

Form **990-PF**  
 Department of the Treasury  
 Internal Revenue Service

**Return of Private Foundation**  
**or Section 4947(a)(1) Trust Treated as Private Foundation**  
 ▶ Do not enter social security numbers on this form as it may be made public.  
 ▶ Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).








OMB No 1545-0052  
**2017**  
**Open to Public Inspection**

**For calendar year 2017, or tax year beginning 01-01-2017, and ending 12-31-2017**

Name of foundation HARVEST FOUNDATION		<b>A Employer identification number</b> 91-2065635	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 75554		Room/suite	
		<b>B Telephone number</b> (see instructions) (206) 459-3012	
City or town, state or province, country, and ZIP or foreign postal code SEATTLE, WA 981750554			
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 11,925,302		<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	
		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

<b>Part I Analysis of Revenue and Expenses</b> <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received (attach schedule)	90,000			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
	<b>3</b> Interest on savings and temporary cash investments	3	3		
	<b>4</b> Dividends and interest from securities	335,862	331,866		
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	656,679			
	<b>b</b> Gross sales price for all assets on line 6a	5,809,043			
	<b>7</b> Capital gain net income (from Part IV, line 2)		656,679		
	<b>8</b> Net short-term capital gain				
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less Cost of goods sold					
<b>c</b> Gross profit or (loss) (attach schedule)					
<b>11</b> Other income (attach schedule)					
<b>12 Total.</b> Add lines 1 through 11	1,082,544	988,548			
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc	0	0		0
	<b>14</b> Other employee salaries and wages				
	<b>15</b> Pension plans, employee benefits				
	<b>16a</b> Legal fees (attach schedule)	285	285		0
	<b>b</b> Accounting fees (attach schedule)	19,463	9,732		9,731
	<b>c</b> Other professional fees (attach schedule)	74,699	74,699		0
	<b>17</b> Interest				
	<b>18</b> Taxes (attach schedule) (see instructions)	20,926	5,926		0
	<b>19</b> Depreciation (attach schedule) and depletion				
	<b>20</b> Occupancy				
	<b>21</b> Travel, conferences, and meetings				
	<b>22</b> Printing and publications				
	<b>23</b> Other expenses (attach schedule)	4,312	0		4,312
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	119,685	90,642		14,043
	<b>25</b> Contributions, gifts, grants paid	565,130			565,130
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	684,815	90,642		579,173	
<b>27</b> Subtract line 26 from line 12					
<b>a Excess of revenue over expenses and disbursements</b>	397,729				
<b>b Net investment income</b> (if negative, enter -0-)		897,906			
<b>c Adjusted net income</b> (if negative, enter -0-)					

**Part II Balance Sheets** Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	24,808	6,303	6,303
	<b>2</b> Savings and temporary cash investments . . . . .	266,884	780,428	780,428
	<b>3</b> Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>4</b> Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .			
	<b>10a</b> Investments—U S and state government obligations (attach schedule)	591,579 	496,838	493,710
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	5,787,607 	5,827,947	7,937,516
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .	451,240 	400,790	444,380
	<b>11</b> Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .	1,938,995 	1,942,204	2,251,862
	<b>14</b> Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
<b>15</b> Other assets (describe ▶ _____)	 557 	4,889 	11,103	
<b>16 Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	9,061,670	9,459,399	11,925,302	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .			
	<b>18</b> Grants payable. . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule). . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)			
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	<b>24</b> Unrestricted . . . . .			
	<b>25</b> Temporarily restricted . . . . .			
	<b>26</b> Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	<b>27</b> Capital stock, trust principal, or current funds . . . . .	0	0	
	<b>28</b> Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
<b>29</b> Retained earnings, accumulated income, endowment, or other funds	9,061,670	9,459,399		
<b>30 Total net assets or fund balances</b> (see instructions) . . . . .	9,061,670	9,459,399		
<b>31 Total liabilities and net assets/fund balances</b> (see instructions) .	9,061,670	9,459,399		

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	9,061,670
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	397,729
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	0
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	9,459,399
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	0
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	<b>6</b>	9,459,399

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
<b>1 a</b> PUBLICALLY TRADED SECURITY				
<b>b</b> PUBLICALLY TRADED SECURITY				
<b>c</b> CAPITAL GAINS DIVIDENDS		P		
<b>d</b>				
<b>e</b>				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
<b>a</b> 1,757,525		1,670,976	86,549	
<b>b</b> 4,047,566		3,481,388	566,178	
<b>c</b> 3,952			3,952	
<b>d</b>				
<b>e</b>				
(i) F M V as of 12/31/69			(j) Adjusted basis as of 12/31/69	
(k) Excess of col (i) over col (j), if any			(l) Gain or (loss) col (k), but not less than -0- or Losses (from col (h))	
<b>a</b>			86,549	
<b>b</b>			566,178	
<b>c</b>			3,952	
<b>d</b>				
<b>e</b>				
<b>2</b> Capital gain net income or (net capital loss)		{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		<b>2</b> 656,679
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		<b>3</b>

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
 If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	627,595	10,586,994	0 059280
2015	569,890	10,625,380	0 053635
2014	538,968	10,787,611	0 049962
2013	488,844	10,251,279	0 047686
2012	435,982	9,643,941	0 045208
<b>2</b> Total of line 1, column (d)			<b>2</b> 0 255771
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			<b>3</b> 0 051154
<b>4</b> Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			<b>4</b> 11,115,086
<b>5</b> Multiply line 4 by line 3			<b>5</b> 568,581
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)			<b>6</b> 8,979
<b>7</b> Add lines 5 and 6			<b>7</b> 577,560
<b>8</b> Enter qualifying distributions from Part XII, line 4			<b>8</b> 579,173

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

Table with 11 rows for excise tax calculations. Includes categories like 'Exempt operating foundations', 'Domestic foundations that meet the section 4940(e) requirements', and 'Tax based on investment income'. Total amount owed is 7,416.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Questions include 'During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?' and 'Did the foundation have at least \$5,000 in assets at any time during the year?'. Includes 'Yes' and 'No' columns.

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW HARVESTF ORG
14 The books are in care of MARJORIE RINGNESS Telephone no (206) 459-3012
Located at PO BOX 75554 SEATTLE WA ZIP+4 981750554
15 Section 4947(a)(1) nonexempt charitable 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 15
16 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," enter the name of the foreign country

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.
1a During the year did the foundation (either directly or indirectly)
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days).
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here.
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))
a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? If "Yes," list the years 20, 20, 20, 20
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement-see instructions)
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20, 20, 20, 20
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?
b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017).
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?

**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

<b>5a</b>	During the year did the foundation pay or incur any amount to			
	<b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	<b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	<b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	<b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	<b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? . . . . . Organizations relying on a current notice regarding disaster assistance check here. . . . . ▶			<b>5b</b>
<b>c</b>	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . . <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . . <i>If "Yes" to 6b, file Form 8870</i>			<b>6b</b>
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
<b>b</b>	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . .			<b>7b</b>

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
EDWARD RINGNESS PO BOX 75554 SEATTLE, WA 981750554	MANAGER/DIRECTOR/PRESIDENT 1 00	0	0	0
MARJORIE RINGNESS PO BOX 75554 SEATTLE, WA 981750554	MANAGER/DIRECTOR/TREASURER 1 00	0	0	0

**2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

**Total** number of other employees paid over \$50,000. . . . . **0**

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

**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 such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc

1	Expenses

**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 and 2

1	Amount
All other program-related investments See instructions	

**Total.** Add lines 1 through 3 . . . . . **0**

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	10,728,458
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	555,893
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	11,284,351
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	11,284,351
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	169,265
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	11,115,086
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	555,754

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	555,754
<b>2a</b>	Tax on investment income for 2017 from Part VI, line 5.	<b>2a</b>	8,979
<b>b</b>	Income tax for 2017 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	8,979
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	546,775
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	546,775
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	546,775

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	579,173
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	579,173
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	<b>5</b>	8,979
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	570,194

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
<b>1</b> Distributable amount for 2017 from Part XI, line 7				546,775
<b>2</b> Undistributed income, if any, as of the end of 2017				
<b>a</b> Enter amount for 2016 only. . . . .			302,709	
<b>b</b> Total for prior years 20___, 20___, 20___		0		
<b>3</b> Excess distributions carryover, if any, to 2017				
<b>a</b> From 2012. . . . .				
<b>b</b> From 2013. . . . .				
<b>c</b> From 2014. . . . .				
<b>d</b> From 2015. . . . .				
<b>e</b> From 2016. . . . .				
<b>f</b> Total of lines 3a through e. . . . .	0			
<b>4</b> Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ <u>579,173</u>				
<b>a</b> Applied to 2016, but not more than line 2a			302,709	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2017 distributable amount. . . . .				276,464
<b>e</b> Remaining amount distributed out of corpus	0			
<b>5</b> Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> 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. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018 . . . . .				270,311
<b>7</b> 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). . . . .	0			
<b>8</b> Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions). . . . .	0			
<b>9</b> Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a . . . . .	0			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2013. . . . .				
<b>b</b> Excess from 2014. . . . .				
<b>c</b> Excess from 2015. . . . .				
<b>d</b> Excess from 2016. . . . .				
<b>e</b> Excess from 2017. . . . .				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. . . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

**2a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .

	Tax year	Prior 3 years			<b>(e) Total</b>
	<b>(a) 2017</b>	<b>(b) 2016</b>	<b>(c) 2015</b>	<b>(d) 2014</b>	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					

**3** Complete 3a, b, or c for the alternative test relied upon

**a** "Assets" alternative test—enter

(1) Value of all assets . . . . .

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

**b** "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .

**c** "Support" alternative test—enter

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .

(3) Largest amount of support from an exempt organization

(4) Gross investment income

**Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )  
See Additional Data Table

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

---

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed

---

**b** The form in which applications should be submitted and information and materials they should include

---

**c** Any submission deadlines

---

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**Part XV** **Supplementary Information** (continued)**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b> ▶ <b>3a</b>				565,130
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b> ▶ <b>3b</b>				0

**Part XVI-A Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> _____					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .			14	3	
<b>4</b> Dividends and interest from securities. . . . .			14	331,866	3,996
<b>5</b> Net rental income or (loss) from real estate					
<b>a</b> Debt-financed property. . . . .					
<b>b</b> Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .			18	656,679	
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>12</b> Subtotal Add columns (b), (d), and (e). . . . .		0		988,548	3,996
<b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . . <b>13</b>					992,544

(See worksheet in line 13 instructions to verify calculations )

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions )
4	IRC SEC 103- TAX EXEMPT INCOME

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

Part XVII

Table with columns for questions (1, a, b, c, d) and Yes/No responses. Includes sub-questions (1) through (6) for various transactions.

Table with 4 columns: (a) Line No, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements.

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? [ ] Yes [x] No

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here [Signature] [Date: 2018-11-10] [Title] [Box: May the IRS discuss this return with the preparer shown below (see instr)? [x] Yes [ ] No]

Paid Preparer Use Only section containing fields for Print/Type preparer's name (PATRICK E GREEN), Preparer's Signature, Date (2018-11-10), Check if self-employed, PTIN (P00166052), Firm's name (SMITH BUNDAY BERMAN BRITTON PS), Firm's EIN (91-1275259), Firm's address (11808 NORTHUP WAY SUITE 240, BELLEVUE, WA 980051922), and Phone no (425) 827-8255.

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


EDWARD RINGNESS

MARJORIE RINGNESS

**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ACT - A CONTEMPORARY THEATRE 700 UNION STREET SEATTLE, WA 98101		501(C)(3)	YOUNG PLAYWRIGHTS PROGRAM	10,000
ADAMS ELEMENTARY SCHOOL 6110 28TH AVE NW SEATTLE, WA 98107		501(C)(3)	ARTIST IN RESIDENCE	-4,870
ARTS CORPS4408 DELRIDGE WAY SW SEATTLE, WA 98101		501(C)(3)	ARTS INTEGRATIONS THROUGH TEACHING ARTIST RESIDENCIES	10,000
<b>Total . . . . . ▶</b> <b>3a</b>				565,130

**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ARTS IN EDUCATION OF THE GORGE 1009 EUGENE STREET HOOD RIVER, OR 97031		501(C)(3)	GENERAL OPERATIONS FOR AFTER SCHOOL ARTS PARTNERSHIPS AND COMMUNITY ARTS FOR K-12	10,000
ARTSED WASHINGTON 158 THOMAS ST 16 SEATTLE, WA 98116		501(C)(3)	ART LESSONS IN THE CLASSROOM	10,000
BETHEL BROADCASTING INC PO BOX 468 BETHEL, AK 99559		501(C)(3)	MULTIMEDIA CAREER PATHWAY PARTNERSHIP	10,000
<b>Total</b> . . . . . 				565,130
<b>3a</b>				



**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BOYS AND GIRLS AID 018 SW BOUNDARY CT PORTLAND, OR 97239		501(C)(3)	TRANSITIONAL LIVING PROGRAM (TLP)	10,000
CARNEGIE PICTURE LAB PO BOX 3223 WALLA WALLA, WA 99362		501(C)(3)	GENERAL OPERATIONS - ART EDUCATION TO K-5 CLASSROOMS	10,000
CLARK FORK-HOPE AREA SENIOR CENTER PO BOX 171 CLARK FORK, ID 83811		501(C)(3)	GENERAL OPERATIONS SUPPORTING SENIOR CENTER	10,000
<b>Total</b> . . . . . <b>3a</b>				565,130

**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CONSTRUCTING HOPE 405 NE CHURCH ST PORTLAND, OR 97211		501(C)(3)	CONSTRUCTION TRADES FOR DISADVANTAGED YOUTH	10,000
EDUCATION FOUNDATION FOR BILLINGS PUBLIC SCHOOLS 415 NORTH 30T ST BILLINGS, MT 59101		501(C)(3)	BRINGING STEM TO LIFE THROUGH RELEVANCY	10,000
EL CENTRO DE LA RAZA 2524 16TH AVE SOUTH SEATTLE, WA 98144		501(C)(3)	SENIOR WELLNESS AND CONGREGATE MEAL PROGRAM	10,000
<b>Total . . . . .</b> ► <b>3a</b>				565,130

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount	
Name and address (home or business)					
<b>a</b> <i>Paid during the year</i>					
FIRST WASHINGTON 21238 68TH AVENUE S KENT, WA 98032					10,000
FRIENDS OF JANE ADDAMS MUSIC 98 BOX 27497 SAMMAMISH, WA 98165					10,000
FRIENDS OF YOUTH 13116 NE 132ND ST KIRKLAND, WA 98034					10,000
<b>Total . . . . .</b> ▶ <b>3a</b>				565,130	

**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HEART OF OREGON CORPS INC PO BOX 279 BEND, OR 97709				
		501(C)(3)	GENERAL OPERATIONS FOR VOCATIONAL TRAINING AND CONTINUING EDUCATION TO DISCONNECTED YOUTH 16-24	10,000
HIGH DESERT MUSEUM 59800 SOUTH HWY 97 BEND, OR 97702				
		501(C)(3)	STEM CONNECT REIMAGINING MUSEUM AND SCHOOL PARTNERSHIPS	10,000
HILLTOP ARTISTS IN RESIDENCE PO BOX 6829 TACOMA, WA 98417				
		501(C)(3)	IN-SCHOOL ELECTIVES AT JASON LEE MIDDLE SCHOOL	10,000
<b>Total</b> . . . . . <b>3a</b>				565,130

**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HUNGER INTERVENTION PROGRAM 3841 NE 123RD ST SEATTLE, WA 98125		501(C)(3)	SENIOR COMMUNITY MEAL PROGRAM	10,000
LIFEWIREPO BOX 6398 BELLEVUE, WA 98008		501(C)(3)	ECONOMIC STABILITY SERVICES	10,000
LOG CABIN LITERACY (THE CABIN) 801 S CAPITAL BLVD BOISE, ID 83702		501(C)(3)	WRITERS IN THE SCHOOLS	10,000
<b>Total . . . . . ▶</b> <b>3a</b>				565,130


**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MORNINGSIDE PO BOX 7936 809 LEGION WAY SE OLYMPIA, WA 98507				
		501(C)(3)	HIGH SCHOOL TRANSITION PROGRAM	10,000
MUSIC WORKS NORTHWEST 1331 118TH AVE SE STE 400 BELLEVUE, WA 98005				
		501(C)(3)	MUSIC WORKS OUTREACH PROGRAM	10,000
MUSTARD SEED PROJECT PO BOX 182 VAUGHN, WA 98394				
		501(C)(3)	GENERAL OPERATIONS - TO ASSIST IN PROVIDING INDEPENDENT LIVING AND QUALITY OF LIFE FOR SENIORS RESIDING ON THE KEY PENINSULA IN WESTERN, WASHINGTON	10,000
<b>Total</b> . . . . . <b>3a</b>				565,130

**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PACIFIC NORTHWEST BALLET 301 MERCER ST SEATTLE, WA 98109		501(C)(3)	DISCOVER DANCE	10,000
NEW PHOEBE HOUSEPO BOX 5245 TACOMA, WA 98415		501(C)(3)	FAMILY RECOVERY, REUNIFICATION & RESILIENCY PROGRAM	10,000
NORTHWEST YOUTH SERVICES 1020 N STATE ST BELLINGHAM, WA 98225		501(C)(3)	VOCATIONAL READINESS PROGRAM	10,000
<b>Total</b> . . . . .				565,130
<b>3a</b>				

**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
REFUGEE WOMEN'S ALLIANCE 4008 MARTIN LUGHER KING JR WAY SOUTH SEATTLE, WA 98108		501(C)(3)	WORKFIRST EMPLOYMENT TRAINING PROGRAM	10,000
OPPORTUNITY COUNCIL 1111 CORNWALL AVE BELLINGHAM, WA 98225		501(C)(3)	WHATCOM VOLUNTEER CHORE PROGRAM	10,000
PROJECT FEAST 202 WEST GROVE STREET STE L KENT, WA 98032		501(C)(3)	GENERAL OPERATIONS FOR PROGRAMS EMPOWERING REFUGEE & IMMIGRANT COOKS, PROVIDING PATHWAYS TO SUSTAINABLE EMPLOYMENT IN THE FOOD INDUSTRY	10,000
<b>Total</b> . . . . . <b>3a</b> 				565,130



**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount	
Name and address (home or business)					
<b>a</b> <i>Paid during the year</i>					
SEATTLE EDUCATION ACCESS 6920 ROOSEVELT WAY NE 355 SEATTLE, WA 98115					10,000
SALEM ART ASSOCIATION 600 MISSION ST SE SALEM, OR 97302					10,000
SEATTLE SHAKESPEARE COMPANY PO BOX 19595 SEATTLE, WA 98109					10,000
<b>Total</b> . . . . . 				565,130	
<b>3a</b>					

**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
TREEHOUSE 2100 24TH AVE S SUITE 200 SEATTLE, WA 98144		501(C)(3)	GENERAL OPERATIONS FOR PROGRAMS AIMED AT CHILDREN IN FOSTER CARE, TO ENSURE THAT THEY HAVE THE OPPORTUNITIES AND SUPPORT THEY NEED TO BECOME PRODUCTIVE MEMBERS OF THE COMMUNITY	10,000
WHATCOM COUNCIL ON AGING 315 HALLECK ST BELLINGHAM, WA 98225		501(C)(3)	MEALS ON WHEELS AND MORE	10,000
SENIOR SERVICES OF SNOHOMISH COUNTY 11627 AIRPORT RD STE B EVERETT, WA 98204		501(C)(3)	SENIOR NUTRITION PROGRAM	10,000
<b>Total . . . . . ▶</b>				565,130
<b>3a</b>				

**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SHORELINE LFP ARTS COUNCIL 18560 1ST AVE NE SHORELINE, WA 98155		501(C)(3)	ARTISTS IN SCHOOLS	10,000
BRADLEY ANGLE5432 N ALBINA AVE PORTLAND, OR 97217		501(C)(3)	ECONOMIC EMPOWERMENT PROGRAM	10,000
SOUTH PARK SENIOR CITIZENS 8201 10TH AVE S STE 4 SEATTLE, WA 98108		501(C)(3)	GENERAL OPERATIONS FOR PROGRAMS FOR SENIORS AT THE SOUTH PART SENIOR CENTER	10,000
<b>Total</b> . . . . .				565,130
<b>3a</b>				

**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SOUTH SOUND OUTREACH SERVICES 1106 MARTIN LUTHER KING JR WAY TACOMA, WA 98405		501(C)(3)	FINANCIAL EMPOWERMENT PROGRAM	10,000
VINE MAPLE PLACEPO BOX 1092 MAPLE VALLEY, WA 98038		501(C)(3)	STABLE FAMILIES PROGRAM ADULT SERVICES	10,000
WORDCRAFTERS IN EUGENE 438 CHARNELTON STREET SUITE 102 EUGENE, OR 97401		501(C)(3)	WRITERS IN THE SCHOOLS/WITS WRITERS RESIDENCY SERIES	10,000
<b>Total</b> . . . . . <b>3a</b>			▶	565,130

**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COFFEE OASIS837 4TH ST BREMERTON, WA 98334		501(C)(3)	HOPE INC, OPPORTUNITIES FOR HOMELESS YOUTH	10,000
COMMUNITY ACTION OF SKAGIT COUNTY 330 PACIFIC PLACE MOUNT VERNON, WA 98273		501(C)(3)	EQUIPING FAMILIES FOR SUCCESS INITIATIVE	10,000
IMPACT NWPO BOX 33530 PORTLAND, OR 972923530		501(C)(3)	SENIOR SERVICES	10,000
<b>Total . . . . .</b> ▶ <b>3a</b>				565,130

**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HOPA MOUNTAIN FOUNDATION 234 E BABCOCK STE E BOSEMAN, MT 59715		501(C)(3)	INDIGENOUS SCHOLARS OF PROMISE	10,000
HUMAN SOLUTIONS INC 12350 SE OIWEKK BKVD PORTLAND, OR 97236		501(C)(3)	EMPLOYMENT AND ECONOMIC DEVELOPMENT PROGRAM	10,000
JEROME SENIOR CITIZENS INC 520 N LINCOLN AVE JEROME, ID 83338		501(C)(3)	SENIOR COMMUNITY NUTRITION PROGRAM	10,000
<b>Total</b> . . . . .				565,130
<b>3a</b>				

**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
JUMA VENTURES 131 STEUART ST STE 201 SAN FRANCISCO, CA 94105		501(C)(3)	SEATTLE YOUTH CONNECT	10,000
KLAMATH BASIN SENIOR CITIZENS' CENTER INC PO BOX JE KLAMATH FALLS, OR 97602		501(C)(3)	GENERAL OPERATIONS	10,000
LOWER COLUMBIA COMMUNITY ACTION COUNCIL 1526 COMMERCE AVE LONGVIEW, WA 98632		501(C)(3)	SENIOR NUTRITION	10,000
<b>Total . . . . . ▶</b> <b>3a</b>				565,130

**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MISSOULA AGING SERVICES 337 STEPHENS AVE MISSOULA, MT 59801			501(C)(3) MEALS ON WHEELS	10,000
SOUND LEARNINGPO BOX 2529 SHELTON, WA 98584			501(C)(3) GENERAL OPERATIONS FOR PROGRAMS TO HELP ADULTS IMPROVE THEIR BASIS SKILLS, ACQUIRE A HIGH SCHOOL DIPLOMA OR RED AND DEVELOP ENGLISH LANUAGE SKILLS	10,000
PROVAIL12550 AURORA AVE N SEATTLE, WA 98133			501(C)(3) TRANSITION PROGRAM	10,000
<b>Total . . . . .</b> ▶ <b>3a</b>				565,130



**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SOUTHEAST SEATTLE SENIOR FOUNDATION 6727 RAINIER AVE S SEATTLE, WA 98118		501(C)(3)	ELEVATORS FOR SENIOR APARTMENTS	10,000
SENIOR SERVICES OF ISLAND COUNTY PO BOX 939 FREELAND, WA 98249		501(C)(3)	MEALS ON WHEELS	10,000
WOMEN'S AND CHILDREN'S ALLIANCE 720 W WASHINGTON ST BOISE, ID 83702		501(C)(3)	FINANCIAL LITERACY	10,000
<b>Total . . . . .</b> ▶ <b>3a</b>				565,130

**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
LEARNING LAB INC308 E 36TH ST GARDEN CITY, ID 83714		501(C)(3)	GENERAL OPERATIONS USED FOR LITERACY EDUCATION CENTER FOR ADULTS AND FAMILIES WITH YOUNG CHILDREN	10,000
<b>Total . . . . . ▶</b> <b>3a</b>				565,130

**TY 2017 Accounting Fees Schedule****Name:** HARVEST FOUNDATION**EIN:** 91-2065635**Accounting Fees Schedule**

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
SMITH BUNDAY BERMAN BRITTON, P S - FORM 990-PF PREPARATION	19,463	9,732		9,731

**efile GRAPHIC print - DO NOT PROCESS**

**As Filed Data -**

**DLN: 93491316010848**

## **TY 2017 General Explanation Attachment**

**Name:** HARVEST FOUNDATION

**EIN:** 91-2065635

Identifier	Return Reference	Explanation
INVESTMENTS CORPORATE STOCK	PART II, LINE 10B	<p>HARVEST FOUNDATION INVESTMENTS - COPROPRATE STOCK STATEMENT 9, SUPPORTING SCHEDULE DETAIL OF PART II, LINE 10B COST BASIS FAIR MARKET VALUE 5000 SHARES CISCO SYSTEMS INC 101,900 191,5 002500 SHARES SOUTHERN CALIFORNIA EDISON 58,546 63,5501500 SHARES CENTURYLINK INC 56,718 2 5,020853 SHARES CIT GROUP 27,995 41,99335 SHARES ADIENT PLC 1,631 2,7551940 SHARES ASTRAZE NECA PLC 50,284 67,3182170 SHARES AT&amp;T 57,003 84,3702028 SHARES BCE INC 89,131 97,364300 SHARES BOEING COMPANY 39,452 88,473134 SHARES BRIGHTHOUSE FIN INC 6,696 7,858884 SHARES CHEVRON CORP 68,119 110,668667 SHARES CHUBB 71,970 97,4692707 SHARES CISCO SYSTEMS INC 58,711 103,6781866 SHARES CONOCOPHILLIPS 80,107 102,4252260 SHARES CORNING INC 42,528 72,297658 SHARES DIAGEO PLC 73,028 96,0881470 SHARES DUPONT E IDE NEMOURS 44,590 104,693718 SHARES ELI LILLY &amp; CO 31,596 60,642910 SHARES EXXON MOBIL CORP 70,437 76,1123150 SHARES GENERAL ELECTRIC 75,927 54,968711 SHARES GENUINE PARTS CO 31,860 67,5521497 SHARES HSBC HLDG PLC 63,116 77,3051713 SHARES INTEL CORP 35,369 79,072789 SHARES JOHNSON AND JOHNSON 49,588 110,2391685 SHARES JOHNSON CONTROLS INTER 73,591 64,2151046 SHARES JPMORGAN CHASE &amp; CO 53,760 11,859550 SHARES KIMBERLY CLARK 39,132 66,3631433 SHARES MERCK AND CO INC 47,532 80,6351660 SHARES METLIFE INC 63,147 83,930709 SHARES NEXTERA ENERGY INC 39,302 110,739916 SHARES NOVA RTIS ADR 65,694 76,9072689 SHARES PFIZER INC 85,699 97,396498 SHARES RAYTHEON CO 27,334 93,5491645 SHARES ROYAL DUTCH SHEL PLC 105,578 112,337678 SHARES SIEMENS AG 47,117 46,965711 SHARES SUNTRUST BKS INC 50,230 49,799630 SHARES TRAVELERS COS INC 35,351 85,4531389 SHARES UNILEVER NV NY 37,045 78,2281645 SHARES WELLS FARGO &amp; CO 91,931 99,803414 SHARES 3M COMP ANY 27,120 83,556229 SHARES AFLAC INC 19,131 20,10256 SHARES ALLERGAN PLC 11,729 9,160141 SHARES ALLSTATE CORP 12,793 14,764493 SHARES AMERICAN INTERNATIONAL 29,812 29,373130 SHARES AMGEN IN 23,955 22,607240 SHARES ANDEAVOR REG 24,934 27,44259 SHARES ANTHEM INC 10,873 13,27630 SHARES APTIV PLC 2,585 2,5451479 SHARES AT&amp;T INC 51,295 57,504847 SHARES BAKER HUGHES INC 29,971 26,799501 SHARES BANK NEW YORK MELLON 26,112 26,9841846 SHARES BANK OF AMERICA CORP 45,799 54,49435 SHARES BLACKROCK INC 15,204 17,980169 SHARES BRISTOL-MYERS SQUIBB CO 10,635 10,356264 SHARES CAMPBELL SOUP CO 12,321 12,701205 SHARES CAPITAL ONE FINL 16,974 20,414184 SHARES CATERPILLER INC 22,910 28,995525 SHARES CENTURYLINK INC 8,366 8,757251 SHARES CHUBB LTD 35,544 36,67952 SHARES CHURCH&amp;DWIGHT CO INC 2,535 2,60930 SHARES CIGNA INC 2,285 2,249503 SHARES COSCO SYSTEMS INC 17,208 19,26559 SHARES CLOROX CO 7,747 8,77684 SHARES CME GROUP INC 11,180 12,268502 SHARES CMS ENERGY CORP 23,564 23,745939 SHARES COCA COLA 43,372 43,081600 SHARES COMCAST CORP 23,826 24,030230 SHARES COMERICA INC 17,559 19,966408 SHARES CONAGRA BRANDS INC 13,611 15,369321 SHARES CONSOLIDATED EDISON INC 21,462 27,269380 SHARES CVS HEALTH CORP 31,027 27,55070 SHARES DANAHER CORP 5,982 6,497117 SHARES DEERE CO 14,424 18,31210 SHARES DELPHI TECH PLC 509 525357 SHARES DISNEY (WALT) CO 35,200 38,38189 SHARES DOVER CORP 8,176 8,98832 SHARES DXC TECH CO 2,689 3,037252 SHARES EATON CORP 19,432 19,911189 SHARES, ECOLAB INC 24,613 25,360342 SHARES EDISON INTL 27,069 21,628125 SHARES ELI LILLY &amp; CO 10,528 10,558369 SHARES EMERSON ELEC CO 23,284 25,716411 SHARES EVER SOURCE ENERGY 25,211 25,967662 SHARES EXELON CORP 24,607 26,089211 SHARES EXPRESS SCRIPTS HLDG CO 13,304 15,749646 SHARES FIFTH THIRD BANCORP 17,694 19,60051 SHARES FLOWSERVE CORP 2,099 2,1491489 SHARES FORD MOTOR CO 17,764 18,59835 SHARES FRANKLIN RES INC 1,522 1,51742 2 SHARES GENERAL MILLS 23,392 25,020368 SHARES GENERAL MOTORS CO 14,816 15,084163 SHARES GOLDMAN SACHS GROUP 37,781 41,526106 SHARES HARTFORD FINL SVCS 5,819 5,96670 SHARES HCA HEALTHCARE INC 5,436 6,149247 SHARES HORMEL FOODS CORP 7,830 8,988411 SHARES HUNTINGTON BANCSHRS INC 5,528 5,984586 SHARES HIS MARKIT LTD 26,227 26,458949 SHARES INTEL CORP 35,559 43,806 229 SHARES INTL BUSINESS MACH 33,562 35,13356 SHARES INTL PAPER CO 3,130 3,24552 SHARES JM SMUCKER CO 5,516 6,460326 SHARES JOHNSON AND JOHNSON 42,686 45,549279 SHARES JOHNSON CONTROLS INTER 11,422 10,633940 SHARES JPMORGAN CHASE &amp; CO 88,078 100,524434 SHARES KEY CORP 7,960 8,754221 SHARES KIMBERLY CLARK 15,647 26,6661731 SHARES KINDER MORGAN INC 33,344 31,279284 SHARES KROGER CO 5,734 7,796113 SHARES LOWES COMPANIES INC 8,960 10,502281 SHARES LYONDELLBASELL IND 28,033 31,000170 SHARES MATTEL INC 2,911 2,615154 SHARES MCCORMICK NON VGT 14,981 15,69429 SHARES MCKESSON CORP 4,492 4,523441 SHARES MEDTRONIC PLC 34,561 35,611376 SHARES MERCK AND CO INC 15,535 21,158383 SHARES METLIFE INC 19,732 19,364136 SHARES NEWMONT MINING CORP 4,878 5,103194 SHARES NEXTERA ENERGY INC 28,654 30,30167 SHARES NIELSEN HOLDINGS PLC 2,754 2,439194 SHARES NISOURCE INC 5,058 4,980102 SHARES NORFOLK SOUTHERN CORP 13,362 14,780236 SHARES NUCOR CORP 12,765 15,00574 SHARES OMNICOM GROUP 5,560 5,389728 SHARES ORACLE CORP 34,966 34,420187 SHARES PACCAR INC 13</p>

Identifier	Return Reference	Explanation
INVESTMENTS CORPORATE STOCK	PART II, LINE 10B	,440 13,29273 SHARS PARKER HANNIFIN CORP 12,700 14,56980 SHARES PENTAIR PLC 5,309 5,650877 SHARS PFIZER INC 30,971 31,765259 SHARES PNC FINCL SERVES GR 34,299 37,371174 SHARES PPG IND INC 18,881 20,32717

**TY 2017 Investments Corporate Bonds Schedule****Name:** HARVEST FOUNDATION**EIN:** 91-2065635**Investments Corporate Bonds Schedule**

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
\$50,000 HARTFORD FINL SVCS MTN 6% MATURES 5/16/2019	50,269	51,807
\$140,000 MERRILL LYNCH & CO INC. 6.22% MATURES 9/15/2026	142,448	163,632
\$140,000 BELL SOUTH TELECOM 6.375% MATURES 6/1/2028	144,702	163,439
\$13,000 JOHN HOPKINS UNIVERSITY 5.25% MATURES 7/1/2019	13,050	13,584
\$50,000 COCA-COLA CO 3.2% MATURES 11/1/23	50,321	51,918

**TY 2017 Investments Corporate Stock Schedule****Name:** HARVEST FOUNDATION**EIN:** 91-2065635

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
11,180 SHS MICROSOFT CORPORATION	481,721	1,075,238
SEE STATEMENT	5,346,226	6,862,278



**TY 2017 Investments Government Obligations Schedule****Name:** HARVEST FOUNDATION**EIN:** 91-2065635**US Government Securities - End  
of Year Book Value:**

496,838

**US Government Securities - End  
of Year Fair Market Value:**

493,710

**State & Local Government  
Securities - End of Year Book  
Value:**

0

**State & Local Government  
Securities - End of Year Fair  
Market Value:**

0

**TY 2017 Investments - Other Schedule****Name:** HARVEST FOUNDATION**EIN:** 91-2065635**Investments Other Schedule 2**

<b>Category/ Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
42,664 SHS SERIES R MUTUAL FUNDS	AT COST	458,091	395,069
1457 SHS HCP INC	AT COST	37,698	37,999
1283 SHS WELLTOWER (FORMERLY HEALTHCARE) REIT	AT COST	63,811	81,817
79 SHS VENTAS INC REIT	AT COST	4,008	4,741
4074 SHS ISHS INTERMEDIATE	AT COST	447,951	444,922
1211 SHS ISHARES 3-7 YEAR	AT COST	149,357	147,936
5212 SHS POWERSHARES ETF TR II	AT COST	99,597	98,767
5662 SHS VANGUARD MORTGAGE-BACKED	AT COST	298,788	296,915
42 SHS BOSTON PPTYS INC REIT	AT COST	5,198	5,461
117 SHS EQUITY RESIDENTIAL REIT	AT COST	7,726	7,461
17 SHS REGENCY CENTERS CORP REIT	AT COST	1,073	1,176
105 SHS SIMON PROPERTY GROUP REIT	AT COST	17,169	18,033
33 SHS VORNADO REALTY TRUST REIT	AT COST	2,540	2,580
2000 SHS GUGGENHEIM S&P 500 EQUAL	AT COST	63,976	202,060
1000 SHS ISHARES TIPS	AT COST	97,484	114,080
3400 ISHARES MSCI USA	AT COST	176,098	377,637
137 SHS CROWN CASTLE REIT	AT COST	11,639	15,208

**TY 2017 Legal Fees Schedule****Name:** HARVEST FOUNDATION**EIN:** 91-2065635

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
MENAKER & HERRMANN - INVESTMENT LITIGATION SUPPORT	285	285		0

**TY 2017 Other Assets Schedule****Name:** HARVEST FOUNDATION**EIN:** 91-2065635**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
DIVIDENDS RECEIVABLE FROM BROKER	557	19	19
ACCRUED INTEREST RECEIVABLE			6,214
OTHER RECEIVABLES		4,870	4,870

**TY 2017 Other Expenses Schedule****Name:** HARVEST FOUNDATION**EIN:** 91-2065635**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LICENSES & FEES	25	0		25
OFFICE EXPENSES	637	0		637
MEMBERSHIPS	3,650	0		3,650

**TY 2017 Other Professional Fees Schedule****Name:** HARVEST FOUNDATION**EIN:** 91-2065635

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
MERRILL LYNCH - INVESTMENT SERVICES	74,699	74,699		0

**TY 2017 Taxes Schedule****Name:** HARVEST FOUNDATION**EIN:** 91-2065635

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
FOREIGN TAX WITHHOLDING	5,926	5,926		0
FEDERAL INCOME TAX PAYMENTS	15,000	0		0

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)  
Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**  
▶ Attach to Form 990, 990-EZ, or 990-PF  
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at  
[www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047  
**2017**

**Name of the organization**  
HARVEST FOUNDATION

**Employer identification number**  
91-2065635

**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

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

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 other 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 33<sup>1</sup> 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 totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

**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 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)



<b>Name of organization</b> HARVEST FOUNDATION	<b>Employer identification number</b> 91-2065635
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**Part I** **Contributors** (See instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	EDWARD AND MARJORIE RINGNESS <hr/> PO BOX 75554 <hr/> SEATTLE, WA 981750554	\$ 90,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
	<hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
	<hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
	<hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
	<hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
	<hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
	<hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
	<hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )

<b>Name of organization</b> HARVEST FOUNDATION	<b>Employer identification number</b> 91-2065635
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<b>Part II</b> <b>Noncash Property</b> (See instructions) Use duplicate copies of Part II if additional space is needed
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(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____

**Name of organization**  
HARVEST FOUNDATION

**Employer identification number**  
91-2065635

**Part III** *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____
_____	_____