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### **Return of Private Foundation**

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

OMB No 1545-0052 2016

Department of the Treasury Internal Revenue Service

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▶ 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. 2016, and ending For calendar year 2016 or tax year beginning January 1 December 31 A Employer identification number Name of foundation 91-2083265 The Odell Foundation c/o Jack Odell Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 425-334-3574 7510 Foster Slough Road City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ► Snohomish, WA 98290 Initial return of a former public charity Initial return G Check all that apply: D 1. Foreign organizations, check here Amended return Final return 2. Foreign organizations meeting the 85% test Name change Address change check here and attach computation ▶[\_] E If private foundation status was terminated under H Check type of organization: Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here ▶ 🔲 Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation Fair market value of all assets at J Accounting method: ☐ Cash ☑ Accrual If the foundation is in a 60-month termination end of year (from Part II, col. (c), Other (specify) under section 507(b)(1)(B), check here line 16) ▶ \$ (Part I, column (d) must be on cash basis ) 55,389.88 Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per purposes (cash basis only) ıncome income books the amounts in column (a) (see instructions).) Contributions, gifts, grants, etc., received (attach schedule) di. 53,600.00 2 Check ► ☐ if the foundation is **not** required to attach Sch. B 3 Interest on savings and temporary cash investments **(:)** 0.00 0.00 4 Dividends and interest from securities . 0.00 76 '39 '8' 0.00 0.00 5a Gross rents . . . . SCANNIN WAY 0.00 0.00 Net rental income or (loss) 0.00 Net gain or (loss) from sale of assets not on line 10 0.00 Revenue Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 0.00 Net short-term capital gain . . . Income modifications Gross sales less returns and allowances Less: Cost of goods sold . . . 0.00 Gross profit or (loss) (attach schedule) 0.00 11 Other income (attach schedule) . . 0.00 0.00 0.00 12 Total. Add lines 1 through 11 . 53,600.00 0.00 0.00 Compensation of officers, directors, trustees, etc. 13 0.00 0.00 0.00 0.00 Operating and Administrative Expenses 14 Other employee salaries and wages . 0.00 0.00 0.00 0.00 15 Pension plans, employee benefits 0.00 0.00 0.00 0.00 Legal fees (attach schedule) 16a 0.00 0.00 0.00 0.00 Accounting fees (attach-schedule) 0.00 0.00 0.00 0.00 Other professional fees (attach sched 0.00 0.00 0.00 0.00 17 0.00 0.00 0.00 0.00 18 0.00 0.00 0.00 0.00 Depreciation (attach schedule) and depletion 19 0.00 0.00 0.00 1000 20 Occupancy . 0.00 0.00 0.00 0.00 21 Travel, conferences, and meetings 0.00 0.00 0.00 0.00 22 Printing and publications 0.00 0.00 0.00 0.00 23 Other expenses (attach schedule) 10.00 0.00 0.00 10.00 Total operating and administrative expenses. Add lines 13 through 23 . . . . 10,00 0.00 10.00 25 Contributions, gifts, grants paid . . . . . . 44,995.06 44,995.06 26 Total expenses and disbursements. Add lines 24 and 25 45,005.06 0.00 45,005.06 Subtract line 26 from line 12: 型金 27 Excess of revenue over expenses and disbursements 8,594,94 Net investment income (if negative, enter -0-) . Adjusted net income (if negative, enter -0-) 13.33 

		Attached schedules and amounts in the description column	Beginning of year	End o	of year
P	art'll	Balance Sheets should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	11,617.86	2,336.97	2,336.97
	2	Savings and temporary cash investments	4040.28	52,987.52	52,987.52
	3	Accounts receivable ▶ 0.00		( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	
	ł	Less: allowance for doubtful accounts ▶ 0.00	0.00	0.00	0.00
	4	Pledges receivable ▶ 0.00	34. 5 2000		沙兰山流海
	ŀ	Less: allowance for doubtful accounts ▶ 0.00	0.00	0.00	0.00
	5	Grants receivable	0.00	0.00	0.00
	6	Receivables due from officers, directors, trustees, and other			
	1	disqualified persons (attach schedule) (see instructions)	0.00	0.00	0.00
	7	Other notes and loans receivable (attach schedule) ▶ 0.00	DE VENTAL AND A	MEATERLATE	ce : 35 44 8 8 11 A
	1	Less: allowance for doubtful accounts ▶ 0.00	0.00	0.00	0.00
S	8	Inventories for sale or use	65.39	65.39	65.39
Assets	9	Prepaid expenses and deferred charges	0.00	0.00	0.00
As	10a	Investments – U.S. and state government obligations (attach schedule)	0.00	0.00	0.00
_	b	Investments—corporate stock (attach schedule)	29,282.50	0.00	0.00
	С	Investments—corporate bonds (attach schedule)	0.00	0.00	0.00
	11	Investments—land, buildings, and equipment: basis ▶ 0.00		(1)	
	'	Less: accumulated depreciation (attach schedule) ▶ 0.00		ىشىكىسىدى قىلىدىنى ئىنلانلالىدى. 0.00	المتأور والدائل المحالات بالاستان المسائلات والمناه 0.00
	12	Investments—mortgage loans	0.00	0.00	0.00
	13	Investments—other (attach schedule)	0.00	0.00	0.00
	14	Land, buildings, and equipment: basis ► 0.00			
	1	Less; accumulated depreciation (attach schedule) ▶ 0.00	0.00 كا أند الأمالية الأناسية الأسماد المالية الأمالية الأمالية الأمالية الأمالية الأمالية الأمالية الأمالية ا المالية الأمالية ال	0.00 at 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ئىر ئىلانىگەرنى ئەرىكەنىڭ ئىسىنىگا قىساس 0.00
	15	Other assets (describe ► none	0.00	0.00	0.00
	16	Total assets (to be completed by all filers-see the	9.99	0.00	0.00
	1	instructions. Also, see page 1, item I)	45,006.03	55,389.88	55,389.88
	17	Accounts payable and accrued expenses	0.00	0.00	
۰,۵	18	Grants payable	0.00	0.00	
ĕ	19	Deferred revenue	0.00	0.00	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	0.00	0.00	
ab	21	Mortgages and other notes payable (attach schedule)	0.00	0.00	
Ï	22	Other liabilities (describe ▶ none )	0.00	0.00	
	23	Total liabilities (add lines 17 through 22)	0.00	0.00	
		Foundations that follow SFAS 117, check here ▶ □		9.00	
Balances		and complete lines 24 through 26 and lines 30 and 31.			
2	24	Unrestricted	0.00	0.00	
ale	25	Temporarily restricted	0.00	0.00	
d B	26	Permanently restricted	0.00	0.00	
		Foundations that do not follow SFAS 117, check here ▶ ☑			
Net Assets or Fun	 	and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	0.00	0.00	
ts	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.00	0.00	
SSE	29	Retained earnings, accumulated income, endowment, or other funds	45,006.03	55,389.88	
۲	30	Total net assets or fund balances (see instructions)	45,006.03	55,389.88	
ē	31	Total liabilities and net assets/fund balances (see			
-		instructions)	45,006.03	55,389.88	UBLER OF WAR
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1	Total	net assets or fund balances at beginning of year-Part II, colur	mn (a), line 30 (mus	t agree with	<del></del>
	end-	of-year figure reported on prior year's return)		1	45,006.03
2	Enter	r amount from Part I, line 27a			8,594.94
3		r increases not included in line 2 (itemize) ▶ securities value gain		·	1788.91
4		lines 1, 2, and 3			55,389.88
5	D	and an experience of the first of the second		<u>-</u>	0.00
_6	Total	eases not included in line 2 (itemize)  net assets or fund balances at end of year (line 4 minus line 5)—F	art II, column (b), lir	ne 30 <b>6</b>	55,389.88

Part	IV Capital Gains an	d Losses for Tax on Investm	ent Income				
		he kind(s) of property sold (e.g., real estate, use, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation		acquired day, yr)	(d) Date sold (mo , day, yr )
<u>1a</u>	400 shares of Intel securiti	es		D	12/23	3/2015	4/8/2016
<u>b</u>	454 shares of Intel securite	es		D	12/2	23/15	9/9/2016
c							<u> </u>
<u>d</u>							
е				<u> </u>			<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale			n or (loss) (f) minus (g)
<u>a</u>	12454.02	n/a		13,912.00			-1,457.98
<u> </u>	16,038.18	n/a		15,651.00			387.18
<u>c</u>	<del></del>						
<u>d</u>							
е	Complete only for assets sho	ll owing gain in column (h) and owned b	y the foundation	on 12/31/69			
	(i) F.M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	s of col (i) (i), if any		(k), but no	l. (h) gain minus t less than -0-) <b>or</b> from col (h))
a	n/a	n/a		n/a			-1,457.98
b	n/a	n/a		n/a		-	387.18
С							
<u>d</u>							
е			<del> </del>				
2	Capital gain net income of		also enter in Pai enter -0- in Par		2		-1070.80
3	If gain, also enter in Part	in or (loss) as defined in sections t I, line 8, column (c) (see instruc	tions). If (loss)	, enter -0- in )			.070.00
		· · · · · · · · · · · · · · · · · · ·			3		-1070.80
Part		der Section 4940(e) for Reductivate foundations subject to the s	<del></del>				
Was ti	ion 4940(d)(2) applies, leav he foundation liable for the s," the foundation does no	e this part blank. section 4942 tax on the distribute t qualify under section 4940(e). Do	able amount of o not complete	any year in the b this part.	ase peri	od?	☐ Yes ☑ No
1	Enter the appropriate am	ount in each column for each year	r; see the instru	ctions before ma	king 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	sets		(d) tribution ratio divided by col (c))
	2015	45	,005	24	,689		1.82
	2014	60	,917	44	,389		1.37
	2013	13	,816	44	,389		0.31
_	2012	12,	,275	25	,674		0.48
	2011	11,	128	25	,674		0.43
2	Total of line 1, column (d)				. 2		4,41
3		for the 5-year base period—divid dation has been in existence if les		ne 2 by 5, or by	l.		0.88
4	Enter the net value of nor	ncharitable-use assets for 2016 fro	om Part X, line	5	. 4		24,689
5	Multiply line 4 by line 3				. 5		21,726
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)			. 6	-	0
7	Add lines 5 and 6				. 7	<u> </u>	21,726
8	Enter qualifying distribution If line 8 is equal to or great	ons from Part XII, line 4 ater than line 7, check the box in	 Part VI. line 1h		. 8	using a 1	45,005.06 % tax rate. See the
	Part VI instructions.		71, 1110 10	, and Joinpiete ti	iai pari	conig a i	, un iaic. Oce ille

Part,		nstructi	ons)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.	, *	-
	Date of ruling or determination letter: n/a (attach copy of letter if necessary—see instructions)		4
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		0 00
	here ► 🗹 and enter 1% of Part I, line 27b		
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0 00
3	Add lines 1 and 2		0 00
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0 00
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		0 00
6	Credits/Payments:		
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 0 00	- 125,	
b	Exempt foreign organizations—tax withheld at source 6b 0 00		
C	Tax paid with application for extension of time to file (Form 8868) . 6c 0 00		
_d	Backup withholding erroneously withheld	·	-1-3-1
7	Total credits and payments. Add lines 6a through 6d		0 00
8	Enter any penalty for underpayment of estimated tax. Check here  form 2220 is attached  Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0 00
9	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10		0 00
10 11	Enter the amount of line 10 to be: Credited to 2017 estimated tax   Refunded   11		0 00
	VII-A Statements Regarding Activities		0 00
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Ye	s No
•	participate or intervene in any political campaign?	1a	1
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see		
	Instructions for the definition)?	1b	1
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	\$330	23
	published or distributed by the foundation in connection with the activities.		
С	Did the foundation file Form 1120-POL for this year?	1c	1
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		
	(1) On the foundation. $\triangleright$ \$ 0.00 (2) On foundation managers. $\triangleright$ \$ 0.00		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	1. 3/4"	
	on foundation managers ▶ \$	1	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	<b>/</b>
_	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   4b	<b>√</b>
ь 5	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	5	+,-
3	If "Yes," attach the statement required by General Instruction T.	3	alm va
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 /	d
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 7	+-
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶	300	( V = )
	Washington State		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	ŀ .	1 54
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	, 15, 1	
	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 1	<u>'                                    </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		
	names and addresses	10 1	

Part	/II-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	neaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		/
12	Old 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	_✓	<u>L</u>
	Vebsite address ► none			
14	The books are in care of ▶ Jack Odell Telephone no. ▶ 42	5-334-	3574	
	Located at > 7510 Foster Slough Road, Shohomish, WA 217+4 >	9829		
15	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041—Check here.		•	▶ ⊔
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	Richten N	<b> √</b>
	see the instructions for exceptions and himg requirements for FinCEN Form 114. If fes, letter the hame of the foreign country ▶			
			San Walig	n 1 , 2 1 , 5
Part	II-B Statements Regarding Activities for Which Form 4720 May Be Required	TSE ATT	Vaa	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	13134	Yes	No
1a	Ouring the year did the foundation (either directly or indirectly):	5 7 4		
	1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes Volume No 2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	Secretary.	News 1866	
	disqualified person?		700 V	
	3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	23.67.14		
	4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1		33
	5) Transfer any income or assets to a disqualified person (or make any of either available for	3 30	3	
	the benefit or use of a disqualified person)?			
	6) Agree to pay money or property to a government official? (Exception. Check "No" if the	'		7.3
	foundation agreed to make a grant to or to employ the official for a period after	13	1	<b>1</b>
	termination of government service, if terminating within 90 days.)			<b>4</b> (5)
b	f any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		. (c).	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		1
	Organizations relying on a current notice regarding disaster assistance check here	35,3	1.5	18.30
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	vere not corrected before the first day of the tax year beginning in 2016?	1c		1
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1 1 1	358	
	pperating foundation defined in section 4942(j)(3) or 4942(j)(5)):		#3 w a	
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and			
	Se, Part XIII) for tax year(s) beginning before 2016?	1650	*	
	f "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)	مر د مشاهري		
	relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	مُعَادِ مُعَادِ اللهِ	12.1	1
	Ill years listed, answer "No" and attach statement—see instructions.)	2b	%	88288880A
С	f the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
3a	<ul> <li>20 , 20 , 20 , 20</li> <li>Did the foundation hold more than a 2% direct or indirect interest in any business enterprise</li> </ul>			
Ja	at any time during the year?	3	25	
	, , ,			1 2.5
b	f "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or		أ فريدا	
	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 beginned; or (2) the lapse of		N. San	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of he 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	oundation had excess business holdings in 2016.)	2h		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b 4a	<del> </del>	1
ъ b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a	人特色	4.5.23
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	Larried L	
		, ,,,,	ı	1 7

D۵	_	_	6
- 4	u	u	٠

Part	VII-B	Statements Regarding Activities	s for V	Vhich Form	4720	May Be R	equire	d (contii	nued)_			
-5a	_	the year did the foundation pay or incur a	•			· —			_			
		ry on propaganda, or otherwise attempt t						∐ Yes	✓ No	.		İ
		ence the outcome of any specific publication of the contraction of the		-		os); or to ca	•	☐ Yes	√ No		Ţ, Î	,
		vide a grant to an individual for travel, stu						☐ Yes	V No	1 '		į
		vide a grant to an organization other than	•					_				
								☐ Yes	✓ No			1
		vide for any purpose other than religious										. ,
b		poses, or for the prevention of cruelty to on nswer is "Yes" to 5a(1)–(5), did <b>any</b> of the						Yes	No ∑ Nodin	1	-	*
D		ions section 53.4945 or in a current notice								5b		
	_	ations relying on a current notice regardi	_	=		=			▶□	1	7	<del>۱۱ زد ا</del>
c		nswer is "Yes" to question 5a(4), does t									, ',*	* .
		e it maintained expenditure responsibility		_				☐ Yes	✓ No	~ }	37.00°C	je.
e.	•	" attach the statement required by Regulation foundation, during the year, receive any										
6a		rsonal benefit contract?	iunus,	unectly of in	unecuy	, to pay pre	eriiui is	☐ Yes	✓ No	5 "		
b	•	foundation, during the year, pay premiur	ns, dire	ectly or indire	ctly, on	a personal	benefi			6b	ا 'دسکلامد د	`
		to 6b, file Form 8870.		•	•	•				1111	¥,	250 d
		me during the tax year, was the foundation						Yes	☑ No	التشامه بسا		
	VIII	' did the foundation receive any proceed Information About Officers, Direct								7b		
ган	VIII	and Contractors	turs,	riusiees, r	ounua	LIOII IVIAII	ayers,	migniy r	alu E	прю	ees,	
1	List all	officers, directors, trustees, foundation	n mana	agers and th	eir con	npensation	ı (see i	nstructio	ns).			
		(a) Name and address		e, and average irs per week		mpensation not paid,		Contribution yee benefit		(e) Expe	nse acc	count,
				ted to position		iter -0-)		erred compe		otner	allowan	ces ———
Jack O		ugh Road, Snohomish, WA 98290	Drooid	ent/Sec 1 Hr	ļ	0.00			0.00			0.00
Judy C		ugii Road, Shohomish, WA 30230	riesiu	elivsec i ni		0.00			0.00			0.00
		ugh Road, Snohomish, WA 98290	V. Pres	s/Treas 1 Hr		0.00			0.00			0.00
Julia U	tt											_
		nohomish, WA 98290	Directo	or 1 Hr		0.00			0.00	-		0.00
Joel O		St., Kenmore, WA 98028	Directo	or 1 Hr		0.00			0.00			0.00
2	Compe	nsation of five highest-paid employee			se incl		ne 1—:	see instr		s). If no	one, e	enter
	"NONE											
			_	(b) Title, and a	verage			(d) Contribu		(e) Expe	nee acc	ount
(	a) Name a	nd address of each employee paid more than \$50,00	00	hours per v devoted to p		(c) Comper	nsation	plans and c	deferred		allowan	
none				<del>                                     </del>								
				<del> </del>								
											-	
Total :	number :	of other employees paid over \$50,000 .		L		<u>L</u>						
Totall	iumper (	or other employees paid over \$50,000 .	<i>.</i> .	<u>· · · · · · · · · · · · · · · · · · · </u>	<del></del> -	<del></del>	· ·	<u>· · · · · </u>	.▶	om 99	none	(2016)
										Jun 33	0-1-1-	(2010)

Pa	t.VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	ployees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONI	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
none		
- <b>-</b>		
		<del></del>
Tota	Il number of others receiving over \$50,000 for professional services	none
		none
Pa	t IX-A Summary of Direct Charitable Activities	
	st the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of	F
OI	ganizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	Sonrise Christian Center	
	11625 Airport Road, Everett, WA 98204	
		29,720.0
2	Ravi Zacharias International Ministries	
	4725 Peachtree Corners Circle - Suite 250	
		7049.9
3	Truth For Life	
	PO Box 298000, Cleveland, OH 44139	
	Famile Deliau Institute	1000.0
4	Famile Policy Institute 16108 Ash Way, Suite 113, Lynnwood, WA 98087	
	10 100 ASII Way, Suite 113, Lyiliwoou, WA 96007	1000.0
Pa	t IX-B Summary of Program-Related Investments (see instructions)	1000.0
	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	none	
		0.0
2	none	
		0.0
Al	other program-related investments. See instructions	
3	none	
		0.0
Tota	I. Add lines 1 through 3	0.00
	The state of the s	Form <b>990-PF</b> (2016

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign toun	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out chantable, etc., purposes:		
_	· ·	10	20.00
a	Average monthly fair market value of securities	1a	20,000
b	Fair market value of all other assets (see instructions)	1c	5,000
C	Total (add lines 1a, b, and c)	1d	6!
d e	Reduction claimed for blockage or other factors reported on lines 1a and		25,06
C	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.00
3	Subtract line 2 from line 1d	3	0.00
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	-	25,065
7	instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	376
5 6	Minimum investment return. Enter 5% of line 5	6	24,689
Part		1 - 1	1,234
Fait	and certain foreign organizations check here ► □ and do not complete this part.)	ounuan	JIIS
1		1	
ւ 2a		1 370	1,234
za b		<b>-</b> 100 11	
C	Income tax for 2016. (This does not include the tax from Part VI.)	2c	0.00
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.00
4	Recoveries of amounts treated as qualifying distributions	4	1,234
5	Add lines 3 and 4	5	0.00
6	Deduction from distributable amount (see instructions)	6	1,234
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	<del>-</del>	0.00
•	line 1	7	4.00
			1,234
Part	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes;		
· a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	45.005.00
b	Program-related investments—total from Part IX-B	1b	45,005.06
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	10	0.00
_	purposes	2	0.00
3	Amounts set aside for specific charitable projects that satisfy the:	2	0.00
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	0.00
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	0.00
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	<del>-</del>	45,005.06
•	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.00
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		45,005.06
	qualifies for the section 4940(e) reduction of tax in those years.	y wnethe	i the ioundation
	,		000 DE (0040)

Par	Undistributed Income (see instruction	tions)		· · · · · · · · · · · · · · · · · · ·	- 3-
1	Distributable amount for 2016 from Part XI	(a)	(b) Years pnor to 2015	(c) 2015	(d) 2016
_					1,23
2	Undistributed income, if any, as of the end of 2016:				
a b				2,219	
			0.00		
3 a	Excess distributions carryover, if any, to 2016: From 2011				
a b	F 2010	<del></del>		,	,
C		<del> </del>		' .	* , .
d	5 004.4	<b>⊣</b> '			. 4
-	From 2014 0.0	<b>→</b> '''' '			
f	Total of lines 3a through e			•	, , , ,
4	Qualifying distributions for 2016 from Part XII,	0.00	3	-	
-	line 4: ► \$45,005.06				
а	Applied to 2015, but not more than line 2a				
b	Applied to undistributed income of prior years			0.00	11. 25
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election		0.00		
	required—see instructions)	0.00			
d	Applied to 2016 distributable amount	0.00			<u> </u>
e	Remaining amount distributed out of corpus	0.00			0.00
5	Excess distributions carryover applied to 2016	0.00			X-21-40-1
	(If an amount appears in column (d), the same	A. 2000 Kinds	3 10 3 2 10 10 10 10 10 10 10 10 10 10 10 10 10		0.00
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
a	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	0.00			
b	Prior years' undistributed income. Subtract	26 (A) 28 (A) 18 (A)			
	line 4b from line 2b		0.00		
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has		ļ		
	been issued, or on which the section 4942(a) tax has been previously assessed		ļ		
d	Subtract line 6c from line 6b. Taxable		0.00		
_	amount—see instructions				V V 200 1-4
е	Undistributed income for 2015. Subtract line		0.00		
	4a from line 2a. Taxable amount—see			1.	
	instructions			Ž.	
f	Undistributed income for 2016. Subtract lines		194 2 2 2 2	0.00	
	4d and 5 from line 1. This amount must be				
	distributed in 2017				
7	Amounts treated as distributions out of corpus	* * * * * * * * * * * * * * * * * * * *			0.00
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be	j			
_	required—see instructions)	0.00			AND THE
8	Excess distributions carryover from 2011 not	2	3. 3 / 1. 3 J. K. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
_	applied on line 5 or line 7 (see instructions) .	0.00			
9	Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a		1		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
	Subtract lines 7 and 8 from line 6a	0.00			
	Evene from 0010		1 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	2 12 1 1	3 3 3 3 3 3
	Evenes from 0010				1,5% 21 1 22
	Tuesday (1994)			:	* *
	Tuesday (1994)				
	Evenes from 2010				
_	Excess from 2016 0.00				

Part.	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A. guestion 9	)	
1a	If the foundation has received a ruling				<u></u>	
	foundation, and the ruling is effective for	<b>-</b> '				
b	Check box to indicate whether the four		•	i i	ection  4942(j)(	3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		<del> </del>
	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	0	1613	0	754	2367
ь	85% of line 2a	0	1371	0	640	2011
c	Qualifying distributions from Part XII,				040	2011
•	line 4 for each year listed	45,005	60,917	15,403	13.824	135,149
d	Amounts included in line 2c not used directly	43,003	00,317	13,403	13,024	133,143
_	for active conduct of exempt activities	o	o	o	o	0
е	Qualifying distributions made directly			- 0		
Ŭ	for active conduct of exempt activities.					
	Subtract line 2d from line 2c	45,005	60,917	15,403	13,824	135,149
3	Complete 3a, b, or c for the	40,000	00,517	10,405	15,624	100,140
_	alternative test relied upon:					
а	"Assets" alternative test - enter:					
_	(1) Value of all assets	55,390	45,006	78,284	50,692	229,372
	(2) Value of assets qualifying under	00,000	40,000	10,204		
	section 4942(j)(3)(B)(i)	na	na	na	na	na
b	"Endowment" alternative test-enter 2/3	110				
	of minimum investment return shown in Part X, line 6 for each year listed	823	1479	1545	1498	5345
С	"Support" alternative test—enter.	020	1473	1040		3373
·	''					
	(1) Total support other than gross investment income (interest,	ı				
	dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)	53,600	31,242	29,354	28,778	142,974
	(2) Support from general public	30,000	31,242	20,004	20,770	142,374
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)	0	ol	0	آه ا	0
	(3) Largest amount of support from					
	an exempt organization	o	اه	o	o	0
	(4) Gross investment income	0		0	0	<u>0</u>
Part		n (Complete th	is part only if th	e foundation h		
	any time during the year-				<b>,</b>	
1	Information Regarding Foundation		<u> </u>			
а	List any managers of the foundation v		ted more than 2%	of the total contr	butions received	by the foundation
	before the close of any tax year (but o					•
Jack O	dell and Judy Odell					
	List any managers of the foundation	who own 10% or	more of the stoc	k of a corporation	(or an equally lar	ge portion of the
	ownership of a partnership or other er					• .
Jack O	dell and Judy Odell					
2	Information Regarding Contribution	, Grant, Gift, Loai	n, Scholarship, et	c., Programs:		
	Check here ► ✓ If the foundation	only makes contri	butions to presel	ected charitable of	organizations and	does not accept
	unsolicited requests for funds. If the fe	oundation makes	gifts, grants, etc. (	see instructions) t	o individuals or or	ganızations under
	other conditions, complete items 2a, b					
а	The name, address, and telephone nu	mber or e-mail ad	dress of the perso	n to whom applica	ations should be a	ddressed:
n/a		<del></del>				
b	The form in which applications should	be submitted and	information and r	naterials they sho	uld include:	
n/.a			<del></del>			
C	Any submission deadlines:					
n/a	<u></u>		<u> </u>			
ď	Any restrictions or limitations on aw	ards, such as by	geographical are	eas, charitable fie	elds, kinds of inst	itutions, or other
	factors:					
n/a		<del></del>				

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During t			ture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
Sonrise Christian Center, Everett, WA	n/a	Rel	Charitable	29,720
Ravi Zacharias ministries, 725 Peachtree Corners Circle Suite 250, Norcross, GA 30092	n/a	Rel	Charitable	7048
American Center for Law & Justice, PO Box 90555, Washington DC 20090	n/a	Rei	Charitable	1000
Truth for Life - Alistair Begg, PO Box 398000, Cleveland, OH 44139	n/a	Rel	Charitable	1000
Family Policy Institute of Washington, 16108 Ash Way, Suite 113, Lynnwood, WA 98087	n/a	Rel	Charitable	1000
Zion's Hope Ministries, PO Box 783369, Winter Garden, FL 34778	n/a	Rel	Charitable	100
CTA, PO Box 1205, 1625 Larkin Williams Rd, Fenton, MO 63026	n/a	Rel	Charitable	47
Gospel Tract Society, Inc, PO Box 1118, Independence, MO 64051	n/a	Rei	Charitable	330
Goodwill, 228 SW Everett Mall Way, Everett, WA 98204	n/a	public	Charitable	240
Costco 10200 19th Ave SE, Everett, WA 98208	n/a	public	Charitable	51
The Reapers, PO Box 867505, Plano, TX 75086	n/a	public	Charitable	144
Staples, 4920 Evergreen Way So, Everett, WA 98203	n/a	public	Charitable	37
Sun Designe, 1100 Southford Rd., Middlebury, CT 06762	n/a	public	Charitable	318
American Reading Glasses, 20133 NE 16 PI, North Miami, FL 33179	n/a	public	Charitable	233
International Prison Ministry Inc, PO Box 2868, Costa Mesa, CA 92628	n/a	public	Charitable	231
YWAM, PO Box 55787, Seattle, WA 98155	n/a	Rel	Charitable	117
b Approved for future payment	<u></u>	<del></del>	► 3a	41,516
<b>b</b> Approved for fatale payment				
Sonrise Christian Center, Everett, WA	n/a	Rel	Charitable	30,000
Snohomish County Corrections, Everett, WA	n/a	public	Charitable	2,500
Antioch Adoption, Redmond, WA	n/a	Rel	Charitable	2,500
Ravi Zacharias Ministries, Norcross, GA 30092	n/a	Rel	Charitable	5,000
American Center for Law & Justice, PO Box 90555, Washington DC 20090	n/a	Rel	Charitable	5,000
Family Policy Institute of Washington, 16108 Ash Way, Suite 113, Lynnwood, WA 98087	n/a	Rei	Charitable	2,500
Voice of the Martyrs, PO Box 443, Bartlesville, OK 74006	n/a	Rel	Charitable	2,500
Total	<u> </u>		<b>&gt;</b> 3b	50,000

Pai	rt XVI-A Analysis of Income-Produc	cing Activities				
nte	er gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by sect	ion 512, 513, or 514	(e)
		(a)	(b)	(c)	(d)	Related or exempt
		Business code		Exclusion code	Amount	function income (See instructions.)
1	Program service revenue:		,			Cocc instructions.
	a <sub>na</sub>	na	0	na	0	0
	b					
	C					
	d					
	е		<del></del>	<b></b>		
	•			<del></del>		
	· <del></del>		<del> </del>	<del> </del>		
	g Fees and contracts from government ag	<del></del>	<u> </u>			
2	•	· · na	0	na	0	0
3	Interest on savings and temporary cash invest	ments <u>na</u>	0	na	0	0
4	Dividends and interest from securities	<u>na</u>	o		o	<u> </u>
5	Net rental income or (loss) from real estate:	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	TOPME	3.62 45.1		CMC3057-25"
	a Debt-financed property		0	na	0	0
	<b>b</b> Not debt-financed property		0		0	0
6	Net rental income or (loss) from personal pro		0		0	0
		· ·	<del> </del>	<del> </del>		<del></del>
7		<del></del>	0		0	0
8	Gain or (loss) from sales of assets other than inv	· · · · · · · · · · · · · · · · · · ·	0		0	0
9	Net income or (loss) from special events .		0	na na	0	0
10	Gross profit or (loss) from sales of inventory	· · na	0	na	0	0
11	Other revenue: a none			L		
	b	\	l			
	C					
	d					
	e			-		
		96.00 (4.00 2.00	<del> </del>	S. ** * ** ** *** ***		
12	Subtotal, Add columns (b), (d), and (e)		. n	IN KW W. W.	Λ	! n
	Subtotal. Add columns (b), (d), and (e) Total Add line 12 columns (b), (d), and (e)			N. W. W. Y.	13	<del></del>
13	Total. Add line 12, columns (b), (d), and (e)			<u> </u>	13	0
<b>13</b> See	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal	culations.)				<del></del>
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal rt XVI-B Relationship of Activities to	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal rt XVI-B Relationship of Activities to	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal t XVI-B Relationship of Activities to e No.  Explain below how each activity for accomplishment of the foundation's exception.	culations.)  the Accomplishm	ent of Exemp	t Purposes	13	0

		<b>.</b>											<u> </u>
Part	XVII	<ul> <li>Informatio</li> <li>Exempt Or</li> </ul>			sfers To an	d Transacti	ons and	Relationsh	ips Wi	th Noncha	ritab	le	
1	Did t	the organization of			ngage in any	of the follows	ng with ar	ny other organ	nization	described	"	Yes	No
		ection 501(c) of th											
	orga	nizations?									,,	_	
а	Tran	sfers from the rep	porting foun	dation to	a noncharital	ole exempt or	ganizatio	n of:					^
	(1) (	Cash									1a(1)		1
	(2)	Other assets .									1a(2)		1
b	Othe	er transactions:											
	(1) S	Sales of assets to	a noncharit	able exe	mpt organizat	ion					1b(1)		<b>✓</b>
	(2) F	Purchases of asse	ets from a n	oncharita	ble exempt o	rganization .					1b(2)		1
	(3) F	Rental of facilities	, equipment	t, or other	rassets .						1b(3)		1
	(4) F	Reimbursement a	rrangement	s							1b(4)		1
		oans or loan gua									1b(5)	L	✓
		Performance of se			-	-					1b(6)		<b>✓</b>
C		ing of facilities, e									1c		<b>✓</b>
d		e answer to any											
		e of the goods, o											
		e in any transacti											_
(a) Line	no	(b) Amount involved	(c) Nan	ne of nonch	antable exempt o	rganization	(d) Desc	cription of transfe	ers, transa	actions, and sha	aring arr	angem	ents
n/a		n/a_	n/a				n/a						
			<u> </u>				<del> </del>						
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			ļ	<del></del>			<del> </del>						
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					<del></del>		ļ						
					<del></del> -		<del> </del>						
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							<del> </del>						
				<del></del>			<del> </del>						
		<del></del>				<del></del>	<del> </del>						
2a	Is the	e foundation dire	ctly or indi	rectiv aff	liated with, o	r related to	one or mo	re tax-exem	nt orga	nizations			
		ribed in section 5									] Yes	. [7]	Nο
b		es," complete the				, , , ,				-	_,	ت.	
		(a) Name of organ	ization		(b) Ty	oe of organization	<u> </u>	1	(c) Descr	ption of relatio	nship		
n/a					n/a			n/a					
									<del> </del>				
							<del></del>						
	Unde	er penalties of perjury, I	declare that I ha	ve examined	this return, includ	ng accompanying	schedules an	d statements, and	to the be	st of my knowled	dge and	belief, it	is true,
Sign	Corre	ect,-and complete Deck	aration of prepai	er (other tha	n taxpayer) is base	on all information	of which pre	parer has any kno	wledge	May the I	RS discu	ıss this	return
Here		Foch 7	. Olde	ll	14//	15/17 P	resident			with the p	oreparer	shown	below
	Şıgr	nature of officer of trus	stee		Date	Title	9			— (see instru	ctions)?	∐ Yes	∐NO
Paid	1 ,	Print/Type preparer	's name		Preparer's signa	ature		Date		heck I if	PTIN		
Prepa					<u> </u>					elf-employed			
Use (		Firm's name ▶							Firm's E	IN ►			
		Firm's address ▶							Phone n	10			

#### 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

**Employer identification number** Name of the organization The Odell Foundation c/o Jack Odell 91-2083265 Organization type (check 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 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

Part I	Contributors (See instructions). Use duplicate copies of	of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Jack Odell  7510 Foster Slough Road  Snohomish, WA 98290	\$50,000	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Clifton & Gaylene Bergan  2229 S. Alton Way  Denver, CO 80231	\$600	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Joe Adams-Ralph PO Box 19576 Seattle, WA 98109	\$3,000	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Employer identification number

Part II	Noncash Property (See instructions). Use duplicate copies	of Part II if additional sp	ace is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	n/a	\$ n/a	n/a
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	n/a	\$n/a	n/a
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
3	n/a	\$	n/a
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Part III

Employer identification number

		nizations completing Pa	art III, enter the tota	Complete columns (a) through (e) and all of exclusively religious, charitable, etc. ee instructions.) > \$			
	Use duplicate copies of Part III if	•					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
1	Support Christian organizations	upport Christian organizations exclusively for Chri		cash			
	(e) Transfer of gift  Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
	Jack Odell 7510 Foster Slough Road Snohomish, WA 98290		same				
(a) No. from Part i	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
2	Support SCC (jail) ministry exclusively for Bible		s & inmate material	held as cash in bank			
				•			
	(e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee						
	2220 S Alton May		former volunteer a	t SCC			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
3	Support SCC (Jail) ministry	exclusively for Bible	s & inmate material	held as cash in bank			
	(e) Transfer of gift						
	Transferee's name, addres	nship of transferor to transferee					
	Joe Adams-Ralph		friend	•			
	PO Box 19576 Seattle, WA 98109						
(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, addres		Relationship of transferor to transferee				
ļ							
				***************************************			

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

THE ODELL FOUNDATION EIN. 91-2083265 Tax Year: 2016 4/11/2017

# Schedule for 990-PF, Sec. 1, Line 1. Schedule of Contributors for 2016

Con	tributors:	Amount:
1.	Jack Odell 7510 Foster Slough Road Snohomish, WA 98290	\$50,000
2.	Clifton Bergan 2229 S Alton Way Denver, CO 80231	\$600.00
3.	Joe Adams Ralph PO Box 19576 Seattle WA 98109	\$3,000.00

THE ODELL FOUNDATION

Ref. 91-2083265

Tax Year: 2016 4/11/2017

Schedule for 990-PF, Sec. 1, Line 23.

1. Taxes/IRS \$10.00

THE ODELL FOUNDATION Ref. 91-2083265 Tax Year: 2016

4/11/2017

Schedule for 990-PF, Sec. 2, Line 10B.

1. Investment -

Intel Corp 850 shares @ \$34.45 valued at \$29,282.50

THE ODELL FOUNDATION Ref. 91-2083265 Tax Year: 2016 4/11/2017

Schedule for 990-PF, Sec. 7A, Line 8b.

1. Washington State Attorney General asked not to send in the 990-PF unless the income exceeded \$250,000.

THE ODELL FOUNDATION Ref. 91-2083265 Tax Year: 2016 4/11/2017

Schedule for 990-PF, Sec. 7A, Line 10.

1. Substantial contributors:

Jack & Judy Odell 7510 Foster Slough Road Snohomish, WA 98290

# Schedule for 990-PF, Sec. 14a.

# 1. Supplementary Information (Continued)

Recipient	Relation	Status	Purpose	Amount
CCLI, Portland, OR	n/a	Public	Charitable	124
ARM Prison Outreach, 3605 N. Main St., Joplin, MO	n/a	Public	Charitable	400
64801				
Prison Impact Ministries, PO Box 7173, Kalispell,	n/a	Rel	Charitable	150
Montana 59904				
Hope for the Heart, PO Box 7, Dallas, TX 75221	n/a	Rel	Charitable	25
Family Christian Stores, 811 SE Everett Mall Way,	n/a	public	Charitable	26
Everett, WA 98208				
St. Vincent de Paul, 6424 Broadway, Everett, WA	n/a	Rel	Charitable	7
98203				
Purehope, 2001 West Plano Parkway, Plano, TX	n/a	Rel	Charitable	60
75075				
Fabulously Frugal Thrift Store, 611 2 <sup>nd</sup> St, Snohomish,	n/a	public	Charitable	8
WA 98290				
Misc – Office supplies, etc.	-			100
Total				900