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Form .990-PF

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ 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/form

For	caler	ndar year 2016 or tax year beginning		016, and	ending		, 20
Na	me of fo	Dundation				er identification numb	er
	<u>RI</u>	ZAD FOUNDATION			91-1	368660	
		nd street (or P O box number if mail is not delivered to street address)	Ro	om/surte	B Telephor	ne number (see instruct	•
	Z 0.	3E CEDAR LANE			360	-577-64	†05
Cit		m, state or province, country, and ZIP or foreign postal code				tion application is pend	
	LO	NGYIEW WA 9863Z					_
G	Check	k all that apply: Initial return Initial return	n of a former pub	lic charity	D 1. Foreig	n organizations, check	here . ▶□
		☐ Final return ☐ Amended	return		2 Foreig	n organizations meetin	a the 95% test
		Address change Name cha	inge			here and attach comp	
Н	Check	k type of organization: X Section 501(c)(3) exempt p	orivate foundatio	n		foundation status was 607(b)(1)(A), check here	
	Section	on 4947(a)(1) nonexempt charitable trust 🔲 Other ta	xable private fou	indation	section 3	or (u)(1)(A), check here	
ı	Fair n	narket value of all assets at J Accounting method	d: 🗌 Cash 🛣	Accrual	F If the fou	ndation is in a 60-mon	th termination
		of year (from Part II, col. (c),				ction 507(b)(1)(B), chec	
_	line 16	6) ► \$ 7 1 8 7 9 3 (Part I, column (d) must be	e on cash basis.)				
Pa	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(h) Not		(a) Advicted not	(d) Disbursements for chantable
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books		investment icome	(c) Adjusted net income	purposes
		the amounts in column (a) (see instructions))	20010			NIA	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	The Late of the same of the same of		(5.6) (5.7)		
	2	Check ► ☐ If the foundation is not required to attach Sch. B	e s it	350.6			A CONTRACTOR
	3	Interest on savings and temporary cash investments	<u> </u>				5.78(5)
	4	Dividends and interest from securities	8058		3058		
	5a	Gross rents	500				
-	b	Net rental income or (loss)		1000	<u> </u>		
ĭe	6a	Net gain or (loss) from sale of assets not on line 10					
ē	b	Gross sales price for all assets on line 6a	And the second second		620		
Revenue	7 8	Capital gain net income (from Part IV, line 2)			930		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
_	9	Net short-term capital gain	***				
	10a	Gross sales less returns and allowances					Section 2
	b	Less: Cost of goods sold				CE STATE OF THE ST	
	C	Gross profit or (loss) (attach schedule)		4.3			
	11	Other income (attach schedule)			A TO SHOW THE COLUMN TWO IS NOT THE COLUMN TO SHAPE OF THE COLUMN TWO IS NOT THE COLUMN TO SHAPE OF THE COLUMN TWO IS NOT THE COLUMN TO SHAPE OF THE COLUMN TWO IS NOT THE COLUMN TO SHAPE OF THE COLUMN TWO IS NOT THE COLU		
	12	Total. Add lines 1 through 11	8561	19	988		
	13	Compensation of officers, directors, trustees, etc.,			<u> </u>	•	
Se	14	Other employee salaries and wages VED					
en	15	Pension plans, employee benefits					
Expenses	16a	Legal fees (attach seedule) AR 0 3. 2017					
9	ь	Accounting fees (affach schedule)	1490		490		1490
- > 1	C	Other professional fees (attach schedule)	ļ				
tra	17	Interest OGDEN, UT	0.40		20		2 = 6
- <u>S</u>	18	Taxes (attach schedule) (see instructions)	9/3		679		679
<u> </u>	19	Depreciation (attach schedule) and depletion		 			
8	20 21	Occupancy					
2	22	Printing and publications	 				
a	23	Other expenses (attach schedule)	9911	9	911		9911
١	24	Total operating and administrative expenses.					
ē		Add lines 13 through 23	12314	12	080		12080
Operating and Administrati	25	Contributions, gifts, grants paid	24370	* 40		PARAMETER STATE	24370
0	26_	Total expenses and disbursements. Add lines 24 and 25	36684		991		36450
	27	Subtract line 26 from line 12:					
ļ	а	Excess of revenue over expenses and disbursements	(a8/23)	8.75			
	b	Net investment income (if negative, enter -0-) .	der Art. St	21	991		
ĺ	C	Adjusted net income (if negative, enter -0-)		313359			

Pa	rt II	Ralance Shoots	Attached schedules and amounts in the description column	Beginning of year	<u> </u>	of year
		Dalarice Oricets	should be for end-of-year amounts only. (See instructions.)		(b) Book Value	(c) Fair Market Value
	1	Cash non-interest-l	•	4295	25822	25822
	2	Savings and tempora	ary cash investments	28885	601	601
	3	Accounts receivable				
		Less: allowance for c	doubtful accounts ▶			
	4	Pledges receivable ▶				
ĺ		Less: allowance for o	doubtful accounts >			<u> </u>
	5	Grants receivable .				
	6	Receivables due fro	m officers, directors, trustees, and other			
		disqualified persons	(attach schedule) (see instructions)			l
	7	Other notes and loans re	eceivable (attach schedule) ▶			
			ubtful accounts ▶			
छ	8		or use			
Assets	9	Prepaid expenses an	nd deferred charges			
As	10a		state government obligations (attach schedule)	8939	5658	5658
1	b		rate stock (attach schedule)	506326	579691	579691
	С		rate bonds (attach schedule)			
	11	•	dings, and equipment: basis ▶	75.V. 4. 18 18 18 18 18 18 18 18 18 18 18 18 18		
	••		ciation (attach schedule) >	_ 1000 IV em parameter and minimum		
J	12		age loans			
	13	•	(attach schedule)			
	14	•	quipment: basis > 107021			18 18 18 18 18 18 18 18 18 18 18 18 18 1
	1-7	Less accumulated den	reciation (attach schedule)	107021	107021	107021
	15	Out 4 (1 11	`	1	701021	107027
	16	Total assets (to	be completed by all filers—see the			
		instructions. Also, se	e page 1, item l)	655466	718793	7/8793
\dashv	17		nd accrued expenses	3000	110112	
	18					100
es	19	• •			·	
Liabilities	20		ectors, trustees, and other disqualified persons			2.0
ğ	21		r notes payable (attach schedule)			
ا ت	22	Other liebulties /dees	ribe DEPOSTI-LAND SOLE		25000	148
	23	Total liabilities (add	lines 17 through 22)		25000	
-			llow SFAS 117, check here ▶ □		43000	
န္		and complete lines	24 through 26 and lines 30 and 31.			
ဍ	24	•		,		
夏	25	Temporarily restricted				
8	26	•	ed			
nd Balances	20	•		<u> </u>		
		and complete lines	o not follow SFAS 117, check here ► ☐ 27 through 31.			
Net Assets or Fu	27		principal, or current funds	655466	693793	
2	28		plus, or land, bldg., and equipment fund	(C - C - C)	W13112	
Se	29		cumulated income, endowment, or other funds			
AS	30	-		1 Mr 41 h h	493793	
_	31		fund balances (see instructions) Ind net assets/fund balances (see	655466	472/12	
ž	31		· · · · · · · · · · · · · · · · · · ·	655466	718793	
D ₂	et III [nges in Net Assets or Fund Balances		/10 112	
1	rt III		palances at beginning of year—Part II, colu		st agree with	
•			d on prior year's return)		· · · · 1	655466
_		r amount from Part I.			2	(28123)
2		•		CATILLE T		
3	Othe Othe	increases not includ	led in line 2 (itemize) ► UNREALIZE	A CHIAN ON TV	VESTMENT 3	66 450
4		lines 1, 2, and 3 reases not included in	ine 2 (itemize)		5	693793
5 6	Tota	tases not included in I net assets or fund be	alances at end of year (line 4 minus line 5)—	-Part II. column (b) II		693793
	· ota	. Hot addots of fulld be	and or your (line 4 minus into o)			Form 990-PF (2016)

Part	(a) List and describe the ki	.osses for Tax on Investme ind(s) of property sold (e.g., real estate, or common stock, 200 shs MLC Co)	nt Income	(b) How acquired P—Purchase	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a	PUBLICLY TRADED			D-Donation		
b	LADITAL IKEINED	JELUK LI I F				
d						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or plus exper	other basis ase of sale		in or (loss) (f) minus (g)
a						11930
b						
C						
<u>d</u>						
e	Complete only for assets show	ng gain in column (h) and owned by	the foundation	on 12/31/69		
	Complete only for assets shown		(k) Excess			ıl. (h) gaın mınus ıt less than -0-) or
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	over col			from col (h))
а		•				11930
b						1175
c						
d						
е					·	
2	Capital gain net income or (r		so enter in Pai nter -0- in Par		2	11930
3	If gain, also enter in Part I, i	or (loss) as defined in sections 1: line 8, column (c) (see instruction	ons). If (loss),	enter -0- in	2	
Part		Section 4940(e) for Reduc			3	
Was t	s," the foundation does not qu	ction 4942 tax on the distributal ualify under section 4940(e). Do	not complete	this part.	·	☐ Yes ☐ No
1		t in each column for each year;	see the instru	ctions before m	aking any entries.	
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value of	(c) nonchantable-use as		(d) tribution ratio divided by col (c))
	2015	27157	55	4316		4.90
	2014	36804		2386		6.79
	2013	16303	50	1437		3,25
	2012	9664		7784		2.20
	2011	10483	4/	9661		2.50
_	Tatal of line 4 column (d)					19,64
2 3	Total of line 1, column (d) Average distribution ratio for	the 5-year base period—divide			the 2	191,69
3		ion has been in existence if less			I I	3.93
		,	,			<u> </u>
4	Enter the net value of nonch	arıtable-use assets for 2016 from	m Part X, line	5	. 4	537511
5	Multiply line 4 by line 3 .				. 5	21124
6	Enter 1% of net investment i	ncome (1% of Part I, line 27b)			. 6	220
7	Add lines 5 and 6				. 7	21344
8	Enter qualifying distributions	from Part XII, line 4			. 8	36450
		r than line 7, check the box in F				1% tax rate. See th

Part		instru	ction	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.		35.0	
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)	Marie S		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	22	0	
	here ► 🔯 and enter 1% of Part I, line 27b	15	2	
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	10-		
3	Add lines 1 and 2	220	2	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	-0-	\perp	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	220		
6	Credits/Payments:			
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a			
b	Exempt foreign organizations—tax withheld at source 6b			
C	Tax paid with application for extension of time to file (Form 8868) . 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d	<u>-0-</u>		
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9	220	2	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10		• +	
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ Refunded ▶ 11			
Part	VII-A Statements Regarding Activities During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Vac	No
1a	participate or intervene in any political campaign?	1a	163	
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	1a		X
	Instructions for the definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c	SECTION SECTION	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		20.0	
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
_	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		×
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
Ъ	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	+	ǯ
Э	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	S 1900 A	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
U	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	~	2536/
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	文十	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶			
	I.INCLITALE TO AS			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"			
	complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their]		<u>,</u>
	names and addresses	10		\overline{x}
	F	om 99 (n-PF	20161

Form	agn.	.PF	(2016)	

Page 5

Par	VII-A Statements Regarding Activities (continued)			
44	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
11	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		×
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		×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address >			
14	The books are in care of Mowapi C. RAGAN CPD Telephone no. > 360-5	17	-6	405
15	Located at ► 203 E. CEDAR LANE, LONGY ZEW, WATER ZIP+4 ► 98632 Section 4947(a)(1) nonexempt charitable trusts filling Form 990-PF in lied of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year ► 15	• •		
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No ×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	entrante	(100 mg/s)	State Co.
ı aı	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			K-S
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	M/	A
	Organizations relying on a current notice regarding disaster assistance check here ▶□			
С	Did the foundation engage in a pnor year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?			
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	2b	<i>\</i> //	ā
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
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.)	1 3 3b	7	A
4a b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a 4b		×

Part	VII-B Statements Regarding Activities	s for V	Vhich Form	4720	May Be R	equire	ed (continu	ed)	
5a	During the year did the foundation pay or incur a	any amo	ount to:				-		
	(1) Carry on propaganda, or otherwise attempt							∄ No	
	(2) Influence the outcome of any specific publi		ion (see secti	on 495	5); or to ca	arry on	1		
	directly or indirectly, any voter registration di							No	100000000000000000000000000000000000000
	(3) Provide a grant to an individual for travel, stu							∏ No	
	(4) Provide a grant to an organization other than	n a cha	ritable, etc.,	organiz	ation desc	ribed ir		_	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							∐ No	
	(5) Provide for any purpose other than religious							*	
	purposes, or for the prevention of cruelty to							No	EGENERAL TREPOSED STREET, ALCOHOLOGICAL AND A
b	If any answer is "Yes" to 5a(1)–(5), did any of the							ea in	
	Regulations section 53.4945 or in a current notice	_	_			uclions	,,	· —	5b µ/A
•	Organizations relying on a current notice regards If the answer is "Yes" to question 5a(4), does to					tha tay	'		
С	because it maintained expenditure responsibility							No	
	If "Yes," attach the statement required by Regula		_					_] 140	
6a	Did the foundation, during the year, receive any					emiums	3		
								No P	
ь	Did the foundation, during the year, pay premiur	ns, dire	ectly or indire	ctly, on	a personal	benefi		-	6b M/A
	If "Yes" to 6b, file Form 8870.	-		•	·				
	At any time during the tax year, was the foundation						☐ Yes	No 🏖	
	If "Yes," did the foundation receive any proceed							•	7b /y/ A
Par	VIII Information About Officers, Direct	tors,	Frustees, F	ounda	tion Mana	agers,	Highly Pa	id Ei	mployees,
	and Contractors		name and th	oir oon	nonostion	loop i			
	List all officers, directors, trustees, foundation		e, and average		mpensation		Contributions to		
	(a) Name and address	hou	irs per week ted to position	(It r	not paid, iter -0-)	emple	oyee benefit pla erred compens	ns	(e) Expense account, other allowances
MT	KE NICHOLS-6963 OLD PAC HWY		5 - DZR			and doi	circa compone	-	
.113.JC	LAMA WA 98626	r	HRS	- () -			1	
APT	JORDAN - 10919 MAYA LANE S.E		45-DZQ						
OLY	MPIA WA 98501	5	HRS	-	0-				
MA	RYNELSON 139 POPLAR WAY	Y PR	es-dir		Λ				
401	16126w WA 98638	5	HRS	•	Q =		<u> </u>		
	CEDARGREN-2924 MAGNOLIA	1 .	n BR	,					
Lor	IGVZEW WA 98632		NRS		<u> </u>	<u> </u>			
2	Compensation of five highest-paid employe "NONE."	es (oth	er than tho	se inci	ngeg ou (i	ne 1 –	see instruc	tions	ij. If none, enter
	NONE.		т		ι		(4) 0-4-5-4-	4-	
	(a) Name and address of each employee paid more than \$50,0	ດດ	(b) Title, and a hours per v		(c) Compe	nsation	(d) Contributio employee be	nefit	(e) Expense account,
	ay rame and address of out on proyet paid more than tooks.		devoted to p	osition	(0,00		plans and defe compensati		other allowances
	NONE		<u> </u>		 		<u> </u>	\dashv	
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			ļ						
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~						]	Į	
			<del> </del>		<u> </u>		<u> </u>		
								1	
		<del></del>	<del> </del>		<del> </del>		<del> </del> -		
							]	]	
Total	number of other employees paid over \$50,000 .		<u> </u>		L		L		
		<u>-:</u> -		· · ·			<u> </u>	- F	Form <b>990-PF</b> (2016)

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All other program-related investments. See instructions.

Form **990-PF** (2016)

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore	ign fou	undations,
	see instructions.)		- <del></del>
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	528329
b	Average of monthly cash balances	1b	17367
C	Fair market value of all other assets (see instructions)	1c	-0-
d	<b>Total</b> (add lines 1a, b, and c)	1d	545696
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	-0-
3	Subtract line 2 from line 1d	3	545696
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	1	
	instructions)	4	B185
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	537511
6	Minimum investment return. Enter 5% of line 5	6	26876
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations check here ► ☐ and do not complete this part.)	ounda	itions
1	Minimum investment return from Part X, line 6	11	26876
, 2a	Tax on investment income for 2016 from Part VI, line 5		20010
b	Income tax for 2016. (This does not include the tax from Part VI) 2b -0-		•
C	Add lines 2a and 2b	2c	220
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	26056
4	Recoveries of amounts treated as qualifying distributions	4	-0-
5	Add lines 3 and 4	5	26656
6	Deduction from distributable amount (see instructions)	6	-0-
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	<del>  •  </del>	
•	line 1	7	26656
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	76.2	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	36450
b	Program-related investments—total from Part IX-B	1b	-0-
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		<u></u>
_	purposes	2	-0-
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	-0-
b	Cash distribution test (attach the required schedule)	3b	-0-
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V. line 8, and Part XIII, line 4	4	36450
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	<del>  -  </del>	
-	Enter 1% of Part I, line 27b (see instructions)	5	-0-
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	36450
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculatin qualifies for the section 4940(e) reduction of tax in those years.	g whe	

Part	XIII Undistributed Income (see instruction	ons)			
		(a)	(b)	(c)	(d) 2016
1	Distributable amount for 2016 from Part XI,	Corpus	Years pnor to 2015	2015	
_	line 7		Appropriate the second second second		26656
2	Undistributed income, if any, as of the end of 2016:			F107	
a	Enter amount for 2015 only			5197	
ь 3	Total for prior years: 20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20,20				
а	From 2011				
b	From 2012				
c	From 2013				
d	From 2014				
e	From 2015	10.00			
f	Total of lines 3a through e	-0-			
4	Qualifying distributions for 2016 from Part XII,				The Control of the Co
	line 4: ▶ \$ <u>36450</u>				
a	Applied to 2015, but not more than line 2a .			5197	and the second second
b	Applied to undistributed income of prior years (Election required—see instructions)		-0-		
_	Treated as distributions out of corpus (Election				
С	required—see instructions)	~O`			
d	Applied to 2016 distributable amount	- 4-48-144			26656
e	Remaining amount distributed out of corpus	4597			
5	Excess distributions carryover applied to 2016	-0-		2 5 7 7 7	-0-
	(If an amount appears in column (d), the same	4.05.5			
	amount must be shown in column (a).)				110000
6	Enter the net total of each column as	a resident			
	indicated below:		<b>"我我我</b>		
a	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	-0-			
b	Prior years' undistributed income. Subtract line 4b from line 2b		-0-		
С	Enter the amount of prior years' undistributed				78 12 NOTE 18
•	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)		-0-		fall consists
	tax has been previously assessed				
đ	Subtract line 6c from line 6b. Taxable		-0-		
	amount—see instructions	<b></b>			
e	Undistributed income for 2015. Subtract line			^-	
	4a from line 2a. Taxable amountsee instructions		/ Post	-0-	
f	Undistributed income for 2016. Subtract lines		<b>4</b>		
•	4d and 5 from line 1. This amount must be				c O-
	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 may be	-0-			
_	required—see instructions)				
8	Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions).	-0-			
9	Excess distributions carryover to 2017.	<u> </u>	Park Care		
9	Subtract lines 7 and 8 from line 6a	-0-			
10	Analysis of line 9:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
а	Excess from 2012				
b	Excess from 2013				
C	Excess from 2014				
d	Excess from 2015				
ее	Excess from 2016				

Part	XIV Private Operating Founda	tions (see instr	ections and Part	VII-A question 9	<del>/</del>	rage 10
	If the foundation has received a ruling				<i>'</i>	*
10	foundation, and the ruling is effective for				$\sim$	4
ь	Check box to indicate whether the four				ection 7 4942(i)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	l g	Prior 3 years	<u> </u>	1
	income from Part I or the minimum	(a) 2016	<b>(b)</b> 2015	(c) 2014	(d) 2013	(e) Total
	investment return from Part X for each year listed	(4) 55.0	, , , , , , , , , , , , , , , , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	V	
ь	85% of line 2a	<del></del>	<del> </del>			
c	Qualifying distributions from Part XII,	<del></del>				
	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:		ļ			}
	(1) Value of all assets	 	ļ	<del></del>	 <del> </del>	<b></b>
	(2) Value of assets qualifying under		}			,
_	section 4942(j)(3)(B)(i)	<u> </u>	\		<del></del>	
b	of minimum investment return shown in					
	Part X, line 6 for each year listed	<del></del>				
C	"Support" alternative test—enter		1			}
	(1) Total support other than gross		1			1
	investment income (interest, dividends, rents, payments on		1			
	securities loans (section		!			1
	512(a)(5)), or royalties)	<del></del>	ļ			<del> </del>
	(2) Support from general public and 5 or more exempt		1			1
	organizations as provided in		1			
	section 4942(j)(3)(B)(iii)		<del> </del>	<del> </del>		<del> </del>
	an exempt organization ,		ļ			
	(4) Gross investment income		<del> </del>	<u> </u>		<del> </del>
Part		on (Complete th	is part only if the	ne foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-	see instruction	ns.)		•	
1	Information Regarding Foundation	Managers:				
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	only if they have co	ontributed more th	an \$5,000). (See s	ection 507(d)(2).)	
	NONE				<del></del>	<del></del>
þ	List any managers of the foundation					arge portion of the
	ownership of a partnership or other er	ntity) of which the	toundation has a	10% or greater into	erest.	
	NONE			<del></del>		<del></del>
2	Information Regarding Contribution			_		
	Check here ▶ ☐ if the foundation	-	·		_	•
	unsolicited requests for funds. If the f other conditions, complete items 2a, I		gins, grams, etc.	(see instructions) i	o individuals of o	rganizations under
	<del></del>		drope of the perce	n to whom applie	ations should be	addrossad:
а	The name, address, and telephone numer make make with the company of the company	10 RIZAD	FOUNDATION	r to whom applic	ations should be	audresseu.
	P.O. BOX 1082 KELSO			4.		
h	The form in which applications should	he submitted and	d information and	materials they sho	uld include.	<del></del>
•	The form in which applications should	, 55 Soomitted an		materials tries sile	ala molado.	
	SEX ATTACHMENT					
C	Any submission deadlines:	<del> </del>			<del></del>	
_	NONE					
d	Any restrictions or limitations on av	vards, such as b	y geographical ar	eas, charitable fi	elds, kinds of ins	stitutions, or other
	factors:	_				•
	SEE ATTACHMENT					

3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient	Part XV Supplementary Information (con				
Name and address (home or business)  a Pad during the year  C DULTT COUNTY SER COUNTIL  KELSO, WA 98626  COWLETT COUNTY SHRIFF  RESERVE FLOW MY 98626  COWLETT COUNTY SHRIFF  RESERVE FLOW MY 98626  COWLETT COUNTY SHRIFF  RESERVE FLOW MY 88626  COWLETT COUNTY DIVE  RESERVE FLOW MY 88626  COWLETT COUNTY DIVE  RESERVE FLOW  RESERVE CEPTIFICATION  Total  DAPProved for future payment  RESERVE FLOW  RESERVE FLOW	3 Grants and Contributions Paid During	the Year or Approv	ed for Fu	ture Payment	
a Paddung the year  C OWLITI COUNTY SER COUNTL  312 SW FIRSTAUL  KELSO, WA 98626  COWLITIZOUNTY SER TEAM  312 SW FIRST AUL  KELSO WA 98626  COWLITI COUNTY SHERIFF:  RESERVE  207 N. YEM AVE  HELSO WA 98626  COULLITI COUNTY DIVE  RESCUE TEAM  231 SW AND 98626  COULLITI COUNTY DIVE  RESCUE TEAM  231 NC SWIFT WATE RESCUE  COUNTY COUNTY DIVE  RESCUE TEAM  231 N. YEM AVE  KENSO, WA 98626  Total  b Approved for future payment  PC MATHERIN RITAD  G 500  CONFERRICE SERVETTO  SOLIT WATE RESCUE  CEPTIFICATION  Total  D Approved for future payment	<u> </u>	show any relationship to any foundation manager	status of		Amount
CONLITICOUNTY SER COUNTS   SER COUNTS   SER TEAM OF COMPLEX   SER		or substantial contributor	recipient		
KELSO, WA 98016  CONLITICOUNTY S FR TEAM 312 SW F 7057 AVE  MELSO WA 98026  COULITI COUNTY SHERIFF: RESERVE 207 N. 47H AVE H4LSO WA 98026  COULITY COUNTY DIVE RESCUT TEAM 207 N. 47H AVE MELSO, WA 98026  COUNTY FEAM 207 N. 47H AVE MELSO, WA 98026  Total  Total  Total  Approved for future payment  Fig. 30 24370	a Paid during the year  COULTY COUNTY SFR COUNTS  213 SW FIRSTAUF	•	PC	MAINTAIN RIZAD	6500
RELSO WA 98626  COWLITZ COUNTY SHERIFF: RESERVE 207 N. 4714 AVE KELSO WA 98626  COWLITZ COUNTY DIVE RESCUE TEAR 207 N. 4714 AVE KELSO, WA 98626  NC SOUTT WATERESCUE CEPTIFICATION  Total  D Approved for future payment	KELSO, WA 93626			SAR TERM CONFERENCE REGISTRATION	6500
COWLITZ COUNTY SHEELFT:  RESERVE  207 N. 47H AVE  HELSO WA 98626  COWLITZ COUNTY DIVE  RESCUE TEAM  201 N. 47H AVE  MENSO, WA 98626  Total  Total  D Approved for future payment	COULTTICOUNTY S FA TEAM 312 SW FIRST AVE KELSO WA 98626		PC	S & R. TEAM MEMBERS REZMEURSED COSTS	3520
COWLITE COUNTY DIVE RESCUE TEAM 287 M. 474 AVE KELSO, WA 982-16  Total  b Approved for future payment  Total  Total	COWLITZ COUNTY SHERTH'S RESERVE 207 N. 4TH AVE		NC	CONFERRNCE SECURITY	2000
Total	COUNTY SOUNTY DIVE RESCUE TEAM 201 N. 474 AVE		NC		S 850
b Approved for future payment					21/225
		<del> </del>	· · · ·	<b>. ▶ 3</b> a	24370
Total					
	Total	<u> </u>	<u> </u>	▶ 3b	

Pai	t XVI	<ul> <li>Analysis of Income-Producing Ac</li> </ul>					
nte	r gross	s amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by section	n 512, 513, or 514	(e)
			(a)	(b)	(c)	(d)	Related or exempt
			Business code	Amount	Exclusion code	Amount	function income (See instructions.)
1	Progr	am service revenue:					ļ <u> </u>
	a	· · · · · · · · · · · · · · · · · · ·			<b></b>		
	b _				<u> </u>		ļ
	c _			· · · · · · · · · · · · · · · · · · ·			ļ
	d _						
	e _				l		
	f				<u> </u>		
		ees and contracts from government agencies		·			
2		pership dues and assessments					
3		st on savings and temporary cash investments			l		
4		ends and interest from securities		and the second s	14	8058	
5	Net re	ental income or (loss) from real estate:	Section 3				
		ebt-financed property					
		ot debt-financed property			ļ		
6		ental income or (loss) from personal property			<del>   </del>		
7		investment income					
8		or (loss) from sales of assets other than inventory			<u> </u>		
9		come or (loss) from special events			<del>                                     </del>		
10		s profit or (loss) from sales of inventory					ļ
11	Other	revenue: a			<u> </u>		
	b				ļ		
	c				<del> </del>		<u> </u>
	d			· <del></del>	ļ		<u> </u>
	_						
	e _						ļ
		otal. Add columns (b), (d), and (e)				8058	
13	Total	. Add line 12, columns (b), (d), and (e)				8058 13	8058
<b>13</b> See	Total works	Add line 12, columns (b), (d), and (e)	 ns.)				8058
13 See Pa	Total works	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
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13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pai Lin	Total works it XVI e No.	Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	t Purposes	13	

		Exempt Or	rganizations						
1	in sec			engage in any of the f section 501(c)(3) orga					Yes No
а	Trans	sfers from the rep	porting foundation t	to a noncharitable exer	mpt organizati	on of:			
	(1) C	ash						1a(1)	
	(2) 0	ther assets .						1a(2)	X
b	Other	r transactions:							72
	(1) S	ales of assets to	a noncharitable ex	empt organization .				1b(1)	×
				table exempt organiza				15(2)	×
				er assets				1b(3)	X
								1b(4)	1-5
		oans or loan qua	_					1b(5)	- + + +
		~						1b(6)	<del>-+ (</del>
_				ship or fundraising solid					<del>-   \$</del>
				ists, other assets, or p				1c	1
d				es," complete the follo					
				ices given by the repo					
			<del>,</del>	gement, show in colum					
(a) Line	no (	b) Amount involved	(c) Name of none	chantable exempt organization	on <b>(d)</b> De	scription of transfers	, transactions, and	sharing arra	ngements
			<u> </u>						
		-							
	$\neg \vdash$						· · · · · · · · · · · · · · · · · · ·		<del></del>
			<del></del>		<del></del>	<del></del>			
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			<u> </u>	<del></del>			····-		
		<del></del>	L				<del> </del>		
2a				ffiliated with, or relate					
				other than section 501	(c)(3)) or in se	ction 527?		☐ Yes	🔀 No
b	If "Ye	s," complete the	e following schedule	θ					
(a) Name of organization		(b) Type of orga	anization	(0	ationship				
					_				
				<del> </del>		<del>                                     </del>			
	Unde	r penalties of perjury, I	declare that I have examin	ned this return, including accom	panying schedules	and statements, and to	the best of my kno	wledge and b	elief, it is true,
Sign	сопр	ct, and complete. Decl	laration of preparer (other t	han taxpayer) is based on all inf	ormation of which p	preparer has any knowl		ne IRS discus	o thus make ma
Here		LEMAGE /25	1) MARCES	17.25.17	PRES	IDENT		ne preparer s	
1016		ature of officer or true	stee	Date	Title		(see in	structions)?	X(Yes [∏No
	L	Print/Type preparer		Preparer's signature		Date		PTIN	
Paid		11	00	11- And	- 0.04	2.25-201	Check X :	f   · · · · ·	13634
Prepa		HOWARD	C DAGAN	TOWNY !!		<del></del>		PUZ	<u>639 36</u>
Use (	Only	Firm's name ▶		gan cpa	<u>U</u>		Firm's EIN		44.4
		Firm's address ▶	203 E CEDAR	LANK LONGUS	EW WA	78632 F	Phone no 360-	577-6	
								Form <b>99</b> 0	<b>)-PF</b> (2016)

### RIZAD FOUNDATION - 91-1368660 FORM 990 PF - 2016

Prepared By Work Paper No Reviewed By

Date

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190	ACCOUNTING FEES	<del>                                     </del>	, 1							!	
	HOWARD C. RAGAN CPA		7	- <del>:  </del>	-+-	11	<del>          -                            </del>			+	1490
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18	TAXES	<del>-    </del>		<del></del>			╁┼┼┼			++	<del>                                     </del>
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	OTHER EXPENSES	<del></del>		<del>!    </del>		<del>- </del> -	11		+++	<del>-    </del> -	
<del>-</del>	COWLETZ Co SAR EXPENSES										
	SEERETARY FEE										
	OFFICE AND POSTAGE			. '						-	86
	MEMORIAL FLOWERS										200
	INVESTMENT ADVISORY FE										7708
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	INVESTMENTS - CORPORATES	. 1	- 1		[_				1	<del></del>	
<u> </u>	PAUDENTIAL QMA STRATEGO	ic Val	LUE	FUN	(D) \$4	4551	<del>}</del>	-		<u> </u>	169326
	PRUDENTIAL JEHN ISON SMALL										60 563
-	PRUDENTIAL INVI PORT GAOM				- 11		1 1 1 1		<del>.   ;</del>		157377
	PRUDENTIAL OMA SMALL CA						SVX	#	$\perp \downarrow \downarrow$		148018
	TARGET - INTL EQUITY	PORT	TFO	170	TAI	EX	;	11	11		44407
<u> </u>			;				,				
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p ; ;	LAND		,					!			107021
	THIS IS UNIMPROVED RE	SALL	1	276					111		
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	THE THE PARTY OF T	*				177		1 1	111	†	
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	<u> </u>	1 .			9					,	

2016 FORM 99 OPF RIZAD FOUNDATION 91-1368660

# RIZAD FOUNDATION GRANT APPLICATION PROCESS

Individuals or organizations requesting grants must meet the following criteria:

- Individuals must be members of a Rizad approved emergency response unit headquartered in Cowlitz County.
- 2. The grant must be for individual or organizational expenses incurred while on an authorized activity.
- If the grant is for other than already expended funds, prior authorization must be obtained before the expenditures are made. This includes, but is not limited to, training and equipment.
- Individual requested will be authorized by their volunteer organization and forwarded to the Rizad Foundation for consideration.
- Qualified organizational requests will be forwarded to the Foundation.

A qualified individual is a person who is a member in good standing of an emergency response organization and has incurred an expense while volunteering on an authorized activity. Such expenses must not be eligible for reimbursement through any government agency.

A qualified organization is one on the approved Rizad list.

Grant applications are available through the Cowlitz County Department of Emergency Management website. Fully completed applications will be returned to the Rizad Foundation, P.O. Box 1082, Kelso, Wa. 98626. Grant requests will be considered at the Rizad Foundation's quarterly meetings.

2016 FORM 990 PF RZZAD FOUNDATION 91-1368660

### GENERAL GRANTING GUIDELINES

The Rizad Foundation may, at its discretion, reimburse qualified individuals for out-of-pocket expenses incurred while volunteering. Individuals requesting a grant must belong to a volunteer organization headquartered in Cowlitz County.

Although the primary mission is directed at the individual volunteer, the Foundation may, at its discretion, make grants to qualified volunteer organizations in Cowlitz County which are seen to benefit the individual volunteers by providing training or equipment which would otherwise not be reasonably available.

At no time is the Rizad Foundation obligated to make grants to any individual or organization and any grants made are totally at the discretion of the Foundation's directors.

## = 2016 FORM 990PF

### 9/-/368660 RIZAD FOUNDATION Grant Request

The RIZAD Foundation's primary purpose is to assist Cowlitz County emergency worker volunteers with one-time personal expenses incurred as a result of their volunteerism while belonging to an authorized Cowlitz County volunteer agency.

Please print clearly	
DATE	
ORGANIZATION INFORMATION	Tax ID#:
Organization Name:	
Address:	
Contact Name:	Phone #:
Email:	
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TIMELINE (Timeframe in which funds will be use	d)
BENEFITS (How many people will benefit from t	ne project and the ways in which they will benefit)
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# KIZAD FORM 990 PF

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