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2016

OMB No 1545-0052

## **Return of Private Foundation**

Form 990-PF

Department of the Treasury

Internal Revenue Service

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 instructions is at <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

		ndar year 2016, or tax year beginning 01-01-	201	6 , ar	nd er	nding 12-31-		
		indation ON FAMILY CHARITABLE FOUNDATION				91-1875867	entification numbe	er.
Num	her and	street (or P.O. box number if mail is not delivered to street addre	255)   F	Room/suite				
		8TH AVE NE		tooning suite		(800) 466-1611	mber (see instructio	ns)
		, state or province, country, and ZIP or foreign postal code LE, WA 98072	•			<b>C</b> If exemption	application is pendir	g, check here
G Ch	neck al	I that apply  Initial return  Initial return  Amended return  Address change	ırn	rmer public charity		2. Foreign of	ganizations, check h ganizations meeting k here and attach co	► LJ the 85%
<b>1</b> Ch	neck tv	pe of organization Section 501(c)(3) exempt priva		ındatıon			indation status was	
_		4947(a)(1) nonexempt charitable trust  Other taxa				under sectio	n 507(b)(1)(A), che	k nere
of '	year <i>(f</i>	tet value of all assets at end from Part II, col (c),  \$ 528,329  J Accounting method  Other (specify)  (Part I, column (d) method		Cash Accru	al		ation is in a 60-mont n 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a	) Revenue and				(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		expenses per books	(b)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach		57,326				
	2	schedule)  Check ▶ ☐ If the foundation is <b>not</b> required to attach						
	3	Sch B	•  -					
	4	Dividends and interest from securities		28,053		28,053		
	5a	Gross rents	-					
	ь	Net rental income or (loss)						
Ele	6a	Net gain or (loss) from sale of assets not on line 10		-27,306				
Revenue	ь 7	Gross sales price for all assets on line 6a 28,5 Capital gain net income (from Part IV, line 2)	559			0		
œ	8	Net short-term capital gain	. ⊢					
	9	Income modifications	. 🖯					
	10a	Gross sales less returns and allowances						
	ь	Less Cost of goods sold						
	С	Gross profit or (loss) (attach schedule)	• L					
	11	Other income (attach schedule)	. 9	-47		-47		
	12	Total. Add lines 1 through 11	•	58,026		28,006		
	13	Compensation of officers, directors, trustees, etc		0		0		C
	14	Other employee salaries and wages	-					
ses	15	Pension plans, employee benefits	·	<b>1</b> 260		0		260
Ē	16a							
EX	b	Accounting fees (attach schedule)	. 99			2,705		2,705
e e	c c	Other professional fees (attach schedule)	. 9	120		120		
ra E	17 18	Interest	. 9	<b>Ы</b> 66		0		0
<u> </u>	19	Taxes (attach schedule) (see instructions)  Depreciation (attach schedule) and depletion	. <u> </u> -	<b>3</b> 00				
Ē	20	Occupancy	' ⊢					
Ad	21	Travel, conferences, and meetings	: ⊢	928		0		928
E E	22	Printing and publications	.  -					
Ď.	23	Other expenses (attach schedule)	. 9	35		0		35
atı	24	Total operating and administrative expenses.						
Operating and Administrative Expenses		Add lines 13 through 23	.	6,819	L	2,825		3,928
0	25	Contributions, gifts, grants paid	. [	96,575				96,575
	26	<b>Total expenses and disbursements.</b> Add lines 24 an 25	d	103,394		2,825		100,503
	27	Subtract line 26 from line 12						
	a	Excess of revenue over expenses and disbursements		-45,368				
	ь	Net investment income (if negative, enter -0-)				25,181		
	c	Adjusted net income(If negative, enter -0-)	. [					
or	Daner	work Reduction Act Notice, see instructions.				Cat No. 11289)	, Ea	m <b>QQN-DF</b> (2016)

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . . .

Foundations that do not follow SFAS 117, check here ▶ ✓

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Investments—land, buildings, and equipment basis ▶

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Paid-in or capital surplus, or land, bldg, and equipment fund

Other increases not included in line 2 (itemize) ▶ \_\_\_\_\_

Less accumulated depreciation (attach schedule)

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > \_

Other liabilities (describe ▶\_

Unrestricted

Temporarily restricted

Permanently restricted . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶ \_

C

11

12

13

14

15

16

17 18

19

20 21

22

23

24

25

26

28 29

31

Part III

2 3

Liabilities

Balances

Fund

ō

Assets 27

Net 30 470,336

26,328

518,078

518,078

518.078

518,078

[چە

436,729

0

472,710

472,710

472.710 472,710

2

3

4

5

6

518,078

-45,368

472,710

472,710 Form **990-PF** (2016)

0

492,348

528,329

	<b>(a)</b> the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1 a PUBLICLY TRADED SECU	RITIFS		D-Donation	2002-09-06	2016-11-14
b INVESTMENT IN LIBERTY			Р	2008-01-01	2016-12-31
c LT CAP LOSS FROM LIBE	,		P		
d					
<del>-</del> е					
	(f)		(g)	(	h)
(e) Gross sales price	Depreciation allowed		other basis	Gain o	r (loss)
	(or allowable)	plus exp	ense of sale	(e) plus (f	) mınus (g)
<b>a</b> 2	8,559		33,607		-5,048
b			21,410		-21,410
С			848		-848
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69		I)
(i)	(i)		(k)		h) gain minus
F M V as of 12/31/69	Adjusted basis as of 12/31/69		of col(၊) l(j), if any		less than -0-) <b>or</b> om col (h))
	as 01 12/31/09	Over cor	(j), ii aliy	203363 (11	-5,048
a b					-21,410
					-848
C					-040
d					
e		If gain, also enter in P			
	gain or (loss) gain or (loss) gain or (loss) as defined in sections :		' '	3	-27,306
Part V Qualification U	Jnder Section 4940(e) for Re	educed Tax on Net	Investment Inc	ome	
For optional use by domestic p	rivate foundations subject to the sec	ction 4940(a) tax on ne	et investment incom	e )	
		` ,		•	
If "Yes," the foundation does no	e section 4942 tax on the distributa ot qualify under section 4940(e) Do	not complete this part	<u> </u>		es 🗸 No
	nount in each column for each year,	see instructions before	making any entries		
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rat (col (b) divided by c	
2015	121,417		635,063		0 191189
2014	112,701		684,685		0 164603
2013	104,184		723,229		0 144054
2012	113,371		834,330		0 135883
2011	101,629		921,344		0 110305
2 Total of line 1, column (	d)		2		0 746034
3 Average distribution ratio	for the 5-year base period—divide	the total on line 2 by 5			
	ndation has been in existence if less		3		0 149207
	ncharitable-use assets for 2016 fron	•	4		573,958
<b>5</b> Multiply line 4 by line 3			5		85,639
	ent income (1% of Part I, line 27b)		6		252
			7		85,891
	ons from Part XII, line 4 ,		8		100,503
If line 8 is equal to or gre instructions	eater than line 7, check the box in Pa	art VI, line 1b, and com	nplete that part usin	g a 1% tax rate Se	e the Part VI

1, 165 to 65, me 16, m 6016						
<b>7a</b> At any time during the tax year, wa	s the	foundation a party to a p	rohibited tax shelter trar	nsaction? Yes	No	
<b>b</b> If yes, did the foundation receive ar	ny pro	ceeds or have any net in	come attributable to the	transaction?	7b	<u> </u>
Part VIII Information About ( and Contractors	Offic	ers, Directors, Trust	ees, Foundation Ma	nagers, Highly Paid En	nployees	,
1 List all officers, directors, truste	es, fo	undation managers an	d their compensation	(see instructions).		
(a) Name and address	(1	Title, and average hours per week o) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		
DALE LARSON		IDENT	0	0		0
14224 168TH AVE NE WOODINVILLE, WA 98072	1 00					
PHYLLIS LARSON		ETARY	0	0		0
14224 168TH AVE NE WOODINVILLE, WA 98072	3 00					
2 Compensation of five highest-pa	id en	ployees (other than th	ose included on line 1	.—see instructions). If nor	ne, enter '	'NONE."
(a) Name and address of each employee pa more than \$50,000	aıd	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation		nse account, allowances
NONE						
Total number of other employees paid ov	er \$5	0,000				0
				•	Form <b>99</b>	<b>0-PF</b> (2016)

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional service	ces (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total</b> number of others receiving over \$50,000 for professional services		• 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rel		r of Expenses
organizations and other beneficiaries served, conferences convened, research papers produ	ucea, etc	
1		
2		
2		
3		
4		
4		
Part IX-B Summary of Program-Related Investments (see	· · · · · · · · · · · · · · · · · · ·	
Describe the two largest program-related investments made by the foundation during t	ne tax year on lines 1 and 2	Amount
1		
2		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3		▶ 0
<u> </u>		Form <b>990-PF</b> (2016)

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

1b

2

За 3b

4

5

100.503

100.251

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252

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . .

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

b

2

3

4

5

Page 9

28.446

28,446

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Form	990	)-PF	(2	31
Pa	rt )	(III		

**b** Total for prior years

From 2011. . . . .

**b** From 2012. . . . . c From 2013. . .

**d** From 2014. . . . . e From 2015. . . . .

XII, line 4 ▶ \$

indicated below:

O-PF	(20	016)
X444		Un

1 Distributable amount for 2016 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only. . . . . .

Excess distributions carryover, if any, to 2016

f Total of lines 3a through e. . . . . . .

d Applied to 2016 distributable amount. . . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a) )

**5** Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2017.

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. . .

Subtract lines 7 and 8 from line 6a . . . .

6 Enter the net total of each column as

**b** Prior years' undistributed income Subtract 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 assessed. . . . . . d Subtract line 6c from line 6b Taxable amount —see instructions . . . . . . . . . . . . e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . . f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must 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 may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2011 not

4 Qualifying distributions for 2016 from Part

a Applied to 2015, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election required—see instructions). . . . . . . . . .

55,744 72,339

68.795 79.061

90.206

72.339 68,795

79.061

90.206

72.057

(a)

Corpus

366,145

72.057

438,202

55,744

382,458

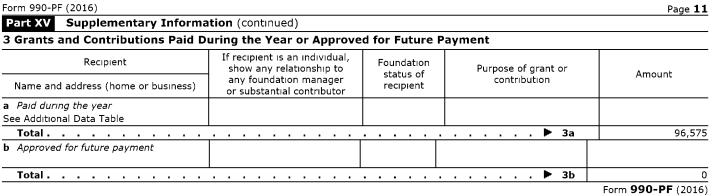
(b)

Years prior to 2015

(c)

2015

0-PF (20	016)		
XIII	Undistributed Income	(see instructions)	



er aross	amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	512, 513, or 514	(e) Related or exem
		(a)	(b)	(c)	(d)	function income (See instructions
_	service revenue	Business code	Amount	Exclusion code	Amount	(See matraction
:						
	and contracts from government agencies					
Membe	rship dues and assessments					
	st on savings and temporary cash ments					
	ds and interest from securities			14	28,053	
	tal income or (loss) from real estate					
	financed property					
	ebt-financed property ntal income or (loss) from personal property					
	nvestment income					
	or (loss) from sales of assets other than					
	ory			18	-27,306	
	ome or (loss) from special events profit or (loss) from sales of inventory					
	evenue					
	Y CAPITAL BRIDGE, LLC			14	-47	
	al Add columns (b) (d) and (e)		,	nl I	700	
	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)			<b>13</b>	700	
Subtota <b>Total.</b> worksl	Add line 12, columns (b), (d), and (e)	ns )		13		
Subtota <b>Total.</b> .	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio  Relationship of Activities to th	<sup>ns</sup> ) <b>e Accomplish</b>	ment of Exem	pt Purposes		7
Subtota Total. worksl	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns ) <b>e Accomplish</b> Income is reporte	ment of Exem	13  pt Purposes  of Part XVI-A contribut	ed importantly to	7
Subtota Total. worksl rt XVI e No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  Relationship of Activities to the Explain below how each activity for which its content of the content o	ns ) <b>e Accomplish</b> Income is reporte	ment of Exem	13  pt Purposes  of Part XVI-A contribut	ed importantly to	7
Subtota Total. worksl tt XVI e No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's expressions.	ns ) <b>e Accomplish</b> Income is reporte	ment of Exem	13  pt Purposes  of Part XVI-A contribut	ed importantly to	7
Subtota Total. worksl rt XVI e No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's expressions.	ns ) <b>e Accomplish</b> Income is reporte	ment of Exem	13  pt Purposes  of Part XVI-A contribut	ed importantly to	7
Subtota <b>Fotal.</b> worksl <b>rt XVI</b> <b>e No.</b>	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's expressions.	ns ) <b>e Accomplish</b> Income is reporte	ment of Exem	13  pt Purposes  of Part XVI-A contribut	ed importantly to	7
Subtota  Fotal.  works  t XV  e No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's expressions.	ns ) <b>e Accomplish</b> Income is reporte	ment of Exem	13  pt Purposes  of Part XVI-A contribut	ed importantly to	7
Subtota <b>Fotal.</b> worksl <b>rt XVI</b> <b>e No.</b>	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's expressions.	ns ) <b>e Accomplish</b> Income is reporte	ment of Exem	13  pt Purposes  of Part XVI-A contribut	ed importantly to	7
Subtota <b>Fotal.</b> worksl <b>rt XVI</b> <b>e No.</b>	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's expressions.	ns ) <b>e Accomplish</b> Income is reporte	ment of Exem	13  pt Purposes  of Part XVI-A contribut	ed importantly to	7
Subtota <b>Fotal.</b> worksl <b>rt XVI</b> <b>e No.</b>	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's expressions.	ns ) <b>e Accomplish</b> Income is reporte	ment of Exem	13  pt Purposes  of Part XVI-A contribut	ed importantly to	7
Subtota  Fotal.  works  t XV  e No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's expressions.	ns ) <b>e Accomplish</b> Income is reporte	ment of Exem	13  pt Purposes  of Part XVI-A contribut	ed importantly to	7
Subtota  Fotal.  works  t XV  e No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's expressions.	ns ) <b>e Accomplish</b> Income is reporte	ment of Exem	13  pt Purposes  of Part XVI-A contribut	ed importantly to	7
Subtota  Fotal.  works  t XV  e No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's expressions.	ns ) <b>e Accomplish</b> Income is reporte	ment of Exem	13  pt Purposes  of Part XVI-A contribut	ed importantly to	7
Subtota Fotal. worksl t XVI e No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's expressions.	ns ) <b>e Accomplish</b> Income is reporte	ment of Exem	13  pt Purposes  of Part XVI-A contribut	ed importantly to	7
Subtota  Fotal.  works  t XV  e No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's expressions.	ns ) <b>e Accomplish</b> Income is reporte	ment of Exem	13  pt Purposes  of Part XVI-A contribut	ed importantly to	7
Subtota <b>Fotal.</b> worksl <b>rt XVI</b> <b>e No.</b>	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's expressions.	ns ) <b>e Accomplish</b> Income is reporte	ment of Exem	13  pt Purposes  of Part XVI-A contribut	ed importantly to	7
Subtota <b>Fotal.</b> worksl <b>rt XVI</b> <b>e No.</b>	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's expressions.	ns ) <b>e Accomplish</b> Income is reporte	ment of Exem	13  pt Purposes  of Part XVI-A contribut	ed importantly to	7
Subtota Total. worksl tt XVI e No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's expressions.	ns ) <b>e Accomplish</b> Income is reporte	ment of Exem	13  pt Purposes  of Part XVI-A contribut	ed importantly to	7
Subtota <b>Fotal.</b> worksl <b>rt XVI</b> <b>e No.</b>	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's expressions.	ns ) <b>e Accomplish</b> Income is reporte	ment of Exem	13  pt Purposes  of Part XVI-A contribut	ed importantly to	7
Subtota  Total.  worksl  t XV  e No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's expressions.	ns ) <b>e Accomplish</b> Income is reporte	ment of Exem	13  pt Purposes  of Part XVI-A contribut	ed importantly to	7
Subtota <b>Fotal.</b> worksl <b>rt XVI</b> <b>e No.</b>	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  Relationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's expressions.	ns ) <b>e Accomplish</b> Income is reporte	ment of Exem	13  pt Purposes  of Part XVI-A contribut	ed importantly to	7

. , – -	,
ш	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Pari	: XVII	Information Re Exempt Organiz		ransi	fers To	and Trans	sactio	ns and F	Relatio	nships With No	ncharit	able		
		ganization directly or in- Code (other than sectio	directly enga								ion 501		Yes	No
a Tra	nsfers f	rom the reporting foun	dation to a no	oncha	ırıtable ex	empt organ	ızatıon	of			Ī			
(1	) Cash.										. [	1a(1)		No
(2	<b>)</b> Other	assets									[	1a(2)		No
<b>b</b> Oth	her tran	sactions												
(1	<b>)</b> Sales	of assets to a nonchari	itable exempt	orga	nızatıon.						[	1b(1)		No
(2	<b>)</b> Purch	ases of assets from a n	oncharitable	exem	pt organi	zation					[	1b(2)		No
(3	<b>)</b> Renta	il of facilities, equipmer	nt, or other as	ssets.							[	1b(3)		No
(4	) Reimb	oursement arrangemen	ts									1b(4)		No
•	•	or loan guarantees.										1b(5)		No
(6	<b>)</b> Perfori	mance of services or m	embership or	fund	raising so	licitations.					.	1b(6)		No
	_	facilities, equipment, n	-				•				٠ [	<b>1</b> c		No
of i	the good any tran	ver to any of the above ds, other assets, or servisaction or sharing arra	vices given by ngement, sho	y the ow in	reporting column (d	foundation	If the f of the	oundatior goods, ot	n receive her asse	d less than fair ma ts, or services rece	rket value eved	2	aomon	<b>+</b> c
(a) Lin	e No	(B) Amount involved	(C) Name of	noncha	аптаріе ехе	mpt organiza	LIOII	(a) Desc	прион ог	transfers, transaction:	s, and snan	ing arrai	igernen	
	-+													
	-													
	-													
<b>2a</b> Is	the four	idation directly or indire	ectly affiliated	with	, or relate	ed to, one or	r more t	ax-exem	ot organı	zations		_	_	
des	scribed i	in section 501(c) of the	Code (other	than	section 50	01(c)(3)) or	ın secti	on 527?.			🗆	Yes	<b>✓</b> N	0
b If'	'Yes," co	omplete the following so	chedule											
		(a) Name of organization	n		(	<b>b)</b> Type of or	ganızatıo	n		(c) Descriptio	n of relation	nship		
Sign Here	of m whic	er penalties of perjury, y knowledge and belief h preparer has any kno *****	, it is true, co				ration o			than taxpayer) is b		all infor	mation	of eturn
	<b>7</b> 9	Signature of officer or ti	rustee			Date		Tıt	le		(see instr			
	•	Print/Type preparer's	name	Prepa	arer's Sig	nature		Date		Check if self- employed ▶ □	PTIN	P00190	601	
Paid	1	KURT LIPPMANN						2017-	05-12	' '				
_	oarer Only	Firm's name ► MOS	S ADAMS LLF	<b>)</b>				1			Fırm's EI	N ▶91-	01893	18
<i>-</i> 35	Jilly	Firm's address ▶ 27	07 COLBY AV	/ENUE	SUITE 8	01								
			ERETT, WA								Phone no	one no (425) 259-7227		

F	Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total
C	contributions received by the foundation before the close of any tax year (but only if they have contributed more
t	:han \$5,000).
ı	

DALE LARSON

PHYLLIS LARSON

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount			
· · · · · · · · · · · · · · · · · · ·	or substantial contributor						
a Paid during the year							
ASSEMBLY OF GODGEN'L COUNCIL 1445 BOONVILLE AVE SPRINGFIELD, MO 65802	NONE	PC	TO SUPPORT EVANGELIZING TO THE LOST AND WORSHIPPING GOD	37,175			
BRIDGES FOR PEACE INC PO BOX 410037 MELBOURNE, FL 36941	NONE	PC	TO ASSIST JEWISH IMMIGRANTS	600			
IMPACT PO BOX 40090 BELLEVUE, WA 98104	NONE	PC	TO PROVIDE INDIVIDUALS & GROUPS WITH MISSIONS OPPORTUNITIES	7,200			
MINISTRY RESOURCES INTERNATIONAL 733 7TH AVE STE 200 KIRKLAND, WA 98033	NONE	PC	IN SERVICE OF MINISTRY NEEDS	24,500			
OREGON MINISTRY NETWORK PO BOX 9178 SALEM, OR 97305	NONE	PC	DEVELOPING EFFECTIVE LEADERS AND BUILDING HEALTHY CHURCHES	2,400			
PRISONERS FOR CHRIST OUTREACH MINISTRIES PO BOX 1530 WOODINVILLE, WA 98072	NONE	PC	TO PROVIDE MISSIONARY TO PRISONERS	4,800			
RESCUE FREEDOM PO BOX 77 KIRKLAND, WA 98083	NONE	PC	TO PROVIDE A SAFE HOME AND CARE FOR SEXUAL SLAVERY VICTIMS	5,000			
SHARED HOPE INTERNATIONAL 2906 E EVERGREEN BOULEVARD/PO BOX 65337 VANCOUVER, WA 98665	NONE	PC	TO FURTHER HUMAN AND CIVIL RIGHTS	2,400			
WESTMINSTER CHAPEL 13646 NE 24TH ST BELLEVUE, WA 98005	NONE	PC	TO SUPPORT MINISTRY AND CHRISTIAN SERVICES	6,000			
BELLEVUE CHRISTIAN SCHOOL 18250 168TH PL NE WOODINVILLE, WA 98072	NONE	PC	TO SUPPORT MINISTRY AND CHRISTIAN SERVICES	100			
CEDAR PARK CHURCH 16300 112TH AVE NE BOTHELL, WA 98011	NONE	PC	TO SUPPORT MINISTRY AND CHRISTIAN SERVICES	500			
COMPASSION FIRST 16055 SW WALKER RD PMB239 BEAVERTON, OR 97006	NONE	PC	TO SUPPORT MINISTRY AND CHRISTIAN SERVICES	500			
DISCOVERY INSTITUTE 208 COLUMBIA ST SEATTLE, WA 98104	NONE	PC	TO SUPPORT COMMUNITY PROGRAMS	200			
MEDICAL TEAMS WORLDWIDE 16541 REDMOND WAY SUITE 133C REDMOND, WA 98052	NONE	PC	TO HELP PROVIDE MEDICAL SUPPLIES TO THOSE IN NEED WORLDWIDE	100			
THINK SMALL PO BOX 40090 BELLEVUE, WA 98104	NONE	PC	TO PROVIDE INDIVIDUALS & GROUPS WITH MISSIONS	1,600			

Total . 3a OPPORTUNITIES

96,575

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Foundation Recipient If recipient is an individual, Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year WORLD CONCERN PO BOX 33000 NONE PC TO SUPPORT MINISTRY AND 2,500 SEATTLE, WA 98133 CHRISTIAN SERVICES

	1			
AMERICAN FRIENDS OF TYNDALE HOUSE PO BOX 1062 WHEATON, IL 60187	NONE	PC	TO SUPPORT MINISTRY AND CHRISTIAN SERVICES	1,000
4				

HOUSE PO BOX 1062 WHEATON, IL 60187	CHRISTIAN SERVICES	
Total	 	96,575

3а

efile GRAPHIC print - DO NOT PROCESS   As Filed Data - DLN: 93491135043537  TY 2016 Accounting Fees Schedule					
Name: THE LARSON FAMILY CHARITABLE FOUNDATION EIN: 91-1875867					
Category	Amo	unt	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

ACCOUNTING FEES 5,410 2,705

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491135043537
TY 2016 Investments Corporat	e Bonds Sche	dule

Name: THE LARSON FAMILY CHARITABLE FOUNDATION

**EIN:** 91-1875867

Name of Bond	End of Year Book Value	End of Year Fair Market Value
500/450 SHS INGERSOLL RAND NOTES	436,729	492,348

efile GRAPHIC print - DO NOT PROCES	SS As Filed Data	-	DLI	N: 93491135043537
TY 2016 Legal Fees Schedule				
_				
Name: THE LARSON FAMILY CHARITABLE FOUNDATION EIN: 91-1875867				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	260	0		260

Description

efile GRAPHIC print - DO NOT PROCESS

Beginning of Year -

**Book Value** 

Name: THE LARSON FAMILY CHARITABLE FOUNDATION

Other	Assets	Schedule

LIBERTY CAPITAL BRIDGE, LLC

As Filed Data -

26,328

Value

DLN: 93491135043537

End of Year - Book

0

End of Year - Fair

Market Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491135043537		
TY 2016 Other Expenses Schedule						
Name:	THE LARSON FA	AMILY CHARITABL	E FOUNDATION			
EIN:	91-1875867					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
STATE FILING FEES	35	0		35		

Description

efile GRAPHIC print - DO NOT PROCESS

Name: THE LARSON FAMILY CHARITABLE FOUNDATION

Revenue And

**Expenses Per Books** 

Other	Income	Schedule
Other	THEOTHE	Jeneauc

LIBERTY CAPITAL BRIDGE, LLC

**EIN:** 91-1875867

As Filed Data -

-47

Net Investment

Income

-47

**Adjusted Net Income** 

DLN: 93491135043537

-47

efile GRAPHIC print - DO NOT PROCES	S As Filed Data	As Filed Data - DLN: 93491135043537			
TY 2016 Other Professional Fees Schedule					
Name: THE LARSON FAMILY CHARITABLE FOUNDATION					
<b>EIN:</b> 91-1875867					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	

INVESTMENT FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491135043537	
TY 2016 Taxes Schedule					
Name	: THE LARSON	N FAMILY CHARITA	ABLE FOUNDATION	J	
EIN	: 91-1875867				
Catagonii	Amount	Not Investment	Adiusted Not	Dishursoments	
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
IRS EXCISE TAX	66	0		0	

efile GRAPHIC print -	OO NOT PROCESS As Filed Data -			DLN: 93491135043537	
Schedule B (Form 990, 990-EZ,	Sched	Schedule of Contributors		OMB No 1545-0047	
or 990-PF)  Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a> .			2016	
Name of the organizat THE LARSON FAMILY CH			Employer i	dentification number	
Organization type (ch	eck one)		91-1875867	<u> </u>	
	,				
Filers of:	Section:				
Form 990 or 990-EZ	501(c)( ) (enter number) organization				
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation				
	☐ 527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
	ration filing Form 990, 990-EZ, or 990- or property) from any one contributor C				
Special Rules					
under sections received from a	tion described in section 501(c)(3) filin 509(a)(1) and 170(b)(1)(A)(vi), that che ny one contributor, during the year, tot ne 1h, or (ii) Form 990-EZ, line 1 Com	ecked Schedule A (Form 990 or al contributions of the greater	or 990-EZ), Part II, line 13,	, 16a, or 16b, and that	
during the year,	tion described in section 501(c)(7), (8) total contributions of more than \$1,00 the prevention of cruelty to children or	0 <i>exclusively</i> for religious, cha	ritable, scientific, literary, o		
during the year, If this box is che purpose Do no	tion described in section 501(c)(7), (8) contributions exclusively for religious, ecked, enter here the total contributions to complete any of the parts unless the able, etc., contributions totaling \$5,000	charitable, etc., purposes, but s that were received during the <b>General Rule</b> applies to this c	t no such contributions tota e year for an <i>exclusively</i> re organization because it red	aled more than \$1,000 eligious, charitable, etc, eived <i>nonexclusively</i>	
990-EZ, or 990-PF), bu	on that is not covered by the General F t it <b>must</b> answer "No" on Part IV, line 2 Form 990PF, Part I, line 2, to certify tha	2, of its Form 990, or check the	e box on line H of its		
For Paperwork Reduction for Form 990, 990-EZ, or 9	Act Notice, see the Instructions 90-PF	Cat No 30613X	Schedule B (Form 990	), 990-EZ, or 990-PF) (2016)	

Schedule B (Forn	n 990, 990-EZ, or 990-PF) (2016)		Page 2
Name of organiz THE LARSON FAMI	ation LY CHARITABLE FOUNDATION	Employer identification 91-1875867	number
Part I	Contributors (see instructions) Use duplicate copies of Part I if add	itional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DALE LARSON  14224 168TH AVE NE  WOODINVILLE, WA 98072	<u>\$ 57,326</u>	Person  Payroll  Noncash  (Complete Part II for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	contributions )  (d)  Type of contribution
	Name, address, and ZIP + 4	\$	Person Payroll Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		<u>\$</u>	Person  Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		<u>\$</u>	Person  Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		<u>\$</u>	Person  Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

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