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2016

OMB No 1545-0052

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

Department of the Treasury Internal Revenue Service

Form 990-PF

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 www.irs.gov/form990pf.

Open to Public Inspection

		ndar year 2016, or tax year beginning 01-01-20	16 , aı	nd er	nding 12-31-		
SA	TYA AN	ındation D RAO REMALA FOUNDATION H BUNDAY BERMAN BRITTON PS			91-6477106	entification numbe	r
Num	ber and	d street (or P O box number if mail is not delivered to street address)	Room/suite		R Telenhone nu	mher /see instruction	ne)
1:	1808 NO	DRTHUP WAY NO 240	B Telephone number (see instructions) (425) 462-8220				
		ı, state or province, country, and ZIP or foreign postal code WA 98005		 ` '	application is pendin	a check here	
					-	approaction to postant	▶ L
G Ch	neck al	l that apply ☐ Initial return ☐ Initial return of a ☐ Final return ☐ Amended return	former public charity		_	ganızatıons, check he	▶ ∟
		☐ Final return ☐ Amended return ☐ Address change ☐ Name change				rganizations meeting k here and attach co	
1 Ch	neck tv	pe of organization ✓ Section 501(c)(3) exempt private f	foundation			undation status was t	
_		1. 4947(a)(1) nonexempt charitable trust \Box Other taxable			under sectio	n 507(b)(1)(A), chec	k nere
			☑ Cash ☐ Accru	al		ation is in a 60-month	
		from Part II, col (c), \$ 12,272,026	be on cash basis)		under sectio	n 507(b)(1)(B), chec	k here
Pa	rt I	Analysis of Revenue and Expenses (The total					(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only
	1	Contributions, gifts, grants, etc , received (attach	476,920				
	2	schedule) Check ▶ ☐ If the foundation is not required to attach					
		Sch B					
	3	Interest on savings and temporary cash investments	1,114		1		
	4	Dividends and interest from securities	207,821		207,821		
	5a b	Gross rents					
<u>e</u>	6a	Net gain or (loss) from sale of assets not on line 10	-86,284				
Revenue	b	Gross sales price for all assets on line 6a3,953,075					
Re	7	Capital gain net income (from Part IV, line 2)			6,616		
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	Ь	Less Cost of goods sold					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	599,571		214,438	0	
	13	Compensation of officers, directors, trustees, etc	0		0	0	
	14	Other employee salaries and wages					
es	15	Pension plans, employee benefits					
ens	16a	Legal fees (attach schedule)					
ă X	b	Accounting fees (attach schedule)	14,505		7,252	0	.,
Operating and Administrative Expenses	С	Other professional fees (attach schedule)	29,791		29,791	0	
a E	17	Interest	10,956		2,956	0	
<u> </u>	18 19	Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion	10,930		2,930		
<u>=</u>	20	Occupancy					
Ad	21	Travel, conferences, and meetings					
and	22	Printing and publications					
<u>5</u>	23	Other expenses (attach schedule)	1,004		0	0	1,00
rati	24	Total operating and administrative expenses.					
8	_	Add lines 13 through 23	56,256		39,999	0	· '
_	25	Contributions, gifts, grants paid	613,166				613,16
	26	Total expenses and disbursements. Add lines 24 and 25	669,422		39,999	0	621,42
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursements	-69,851				
	ь	Net investment income (If negative, enter -0-)			174,439		
	С	Adjusted net income(If negative, enter -0-)				0	
or	Danor	work Reduction Act Notice, see instructions.			Cat No. 11289)	/ <u>For</u>	m 000-DE (2016

11,177,518

11,177,518

11,197,830

11,169,857

11,169,857

11,175,176

2

3

4

5

6

11,177,518

11,169,857

11,169,857

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-69,851

62,190

Foundations that follow SFAS 117, check here ▶

Unrestricted

Permanently restricted

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) -

Temporarily restricted

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

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

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

Capital stock, trust principal, or current funds

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 end of year (line 4 minus line 5)-Part II, column (b), line 30

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

Analysis of Changes in Net Assets or Fund Balances

Balances

Fund 26

ŏ

Assets 27

Net 30

2

24

25

28

29

31 Part III

	(a) the kind(s) of property sold (e g , re rehouse, or common stock, 200 shs	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)	
1 a SALE OF PUBLICALLY TR	RADED SECURITIES		P	2015-12-31	2016-12-30
b SALE OF PUBLICALLY TR			Р	2010-12-30	2016-12-31
c SALE OF PUBLICALLY T	RADED SECURITIES		D	2014-12-30	2016-12-31
d CAPITAL GAINS DIVIDE	NDS		Р		
e					
(e)	(f)		(g)		h)
Gross sales price	Depreciation allowed		other basıs ense of sale		or (loss)
2 9	(or allowable) 41,234	pius expi	993,835	 ` ' ' ' ` `	7) minus (g) -52,601
	55,271		2,950,624	†	-85,353
	10,971		2,930,024	†	108,971
	35,599		2,000	'	35,599
e e	33,399				33,399
			12/21/60	_	
Complete only for asset	s showing gain in column (h) and ow	<u> </u>			(I) h) gain minus
(i)	(j) Adjusted basis		(k) of col(ı)		less than -0-) or
F M V as of 12/31/69	as of 12/31/69		(j), if any		om col (h))
a					-52,601
b					-85,353
c					108,971
d					35,599
e					
•	gain or (loss) as defined in sections : art I, line 8, column (c) (see instructi		· }	3	6,616
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net	Investment In	come	
For optional use by domestic	private foundations subject to the sec	ction 4940(a) tax on ne	et investment incom	ne)	
if section 4940(d)(2) applies,	eave this part blank				
Was the foundation liable for t	ne section 4942 tax on the distributal ot qualify under section 4940(e) Do	• •	· ·	?	es 🔽 No
1 Enter the appropriate a	mount in each column for each year,	see instructions before	making any entrie	S	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rat (col (b) divided by c	
2015	579,890		11,892,118		0 048763
2014	563,955		11,871,633		0 047504
2013	448,716		10,915,184		0 041109
2012	497,638		10,013,968		0 049694
2011	344,487		9,473,308		0 036364
2 Total of line 1, column	•				0 223434
	o for the 5-year base period—divide		, or by the		0.044607
	ndation has been in existence if less on charitable-use assets for 2016 from				0 044687 11,630,756
		•	5		519,744
	ent income (1% of Part I, line 27b)		6		1,744
			· · · · 0		521,488
	tions from Part XII, line 4 ,				660,172
	eater than line 7, check the box in Parent			ng a 1% tax rate Se	
IIISU UCUOIIS					

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Part VIII Information About Officers, Directors, Trustees, Foundation Man and Contractors (continued)	agers, Highly Paid Employees,
3 Five highest-paid independent contractors for professional services (see instruction	s). If none, enter "NONE".
(a) Name and address of each person paid more than \$50,000 (b) Type	of service (c) Compensation
NONE	
Total 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 relevant statistical information organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ion such as the number of Expenses
1	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 ar	d 2 Amount
1 GLOBAL HEALTH INVESTMENT FUND I, LLC (THE "FUND") SEEKS TO PROVIDE AFFORDABLE FU	
THE DEVELOPMENT OF DRUGS, VACCINES, PREVENTATIVE, DIAGNOSTICS AND OTHER PRODU GLOBAL HEALTH CHALLANGES THAT DISPROPORTIONATELY IMPACT DEVELOPING COUNTRIES	
COLLABORATION AMOUNG JP MORGAN, THE BILL & MELINDA GATES FOUNDATION AND LION	S HEAD GLOBAL
PARTNERS	38,749
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	▶ 38,749

1a

1b

2

3a 3b

4

5

621,423

38,749

660.172

1.744

658.428

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Part XII

1

2

3

4

5

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

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.

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

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

income Enter 1% of Part I. line 27b (see instructions).

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

Page 9

579.794

135.945

443,849

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	al C AIII
1	Distributable
2	Undistributed
а	Enter amour

d From 2014. .

e From 2015.

XII, line 4 🕨 \$

indicated below:

stributable amount for 2016 from Part XI, line 7					
ndistributed income, if any, as of the end of 2016					
nter amount for 2015 only					
otal for prior years 20, 20, 20					
cess distributions carryover, if any, to 2016					

а	Enter amount for 2015 only						
b	Total for prior	. ye	ears	5	20),	20
3	Excess distrib	utio	ons	cai	ryc	ver, if	any, to 2016
а	From 2011.						
b	From 2012.						
_	From 2013						

f Total of lines 3a through e. 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).

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 **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

6 Enter the net total of each column as

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 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

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

same amount must be shown in column (a))

(a)

Corpus

0

(b)

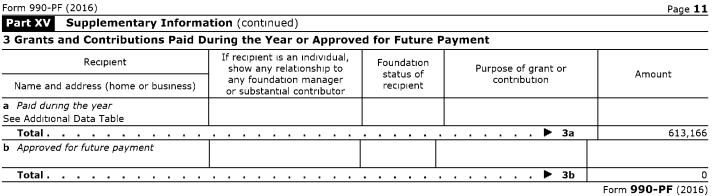
Years prior to 2015

(c)

2015

524,227

524,227



	amounts unless otherwise indicated	Unrelated bus	siness income	Excluded by section	512, 513, or 514	(e) Related or exempt
1 Program	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
d						
	and contracts from government agencies					
2 Membe	rship dues and assessments					
	st on savings and temporary cash ments			14	1	1,113
4 Divider	ds and interest from securities			14	207,821	
	Ital Income or (loss) from real estate					
	ebt-financed property					
	ental income or (loss) from personal property					
	nvestment income					
	or (loss) from sales of assets other than			18	-86,284	
9 Net inc	ome or (loss) from special events					
	profit or (loss) from sales of inventory revenue a					
	evenue a					
			0		121,538	1,113
3 Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)			13	3	122,651
See works	heet in line 13 instructions to verify calculatio Relationship of Activities to th	ns)		pt Purposes		
See works Part XVI	reet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish i income is reporte	ment of Exem	f Part XVI-A contribut		
ee works Part XVI Line No.	reet in line 13 instructions to verify calculation Relationship of Activities to th Explain below how each activity for which	ns) e Accomplish income is reporte empt purposes (c	ment of Exem d in column (e) o other than by prov	f Part XVI-A contribut		
ee works Part XVI Line No.	reet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	ns) e Accomplish income is reporte empt purposes (c	ment of Exem d in column (e) o other than by prov	f Part XVI-A contribut		
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See works Part XVI Line No.	reet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	ns) e Accomplish income is reporte empt purposes (c	ment of Exem d in column (e) o other than by prov	f Part XVI-A contribut		

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

	art vati	Exempt Organi	zations							
			directly engag				on described in section ! organizations?	501	Yes	No
а	Transfers	from the reporting foun	dation to a no	ncharitable ex	empt organization	of	-			
	(1) Cash							1a(1)		No
	(2) Othe	rassets						1a(2)		No
b	Other tran	nsactions								
	(1) Sale:	s of assets to a nonchar	table exempt	organization.				1b(1)		No
	(2) Purc	hases of assets from a r	oncharitable e	exempt organi	zation			. 1b(2)		No
	(3) Rent	al of facilities, equipmer	nt, or other ass	sets				. 1b(3)		No
(4) Reimbursement arrangements										No
(5) Loans or loan guarantees										No
	(6) Perfo	rmance of services or m	embership or i	fundraising so	licitations			1b(6)		No
	_	f facılıtıes, equipment, n		· ·				1c		No
							lways show the fair mar			
							ed less than fair market ets, or services received			
		,		`		,	,			
(a)	Line No	(b) Amount involved	(c) Name of n	oncharitable exe	empt organization	(d) Description o	f transfers, transactions, and	d sharing arra	ngemen	its
2 a	Is the fou	ndation directly or indire	ectly affiliated	with, or relate	ed to, one or more t	tax-exempt organ	nizations			
		in section 501(c) of the	•	•	•			. 🗆 Yes	✓ N	lo
		complete the following s	,		(-)(-),					-
_		(a) Name of organization		(b) Type of organizatio	n	(c) Description of	relationship		
	11,5 4	lor nonaltice of name:	I doclare *b-+	I have avares	and the potential in the	udina sessessissis	ring schedules and state	monte == 1	+0 +1	hor+
							r than taxpayer) is base			
Si	gn who	ch preparer has any kno	wledge							
	ere L	*****			2017-11-15	*****		the IRS discu		
		Signature of officer or t	rustee		Date	Title		instr)?		
		1				1	(see	ilisti), E	res — N	
		Print/Type preparer's	name	Preparer's Sig	nature	Date	Check if self-	N		
								P0008	0717	
_		JAYNE BRAY					employed ▶ ☐			
	id									
	eparer		TH BUNDAY BE	ERMAN BRITTO	ON PS		Firn	n's EIN ▶91	-12752	 259
US	e Only		.808 NORTHUF	O WAY SHITE 1	240					
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		BE	LLEVUE, WA	980051959			Pho	ne no (425	1 02/-0	UZ33

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

tha RAO V REMALA

SATYA K REMALA

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	any foundation manager or substantial contributor	recipient				
a Paid during the year						
API CHAYA PO BOX 14047 SEATTLE, WA 98114	NONE	501(C)(3)	TO END INTIMATE PARTNER VIOLENCE AND OTHER FORMS OF EXPLOITATION	1,050		
CONSUMER CHECKBOOK 101 TRUMAN AVENUE YONKERS, NY 10703	NONE	501(C)(3)	TO WORK FOR A FAIR, JUST, AND SAFE MARKETPLACE FOR ALL CONSUMER TO PROVIDE TRUSTWORTHY PRODUCT INFORMATION	250		
FOOD LIFELINE 1702 NE 150TH ST SHORELINE, WA 98155	NONE	501(C)(3)	TO PROVIDE FOOD TO THOSE IN NEED	1,000		
FRED HUTCHINSON CANCER RESEARCH CENTER PO BOX 19024 J5-200 SEATTLE, WA 98109	NONE	501(C)(3)	TO SUPPORT RESEARCH, PREVENTION, DETECTION AND OF CANCER	55,350		
THE SALVATION ARMY PO BOX 9219	NONE	501(C)(3)	TO CARE FOR PEOPLE IN NEED	500		

FOOD LIFELINE 1702 NE 150TH ST SHORELINE, WA 98155	NONE	501(C)(3)	TO PROVIDE FOOD TO THOSE IN NEED	1,00
FRED HUTCHINSON CANCER RESEARCH CENTER PO BOX 19024 J5-200	NONE	501(C)(3)	TO SUPPORT RESEARCH, PREVENTION, DETECTION AND OF CANCER	55,35

SEATTLE, WA 98109

613,166 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year HABITAT FOR HUMANITY OF EAST KING NONE 501(C)(3) TO CREAT A VARIETY OF 5,750 COUNTY HOUSING SOLUTIONS THROUGH PO BOX 817 NEW CONSTRUCTION REDMOND, WA 98073 RENOVATION AND REPAIR TO HELP LOW-INCOME FAMILIES AND BUILD SAFE COMMUNITIES LIODEL TALK NONE E01/C\/3\ TO DROVEDE FOR EMERCENCY 1.500 000

	16225 NE 87TH ST SUITE A-1 REDMOND, WA 98052	NONE	501(C)(3)	FOOD, CLOTHING AND SHELTER	1,50
	FOREST RIDGE SCHOOL 4800 139TH AVENUE SE BELLEVUE, WA 98006	NONE	501(C)(3)	TO SUPPORT EDUCATION AND SCHOLARSHIPS	4,00
П			1		

4800 139TH AVENUE SE BELLEVUE, WA 98006			SCHOLARSHIPS	
NORTHWEST HARVEST PO BOX 12272 SEATTLE, WA 98102	NONE	501(C)(3)	TO PROVIDE FOOD TO THOSE IN NEED	

BELLEVUE, WA 98006				
NORTHWEST HARVEST PO BOX 12272 SEATTLE, WA 98102	NONE	501(C)(3)	TO PROVIDE FOOD TO THOSE IN NEED	:
SPECIAL OLYMPICS WASHINGTON	NONE	501(C)(3)	TO PROVIDE TRAINING AND	

BELLEVUE, WA 98006				
NORTHWEST HARVEST PO BOX 12272 SEATTLE, WA 98102	NONE	501(C)(3)	TO PROVIDE FOOD TO THOSE IN NEED	1,000
SPECIAL OLYMPICS WASHINGTON	NONE	501(C)(3)	TO PROVIDE TRAINING AND	500

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SPECIAL OLYMPICS WASHINGTON 2150 N 107TH ST SUITE 220 SEATTLE, WA 98133	NONE	501(C)(3)	TO PROVIDE TRAINING AND HEALTH EDUCTION TO PEOPLE WITH DISABILITIES	

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613,166 Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
THE SEATTLE FOUNDATION 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101	NONE	501(C)(3)	TO IMPROVE THE QUALITY OF LIFE IN KING COUNTY	90,885	
UNITED WAY OF KING COUNTY 720 SECOND AVENUE SEATTLE, WA 98104	NONE	501(C)(3)	TO ENHANCE THE ABILITY FOR PEOPLE TO SUPPORT EACH OTHER	232,280	
UNIVERSITY OF WASHINGTON FOUNDATION 1200 FIFTH AVENUE SUITE 500 SEATTLE, WA 98101	NONE	501(C)(3)	TO SUPPORT COMPUTER SCIENCE SCHOLARSHIPS & ENGINEERING	7,500	
WASHINGTON TRAILS ASSOCIATION 2019 THIRD AVE SUITE 100 SEATTLE, WA 98121	NONE	501(C)(3)	TO PROTECT HIKING TRAILS AND WILDERNESS	2,500	
WEATHERHILL NATURE PRESERVE 4030 95TH NE YARROW POINT WA 98004	NONE	501(C)(3)	TO PROVIDE SUPPORT FOR MAINTENANCE OF THE PRESERVE	500	

PRESERVE

YARROW POINT, WA 98004

613,166

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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount	
Name and address (home or business)	or substantial contributor				
a Paid during the year					
CHILDHAVEN 316 BROADWAY SEATTLE, WA 98122	NONE	501(C)(3)	TO GIVE CHILDREN THE CHANCE TO LEARN THE EDUCATION AND SOCIAL SKILLS THEY NEED TO BE SUCCESSFUL IN SCHOOL AND BEYOND	1,000	
TECHNOLOGY ACCESS FOUNDATION 4436 RAINIER AVENUE SOUTH SUITE B SEATTLE, WA 98118	NONE	501(C)(3)	TO PROVIDE A HIGH-QUALITY EDUCATION FOR MORE UNDERSERVED STUDENTS OF COLOR	25,100	
SEATTLE CHILDREN HOSPITAL 4800 SAND POINT WAY NE SEATTLE, WA 98105	NONE	501(C)(3)	TO SUPPORT RESEARCH, DIAGNOSIS & TREATMENT FOR CHILDREN	1,000	
LIFELONG AIDS ALLIANCE 1002 ESENECA SEATTLE, WA 98122	NONE	501(C)(3)	TO PROVIDE RESEARCH, TREATMENT & SUPPORT FOR PEOPLE	1,000	

SEATTLE CHILDREN HOSPITAL 4800 SAND POINT WAY NE SEATTLE, WA 98105	NONE	501(C)(3)	TO SUPPORT RESEARCH, DIAGNOSIS & TREATMENT FOR CHILDREN	1,0
LIFELONG AIDS ALLIANCE 1002 ESENECA	NONE	501(C)(3)	TO PROVIDE RESEARCH, TREATMENT & SUPPORT FOR	1,0

NONE 501(C)(3) TO PROVIDE MEALS & HYGIENE

500

MILLIONAIR CLUB CHARITY FACILITIES TO THE HOMELESS

2515 WESTERN AVE SEATTLE, WA 98121

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613,166 Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation 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 LEUKEMIA & LYMPHOMA SOCIETY NONE 501(C)(3) TO FIGHT AGAINST LEUKEMIA, 5,000 123 NW 36TH ST 100 LYMPHOMA AND MYELOMA AND SEATTLE, WA 98107 TO IMPROVE THE QUALITY OF LIFE OF PATIENTS AND THEIR

			FAMILIES	
MAKE A WISH 4742 N 24TH ST SUITE 400 PHOENIX, AZ 85016	NONE	501(C)(3)	TO ENRICH THE LIVES OF CHILDREN WITH LIFE- THREATENING MEDICAL CONDITIONS THROUGH ITS WISH-GRANTING WORK	

HOENIX, AZ 85016			THREATENING MEDICAL CONDITIONS THROUGH ITS WISH-GRANTING WORK	
EATTLE GOODWILL 765 6TH AVENUE SOUTH EATTLE, WA 98134	NONE	501(C)(3)	TO ASSIST PEOPLE AND FAMILIES IN NEED	1,500
AMMA'S HANDS PO BOX 40464	NONE	501(C)(3)	TO REAWAKEN WITHIN	1,000

1,000

SEATTLE, WA 98134			FAMILIES IN NEED	
MAMMA'S HANDS PO BOX 40464 BELLEVUE, WA 98015	NONE	501(C)(3)	TO REAWAKEN WITHIN INDIVIDUALS THE HOPE THEY NEED TO REGAIN THEIR SELF- RESPECT AND THEIR DESIRE FOR A PRODUCTIVE LIFE	1,000
CRISIS CLINIC	NONE	501(C)(3)	TO PROVIDE HELPING FOR	500

BELLEVUE, WA 98015			INDIVIDUALS THE HOPE THEY NEED TO REGAIN THEIR SELF- RESPECT AND THEIR DESIRE FOR A PRODUCTIVE LIFE	
CRISIS CLINIC 1515 DEXTER AVENUE NORTH	NONE	501(C)(3)	TO PROVIDE HELPING FOR PEOPLE IN CRISIS	500

			RESPECT AND THEIR DESIRE FOR A PRODUCTIVE LIFE	
CRISIS CLINIC	NONE	501(C)(3)	TO PROVIDE HELPING FOR	

			FOR A PRODUCTIVE LIFE	
RISIS CLINIC 515 DEXTER AVENUE NORTH	NONE	501(C)(3)	TO PROVIDE HELPING FOR PEOPLE IN CRISIS	

SEATTLE, WA 98109		1
Total	 	613,166

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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
NORTHWEST FOLKLIFE 305 HARRISON STREET SEATTLE, WA 98109	NONE	501(C)(3)	TO SHARE AND SUSTAIN THE VITALITY OF FOLK, ETHNIC AND ARTISTIC COMMUNITIES	500	
THE KIRAN ANJALI PROJECT 7201 HOLLY HILL DR MERCER ISLAND, WA 98040	NONE	501(C)(3)	TO ADVANCE EDUCATIONAL OPPORTUNITIES FOR UNDERPRIVILEGED CHILDREN	5,000	
VILLAGE THEATRE 303 FRONT STREET NORTH ISSAQUAH, WA 98027	NONE	501(C)(3)	TO OFFER THE HIGHEST QUALITY PERFORMING ARTS PROGRAMS	250	
SEATTLE HUMANE SOCIETY 13212 SE EASTGATE WAY BELLEVUE, WA 98005	NONE	501(C)(3)	TO BRING PEOPLE AND PETS TOGETHER AND KEEP THEM TOGETHER	6,000	
SEATTLE UNIVERSITY	NONE	501(C)(3)	TO PROVIDE MUCH NEEDED	1,000	

INONE 501(C)(3) TO PROVIDE MUCH NEEDED SCHOLARSHIPS FOR THE

| SEATTLE UNIVERSITY 901 12TH AVENUE SEATTLE, WA 98122

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613,166 Total . .

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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
GLOBAL PARTNERSHIPS 1932 FIRST AVENUE SUITE 400 SEATTLE, WA 98101	NONE	501(C)(3)	TO IMPACT INVESTOR THAT WORKS TO EXPAND OPPORTUNITY FOR PEOPLE LIVING IN POVERTY	3,000	
GEORGE WASHINGTON UNIVERSITY 2121 1ST NW WASHINGTON, DC 20052	NONE	501(C)(3)	TO OFFERS COMPREHENSIVE PROGRAMS OF UNDERGRADUATE AND GRADUATE LIBERAL ARTS STUDY AS WELL AS DEGREE PROGRAMS IN MEDICINE, LAW, ENGINEERING, EDUCATION	2,000	
YARROW POINT COMMUNITY ASSOCIATION 9030 NE 34TH ST BELLEVUE, WA 98004	NONE	501(C)(3)	TO PROVIDE BETTER SERVICES TO COMMUNITY	250	
INFECTIOUS DISEASE RESEARCH INSTITUTE 1616 EASTLAKE AVENUE EAST SUITE 400 SEATTLE, WA 98102	NONE	501(C)(3)	TO TAKE A COMPREHENSIVE APPROACH TO ADDRESS INFECTIOUS DISEASES	32,500	
SENIOR NET 5237 SUMMERLIN COMMONS BLVD FORT MYERS, FL 33907	NONE	501(C)(3)	TO PROVIDE OLDER ADULTS EDUCATION FOR AND ACCESS TO COMPUTER TECHNOLOGIES TO ENHANCE THEIR LIVES AND ENABLE THEM TO SHARE THEIR KNOWLEDGE AND WISDOM	250	
Total	613,166				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or Amount Recipient show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SIGHTLIFE 1200 6TH AVE 300 NONE 501(C)(3) TO ELIMINATE CORNEAL 25,000 SEATTLE, WA 98101 BLINDNESS UNIVERSITY DISTRICT FOOD BANK NONE 501(C)(3) TO HELP PREVENT HUNGER IN 500 4731 15TH AVE NE NORTHEAST SEATTLE SEATTLE, WA 98105 NEIGHBORHOODS E04/01/31

WASHINGTON GLOBAL HEALTH ALLIANCE 1809 7TH AVE SUITE 901 SEATTLE, WA 98101	NONE	501(C)(3)	TO ADVANCE GLOBAL HEALTH EQUITY	6,850
YMCA OF GREATER SEATTLE 909 4TH AVE SEATTLE, WA 98104	NONE	501(C)(3)	TO HELP YOUNG PEOPLE ACHIEVE THEIR POTENTIAL, EMPOWERING PEOPLE OF ALL AGES TO LEAD HEALTHIER LIVES	500
YOUTH CARE 2500 NE 54TH STREET SEATTLE, WA 98105	NONE	501(C)(3)	TO HELP HOMELESS YOUNG PEOPLE MOVE OFF THE STREETS	500

Total . 3a AND PREPARE FOR LIFE

613,166

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	any foundation manager or substantial contributor	recipient				
a Paid during the year			_			
LITERACY BRIDGE 1904 THIRD AVENUE SUITE 417 SEATTLE, WA 98101	NONE	501(C)(3)	TO SIGNIFICANTLY IMPROVE THE HEALTH, INCOME, AND QUALITY OF LIFE FOR THE WORLD'S MOST UNDERSERVED COMMUNITIES BY PROVIDING LIFE-CHANGING KNOWLEDGE THROUGH INNOVATIVE TECHNOLOGY	5,000		
COLLEGE SUCCESS FOUNDATION 1605 NW SAMMAMISH ROAD ISSAQUAH, WA 98027	NONE	501(C)(3)	TO PROVIDE A UNIQUE INTEGRATED SYSTEM OF SUPPORTS AND SCHOLARSHIPS TO INSPIRE UNDERSERVED LOW-INCOME STUDENTS TO FINISH HIGH SCHOOL, GRADUATE FROM COLLEGE AND SUCCEED IN LIFE	5,000		
INTERNATIONAL ASSOCIATION FOR HUMAN VALUES 2401 15TH STREET NW WASHINGTON, DC 20009	NONE	501(C)(3)	TO REDUCE STRESS AND DEVELOP LEADERS SO THAT HUMAN VALUES CAN FLOURISH IN PEOPLE AND COMMUNITIES	1,030		
IAWW PO BOX 404 BELLEVUE, WA 98009	NONE	501(C)(3)	TO PROVIDE A COMMON IDENTITY TO THE INDIAN COMMUNITY AND FACILITATE CULTURAL, SOCIAL AND EDUCATIONAL SERVICES AND OPPORTUNITIES FOR CULTURAL INTEGRATION FROM YOUNG TO OLD OF THE COMMUNITY	3,697		
MADISON PARK COOPERATIVE PRESCHOOL 1900 43RD AVENUE EAST SEATTLE, WA 98112	NONE	501(C)(3)	TO PROVIDE BETTER EARLY EDUCATION	1,000		

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613,166 Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
OVERLAKE HOSPITAL FOUNDATION 1035 116TH AVE NE BELLEVUE, WA 98004	NONE	501(C)(3)	TO PROVIDE MEDICAL EXCELLENCE EVERY DAY	5,500	
BIG CLIMB 123 NW 36TH ST 100 SEATTLE, WA 98107	NONE	501(C)(3)	TO SHARE THE STORIES OF LOCAL PATIENTS WITH THE BIG CLIMB COMMUNITY TO ILLUSTRATE THE IMPACT OF BLOOD CANCER IN THE PUGET SOUND AREA	48	
CANINE COMPANIONS FOR INDEPENDENCE PO BOX 446 SANTA ROSA, CA 954020446	NONE	501(C)(3)	TO ENHANCES THE LIVES OF PEOPLE WITH DISABILITIES BY PROVIDING HIGHLY TRAINED ASSISTANCE DOGS AND ONGOING SUPPORT TO ENSURE QUALITY PARTNERSHIPS	250	
CATHOLIC COMMUNITY SERVICES 100 23RD AVENUE SOUTH SEATTLE, WA 981442302	NONE	501(C)(3)	TO HELP INDIVIDUALS, CHILDREN, FAMILIES, AND COMMUNITIES STRUGGLING WITH POVERTY AND THE EFFECTS OF INTOLERANCE AND RACISM	500	
CYSTIC FIBROSIS FOUNDATION 4550 MONTGOMERY AVE SUITE 1100 N BETHESDA, MD 20814	NONE	501(C)(3)	TO HELP PEOPLE WITH CYSTIC FIBROSIS	500	

Total . . 3a 613,166

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
EPIPHANY EARLY LEARNING PRESCHOOL 1805 38TH AVE SEATTLE, WA 98122	NONE	501(C)(3)	A PLAY-BASED, REGGIO EMILIA- INSPIRED PRESCHOOL FOR CHILDREN AGES 18 MONTHS TO FIVE YEARS OLD IN THE MADRONA NEIGHBORHOOD OF SEATTLE	1,000	
FARESTART 700 VIRGINIA ST SEATTLE, WA 98101	NONE	501(C)(3)	TO MAKE A DIFFERENCE IN OUR COMMUNITY, OR IN COMMUNITIES AROUND THE COUNTRY	1,000	
261 FEARLESS PO BOX 1640 PORT WASHINGTON, NY 11050	NONE	501(C)(3)	TO BRING ACTIVE WOMEN TOGETHER THROUGH A GLOBAL SUPPORTIVE SOCIAL RUNNING NETWORK	2,000	
HINDU HERITAGE ENDOWMENT 107 KAHOLALELE RD KAPAA, HI 96746	NONE	501(C)(3)	STRENGTHENS COMMUNITIES BY SUPPORTING ORPHANAGES, TEMPLES, MONASTERIES, SCHOOLS, ASHRAMS AND HOMES FOR THE ELDERLY, YOUTH HOSTELS, COWS, DISTRIBUTION OF FREE HINDU LITERATURE AND SCRIPTURE FOR THE BLIND	251	
BELLEVUE LIFESPRING PO BOX 53203 BELLEVUE, WA 98015	NONE	501(C)(3)	TO FOSTER STABILITY AND SELF-SUFFICIENCY FOR BELLEVUE'S CHILDREN AND THEIR FAMILIES	991	
-				642.466	

613,166

Total . .

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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation 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 NISQUALLY LAND TRUST NONE 501(C)(3) TO ACQUIRE AND MANAGE 100 BROWN FARM RD NE CRITICAL LANDS TO OLYMPIA, WA 98516 PERMANENTLY BENEFIT THE WATER WILDLIFE AND PEOPLE

500

123

2,000

			OF THE NISQUALLY RIVER WATERSHED	
KCTS 30 TRANSPORT DRIVE WALTON, KY 41094	NONE	501(C)(3)	TO INSPIRE, ENRICH, AND EDUCATE	
RWANDA GIRLS INITIATIVE	NONE	501(C)(3)	TO EDUCATE AND EMPOWER	

RWANDA GIRLS INITIATIVE PO BOX 325 MEDINA, WA 98039	NONE	501(C)(3)	TO EDUCATE AND EMPOWER GIRLS OF RWANDA TO REACH THEIR HIGHEST POTENTIAL
SEATTLE ART MUSEUM 1300 FIRST AVENUE SEATTLE, WA 98101	NONE	501(C)(3)	TO CREATE EXTRAORDINARY EXPERIENCES FOR PEOPLE TO CONNECT WITH AND BLACE

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MEDINA, WA 98039			THEIR HIGHEST POTENTIAL	
SEATTLE ART MUSEUM 1300 FIRST AVENUE SEATTLE, WA 98101	NONE	501(C)(3)	TO CREATE EXTRAORDINARY EXPERIENCES FOR PEOPLE TO CONNECT WITH ART FROM ACROSS TIME AND PLACE	2,800
SEATTLE SYMPHONY	NONE	501(C)(3)	TO UNLEASH THE POWER OF	9,750

SEATTLE ART MUSEUM 1300 FIRST AVENUE SEATTLE, WA 98101	NONE	501(C)(3)	TO CREATE EXTRAORDINARY EXPERIENCES FOR PEOPLE TO CONNECT WITH ART FROM ACROSS TIME AND PLACE	2
SEATTLE SYMPHONY 200 UNIVERSITY STREET	NONE	501(C)(3)	TO UNLEASH THE POWER OF MUSIC, BRING PEOPLE	9

1300 FIRST AVENUE SEATTLE, WA 98101			EXPERIENCES FOR PEOPLE TO CONNECT WITH ART FROM ACROSS TIME AND PLACE	
SEATTLE SYMPHONY 200 UNIVERSITY STREET SEATTLE, WA 98101	NONE	501(C)(3)	TO UNLEASH THE POWER OF MUSIC, BRING PEOPLE TOGETHER, AND LIFT THE	9,750

Total		•	613 166
EATTLE, WA 98101		TOGETHER, AND LIFT THE HUMAN SPIRIT	
(II) IIIVIVERSIIY SIREEI		INITED TO THE PRINT PRINT IN THE	i e

orm 990PF Part XV Line 3 - Grant	ts and Contributions Paic	I During the '	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
SRI VENKATESWARA TEMPLE 18109 NE 76TH ST 108 REDMOND, WA 98052	NONE	501(C)(3)	TO PROVIDE A PLACE FOR HINDUS TO WORSHIP IN TRADITIONAL STYLE AND TO PROVIDE RELIGIOUS, HUMANITARIAN, CULTURAL AND EDUCATIONAL RESOURCES TO ALL INTERESTED IN HINDUISM	101
TREE HOUSE 2100 24TH AVE S SEATTLE, WA 98144	NONE	501(C)(3)	TO CREATE A WORLD WHERE EVERY CHILD THAT HAS EXPERIENCED FOSTER CARE HAS THE OPPORTUNITIES AND SUPPORT THEY NEED TO PURSUE THEIR DREAMS AND BECOME PRODUCTIVE MEMBERS OF OUR COMMUNITY	1,000
UDAYAN CARE USA 5546 171ST AVENUE SE BELLEVUE, WA 98006	NONE	501(C)(3)	TO CREAT SMALL FAMILY HOMES WHERE CHILDREN LIVE UNTIL THEY REACH ADULTHOOD, CREAT A SENSE OF BELONGING AND A BOND FOR LIFE	2,000
WASHINGTON WILDLIFE & RECREATION COALITION 1402 3RD AVE 507 SEATTLE, WA 98101	NONE	501(C)(3)	TO ENSURE ROBUST FUNDING FOR WASHINGTON'S GREAT OUTDOORS BY UNIFYING DISPARATE VOICES THROUGH EDUCATION AND ADVOCACY	960
WOMEN'S FUNDING ALLIANCE 2101 FOURTH AVENUE SUITE 1330 SEATTLE, WA 98121	NONE	501(C)(3)	TO IMPROVE THE LIVES OF WOMEN AND GIRLS IN WASHINGTON STATE	150
Total				613,166

Total . За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation 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 WASHINGTON WOMEN IN NEED NONE 501(C)(3) TO MAKE FINANCIAL GRANTS TO 1.030 232 5TH AVE S 201 WOMEN IN WASHINGTON STATE KIRKLAND, WA 98033 WHO ARE READY FOR TRANSFORMATIONAL CHANGE IN TWO CATEGORIES EDUCATION AND HEALTH CARE NONE KAY TITA 500 YALE AVE N 501(C)(3) TO PROVIDE CHANGEMAKERS IN 1,000 SEATTLE, WA 98109 HAITI WITH A SAFE SPACE AND THE RESOURCES THEY NEED TO INCREASE THEIR IMPACT, DEVELOP SKILLS, AND **ESTABLISH KEY PARTNERSHIPS** NONE SANKARA EYE FOUNDATION 501(C)(3) 35,000 TO REACH OUT TO THE RURAL 1900 MCCARTHY BLVD 302 POOR AND PROVIDE QUALITY MILPITAS, CA 95035 EYE CARE FREE OF COST TO THE NEEDY BY BUILDING OPERATIONALLY SELF-SUFFICIENT SUPER SPECIALTY EYE CARE HOSPITALS ACROSS INDIA

PLANNED PARENTHOOD 14730 NE 8TH ST BELLEVUE, WA 98007	NONE	501(C)(3)	TO PROVIDE HEALTH CARE IN THE UNITED STATES AND GLOBALLY	2,500
ART OF LIVING 555 MOWRY AVE FREMONT, CA 94536	NONE	501(C)(3)	TO FIND PEACE WITHIN ONESELF AND TO UNITE PEOPLE IN OUR SOCIETY - OF DIFFERENT CULTURES, TRADITIONS, RELIGIONS, NATIONALITIES, AND THUS REMINDING US ALL THAT WE HAVE ONE GOAL TO UPLIFT HUMAN LIFE EVERYWHERE	190

613,166

Total.

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Recipient If recipient is an individual, show any relationship to any foundation manager and contribution any foundation manager and contributions are contributions.

	or substantial contributor			
a Paid during the year				
BOY SCOUTS 3120 RAINIER AVE S	NONE	501(C)(3)	TO GIVE BOYS ALL THE	

SEATTLE, WA 98144

or cubetantial contributor

Name and address (home or business)

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Total	 	613.166

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TY 2016 Accounting Fees Schedule						
Name: SATYA AND RAO REMALA FOUNDATION						
C/O SMITH BUNDAY BERMAN BRITTON PS						
EIN: 91-6477106						
Category	Ame	ount I	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	

7,252

7,253

14,505

ACCOUNTING FEES

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TY 2016 General Explanation Attachment

Name: SATYA AND RAO REMALA FOUNDATION

C/O SMITH BUNDAY BERMAN BRITTON PS

EIN: 91-6477106

General E	xplanation	Attachment	
Identifier	Return Reference	Explanation	
1		FORM 990-PF, PAGE 5, PART VI-A, LINE 12	DURING THE 2016 TAX YEAR, FOUNDATION MADE A DONATION OF \$90,885 TO THE SEATTLE FOUNDATION IN A DONOR ADVISED FUND THE FOUNDATION TREATED THE ENTIRE \$90,885 DONATION AS A QUALIFYING DISTRIBUTION THE TAXPAYER MAKES FREQUENT DONATIONS TO THE SEATTLE FOUNDATION AND JOINS WITH THE AREA'S CHARITABLE COMMUNITY UTILIZING THE SEATTLE FOUNDATION'S INFORMATION GATHERING FOR ASSESSMENT OF CHARITABLE NEEDS IN THE COMMUNITY THE SEATTLE FOUNDATION SERVES TO FACILATE THE PLANNING FOR MULTI-YEAR GRANTS TO AREA CHARITIES AS WELL AS LARGER SINGLE DONATIONS TO CHARITIES IN NEED

TY 2016 Investments Corporate Bonds Schedule				
Name:	SATYA AND RAO REMALA FOUNDATION			

C/O SMITH RUNDAY REDMAN RDITTON DS

DLN: 93491305006327

1,330,267

1,288,397

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VARIOUS BONDS - SEE ATTACHED

EIN: 91-6477106	BEIN IN WE BIRT FOR FO	
Name of Bond	End of Year Book Value	End of Year Fair Market Value

TY 2016 Investments Corporate Stock Schedule	
Name: SATYA AND RAO REMALA F	OUNDATION

DLN: 93491305006327

End of Year Fair

Market Value

9,242,143

Value

8,187,163

C/O SMITH BUNDAY BERMAN BRITTON PS

EIN: 91-6477106

Name of Stock End of Year Book

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VARIOUS EQUITIES - SEE ATTACHED

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491305006327
TY 2016 Other Assets Schedule		

Name: SATYA AND RAO REMALA FOUNDATION

C/O SMITH BUNDAY BERMAN BRITTON PS

7,480

6,473

6,473

EIN: 91-6477106

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AMOUNTS TAXED, BUT NOT RECEIVED

Other Assets Schedule			
Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491305006327
TY 2016 Other Expenses Sche	dule			
Name:	SATYA AND RAG	O REMALA FOUND	DATION	
C/O SMITH BUNDAY BERMAN BRITTON PS				
EIN: 91-6477106				
Other Expenses Schedule				4
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PARKING	366	0	0	366
BUSINESS EXPENSES	218	0	0	218

CREDIT CARD FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491305006327		
TY 2016 Other Increases Sche	TY 2016 Other Increases Schedule				
Name:	SATYA AND RA	AO REMALA FOUNDATION			
	C/O SMITH BU	INDAY BERMAN BRITTON PS			
EIN:	91-6477106				
De	escription		Amount		
UNREALIZED GAIN			62,190		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DI	LN: 93491305006327		
TY 2016 Other Liabilities Sche	Y 2016 Other Liabilities Schedule					
Name:	SATYA AND RA	AO REMALA F	OUNDATION			
	C/O SMITH BI	JNDAY BERM	AN BRITTON PS			
EIN:	91-6477106					
Description	n		Beginning of Year - Book Value	End of Year - Book Value		
CREDIT CARDS PAYABLE			20,312	5,319		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DL	N: 93491305006327	
TY 2016 Other Professional Fees Schedule					
Name	e: SATYA AND	RAO REMALA FOU	NDATION		
	C/O SMITH BUNDAY BERMAN BRITTON PS				
EIN: 91-6477106					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable	

EIN: 91-64//106				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

29,791

29,791

INVESTMENT ADVISOR

efile GRAPHIC print - DO NOT PROCES	SS As Filed Data	-	DLN	N: 93491305006327
TY 2016 Taxes Schedule				_
				•
Nan	ne: SATYA AND	RAO REMALA FOUI	NDATION	1
		BUNDAY BERMAN I		1
EIN: 91-6477106				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable
1				Purposes
FOREIGN TAX	2,956	2,956	0	0
FEDERAL EXCISE TAX	8,000	0	0	0

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491305006327						
Schedule B (Form 990, 990-EZ,	Schedu	ule of Contributors		OMB No 1545-0047		
or 990-PF) Department of the Treasury Internal Revenue Service	► Information about Schedule B (F	PForm 990, 990-EZ, or 990-PF Form 990, 990-EZ, or 990-PF) and its ins <u>www.irs.gov/form990</u>		2016		
Name of the organizat SATYA AND RAO REMALA			Employer id	lentification number		
C/O SMITH BUNDAY BER Organization type (che			91-6477106			
Organization type (one	ock one)					
Filers of:	Section:					
Form 990 or 990-EZ						
4947(a)(1) nonexempt charitable trust not treated as a private foundation						
527 political organization						
Form 990-PF 501(c)(3) exempt private foundation						
4947(a)(1) nonexempt charitable trust treated as a private foundation						
501(c)(3) taxable private foundation						
	ation filing Form 990, 990-EZ, or 990-l r property) from any one contributor C					
Special Rules						
under sections to under sections to under sections to the under sections are under sections.	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ 3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 lf this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not 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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)						
For Paperwork Reduction for Form 990, 990-EZ, or 99	Act Notice, see the Instructions 00-PF	Cat No 30613X	Schedule B (Form 990	, 990-EZ, or 990-PF) (2016)		

Schedule B (For	m 990, 990-EZ, or 990-PF) (2016)		Page 2
	zation REMALA FOUNDATION AY BERMAN BRITTON PS	Employer identification 91-6477106	number
Part I	Contributors (see instructions) Use duplicate copies of Part I if add	ditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RAO AND SATYA REMALA		Person
	8827 NE 36TH STREET	\$ 476,920	Payroll
	BELLEVUE, WA98004		(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
-			Payroll
		\$	Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
-			Payroll
		<u> </u>	Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
-			Payroll
		<u>\$</u>	Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
-			Payroll
		\$	Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
-			Payroll
		<u> </u>	Noncash
			(Complete Part II for noncash contributions)
	<u> </u>	Schedule B (F	orm 990, 990-EZ, or 990-PF) (2016)

Schedule B (Forr	n 990, 990-EZ, or 990-PF) (2016)		Page 3	
	EMALA FOUNDATION	Employer identification number		
	AY BERMAN BRITTON PS	91-64	77106	
Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed			
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
1	8000 SHARES MICROSOFT CORPORATION STOCK	\$ 476 920	2016-11-02	
(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	
		\$		
(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	
		\$		
		Schedule B (Form 9	990, 990-EZ, or 990-PF) (2016)	

Schedule B (Form	990, 990-EZ, or 990-PF) (2016)		Page 4
			Employer identification number 91-6477106
than \$1, organiza the year	,000 for the year from any one contributo	r. Complete columns (a) thro of exclusively religious, chari ctions.) ▶ \$	d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less for
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	t Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	t Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 F	t Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	t Relationship of transferor to transferee
			Schedule B (Form 990, 990-EZ, or 990-PF) (2016)