERVED	10,00
NEW PHOEBE HOUSE ASSOCATION		PC: 509(A)(1)	1	
PO BOX 5245 TACOMA, WA 98415		OR (A)(2)	REUNIFICATION	150,00
OF THE CRECK		ng. 500(3)(1)	BOOMED CARE PROGRAMS	
OLIVE CREST 2500 116TH AVE NE		PC: 509(A)(1) OR (A)(2)	FOSTER CARE PROGRAMS	
BELLEVUE, WA 98004	_	(37, (27)	1	50,00
PAGE AHEAD CHILDREN'S LITERACY		PC: 509(A)(1)	TACOMA SCHOOLS BOOK UP	
PROGRAM 1130 NW 85TH STREET		OR (A)(2)	SUMMER	
SEATTLE, WA 98117				32,28
Total from continuation sheets		1	1	. = , = •

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y	ear (Continuation)			
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		
PUGET SOUND CHRISTIAN CHURCH 4020 S. 56TH ST, SUITE 200 TACOMA, WA 98409		PC: 509(A)(1) OR (A)(2)	BACKPACKS AND SCHOOL SUPPLIES	9,445.
PUGET SOUND PET FOOD BANK 3701 SIXTH AVE, SUITE 5 TACOMA, WA 98406		PC: 509(A)(1) OR (A)(2)	SPANAWAY BRANCH PROJECT	7,500.
RALLYPOINT/6 9881 BRIDGEPORT WAY SW LAKEWOOD, WA 98499		PC: 509(A)(1) OR (A)(2)	BOYS & GIRLS CLUB	31,500.
RALLYPOINT/6 9881 BRIDGEPORT WAY SW LAKEWOOD, WA 98499		PC: 509(A)(1) OR (A)(2)	SCOUT PROGRAM	150,000.
REACH 714 S. 27TH STREET, FIRST FLOOR TACOMA, WA 98402		PC: 509(A)(1) OR (A)(2)	BUILDING REACH'S CAPACITY TO SERVE	50,000.
REBUILDING TOGETHER SOUTH SOUND 712 54TH AVE E TACOMA, WA 98424		PC: 509(A)(1) OR (A)(2)	YEAR ROUND SERVICES	20,000.
SOUTH SOUND CARE FOUNDATION PO BOX 1314 TACOMA, WA 98401		PC: 509(A)(1) OR (A)(2)	CANCER RESEARCH STUDIES & TRIALS	10,000.
TACOMA COMMUNITY HOUSE 1314 S. L STREET TACOMA, WA 98405		PC: 509(A)(1) OR (A)(2)	A JOURNEY TO CITIZENSHIP	25,000.
TACOMA YOUTH FOR CHRIST PO BOX 834 TACOMA, WA 98401		PC: 509(A)(1) OR (A)(2)	CITY LIFE PROGRAM	30,000.
TACOMA/PIERCE COUNTY HABITAT FOR HUMANITY 4824 S. TACOMA WAY		PC: 509(A)(1) OR (A)(2)	COMMON HOUSE AT THE WOODS	
TACOMA, WA 98409		<u> </u>		50,000.
Total from continuation sheets				<u> </u>

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y				
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		
THE CHILDRENS'S FUND		PC: 509(A)(1) OR (A)(2)	THE CHILDREN'S FUND	
AUBURN, WA 98001				150,00
THE HUMANE SOCIETY FOR TACOMA AND		PC: 509(A)(1) OR (A)(2)	HOLIDAY PET BASKETS	
2608 CENTER STREET FACOMA, WA 98409				98,30
THE RESCUE MISSION PO BOX 1912		PC: 509(A)(1) OR (A)(2)	CLIENT ASSISTANCE PROGRAM	
TACOMA, WA 98401	 			35,00
TOY RESCUE MISSION		PC: 509(A)(1)	RENT AND OVERHEAD	
607 S. WINNIFRED ST. TACOMA, WA 98464		OR (A)(2)	EXPENSES	70,00
YWCA PIERCE COUNTY 405 BROADWAY		PC: 509(A)(1) OR (A)(2)	YWCA TEEN AND LEGAL PROGRAMS	
TACOMA, WA 98402	1			150,00
ZEESPEED		PC: 509(A)(1)	YOUTH ENDURANCE CAMP	
2201 S. TACOMA WAY #206 TACOMA, WA 98409		OR (A)(2)		20,00
				<u></u>
Total from continuation sheets	1			

FORM 990-PF	LEGAL	FEES	S:	TATEMENT 1
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	4,221.	0.		4,221.
TO FM 990-PF, PG 1, LN 16A =	4,221.	0.		4,221.
FORM 990-PF	ACCOUNTI	NG FEES	S'	ratement 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	4,359.	0.		4,359.
TO FORM 990-PF, PG 1, LN 16B	4,359.	0,		4,359.
FORM 990-PF (OTHER PROFES	SIONAL FEES	S	ratement 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES	90,863.	90,863.		0.
TO FORM 990-PF, PG 1, LN 16C	90,863.	90,863.		0.
FORM 990-PF	TAX	ES	S	TATEMENT 4
DEGGDIDATON	(A) EXPENSES PER BOOKS		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DESCRIPTION				
EXCISE TAXES	25,000. 27,329.			
		27,329.		0.

FORM 990-PF	OTHER E	XPENSES			STATEMENT !
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM	
INSURANCE	5,763.	_	0.		5,763
COMPUTER EXPENSE	6,684.		0.		6,684
OFFICE EXPENSE	1,592.		0.		1,592
REPAIRS & MAINTENANCE	2,173.		0.		2,173
EQUIPMENT RENTAL	748.		0.		748
DEDUCTIONS FROM PARTNERSHIP					
INVESTMENTS	0.		193.		0
TO FORM 990-PF, PG 1, LN 23	16,960.		193.		16,960
FORM 990-PF U.S. AND	STATE/CITY G	OVERNMENT	OBLI	GATIONS	STATEMENT (
DESCRIPTION	U.S GOV'		воо	K VALUE	FAIR MARKET VALUE
GOVERNMENTAL OBLIGATIONS	x	-		442,397.	442,397
TOTAL U.S. GOVERNMENT OBLIGA	TIONS	•		442,397.	442,397
TOTAL STATE AND MUNICIPAL GO	VERNMENT OBL	IGATIONS			
TOTAL TO FORM 990-PF, PART I	I, LINE 10A	:	·	442,397.	442,397
FORM 990-PF	CORPORAT	E STOCK		· ·	STATEMENT '
DESCRIPTION			воо	K VALUE	FAIR MARKET VALUE
1,242.000 SHS POWERSHARES DB	GOLD FIND	•		45,991.	45,991
103,126.021 SHS VOYA GLOBAL		I		1,940,832.	1,940,832
106,770.000 SHS VANGUARD FTS				3,901,376.	3,901,376
115,754.000 SHS ISHARES TRUS				-	
MSCI EAFE ETF				3,053,103.	3,053,103
12,637.000 SHS VANGUARD DIVI				1,076,420.	1,076,420
14,132.000 SHS ISHARES SELECT		F		1,251,671.	1,251,671
14,417.000 SHS SPDR S&P DIVI		****		1,233,519.	1,233,519
151,435.591 SHS EATON VANCE				1,355,349.	1,355,349
153,246.984 SHS FRANKLIN FLO.				1,362,366.	1,362,366
179,003.074 SHS MATTHEWS ASI		ΝV		2,778,128.	2,778,128
196,899.061 SHS IVA INTERNAT	TONAL I			3,107,067.	3,107,067

GARY E. MILGARD FAMILY FOUNDATION-CARI		81-1292744
212,086.034 SHS METROPOLITAN WEST TOT RET BD FD	2,233,266.	2,233,266.
233,322.000 SHS VANGUARD INDEX TR LRG CAP VIPERS	23,885,175.	23,885,175.
25,173.000 SHS SPROTT PHYSICAL GOLD TRUST	236,374.	236,374.
28,293.000 SHS VANGUARD MID-CAP VIPERS	3,724,208.	3,724,208.
28,766.000 SHS VANGUARD SMALL-CAP VIPERS	3,709,663.	3,709,663.
34,430.000 SHS GUGGENHEIM S&P 500 EQUAL WEI ETF	2,983,015.	2,983,015.
35,370.000 SHS POWERSHARES FTSE RAFI US 1K	3,521,084.	3,521,084.
47,328.000 SHS ISHARES GOLDTRUST ETF	524,394.	524,394.
474,813.987 SHS DOUBLELINE TOTAL RET BD I	5,042,525.	5,042,525.
5,945.000 SHS SPDR GOLD TR GOLD SHS	651,631.	651,631.
50,722.000 SHS ISHARES MSCI EMERGING MARKETS	1,775,777.	1,775,777.
52,710.000 SHS FIXED INCOME SHARES C MF	529,736.	529,736.
53,596.320 SHS OPPENHEIMER DEVELOP MKTS Y	1,713,474.	1,713,474.
54,020.000 SHS FIXED INCOME SHARES M MF	537,499.	537,499.
77,989.057 SHS OPPENHEIMER INTERNATIONAL GRWTH Y		·
MF	2,704,661.	2,704,661.
19,746.000 SHS ISHARES IBOXX \$ INVESTMENT GRADE	2,313,836.	2,313,836.
TOTAL TO FORM 990-PF, PART II, LINE 10B	77,192,140.	77,192,140.
FORM 990-PF CORPORATE BONDS		STATEMENT 8
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
1,000.000 SHS FNMA POOL	893.	893.
10,000.000 SHS FHLMC 30 YR GOLD G08682	8,555.	8,555.
10,000.000 SHS FNMA POOL AS6520	9,056.	9,056.
10,000.000 SHS SBA COMMUNICATIONS CORP	10,150.	10,150.
12,000.000 SHS STANDARD PACIFIC CORP	13,020.	13,020.
12,000.000 SHS THE MENS WEARHOUSE INC	11,760.	11,760.

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
1,000.000 SHS FNMA POOL	893.	893.
10,000.000 SHS FHLMC 30 YR GOLD G08682	8,555.	8,555.
10,000.000 SHS FNMA POOL AS6520	9,056.	9,056.
10,000.000 SHS SBA COMMUNICATIONS CORP	10,150.	10,150.
12,000.000 SHS STANDARD PACIFIC CORP	13,020.	13,020.
12,000.000 SHS THE MENS WEARHOUSE INC	11,760.	11,760.
124,000.000 SHS FHLMC 30 YR GOLD A86314	8,343.	8,343.
14,000.000 SHS ARAMARK SERVICES INC	14,438.	14,438.
14,000.000 SHS CSC HOLDINGS LLC	14,945.	14,945.
16,000.000 SHS AES CORP	18,600.	18,600.
16,000.000 SHS AUTONATION INC GLOBAL	17,195.	17,195.
16,000.000 SHS CDW LLC/CDW FINANCE CORP	16,920.	16,920.
16,000.000 SHS FNMA POOL AV6368	7,186.	7,186.
16,000.000 SHS FNMA POOL AX7732	11,694.	11,694.
16,000.000 SHS LEVEL 3 FINANCING INC	16,320.	16,320.
16,000.000 SHS RADIAN GROUP INC	17,800.	17,800.
16,000.000 SHS SALLY HLDGS	16,620.	16,620.
16,000.000 SHS TESORO LOGISTICS LP/CORP	16,800.	16,800.
17,000.000 SHS ACMP/ACMP FIN	17,317.	17,317.
17,000.000 SHS BLUE CUBE SPINCO INC	20,528.	20,528.
17,000.000 SHS CLEAN HARBORS IN SER B	17,404.	17,404.
17,000.000 SHS CLEAR CHNL WORLD SER B	17,383.	17,383.
17,000.000 SHS CONCHO RESOURCES INC	17,617.	17,617.
17,000.000 SHS DISH DBS CORP SER B	18,870.	18,870.
17,000.000 SHS ISTAR INC	17,510.	17,510.
17,000.000 SHS MASCO CORP	18,785.	18,785.

17,000.000 SHS NAVIENT CORP	17,638.	17,638.
17,000.000 SHS T-MOBILE USA INC	17,935.	17,935.
18,000.000 SHS ALLY FINANCIAL	18,315.	18,315.
18,000.000 SHS BALL CORP	18,810.	18,810.
18,000.000 SHS CALPINE CORP	17,370.	17,370.
18,000.000 SHS CNH INDUSTRIAL C	18,225.	18,225.
18,000.000 SHS CONSTELLATION BR	20,301.	20,301.
18,000.000 SHS EL PASO CORP	18,418.	18,418.
18,000.000 SHS GOODYEAR TIRE & RUBBER	18,990.	18,990.
18,000.000 SHS HCA INC	18,495.	18,495.
18,000.000 SHS ICAHN ENTERPRISES	18,383.	18,383.
18,000.000 SHS IRON MOUNTAIN SENIOR	18,495.	18,495.
18,000.000 SHS LAMAR MEDIA CORP	18,540.	18,540.
18,000.000 SHS LENNAR CORP	18,585.	18,585.
18,000.000 SHS LEUCADIA NATL	19,062.	19,062.
18,000.000 SHS PVH CORP	18,270.	18,270.
18,000.000 SHS RITE AID CORPORATION	18,900.	18,900.
18,000.000 SHS ROYAL CARIBBEAN	19,262.	19,262.
18,000.000 SHS STEEL DYNAMIC INC	18,855.	18,855.
18,000.000 SHS TENET HEALTHCARE CORP	18,180.	18,180.
18,000.000 SHS T-MOBILE USA INC	18,540.	18,540.
18,000.000 SHS TRANSDIGM INC SER B	18,450.	18,450.
18,000.000 SHS TRIBUNE MEDIA CO	18,293.	18,293.
18,000.000 SHS ZAYO GROUP LLC SER B	18,720.	18,720.
19,000.000 SHS AMSURG CORP	19,589.	19,589.
19,000.000 SHS BOYD GAMIN CORP SR UNS	20,425.	20,425.
19,000.000 SHS CBS OUTDOOR AMERS CAPITAL LLC	19,808.	19,808.
19,000.000 SHS CCO HOLDINGS LLC	19,855.	19,855.
19,000.000 SHS CROWN AMERICAS LLC SER B	19,380.	19,380.
19,000.000 SHS CSC HOLDINGS INC SER B	20,425.	20,425.
19,000.000 SHS D.R. HORTON INC	19,523.	19,523.
19,000.000 SHS DAVITA HEALTHCAR	18,953.	18,953.
19,000.000 SHS DAVITA INC	19,855.	19,855.
19,000.000 SHS EL PASO PIPELINE PT	20,230.	20,230.
19,000.000 SHS EQUINIX INC	19,855.	19,855.
19,000.000 SHS GRAPHIC PACKAGE	19,950.	19,950.
19,000.000 SHS ISTAR FINANCIAL INC	19,095.	19,095.
19,000.000 SHS KINDRED HEALTHCARE INC	17,765.	17,765.
19,000.000 SHS LEVEL 3 COMMUNICATIONS INC	19,523.	19,523.
19,000.000 SHS NATIONSTAR MORT/CAP CORP	19,879.	19,879.
19,000.000 SHS NATIONSTAR MTGE	19,309.	19,309.
19,000.000 SHS NATIONSTAR MTGE SER B	19,238.	19,238.
19,000.000 SHS PULTERGROUP INC	18,858.	18,858.
19,000.000 SHS RICE ENERGY INC SER B	19,523.	19,523.
19,000.000 SHS SPRINGLEAF FINANCE CORP	20,663.	20,663.
19,000.000 SHS SUMMIT MATERIALS	19,499.	19,499.
19,000.000 SHS SUNOCO LP/FINANCE CORP SER B	19,380.	19,380.
19,000.000 SHS TEMPUR SEALY INTERNATIONAL INC	19,095.	19,095.
19,000.000 SHS UNITED RENTALS INC	10,500.	10,500.
19,000.000 SHS VERISIGN INC SER B	19,190.	19,190.
2,000.000 SHS CHS/COMMUNITY HEALTH SYSTEMS INC	1,960.	1,960.
20,000.000 SHS BERRY PLASTICS CORPORATION	20,350.	20,350.
20,000.000 SHS CENTENE CORP	20,200.	20,200.
20,000.000 SHS CHEMOURS CO	19,800.	19,800.
_	•	,000.

20,000.000 SHS CHS/COMMUNITY SER B	18,550.	18,550.
20,000.000 SHS HCA INC	20,600.	20,600.
20,000.000 SHS ISTAR FINANCIAL INC	20,075.	20,075.
20,000.000 SHS LENNAR CORP SR UNS GLOBAL 4.75%	19,500.	19,500.
20,000.000 SHS LKQ CORPORATION SER B	19,900.	19,900.
21,000.000 SHS CONSOL ENERGY INC SER B	20,580.	20,580.
21,000.000 SHS NRG ENERGY INC	21,053.	21,053.
21,000.000 SHS SEAGATE HDD CAYM SER B	20,007.	20,007.
22,000.000 SHS FNMA POOL 310151	13,759.	13,759.
22,000.000 SHS SOUTHWESTERN ENERGY	22,660.	22,660.
224,000.000 SHS FHLMC 30G A89385	41,193.	41,193.
23,000.000 SHS FNMA POOL AS4168	15,591.	15,591.
25,000.000 SHS MGIC INVT CORP GLOBAL	26,063.	26,063.
26,000.000 SHS AMERIGAS FINANCE LLC	26,390.	26,390.
26,000.000 SHS MARKWEST ENERGY PART/FIN	26,694.	26,694.
27,000.000 SHS ALLY FINANCIAL	30,578.	30,578.
27,000.000 SHS FNMA POOL AS0907	14,682.	14,682.
29,000.000 SHS CBRE ESRVICES SR UNSGLOBAL 5%	29,916.	29,916.
29,000.000 SHS FNMA POOL	15,105.	15,105.
30,000.000 SHS MGM RESORTS INTL	33,375.	33,375.
32,000.000 SHS INTL LEASE FIN	37,280.	37,280.
37,000.000 SHS SABINE PASS LIQUEFACTION LLC	39,590.	39,590.
37,000.000 SHS VEREIT OPERATING PARTNERS	37,475.	37,475.
39,000.000 SHS ANTERO RESOURCES FINANCE CORP	39,878.	39,878.
40,000.000 SHS DISH DBS CORP SER B GLOBAL	79,583.	79,583.
40,000.000 SHS FNMA	40,387.	40,387.
44,000.000 SHS FHLMC PC GOLD POOL C09071	29,684.	29,684.
5,000.000 SHS FHMA POOL AW8992	3,665.	3,665.
5,000.000 SHS FNMA POOL AS6408	4,461.	4,461.
6,000.000 SHS FHLMC 30 YR GOLD G60201	4,509.	4,509.
6,000.000 SHS FNMA POOL AX4887	4,260.	4,260.
6,000.000 SHS HERTZ CORP SER B	6,000.	6,000.
69,000.000 SHS FHLMC 30 YR GOLD G08659	55,666.	55,666.
69,000.000 SHS FNMA POOL BC2849	67,648.	67,648.
7,000.000 SHS FNMA POOL AL6715	4,562.	4,562.
7,000.000 SHS THE ADT CORP SER B	7,595.	7,595.
74,000.000 SHS FHLMC 30 YR GOLD V81760	57,773.	57,773.
8,000.000 SHS FNMA POOL AZ7916	5,668.	5,668.
8,000.000 SHS SPRINT NEXTEL CORP SER B	9,820.	9,820.
98,000.000 SHS FED NATL MTG ASSN	90,036.	90,036.
34,000.000 SHS PC GOLD POOL G08623	23,971.	23,971.
31,000.000 SHS PC GOLD POOL G08624	20,974.	20,974.
65,000.000 SHS PC GOLD POOL G07961	53,058.	53,058.
TOTAL TO FORM 990-PF, PART II, LINE 10C	2,562,230.	2,562,230.

FORM 990-PF	OTHER INVESTMENTS		STATEMENT	9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKE' VALUE	r
MERIDIAN PERF PTRS LTD CL A AURORA OFFSHORE FUND LTD. II RIVERVIEW GLOBAL MACRO FUND	FMV FMV FMV	107,210. 339,268.	107, 339,	
(CAYMAN) LP PLACEMENT PINEHURST INSTITUTIONAL, LTD	FMV	4,437,306. 4,616,331.	4,437, 4,616,	
TOTAL TO FORM 990-PF, PART II,	LINE 13	9,500,115.	9,500,	115.
	SUBSTANTIAL CONTRI RT VII-A, LINE 10	BUTORS	STATEMENT	10
NAME OF CONTRIBUTOR	ADDRESS			
GARY E. MILGARD FAMILY FOUNDAT	ION 1701 COMMERCY TACOMA, WA 9			

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

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NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

EXCLUSIVELY ACCEPTED ONLINE VIA WWW.GARYMILGARDFAMILYFOUNDATION.ORG 1701 COMMERCE STREET TACOMA, WA 98402

TELEPHONE NUMBER

253-274-0121

FORM AND CONTENT OF APPLICATIONS

A LETTER OF INQUIRY IS THE FIRST STEP IN THE GRANT APPLICATION PROCESS. THE LETTER OF INQUIRY IS REVIEWED, AND IF APPROVED, THE APPLICANT WILL BE REQUESTED TO PROVIDE A FULL APPLICATION.

ANY SUBMISSION DEADLINES

THERE IS NO DEADLINE FOR SUBMITTING A LETTER OF INQUIRY.

RESTRICTIONS AND LIMITATIONS ON AWARDS

ALL APPLICANT ORGANIZATIONS MUST QUALIFY AS TAX-EXEMPT ORGANIZATIONS UNDER THE INTERNAL REVENUE CODE. CERTAIN PROPOSALS ARE INELIGIBLE FOR FUNDING, SUCH AS: ANNUAL FUNDS, GALAS, OR OTHER SPECIAL EVENT FUNDRAISING ACTIVITIES; SECTARIAN RELIGIOUS ACTIVITIES, DEBT REDUCTION, POLITICAL LOBBYING, OR LEGISLATIVE ACTIVITIES; AND ORGANIZATIONS THAT DISCRIMINATE ON THE BASIS OF AGE, RACE, NATIONAL ORIGIN, ETHNICITY, GENDER, POLITICAL AFFILIATION OR RELIGIOUS BELIEF.