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Form **990-PF**

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. OMB No 1545-0052

Departm	ent c	of the Treasury I	er social security numbers o	n this form as	it may be ma	ide public	2010
Internal F	Reve	nue Service Information about F	orm 990-PF and its separate	and e		s.gov/torm990pt.	Open to Public Inspection
		ar year 2016 or tax year beginning oundation		, allu el	ilding	A Employer identification	number
77 T	D.C	INIA L. PARK FAMILY F	ואר דיים גרוואווי			84-1557117	
		Street (or PO box number if mail is not delivered to str			Room/suite	B Telephone number	
		HUNTS POINT ROAD				425-451-324	42
•		vn, state or province, country, and ZIP or foreig	n postal code			C If exemption application is pe	nding check here
		S POINT, WA 98004	Initial return of a	former nublic o	harity	D 1 Foreign organizations,	check here
G Che	ilk d	Final return	Amended return	ioimei public c	папц	i i oreigii organizations,	UNCOK NETC
		Address change	Name change			Foreign organizations mee check here and attach con	iting the 85% test, nputation
H Che	ck t	ype of organization: X Section 501(c)(3)	exempt private foundation			E If private foundation stati	us was terminated
		non 4947(a)(1) nonexempt charitable trust	Other taxable private found	lation		under section 507(b)(1)(
		·	inting method: X Cash	Accr	ual	F If the foundation is in a 6	
		art II, col (c), line 16)	Other (specify) olumn (d) must be on cash	hacie l		under section 507(b)(1)(B), check here
▶ \$					unatmost.	(a) Adjusted not	(d) Disbursements
ran	<u> </u>	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may no necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net in		(c) Adjusted net income	for charitable purposes (cash basis only)
$\neg au$		Contributions, gifts, grants, etc., received	7,676.	,			See and only
	2 (Check In the foundation is not required to attach Sch. B					
- } ;	3 8	nterest on savings and temporary cash investments					
.	4 [Dividends and interest from securities	3,409.	·	3,409.	3,409.	STATEMENT 1
	5a (Gross rents		 			
		Net rental income or (loss)		 			
e l	١. (Net gain or (loss) from sale of assets not on line 10 Gross sales price for all		 		 	
Revenue		assets on line 6a Capital gain net income (from Part IV, line 2)	-	 	0.		
æ	•	Vet short-term capital gain		 			
	9 (ncome modifications					
1	0a a	Gross sales less returns and allowances		ļ			
}		ess Cost of goods sold		 			
		Gross profit or (loss)	ļ	 			
		Other Income	11,085	 	3,409.	3,409.	
		Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc	11,000		<u>5,∓09.</u> 0.		(
		Other employee salaries and wages		1			· · · · · · · · · · · · · · · · · · ·
1		Pension plans, employee benefits					
Ses 1		Legal fees		<u> </u>			
Expenses		Accounting fees STMT 2	995	•	100.	0.	895
		Other professional fees	ļ				
		Interest Taxes STMT-3	SENCED 31	 	0.	0.	
istr		Depreciation and depletion	CEIVEDO	 			
E 2		000000000	8	 			
V V			AY I 9 ZUIV				
(0)		Tilling and positionio	اغالم	-			
<u> 6</u> 2		Other expenses	GDEN. UI	ļ			
Operating		Total operating and administrative	1 000		100	_	001
Ö,		expenses. Add lines 13 through 23	1,026 6,650	•	100.	0.	895 6,650
2		Contributions, gifts, grants paid Total expenses and disbursements	0,030	'		 	0,030
		Add lines 24 and 25	7,676	.	100.	0.	7,545
12		Subtract line 26 from line 12	,,,,,				
}		Excess of revenue over expenses and disbursements	3,409	•			
}	þ	Net investment income (if negative, enter -0-)		<u> </u>	3,309.		
1	c	Adjusted net income (if negative, enter -0-)	1	1		3.409.	

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions

Part II Balance Sheets Attached schedules and amounts in the description		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of			
	ai i	Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing					
	2	Savings and temporary cash investments	7.	7.			
	3	Accounts receivable ►					
		Less; allowance for doubtful accounts ▶					
	4	Pledges receivable >					
	•	Less: allowance for doubtful accounts ▶					
	5	Grants receivable			·		
	-	Receivables due from officers, directors, trustees, and other					
	"	disqualified persons					
	_	Other notes and loans receivable			·····		
	′	Less: allowance for doubtful accounts					
Assets	1 -	Inventories for sale or use					
SS	•	Prepaid expenses and deferred charges		·			
•	l	Investments - U.S. and state government obligations					
	l	Investments - corporate stock					
		Investments - corporate bonds					
	11	Investments - land, buildings, and equipment basis					
		Less accumulated depreciation					
	12	investments - mortgage loans					
	13	Investments - other STMT 4	88,949.	92,358.	171,131.		
	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 !)	88,956.	92,365.	171,138.		
	17	Accounts payable and accrued expenses					
	18	Grants payable					
s;	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
api	21	Mortgages and other notes payable					
⋍	22	Other liabilities (describe)					
	23	Total liabilities (add lines 17 through 22)	0.	0.			
		Foundations that follow SFAS 117, check here					
		and complete lines 24 through 26 and lines 30 and 31					
es	24	Unrestricted	88,956.	92,365.			
auc	25	Temporarily restricted					
Bal	1	Permanently restricted					
덛		Foundations that do not follow SFAS 117, check here					
교		and complete lines 27 through 31.					
ŏ	27	Capital stock, trust principal, or current funds					
šets	28	Paid-in or capital surplus, or land, bldg., and equipment fund					
Ass	29	Retained earnings, accumulated income, endowment, or other funds					
Net Assets or Fund Balances	30	Total net assets or fund balances	88,956.	92,365.			
~							
_	31	Total liabilities and net assets/fund balances	88,956.	92,365.			
Γρ	art	III Analysis of Changes in Net Assets or Fund B	alances				
		······································					
1		I net assets or fund balances at beginning of year - Part II, column (a), line	30		00 050		
	-	st agree with end-of-year figure reported on prior year's return)		. 1	88,956.		
		r amount from Part I, line 27a		. 2	3,409.		
		ir increases not included in line 2 (itemize)			0.		
		lines 1, 2, and 3		. 4	92,365.		
		reases not included in line 2 (itemize)	olume (h) line 20		0.		
<u>6</u> _	LOTA	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	oiumn (b), line 30		92,365. Form 990-PF (2016)		
					101111 220 1 1 (2010)		

VIRGINIA L. PARK FAMILY FOUNDATION

84-1557117

Page 2

Form 990-PF (2016)

7

33.

6,415.

7,545.

Add lines 5 and 6

See the Part VI instructions

6 Enter 1% of net investment income (1% of Part I, line 27b)

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

8 Enter qualifying distributions from Part XII, line 4

	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4		135/		ıctio	Page 4
	Exempt operating foundations described in section 4940(d)(2), check here \(\bigs\) and enter "N/A" on line 1.	540	300 11	1500	CHO	115/
1,0	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
h	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	1				33.
U	of Part I, line 27b					<u> </u>
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	,				0.
	Add lines 1 and 2	3				33.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5				33.
	Credits/Payments:					<u> </u>
	2016 estimated tax payments and 2015 overpayment credited to 2016		1			
	Exempt foreign organizations - tax withheld at source 6b					
	Tax paid with application for extension of time to file (Form 8868) 6c					
	Backup withholding erroneously withheld 6d					
	Total credits and payments Add lines 6a through 6d	7				٥
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	7				0.
	• • • • • • • • • • • • • • • • • • • •	8				
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9				33.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	 -			
	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ Refunded ▶ Int VII-A Statements Regarding Activities	11	<u> </u>			
					Yes	No
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	IN			162	
	any political campaign?	_		_1a		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	,		_1b	<u> </u>	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ed or				}
	distributed by the foundation in connection with the activities					
	Did the foundation file Form 1120-POL for this year?			1c		<u> </u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. \blacktriangleright \$ 0. (2) On foundation managers \blacktriangleright \$ 0.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$O.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			_2		X
	If "Yes," attach a detailed description of the activities					İ
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	Г				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		ļ	3		<u>X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		}	5		X
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.					
	By language in the governing instrument, or					
	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	ļ
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	CO					
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	<u></u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section $4942(j)(3)$ or $4942(j)(5)$ for cale	n dar				
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes " attach a schedule listing their names and addresses			10		X
			Forr	n 99 0	PF	(2016)

	33	$\overline{}$	Yes	No
11	. At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		63	140
''	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	X	
	Website address ► N/A			
14	The books are in care of ► VIRGINIA L. PARK Telephone no ► 425-45			
	Located at ► 3019 HUNTS POINT RD., HUNTS POINT, WA ZIP+4 ►98	<u> 3004</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		· · ·	· L
	and enter the amount of tax-exempt interest received or accrued during the year	N	[/A	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	ļ	<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
Þ	foreign country art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	1	Yes	No
1:	During the year did the foundation (either directly or indirectly):		1.55	
16	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	1	ļ	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	1	ĺ	
	(5) Transfer any income or assets to a disqualified person (or make any of either available	1		
	for the benefit or use of a disqualified person)?		l	
	(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.)		1	
ı	o 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)? N/A	1b_	 -	
	Organizations relying on a current notice regarding disaster assistance check here 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?	10	1	X
9	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	100	 	-22
_	defined in section $4942(j)(3)$ or $4942(j)(5)$:			
	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			
	If "Yes," list the years \blacktriangleright			
1	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.) 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.			
	Del the foundation than 20% department of the second secon			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No			
	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) N/A	3ь		
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	Ĭ	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
	Fo	rm 99	0-PF	(2016)

Form 990-PF (2016) VIRGINIA L. PARK FAMILY			<u>84-155/1</u>	17	Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be	Required (contin	ued)	 -	
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indi	rectly,			1
any voter registration drive?		Ye	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
4945(d)(4)(A)? (see instructions)		Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or aducational nurnoses or		.5 (22) (10		
the prevention of cruelty to children or animals?	or educational purposes, or		s X No		
	d. 41		טאו גבו פּ		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	·	in Regulations	37 / 3		
section 53 4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h				- 1	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		. —		ł	
expenditure responsibility for the grant?	1	N/A Ye	es L No		
If "Yes," attach the statement required by Regulations section 53 494	5-5(d)				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6ь	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	chelter transaction?		es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribute.		''		7b	1
Part VIII Information About Officers, Directors, Trust		anagers Highly		70	
Paid Employees, and Contractors	ees, roundation wi	anayers, mgm	y		
List all officers, directors, trustees, foundation managers and their	compensation				
The Electric College and Colle	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Ex	nense
(a) Name and address	hours per week devoted	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	accoun	t, other
V-7	to position	enter -0-)	compensation	allowa	ances
SEE STATEMENT 5		0.	0.		0.
	1				
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	optor "NONE "		l	
2 Compensation of the highest-paid employees (other than those inc		, onter NONE.	(d) Contributions to	(e) Ex	nense
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deterred	accoun	t, other
	devoted to position	1	compensation	allowa	ances
NONE					
		ļ			
	<u>]</u>				
	<u></u>				
	1			,	
				-	
	†				
		 			
	1				
	<u> </u>		<u> </u>	l	
Total number of other employees paid over \$50,000					0

Form 990-PF (2016) VIRGINIA L. PARK FAMILY FOUNDATION Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		1557117 Page 7
3 Five highest-paid independent contractors for professional services. If none, enter "NO	NF "	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(2)	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical is number of organizations and other beneficiaries served, conferences convened, research papers produced	nformation such as the , etc.	Expenses
1N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2.	Amount
1 N/A		
2		
All other program-related investments See instructions.		

0 . Form **990-PF** (2016)

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations	must complete this part	Foreign foun	dations, s	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charital	ole, etc., purposes:			
	Average monthly fair market value of securities		1a	159,410.	
	Average of monthly cash balances		Ī	1b	328.
	Fair market value of all other assets		[1c	
	Total (add lines 1a, b, and c)			1d	159,738.
	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	159,738.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amour	it, see instructions)		4	2,396.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and d			5	157,342.
6	Minimum investment return Enter 5% of line 5			6	7,867.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3)	and (j)(5) private operating f	oundations an	d certain	
	foreign organizations check here 🕨 🔲 and do not complete this par	t.)			····
1	Minimum investment return from Part X, line 6			1	7,867.
2a	Tax on investment income for 2016 from Part VI, line 5	2a	33.		
b	Income tax for 2016. (This does not include the tax from Part VI.)	2b			
C	Add lines 2a and 2b			2c	33.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	7,834.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	7,834.
6	Deduction from distributable amount (see instructions)			6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Pa	rt XIII, line 1		7	7,834.
P	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pu	irposes:		4.	7 5/5
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a 1b	7,545. 0.
b	Program-related investments - total from Part IX-B	able ate auroceae		2	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charit	anie, etc., purposes	ŀ	-	
3	Amounts set aside for specific charitable projects that satisfy the:			20	
a				3a 3b	
ь	Cash distribution test (attach the required schedule)	and Dort VIII. June 4		4	7,545.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8,			4	1,343.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net in	vesunent	ŀ	_	33.
_	income. Enter 1% of Part I, line 27b			5 6	7,512.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	whon calculating whather th	no foundation o		
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years	when calculating whether th	ie iouridation (qualifies for	ME 29CHOH
	4940(e) reduction of tax in those years.				

Form **990-PF** (2016)

Page 9 Part XIII Undistributed Income (see instructions) (d) (a) (b) (c) 2015 Corpus Years prior to 2015 2016 1 Distributable amount for 2016 from Part XI, 7,834. line 7 2 Undistributed income, if any, as of the end of 2018 6,607 a Enter amount for 2015 only b Total for prior years: 0 3 Excess distributions carryover, if any, to 2016: a From 2011 **b** From 2012 c From 2013 d From 2014 e From 2015 0. f Total of lines 3a through e 4 Qualifying distributions for 2016 from Part XII, ime 4: ► \$_ 6,607 a Applied to 2015, but not more than line 2a b Applied to undistributed income of prior 0 years (Election required - see instructions) c Treated as distributions out of corpus 0 (Election required - see instructions) d Applied to 2016 distributable amount 938. 0 e Remaining amount distributed out of corpus Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount 0. 0. must be shown in column (a)) Enter the net total of each column as indicated below: 0. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract 0 line 4b from line 2b 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 0 hazzazzań d Subtract line 6c from line 6b. Taxable 0 amount - see instructions e Undistributed income for 2015. Subtract line 0 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must 6,896. be distributed in 2017 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election 0. may be required - see instructions) 8 Excess distributions carryover from 2011 0 not applied on line 5 or line 7 9 Excess distributions carryover to 2017. 0. Subtract lines 7 and 8 from line 6a 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

Part XIV Private Operating Fo	Oundations (see ups			·	0 <u>4</u> N/A	-135/11/ Fage
1 a If the foundation has received a ruling or			1174, 4400010110,	<u></u>	N/A	
foundation, and the ruling is effective for			_			
b Check box to indicate whether the found		-	in section		4942(j)(3) or [4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	y loundation described	Prior 3 year		7572(J)(0) OI L	1042())(0)
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 201		(d) 2013	(e) Total
investment return from Part X for	(-/	(0)	1		(-,	
each year listed b 85% of line 2a						
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		ı				
exempt activities						
e Qualifying distributions made directly			1			
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,						
dividends, rents, payments on securities loans (section					1	
512(a)(5)), or royalties)						
(2) Support from general public						
and 5 or more exempt organizations as provided in					Ì	
section 4942(j)(3)(B)(III)						
(3) Largest amount of support from						
an exempt organization						
(4) Gross investment income						
Part XV Supplementary Info			if the found	dation	had \$5,000	or more in assets
at any time during t	he year-see instr	uctions.)		···		
1 Information Regarding Foundation	n Managers:					
a List any managers of the foundation wh			ntributions receive	ed by the	foundation before	the close of any tax
year (but only if they have contributed n	tore than \$5,000). (See s	ection 507(d)(2))				
VIRGINIA L PARK						
b List any managers of the foundation wh			i (or an equally la	rge portio	in of the ownership	p of a partnership or
other entity) of which the foundation ha	s a 10% of greater litteres	ol.				
NONE						
2 Information Regarding Contribute						
Check here X if the foundation of						
the foundation makes gifts, grants, etc), c, and d.
a The name, address, and telephone num	ber or e-mail address of t	he person to whom app	olications should t	oe addres	sed:	
b The form in which applications should b	e submitted and information	tion and materials they	should include:			
c Any submission deadlines;						
• • • • • • • • • • • • • • • • • • •						
d Any restrictions or limitations on award	s. such as by geographic	al areas, charitable field	s, kinds of institut	IONS, OF O	other factors	
,	, g g - p,	,		,- •		

623601 11-23-16

Form **990-PF** (2016)

Part XVI-A	Analysis of	Income-Producing	Activities

nter gross amounts unless otherwise indicated.	Unrelated	business income		by section 512 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a	0000		1-1-		
b					
c		. <u></u>			
d					
e	_				
f	_				
g Fees and contracts from government agencies	 -		+		
2 Membership dues and assessments			++-		
3 Interest on savings and temporary cash					
investments 4 Dividends and interest from securities			14	3,409.	
5 Net rental income or (loss) from real estate:			+		
a Debt-financed property			 		
b Not debt-financed property					
Not rental income or (loss) from personal					
property	1 1		1		
7 Other investment income					
B Gain or (loss) from sales of assets other					
than inventory					
Net income or (loss) from special events			1		
Gross profit or (loss) from sales of inventory			1		
Other revenue:	}		{ , }		
a	_		 		
b	_				
C	1 1				
d	-				
e		0 .		3,409.	0
2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e)	L		<u></u>	3,403. 13	3,409
See worksheet in line 13 instructions to verify calculations.	1			10	<u>J, 1</u> UJ
		lieb-rent of E		D.,,,,	
Part XVI-B Relationship of Activities	s to the Acco	mplishment of E	xempt i	Purposes	
Line No Explain below how each activity for which is	ncome is reported in	column (e) of Part XVI-	A contributi	ed importantly to the accomp	olishment of
the foundation's exempt purposes (other th					
					
					
					
	 -				
				 	
				 	

Part)		Information Re Exempt Organi						onsh		1557117 ncharitable		ge 13
1 Did	the ore	anization directly or indir		of the follower	an with a	av other organizati	on described in	centin	on 50.1(c) of		Yes	No
		other than section 501(c)						1 300110	30 1(0) 01	Ì		
							inzations.			Ì		
		rom the reporting founda	ILIUH IO A HUHUHAHIA	tole exempt of	yanızanu	iii Ui.				10(1)		v
	Cash									1a(1)		X
٠.	Other								-	1a(2)	 	<u> X</u>
		actions:									1 1	
		of assets to a noncharitat								1b(1)	 	<u>X</u>
		ases of assets from a nor		organization						16(2)		X
٠,		of facilities, equipment, of							-	1b(3)		X
(4)	Reimb	ursement arrangements								1b(4)		<u>X</u>
(5)	Loans	or loan guarantees								1b(5)		X
		mance of services or me								1b(6)		X
c Sha	aring of	facilities, equipment, mai	iling lists, other asso	ets, or paid em	nployees					1c		X
d If th	ne answ	er to any of the above is	"Yes," complete the	following sche	edule. Co	lumn (b) should al	ways show the	fair m	arket value of the g	oods, other ass	sets,	
		given by the reporting for			ed less t	han fair market vali	ue in any trans:	action	or sharing arranger	nent, show in		
(a) Line n	· [b) Amount involved	(c) Name o	f noncharitable	e exempt	organization	(d) Desc	ription	of transfers, transaction	ns, and sharing ar	rangeme	nts
<u>```</u>				N/A								
	+-											
	+-					· · · · · · · · · · · · · · · · · · ·						
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		dation directly or indirect 501(c) of the Code (other					izations descri	bed		Yes	X] No
		mplete the following sch	-	-7(-7) -					•			
	10, 00	(a) Name of org			(b) Ty	pe of organization	T	(c) Description of re	lationship		
		N/A			1	<u> </u>	 	<u>`</u>				
					1		 					
		 			 		 					
					 		 					· · · · ·
					 		 					
	Under	penalties of perjury, I declare	that I have examined th	nis return, includi	ng accomi	panying schedules and	statements, and	to the t	best of my knowledge			
Sign	and be	lief, it is trae, correct, and cor	nprete Declaration of p	reparer (other tha	an taxpaye	r) is based on all infori	mation of which p	reparer	has any knowledge	May the IRS return with the	ne prepar	er
Here		MINIMIA Z	PKIK		1	5/15/17	שמת	C T D	יוואיבי	shown below		7 i
	Sign	ature of officer or trustee	, ruce			Date	Title	SID	ENT	_ X Yes		J No∣
	Loigii	Print/Type preparer's na		PrepareNs s		/u.u	Date		Check If	PTIN		
		Linin Lighe higherer 2 lle	ATTIC	Trepater	Signature .	_ >	Date		self- employed			
Paid			mn = ~~	1	\rightarrow		420-17		Jon Gripioyeu	D00000	242	
	arar	JAMES L BU		1-14			1,/	<u>. </u>		P00022	343	
Prep		Firm's name ► BUR	DICK & AS	SSOCIAT	YES,	P.C.			Firm's EIN ► 2	6-30750	49	

Firm's address > 8390 E CRESCENT YKWY STE 110 GREENWOOD VILLAGE, CO 80111

Phone no. 303-813-1380 Form **990-PF** (2016)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization

Employer identification number

	VIRGINIA L. PARK FAMILY FOUNDATION	84-1557117
Organization type (chec	k one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note: Only a section 501 General Rule	in is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule, or (10) organization can check boxes for both the General Rule and a Special Rule, or (10) organization can check boxes for both the General Rule and a Special Rule, or (10) organization can check boxes for both the General Rule and a Special Rule.	
property) from a	any one contributor. Complete Parts I and II. See instructions for determining a contrib	
Special Rules		
sections 509(a) any one contrib	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% sup (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, outor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the a EZ, line 1 Complete Parts I and II	16a, or 16b, and that received from
year, total conti	ition described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received ributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or of cruelty to children or animals. Complete Parts I, II, and III	_
year, contributi is checked, ent purpose Don't	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received ons exclusively for religious, charitable, etc., purposes, but no such contributions total er here the total contributions that were received during the year for an exclusively relicomplete any of the parts unless the General Rule applies to this organization becausable, etc., contributions totaling \$5,000 or more during the year	ed more than \$1,000 If this box gious, charitable, etc.
but it must answer "No" certify that it doesn't me	on that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	its Form 990-PF, Part I, line 2, to
LHA For Paperwork Re	eduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Sche	Quie B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

VIRGINIA L. PARK FAMILY FOUNDATION

84-1557117

Part I	Contributors (See instructions) Use duplicate copies of Part I	ıf addıtıonal space ıs needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	VIRGINA L. PARK 3019 HUNTS POINT ROAD HUNTS POINT, WA 98004	s7,676.	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 Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	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 If for noncash contributions)
323452 10-1	8-16	Schedule B (Form	990, 990-EZ, or 990-PF) (2016

Employer identification number

VIRGINIA L. PARK FAMILY FOUNDATION

84-1557117

Part II Nonc	ash Property (See instructions) Use duplicate copies of F	Part II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. rom	(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	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
153 10-18-18			990, 990-EZ, or 990-PF) (

Employer identification number

VİRGIN	IA L. PARK FAMILY FOUN	DATION	84-1557117			
Part III	Exclusively religious, charitable, etc., con the year from any one contributor. Complete completing Part III, enter the total of exclusively religious.	tributions to organizations described columns (a) through (e) and the follow us, chantable etc., contributions of \$1,000 or	In section 501(c)(7), (8), or (10) that total more than \$1,000 for			
(a) No.	Use duplicate copies of Part III if addition	nal space is needed				
(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, a	Ind 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, a	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, 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, and ZIP + 4		Relationship of transferor to transferee			

FORM 990-PF DIVIDENT	OS AND INTER	EST FROM SECUR	ITIES ST	ATEMENT 1
GROSS SOURCE AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
FIDELITY 3,409	-	0. 3,409.	3,409.	3,409.
TO PART I, LINE 4 3,409).	3,409.	3,409.	3,409.
FORM 990-PF	ACCOUNTI	NG FEES	Sī	ATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	995.	100.	0.	895.
TO FORM 990-PF, PG 1, LN 16B	995.	100.	0.	895.
FORM 990-PF	TAX	ES	ST	CATEMENT 3
	(A)	(B)	(C)	(5)
DESCRIPTION	EXPENSES PER BOOKS	NET INVEST- MENT INCOME	ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DESCRIPTION TAX ON INVESTMENT INCOME				CHARITABLE
	PER BOOKS	MENT INCOME 0.	NET INCOME	CHARITABLE PURPOSES
TAX ON INVESTMENT INCOME	PER BOOKS	MENT INCOME 0. 0.	NET INCOME 0. 0.	CHARITABLE PURPOSES
TAX ON INVESTMENT INCOME TO FORM 990-PF, PG 1, LN 18	PER BOOKS 31. 31. OTHER INV	MENT INCOME 0. 0. ESTMENTS LUATION	NET INCOME 0. 0. ST	CHARITABLE PURPOSES 0. 0.
TAX ON INVESTMENT INCOME TO FORM 990-PF, PG 1, LN 18 FORM 990-PF	PER BOOKS 31. 31. OTHER INV VA	MENT INCOME 0. 0. ESTMENTS LUATION	NET INCOME 0. ST	CHARITABLE PURPOSES 0. 0. CATEMENT 4 AIR MARKET

FORM 990-PF PA		IST OF OFFICERS, D				
NAME AND ADDRESS		TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT	
VIRGINIA L PARK 3019 HUNTS POINT ROA HUNTS POINT, WA 9800		PRESIDENT 0.00	0.	0.	0.	
DAVID E PARK III 2754 VALLEJO STREET SAN FRANCISCO, CA 94	123	DIRECTOR 0.00	0.	0.	0.	
ELIZABETH G PARK JOH 3210 78TH PLACE NE MEDINA, WA 98039	INSON	SECRETARY 0.00	0.	0.	0.	
JEFFREY MICHAEL JOHN 3210 78TH PLACE NE MEDINA, WA 98039	ISON	DIRECTOR 0.00	0.	0.	0.	
JUMEE Y PARK 2754 VALLEJO STREET SAN FRANCISCO, CA 94	.123	DIRECTOR 0.00	0.	0.	0.	
TOTALS INCLUDED ON 9	90-PF, PAGE	6, PART VIII	0.	0.	0.	

PARK FAMILY FOUNDATION 84-1557117

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Ye	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	CONTRIBUTION	
MARIN COUNTRY DAY SCHOOL		PUBLIC	TO SUPPORT CHILDREN'S	
5221 PARADISE DRIVE	}		HEALTH AND EDUCATION	
CORTE MADERA, CA 94925				1,000.
PLANNED PARENTHOOD FEDERATON OF		PUBLIC	TO SUPPORT	
AMERICA			HEALTH AND EDUCATION	
434 W 33RD STREET				
NEW YORK, NY 10001				600.
PLANNED PARENTHOOD OF GREATER TEXAS		PUBLIC	TO SUPPORT	
7424 GREENVILLE AVE., SUITE 206			HEALTH AND EDUCATION	
DALLAS, TX 75231				1,000.
DIANNER DARRINGOD OF MUE CHEAM		DAID! TO	TO GYADOODE	
PLANNED PARENTHOOD OF THE GREAT NORTHWEST		PUBLIC	TO SUPPORT HEALTH AND EDUCATION	
P.O. BOX 3641			REALIT AND EDUCATION	
SEATTLE WA 98124				750.
SOPHIA WAY 11061 NE 2ND STREET #223		PUBLIC	TO SUPPORT CHILDREN'S HEALTH AND EDUCATION	
BELLEVUE WA 98004			REALIR AND EDUCATION	250.
<u> </u>				
UCSF FOUNDATION		PUBLIC	TO SUPPORT CHIDLREN'S	
BOX 45339 SAN FRANCISCO CA 94145			HEALTH AND EDUCATION	500,
SAN FRANCISCO, CA 94145				300,
	}	}		
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		1		
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Total from continuation sheets				4 100