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2017

OMB No 1545-0052

Return of Private Foundation

Form 990-PF Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

 For	cale	ndar year 2017, or tax yea	r beginning 01-01-2	017 . a	nd er	nding 12-31-	2017	
		undation		,			entification numbe	r
		ND RAO REMALA FOUNDATION TH BUNDAY BERMAN BRITTON PS				91-6477106		
		d street (or P O box number if mail is i ORTHUP WAY NO 240	not delivered to street address) Room/suite		B Telephone nu	mber (see instruction	ns)
1.	LOUG IN	ORTHUP WAT NO 240				(425) 462-8220		
		n, state or province, country, and ZIP o WA 98005	r foreign postal code	•		C If exemption	application is pendin	g, check here
G Ch	neck al	Il that apply	☐ Initial return of a	former public charity		D 1. Foreign or	ganizations, check he	ere 🗀
		Final return	Amended return	•		2 Foreign or	ganizations meeting k here and attach coi	► L the 85%
		☐ Address char				·	ındatıon status was t	· -
_	•		501(c)(3) exempt private				n 507(b)(1)(A), chec	
		n 4947(a)(1) nonexempt charitab	I	le private foundation				
of y	year (i	ket value of all assets at end from Part II, col (c), ▶\$ 13,979,850	J Accounting method Other (specify) (Part I, column (d) must	Cash L Accru	ıaı		ition is in a 60-month n 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and	Evnenses (The total	T				(d) Disbursements
		of amounts in columns (b), (c), and equal the amounts in column (a) (se	(d) may not necessarily	(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	387,175	;			, ,,
	2	schedule) Check ▶ ☐ If the foundation is	not required to attach					
		Sch B						
	3	Interest on savings and tempora	·					
	4	Dividends and interest from sec	urities	282,218	}	282,218		
	5a b	Gross rents						
æ	6a	Net gain or (loss) from sale of a	ssets not on line 10	161,429	,			
Revenue	b	Gross sales price for all assets of		,				
3e√	7	Capital gain net income (from P	2		161,429			
_	8	Net short-term capital gain .				101,423		
	9	Income modifications						
	10a	Gross sales less returns and allo	owances					
	b	Less Cost of goods sold Gross profit or (loss) (attach scl	odule)	<u> </u>				
	11	Other income (attach schedule)	,					
	12			830,822	,	443,647	0	
	13	Compensation of officers, direct		000,022		0	0	
	14	Other employee salaries and wa						
Š	15	Pension plans, employee benefit	ts					
nse	16a	Legal fees (attach schedule) .						
Expenses	ь	Accounting fees (attach schedul	e)	9,604		4,802	0	4,802
e E	С	Other professional fees (attach	schedule)	35,790		35,790	0	(
ţ	17	Interest						
and Administrative	18	Taxes (attach schedule) (see in	structions)	4,034		4,034	0	(
Ē	19	Depreciation (attach schedule) a	and depletion					
f e	20	Occupancy						
ρ	21	Travel, conferences, and meeting	_					
	22	Printing and publications		00.1				
ing	23	Other expenses (attach schedul		7,234		0	0	7,234
Operating	24	Total operating and administ		50.000		44.636	_	12.00
ğ O	25	Add lines 13 through 23 Contributions, gifts, grants paid		56,662 580,658	1	44,626	0	12,036 580,658
-	25 26	Total expenses and disburse		300,038	1			300,038
	27	25 Subtract line 26 from line 13		637,320		44,626	0	592,694
	27	Subtract line 26 from line 12 Excess of revenue over expe	nses and	193,502				
	a	disbursements Net investment income (if ne		193,302		399,021		
	b c	Adjusted net income (if negation	-			399,021	0	
For		rwork Reduction Act Notice, se	*	L		Cat No 11289>	_	 m 990-PF (2017

8,187,163

1,288,397

6,473

5,319

5,319

11,169,857

11,169,857

11,175,176

11,175,176

*

ارچە

9,428,422

1,659,454

6,582

11,479,639

31,897

31.897

11,447,742

11,447,742

11,479,639

2

3

4

5

11,169,857

11,447,742

11,447,742 Form 990-PF (2017)

193,502

84,383

11,930,391

1,657,696

6,582

13,979,850

	/
•	,
•	
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•	
•	/11//17
•	/11//17

4

5

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10a

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c 11

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16

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18

19

20

21

22

23

24

25

28

29

31 Part III

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net 30

2

3

Pledges receivable

Less allowance for doubtful accounts ▶

Less allowance for doubtful accounts

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -_

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

Receivables due from officers, directors, trustees, and other

Other notes and loans receivable (attach schedule)

Prepaid expenses and deferred charges

Investments—land, buildings, and equipment basis ▶ _ Less accumulated depreciation (attach schedule)

Less accumulated depreciation (attach schedule)

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

Foundations that follow SFAS 117, check here

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

disqualified persons (attach schedule) (see instructions)

Investments—U S and state government obligations (attach schedule)

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

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

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

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

Page **3**

Part IV Capital Gains a	and Losses for Tax on Invest	ment Income			
	(a) the kind(s) of property sold (e g , re ehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a See Additional Data Table	e				
b					
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis sense of sale	Gain o	h) r (loss)) mınus (g)
a See Additional Data Table	e				
b					
С					
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69		I)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) s of col (ı) l (ʒ), ıf any	col (k), but not	h) gain minus less than -0-) or om col (h))
a See Additional Data Table	e				
b					
С					
d					
e					
	gaın or (loss) as defined in sections : rt I, line 8, column (c) (see instructi	ons) If (loss), enter -0	Part I, line 7	2	161,429
iii rait 1, iiile 0					
Part V Qualification L	Jnder Section 4940(e) for Re	duced Tax on Net	Investment In	come	
(For optional use by domestic p	private foundations subject to the sec	tion 4940(a) tax on n	et investment incon	ne)	
If section 4940(d)(2) applies, le	eave this part blank			_	
	e section 4942 tax on the distributal ot qualify under section 4940(e) Do		· ·	ı? ∐ Y€	es 🗹 No
	nount in each column for each year,	see instructions before	e making any entrie		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharital	ole-use assets	(d) Distribution rati (col (b) divided by c	
2016	658,428		11,630,756		0 056611
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
2 Total of line 1, column (d	<i>'</i>		2		0 243681
number of years the foun	o for the 5-year base period—divide to indation has been in existence if less incharitable-use assets for 2017 from	than 5 years	3		0 048736 12,929,099
		•	5	1	630,113
	ent income (1% of Part I, line 27b)		6	1	3,990
				1	634,103
	ons from Part XII, line 4 ,			+	640,049
	eater than line 7, check the box in Pa			ng a 1% tax rate. Se	
instructions		,,	,		

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

7b

	Information About Officers, D	irectors Trustees	Foundation Managers	Highly Daid Employees
Door WITT	Initination About Officers, D	inectors, musices,	i oundation managers,	inging raid Employees,
Part VIII	and Contractors			

and Contractors				
List all officers, directors, truste (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	Expense account, (e) other allowances
RAO V REMALA C/O SMITH BUNDAY BERMAN BRITTON 1.1808 NORTHUP WAY SUITE 240 BELLEVUE, WA 98005	TRUSTEE 2 00	0	'	0
SATYA K REMALA C/O SMITH BUNDAY BERMAN BRITTON 11808 NORTHUP WAY SUITE 240 BELLEVUE, WA 98005	TRUSTEE 2 00	0	0	0
2 Compensation of five highest-pa	id employees (other than t	hose included on line 1	1—see instructions). If nor	ne, enter "NONE."
(a) Name and address of each employee p more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE				
		+		
Total number of other employees paid ov	 /er \$50,000		•	0
3 Five highest-paid independent of				E".
(a) Name and address of each perso	n paid more than \$50,000	(b) Typ	pe of service	(c) Compensation
NONE		4		
		-		
		1		
		4		
		1		
Fotal number of others receiving over \$5	0,000 for professional services	·····		0
Part IX-A Summary of Direct				
ist the foundation's four largest direct charitabl organizations and other beneficiaries served, co			nation such as the number of	Expenses
1	, , , , , , , , , , , , , , , , , , , ,			
2				
3				
4				
Part IX-B Summary of Progra	m-Related Investments	(see instructions)		
Describe the two largest program-related inv		<u> </u>	and 2	Amount
1 GLOBAL HEALTH INVESTMENT FUND THE DEVELOPMENT OF DRUGS, VACC GLOBAL HEALTH CHALLANGES THAT COLLABORATION AMOUNG JP MORGA	TÍNES, PREVENTATIVE, DIAGNA DISPROPORTIONATELY IMPAC	OSTICS AND OTHER PRO T DEVELOPING COUNTRI	DDUCTS TO ADDRESS IES THE FUND IS A	
PARTNERS		.5 I CONDATION AND LIC	AN S FILAD GLOBAL	47,355
2				
All other programs value - dimension	Sac instructions			
All other program-related investments 3	See Instructions			
-				
Fotal. Add lines 1 through 3				47,355

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

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

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

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

1a

1b

2

3a 3h

4

5

592,694

47,355

640.049

3.990

636.059

Form 990-PF (2017)

b Total for prior years

a From 2012. **b** From 2013. c From 2014. . . . d From 2015. e From 2016.

1 Distributable amount for 2017 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2017

a Enter amount for 2016 only.

Excess distributions carryover, if any, to 2017

f Total of lines 3a through e. 4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ a Applied to 2016, 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

5 Excess distributions carryover applied to 2017 (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 e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018

6 Enter the net total of each column as

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 2012 not

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . . **b** Excess from 2014. . c Excess from 2015. . . . d Excess from 2016. . . e Excess from 2017. . .

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

Subtract lines 7 and 8 from line 6a

indicated below:

d Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a))

196,200

446,265

Form **990-PF** (2017)

Page 9

FORM 990-PF (2	017)		
Part XIII	Undistributed Income	(see instructions)	,

2016 443.849

443,849

(c)

(a)

Corpus

0

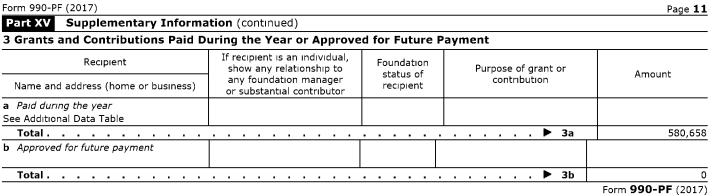
0

(b)

Years prior to 2016

642,465

(d)



	1-A Analysis of Income-Producing		usiness income	Excluded by section	n 512, 513, or 514	(e)
_	s amounts unless otherwise indicated	(a)	(b)	(c)	(d)	Related or exempt function income (See instructions)
Program service revenue a		Business code	Amount	Exclusion code	Amount	(See Instructions)
с						
	and contracts from government agencies					
2 Membe	ership dues and assessments					
invest	tments					
	nds and interest from securities			14	282,218	
	ntal income or (loss) from real estate -financed property.					
	lebt-financed property					
	ental income or (loss) from personal property					
	nvestment income					
	or (loss) from sales of assets other than			1.0	161,429	
	tory			18	161,429	
10 Gross	profit or (loss) from sales of inventory					
	revenue a					
12 Subtot	al Add columns (b), (d), and (e)		0		443,647	
	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu			1	3	443,647
	Relationship of Activities to th		hment of Exem	pt Purposes		
Line No. ▼	Explain below how each activity for which the accomplishment of the foundation's exinstructions)					
	+					
	1					
	ļ					
	1					
					Ea	rm 990-PF (2017)

orm 990)-PF (2	2017)											Pa	ge 13
Part >	(VII	Information Re Exempt Organi		ransfei	rs To a	ind Trans	actio	ns and I	Relatio	nships With No	ncharit	able		
		anization directly or in Code (other than sectio									ion 501		Yes	No
a Trans	sfers fr	rom the reporting foun	dation to a r	oncharit	able exe	empt organı	zation	of						
(1)	Cash.										.	1a(1)		No
(2)	Other	assets									.	1a(2)		No
b Othe	r trans	actions												
(1)	Sales	of assets to a nonchar	itable exemp	t organiz	zation.							1b(1)		No
		ases of assets from a r		•	-						- t	1b(2)		No
		of facilities, equipmer	•								ŀ	1b(3)		No
		ursement arrangemen					• •				ŀ	1b(4)		No
		or loan guarantees.									ŀ	1b(5)		No
		nance of services or m	•		_						.	1b(6)		No
	-	facılıtıes, equıpment, n er to any of the above									l	1c		No
of the	e good y tran:	(b) Amount involved	vices given b ngement, sh	y the rep low in col	porting f lumn (d	foundation	If the f of the	oundation goods, ot	n receive :her asse	d less than fair mai	rket value ived	9	ngemen	nte
(a) Line i	10	(b) Amount myorved	(c) Name of	попенана	able exel	npt organizat	1011	(d) Desi	cription or	cransiers, cransaccions	, and snar	ing arrai	ngernen	
							-							
descr	ribed ii	dation directly or indirent section 501(c) of the mplete the following si	Code (other chedule		ction 50	1(c)(3)) or	ın sect	ion 527?				☐Yes	✓	No
		(a) Name of organization	on		(b) Type of org	anızatıo	n		(c) Description	n of relatio	nship		
	of my	r penalties of perjury, knowledge and belief preparer has any kno	, it is true, c											
Sign Here	*	****				2017-11-1	.5	*	****		return	e IRS dı		
) - s	ignature of officer or t	rustee			<u> </u> Date		—) ⊤	itle		below	e prepai str)?	_	
		Print/Type preparer's	name	Prepare	er's Sign	nature		Date		Check if self-	PTIN	P00080	717	
Paid		JAYNE BRAY						2018-	08-27	employed ▶ ☐		. 55500	. , _ ,	

Preparer | Firm's name ► SMITH BUNDAY BERMAN BRITTON PS Use Only Firm's address ▶ 11808 NORTHUP WAY SUITE 240

BELLEVUE, WA 980051959

Firm's EIN ▶91-1275259

Phone no (425) 827-8255

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P—Purchase (mo, day, yr) (mo, day, yr) D-Donation AMERICAN CAPITAL LTD Р 2012-04-11 2017-01-03 AMERICAN CAPITAL LTD Ρ 2012-04-26 2017-01-03 2014-07-18 AMERICAN CAPITAL LTD Р 2017-01-03 GOLD RESERVE INC CL A Р 2013-02-27 2017-03-30 GOLD RESERVE INC CL A Ρ 2013-05-24 2017-03-30 Ρ VANGUARD SHORT-TERM INVEST-GR ADM 2017-01-30 2017-01-30 Р VANGUARD SHORT-TERM INVEST-GR ADM 2017-04-24 2017-04-24 Р 2017-07-03 2017-07-03 VANGUARD SHORT-TERM INVEST-GR ADM Ρ 2017-10-02 2017-10-02 VANGUARD SHORT-TERM INVEST-GR ADM VANGUARD SHORT-TERM INVEST-GR ADM Р 2017-06-13 2016-05-13 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 7,806 3,693 4,113 17,541 9,467 8,074 2,421 2,104 317 11,181 10,376 805 27,046 31,000 -3,954 1,424 1,424 0 1,483 1,486 -3 145 145 0 578 578 0 1,223 1.223 0 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (i) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 4,113 8,074 317 805 -3,954 0 -3 0 0 0

List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P—Purchase (mo, day, yr) (mo, day, yr) D-Donation VANGUARD SHORT-TERM INVEST-GR ADM Ρ 2016-09-02 2017-10-02 CAPITAL GAINS DIVIDENDS Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss)

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

	(f) (or allowable)	(g) plus expense of sale	(h) (e) plus (f) minus (g)			
897		897	0			
152,077			152,077			
Form 990PF Part IV - Capital	Gains and Losses for Tax on	Investment Income - Colum	ns i - I			
Complete only for assets show	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69					
(i) F M V as of 12/31/69	Adjusted basis	Excess of col (ı)	col (k), but not less than -0-) or			

132,077			132,077						
rm 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I									
Complete only for assets show	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69								
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col(ı) (k) over col(ʒ), ıf any	col (k), but not less than -0-) or (I) Losses (from col (h))						
			n						

152,077

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

SATYA K REMALA

RAO V REMALA

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 YOUTH CARE2500 NE 54TH STREET NONE 501(C)(3) TO HELP HOMELESS YOUNG 500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

SEATTLE, WA 98105			AND PREPARE FOR LIFE	
YARROW POINT COMMUNITY ASSOCIATION 9030 NE 34TH ST	NONE	501(C)(3)	TO PROVIDE BETTER SERVICES TO COMMUNITY	250

ASSOCIATION 2030 NE 34TH ST BELLEVUE, WA 98004		, , , ,	TO COMMUNITY	
VOODLAND PARK ZOO	NONE	501(C)(3)	TO SAVE ANIMALS	

9030 NE 34TH ST BELLEVUE, WA 98004				
WOODLAND PARK ZOO 5500 PHINNEY AVE N SEATTLE WA 98103	NONE	501(C)(3)	TO SAVE ANIMALS	

9030 NE 34TH ST BELLEVUE, WA 98004				
WOODLAND PARK ZOO 5500 PHINNEY AVE N SEATTLE, WA 98103	NONE	501(C)(3)	TO SAVE ANIMALS	29!

BELLEVUE, WA 98004				
WOODLAND PARK ZOO 5500 PHINNEY AVE N	NONE	501(C)(3)	TO SAVE ANIMALS	295

WOODLAND PARK ZOO	NONE	501(C)(3)	TO SAVE ANIMALS	295
5500 PHINNEY AVE N		' ' ' '		
SEATTLE, WA 98103				

Total		 	580,658
5500 PHINNEY AVE N SEATTLE, WA 98103			
WOODLAND LAKK 200	NONE	I TO SAVE ANTINALS	255

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

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

a Paid during the year				
WEATHERHILL NATURE PRESERVE 4030 95TH NE YARROW POINT, WA 98004	NONE	501(C)(3)	TO PROVIDE SUPPORT FOR MAINTENANCE OF THE PRESERVE	500
WASHINGTON WOMEN IN NEED	NONE	501(C)(3)	TO MAKE FINANCIAL GRANTS TO	250

WASHINGTON WOMEN IN NEED 232 5TH AVE S 201 KIRKLAND, WA 98033	NONE	501(C)(3)	TO MAKE FINANCIAL GRANTS TO WOMEN IN WASHINGTON STATE WHO ARE READY FOR TRANSFORMATIONAL CHANGE IN TWO CATEGORIES EDUCATION AND HEALTH CARE	250
WASHINGTON WILDLIFE & RECREATION	NONE	501(C)(3)	TO ENSURE ROBUST FUNDING	500

			TWO CATEGORIES EDUCATION AND HEALTH CARE	
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	500

580,658

Total .

3a

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

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

WASHINGTON TRAILS ASSOCIATION 2019 THIRD AVE SUITE 100 SEATTLE, WA 98121	NONE	501(C)(3)	TO PROTECT HIKING TRAILS AND WILDERNESS	2,500
WASHINGTON OPPORTUNITY SCHOLARSHIP	NONE	501(C)(3)	TO PROVIDE BETTER EDUCATION AND CAREER	2,500

SEATTLE, WA 90121				
WASHINGTON OPPORTUNITY SCHOLARSHIP 1414 31ST AVE S STE 302 SEATTLE, WA 98144	NONE	(- /(- /	TO PROVIDE BETTER EDUCATION AND CAREER OPPORTUNITIES FOR WASHINGTON STUDENTS	2,5

1414 31ST AVE S STE 302 SEATTLE, WA 98144			OPPORTUNITIES FOR WASHINGTON STUDENTS	
VILLAGE THEATRE 303 FRONT STREET NORTH ISSAOUAH WA 98027	NONE	501(C)(3)	TO OFFER THE HIGHEST QUALITY PERFORMING ARTS PROGRAMS	500

,				
VILLAGE THEATRE 303 FRONT STREET NORTH ISSAQUAH, WA 98027	NONE	\ - / \ - /	TO OFFER THE HIGHEST QUALITY PERFORMING ARTS PROGRAMS	50

VILLAGE THEATRE 303 FRONT STREET NORTH ISSAQUAH, WA 98027	501(C)(3) TO OFFER THE HIGHEST QUALITY PERFORMING AF PROGRAMS	RTS

03 FRONT STREET NORTH SSAQUAH, WA 98027	(-)(-)	QUALITY PERFORMING ARTS PROGRAMS	
Total			580 658

55AQUAH, WA 96027	PROGRAMS	
Total	 	580,658

• '	
Total	 580,658

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 UPAYA SOCIAL VENTURESPO BOX 9603 NONE 501(C)(3) TO CREATE DIGNIFIED JOBS BY 1.145 CEATTLE MA 08100 DADTNEDING WITH EADIV

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

SEATTLE, WA 90109			STAGE ENTREPRENEURS TO SCALE THEIR BUSINESSES, EMPLOYING MORE PEOPLE IN THEIR COMMUNITIES	
UNIVERSITY OF WASHINGTON 1200 FIFTH AVENUE SUITE 500	NONE	501(C)(3)	TO SUPPORT COMPUTER SCIENCE SCHOLARSHIPS &	5,0

UNIVERSITY OF WASHINGTON 1200 FIFTH AVENUE SUITE 500 SEATTLE, WA 98101	NONE	501(C)(3)	TO SUPPORT COMPUTER SCIENCE SCHOLARSHIPS & ENGINEERING	5,036
UNIVERSITY DISTRICT FOOD BANK	NONE	501(C)(3)	TO HELP PREVENT HUNGER IN	500

SEATTLE, WA 98101			ENGINEERING	
UNIVERSITY DISTRICT FOOD BANK 4731 15TH AVE NE	NONE	501(C)(3)	TO HELP PREVENT HUNGER IN NORTHEAST SEATTLE	500

·				i
UNIVERSITY DISTRICT FOOD BANK	NONE	501(C)(3)	TO HELP PREVENT HUNGER IN	50
4731 15TH AVE NE		' ' ' '	NORTHEAST SEATTLE	
SEATTLE, WA 98105			NEIGHBORHOODS	i

580,658

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

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

a Paid during the year				
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	207,080
TREE HOUSE2100 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	2,050

			HAS THE OPPORTUNITIES AND SUPPORT THEY NEED TO PURSUE THEIR DREAMS AND BECOME PRODUCTIVE MEMBERS OF OUR COMMUNITY	
THE SALVATION ARMYPO BOX 9219 SEATTLE, WA 98109	NONE	501(C)(3)	TO CARE FOR PEOPLE IN NEED	500

Total . . 580,658

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

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

a Paid during the year				
THE KIRAN ANJALI PROJECT 7201 HOLLY HILL DR MERCER ISLAND, WA 98040	NONE	501(C)(3)	TO ADVANCE EDUCATIONAL OPPORTUNITIES FOR UNDERPRIVILEGED CHILDREN	1,000
TEACH FOR AMERICA 210 S HUDSON ST SUITE 307 SEATTLE, WA 98134	NONE	501(C)(3)	TO EXPAND OPPORTUNITY FOR CHILDREN BY AFFECTING PROFOUND SYSTEMIC CHANGE	550
SVS BALAJI TEMPLE1145 SULLIVAN RD AURORA, IL 60506	NONE	501(C)(3)	TO PROMOTE THE HIGHEST VALUES OF HINDU CULTURE, PHILOSOPHY, RELIGION, SPIRITUALITY AND TRADITION IN OUR ADOPTED HOME LAND	101

WITH BENEVOLENCE, COMPASSION AND TOLERANCE

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Total. 580,658

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

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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	202

			EDUCATIONAL RESOURCES TO ALL INTERESTED IN HINDUISM	
SPLASH1326 5TH AVE STE 300 SEATTLE, WA 98101	NONE	501(C)(3)	TO CREATE SAFE WATER PROJECTS, AT SCALE, IN RESOURCE POOR CITIES	15,000

SEATTLE, WA 98101	NONE	301(0)(3)	PROJECTS, AT SCALE, IN RESOURCE POOR CITIES	13,000
SPECIAL OLYMPICS WASHINGTON 2150 N 107TH ST SUITE 220	NONE	501(C)(3)	TO PROVIDE TRAINING AND HEALTH EDUCTION TO PEOPLE	500

			RESOURCE FOOK CITIES	
SPECIAL OLYMPICS WASHINGTON 2150 N 107TH ST SUITE 220 SEATTLE, WA 98133	NONE	\ - / \ - /	TO PROVIDE TRAINING AND HEALTH EDUCTION TO PEOPLE WITH DISABILITIES	500

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

2150 N 107TH ST SUITE 220		HEALTH EDUCTION TO PEOPLE	Ì
SEATTLE, WA 98133		WITH DISABILITIES	İ

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				
SEATTLE UNIVERSITY901 12TH AVENUE SEATTLE, WA 98122	NONE	501(C)(3)	TO PROVIDE MUCH NEEDED SCHOLARSHIPS FOR THE STUDENTS	2,500
SEATTLE THEATRE GROUP911 PINE ST SEATTLE, WA 98101	NONE	501(C)(3)	TO CONNECT AUDIENCES WITH WORLD-CLASS PERFORMANCES BY RENOWNED LOCAL, NATIONAL, AND INTERNATIONAL ARTISTS	1,000
SEATTLE PHILANTHROPIC ADVISORS NETWORK PO BOX 15717 SEATTLE, WA 98115	NONE	501(C)(3)	TO PROVIDE FINANCIAL ADVISORS, INSURANCE ADVISORS, WEALTH MANAGERS, ATTORNEYS, CPAS, AND OTHER PROFESSIONALS WHO ADVISE	350

			ARTISTS	L
SEATTLE PHILANTHROPIC ADVISORS NETWORK PO BOX 15717 SEATTLE, WA 98115	NONE	501(C)(3)	TO PROVIDE FINANCIAL ADVISORS, INSURANCE ADVISORS, WEALTH MANAGERS, ATTORNEYS, CPAS, AND OTHER PROFESSIONALS WHO ADVISE CLIENTS WITH CHARITABLE	3

INTENT

580,658

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation 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 SEATTLE HUMANE SOCIETY NONE 501(C)(3) TO BRING PEOPLE AND PETS 6,000 13212 SE EASTGATE WAY TOGETHER AND KEEP THEM BELLEVILE WA GOODE TOCETHER

BELLEVOE, WA 98003			TOGETHER	
SEATTLE GOODWILL 1765 6TH AVENUE SOUTH SEATTLE, WA 98134	NONE	501(C)(3)	TO ASSIST PEOPLE AND FAMILIES IN NEED	1,500
SEATTLE FOUNDATION 1200 FIFTH AVENUE SUITE 1300	NONE	501(C)(3)	TO IMPROVE THE QUALITY OF LIFE IN KING COUNTY	172,170

1765 6TH AVENUE SOUTH SEATTLE, WA 98134			FAMILIES IN NEED	_,_
SEATTLE FOUNDATION 1200 FIFTH AVENUE SUITE 1300	NONE	501(C)(3)	TO IMPROVE THE QUALITY OF LIFE IN KING COUNTY	172,1

SEATTLE FOUNDATION 1200 FIFTH AVENUE SUITE 1300 SEATTLE, WA 98101	NONE	501(C)(3)	TO IMPROVE THE QUALITY OF LIFE IN KING COUNTY	172,170

Total . 580,658

Recipient Foundation Purpose of grant or If recipient is an individual, 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 SEATTLE CHILDREN HOSPITAL NONE 501(C)(3) TO SUPPORT RESEARCH. 1.750 4800 SAND POINT WAY NE DIAGNOSIS & TREATMENT FOR

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

SEATTLE, WA 98105			CHILDREN	
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	2,500

SEATTLE, WA 98101			CONNECT WITH ART FROM ACROSS TIME AND PLACE	
RWANDA GIRLS INITIATIVEPO BOX 325 MEDINA, WA 98039	NONE	501(C)(3)	TO EDUCATE AND EMPOWER GIRLS OF RWANDA TO REACH THEIR HIGHEST POTENTIAL	1,000

580,658

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)

a Paid during the year				
PRATHAM USA9703 RICHMOND AVE 102 HOUSTON, TX 77042	NONE	501(C)(3)	TO PROVIDE EDUCATION TO CHILDREN IN MUMBAI SLUMS, PRATHAM	1,000

OVERLAKE HOSPITAL FOUNDATION .035 116TH AVE NE BELLEVUE, WA 98004	NONE	` /\ /	TO PROVIDE MEDICAL EXCELLENCE EVERY DAY	

or substantial contributor

Total . За

BELLEVUE, WA 98004			EXCELLENCE EVERT DAT	
NORTHWEST HARVESTPO BOX 12272 SEATTLE, WA 98102	NONE	501(C)(3)	TO PROVIDE FOOD TO THOSE IN NEED	1,000

5,000

580,658

32777227 1777 33232				
NORTHWEST HARVESTPO BOX 12272 SEATTLE, WA 98102	NONE	501(C)(3)	TO PROVIDE FOOD TO THOSE IN NEED	1,00
DELECTOR, WA 30004				

BELLEVOL, WA 30004				
NORTHWEST HARVESTPO BOX 12272 SEATTLE, WA 98102	NONE	501(C)(3)	TO PROVIDE FOOD TO THOSE IN NEED	1,

SEATTLE, WA 98102			NEED	
IORTHWEST HARVESTPO BOX 12272	NONE	501(C)(3)	TO PROVIDE FOOD TO THOSE IN	:

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

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
NISQUALLY LAND TRUST 100 BROWN FARM RD NE OLYMPIA, WA 98516	NONE	501(C)(3)	TO ACQUIRE AND MANAGE CRITICAL LANDS TO PERMANENTLY BENEFIT THE WATER, WILDLIFE, AND PEOPLE OF THE NISQUALLY RIVER	500

			WATER, WILDLIFE, AND PEOPLE OF THE NISQUALLY RIVER WATERSHED	
NEIGHBORCARE HEALTH 1200 12TH AVENUE S SUITE 901 SEATTLE, WA 98144	NONE	501(C)(3)	TO PROVIDE COMPREHENSIVE HEALTH CARE TO FAMILIES AND INDIVIDUALS WHO HAVE	1,000

ı				WATERSHED	
	NEIGHBORCARE HEALTH 1200 12TH AVENUE S SUITE 901 SEATTLE, WA 98144	NONE	501(C)(3)	TO PROVIDE COMPREHENSIVE HEALTH CARE TO FAMILIES AND INDIVIDUALS WHO HAVE DIFFICULTY ACCESSING CARE	1,0

NEIGHBORCARE HEALTH	NONE	[501(C)(3)	TO PROVIDE COMPREHENSIVE	1,0
1200 12TH AVENUE S SUITE 901			HEALTH CARE TO FAMILIES AND	
SEATTLE, WA 98144			INDIVIDUALS WHO HAVE	
			DIFFICULTY ACCESSING CARE	

Total.

580,658

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				
MILLIONAIR CLUB CHARITY 2515 WESTERN AVE SEATTLE, WA 98121	NONE	501(C)(3)	TO PROVIDE MEALS & HYGIENE FACILITIES TO THE HOMELESS	500
MID-SOUND FISHERIES ENHANCEMENT	NONE	501(C)(3)	TO RESTORE LOCAL STREAM	1,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

MID-SOUND FISHERIES ENHANCEMENT 7400 SAND POINT WAY NE SEATTLE, WA 98115	NONE	501(C)(3)	TO RESTORE LOCAL STREAM AND NEAR-SHORE HABITAT, SO SALMON CAN THRIVE	1,000
MAMMA'S HANDSPO 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
Total			580,658	

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

- ·				
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	1,000
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	7,500

SEATTLE, WA 98101			QUALITY OF LIFE FOR THE WORLD'S MOST UNDERSERVED COMMUNITIES BY PROVIDING LIFE-CHANGING KNOWLEDGE THROUGH INNOVATIVE TECHNOLOGY	
LIFELONG AIDS ALLIANCE 1002 ESENECA	NONE	501(C)(3)	TO PROVIDE RESEARCH, TREATMENT & SUPPORT FOR	1,000

FELONG AIDS ALLIANCE 02 ESENECA	NONE	501(C)(3)	TO PROVIDE RESEARCH, TREATMENT & SUPPORT FOR	1,0
ATTLE, WA 98122			PEOPLE	

SEAT

580,658 Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Foundation Purpose of grant or Amount Recipient If recipient is an individual, 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, 6,223 123 NW 36TH ST 100 LYMPHOMA AND MYELOMA AND SEATTLE, WA 98107 TO IMPROVE THE QUALITY OF LIFE OF PATIENTS AND THEIR EAMILIES

			TAMILLES	
LEADERSHIP TOMORROW 1301 FIFTH AVENUE SUITE 1500 SEATTLE, WA 98101	NONE	501(C)(3)	TO PROVIDE A UNIQUE AND HIGHLY-ADMIRED APPROACH TO CIVIC LEADERSHIP DEVELOPMENT	500
KIDS QUEST MUSEUM 1116 108TH AVE NE BELLEVIJE WA 98004	NONE	501(C)(3)	TO ENCOURAGE LEARNING THROUGH PLAY WITH AN EMPHASIS ON SCIENCE	1,095

, : : : : : :			DEVELOPMENT	_
KIDS QUEST MUSEUM 1116 108TH AVE NE BELLEVUE, WA 98004	NONE	501(C)(3)	TO ENCOURAGE LEARNING THROUGH PLAY WITH AN EMPHASIS ON SCIENCE,	1,0

KIDS QUEST MUSEUM 1116 108TH AVE NE BELLEVUE, WA 98004	NONE	501(C)(3)	TO ENCOURAGE LEARNING THROUGH PLAY WITH AN EMPHASIS ON SCIENCE, TECHNOLOGY, ENGINEERING,	1,0

BELLEVUE, WA 98004		EMPHASIS ON SCIENCE,	
		TECHNOLOGY, ENGINEERING,	
		ART AND MATH	

Total . 580,658

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 contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year KBTC2320 S 19TH ST NONE 501(C)(3) TO INSPIRE, ENRICH, AND 250 TACOMA, WA 98405 **EDUCATE** KAY TITA500 YALE AVE N NONE 501(C)(3) TO PROVIDE CHANGEMAKERS IN 5,114

SEATTLE, WA 98109			HAITI WITH A SAFE SPACE AND THE RESOURCES THEY NEED TO INCREASE THEIR IMPACT, DEVELOP SKILLS, AND ESTABLISH KEY PARTNERSHIPS	
JUBILEE WOMEN'S CENTER 620 18TH AVE EAST	NONE	501(C)(3)	TO SUPPORT WOMEN EXPERIENCING POVERTY TO	630

SEATTLE, WA 98112

Total.

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BUILD STABLE AND FULFILLING

580,658

FUTURES

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 INTERNATIONAL ASSOCIATION FOR NONE 501(C)(3) TO REDUCE STRESS AND 1,000 **HUMAN VALUES** DEVELOP LEADERS SO THAT 2401 15TH STREET NW HUMAN VALUES CAN FLOURISH

WASHINGTON, DC 20009			IN PEOPLE AND COMMUNITIES	
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	2,500

1616 EASTLAKE AVENUE EAST SUITE 400 SEATTLE, WA 98102			INFECTIOUS DISEASES	
INDIAN ASSOC OF WASHINGTON 1000 10TH AVE NE UNIT 201	NONE	501(C)(3)	TO CONNECT, SERVE AND	5,000

SEATTLE, WA 98102				
INDIAN ASSOC OF WASHINGTON 1000 10TH AVE NE UNIT 201	NONE	501(C)(3)	TO CONNECT, SERVE AND	5,00

SEATTLE, WA 98102				ı
NDIAN ASSOC OF WASHINGTON 1000 10TH AVE NE UNIT 201	NONE	501(C)(3)	TO CONNECT, SERVE AND EMPOWER THE INDIAN	5,00

NDIAN ASSOC OF WASHINGTON	NONE	501(C)(3)	TO CONNECT, SERVE AND	5,00
000 10TH AVE NE UNIT 201			EMPOWER THE INDIAN	•
SSAQUAH, WA 98029			COMMUNITY	

INDIAN ASSOC OF MASHINGTON	NONE	301(0)(3)	TO CONNECT, SERVE AND	3,00
.000 10TH AVE NE UNIT 201			EMPOWER THE INDIAN	1
SSAQUAH, WA 98029			COMMUNITY	l

L000 10TH AVE NE UNIT 201 SSAQUAH, WA 98029	EMPOWER THE INDIAN COMMUNITY	
Total	 	580,658

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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					
IAWWPO 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	100	
HUTCH KIDS CHILD CARE CENTER 1210 VALLEY ST SEATTLE, WA 98109	NONE	501(C)(3)	TO PROVIDE QUALITY, ON-SITE CHILD CARE SERVICES TO THE EMPLOYEE FAMILIES OF FRED HUTCHINSON CANCER RESEARCH CENTER, SEATTLE CANCER CARE ALLIANCE AND THEIR PARTNERS	2,000	

HUTCH KIDS CHILD CARE CENTER 1210 VALLEY ST SEATTLE, WA 98109	NONE	501(C)(3)	TO PROVIDE QUALITY, ON-SITE CHILD CARE SERVICES TO THE EMPLOYEE FAMILIES OF FRED HUTCHINSON CANCER RESEARCH CENTER, SEATTLE CANCER CARE ALLIANCE AND THEIR PARTNERS	2,000
HODELINK 16225 NE 87TH ST SHITE A-1	NONE	501(C)(3)	TO PROVIDE FOR EMERGENCY	1 500

501(C)(3)

REDMOND, WA 98052

FOOD, CLOTHING AND SHELTER

580,658 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 HINDU TEMPLE AND CULTURAL CENTER | NONE 501(C)(3) TO PROMOTE SOCIAL,

14320 NE 2151 51 16 BELLEVUE, WA 98007			SPIRITUAL UNDERSTANDING BASED UPON VEDIC PRINCIPLES	
HARVEY RELIEF1303 CAMPBELL RD HOUSTON, TX 77055	NONE	501(C)(3)	TO PROVIDE RELIEF TO SURVIVORS IN THE FORM OF EMERGENCY SUPPLIES LIKE FOOD, WATER, AND MEDICINE IN ADDITION TO LONGER-TERM RECOVERY ASSISTANCE TO HELP RESIDENTS RECOVER AND REBUILD	500

252

			RECOVERY ASSISTANCE TO HELP RESIDENTS RECOVER AND REBUILD	
HABITAT FOR HUMANITY OF EAST KING COUNTY PO BOX 817 REDMOND, WA 98073	NONE	501(C)(3)	TO CREAT A VARIETY OF HOUSING SOLUTIONS THROUGH NEW CONSTRUCTION RENOVATION AND REPAIR	4,000
Total				580,658

			REBUILD	
HABITAT FOR HUMANITY OF EAST KING COUNTY PO BOX 817	NONE	501(C)(3)	TO CREAT A VARIETY OF HOUSING SOLUTIONS THROUGH NEW CONSTRUCTION	4,0

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 GLOBAL PARTNERSHIPS NONE 501(C)(3) TO IMPACT INVESTOR THAT 1,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

1932 FIRST AVENUE SUITE 400 SEATTLE, WA 98101			OPPORTUNITY FOR PEOPLE LIVING IN POVERTY	
GIRLS WHO CODE28 W 23RD ST FL 4 NEW YORK, NY 10010	NONE	501(C)(3)	TO CLOSE THE GENDER GAP IN TECHNOLOGY	
GEORGE WASHINGTON UNIVERSITY 2121 1ST NW WASHINGTON, DC 20052	NONE	501(C)(3)	TO OFFERS COMPREHENSIVE PROGRAMS OF UNDERGRADUATE AND GRADUATE LIBERAL ARTS	

Total		580.658
	GRADUATE LIBERAL ARTS STUDY AS WELL AS DEGREE PROGRAMS IN MEDICINE, LAW, ENGINEERING, EDUCATION	
WASHINGTON, DC 20052	UNDERGRADUATE AND	I

10,000

2,500

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 FRED HUTCHINSON CANCER RESEARCH | NONE 501(C)(3) TO SUPPORT RESEARCH. 57,971

CENTER PO BOX 19024 J5-200 SEATTLE, WA 98109		, , , ,	PREVENTION, DETECTION AND OF CANCER	·
FOREST RIDGE SCHOOL 4800 139TH AVENUE SE	NONE	501(C)(3)	TO SUPPORT EDUCATION AND SCHOLARSHIPS	3,000

•				
FOREST RIDGE SCHOOL 4800 139TH AVENUE SE BELLEVUE, WA 98006	NONE	501(C)(3)	TO SUPPORT EDUCATION AND SCHOLARSHIPS	3,000
FOOD LIFELINE1702 NE 150TH ST SHORELINE, WA 98155	NONE	501(C)(3)	TO PROVIDE FOOD TO THOSE IN NEED	500

4800 139TH AVENUE SE BELLEVUE, WA 98006			SCHOLARSHIPS	
FOOD LIFELINE1702 NE 150TH ST SHORELINE, WA 98155	NONE	501(C)(3)	TO PROVIDE FOOD TO THOSE IN NEED	500

T	-			E00.6E0
FOOD LIFELINE1702 NE 150TH ST SHORELINE, WA 98155	NONE	501(C)(3)	TO PROVIDE FOOD TO THOSE IN NEED	500
BELLEVOE, WA 98000				

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

Total .

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FARESTART700 VIRGINIA ST SEATTLE, WA 98101	NONE	501(C)(3)	TO MAKE A DIFFERENCE IN OUR COMMUNITY, OR IN COMMUNITIES AROUND THE COUNTRY	500
EPIPHANY EARLY LEARNING PRESCHOOL 1805 38TH AVE SEATTIF WA 98122	NONE	501(C)(3)	A PLAY-BASED, REGGIO EMILIA- INSPIRED PRESCHOOL FOR CHILDREN AGES 18 MONTHS TO FIVE YEARS OLD IN THE	4,000

1805 38TH AVE SEATTLE, WA 98122			CHILDREN AGES 18 MONTHS TO FIVE YEARS OLD IN THE MADRONA NEIGHBORHOOD OF SEATTLE	
CRISIS CLINIC 1515 DEXTER AVENUE NORTH	NONE	501(C)(3)	TO PROVIDE HELPING FOR PEOPLE IN CRISIS	

500

580,658

			SEATTLE	
CRISIS CLINIC 1515 DEXTER AVENUE NORTH SEATTLE, WA 98109	NONE	501(C)(3)	TO PROVIDE HELPING FOR PEOPLE IN CRISIS	

Form 990PF Part XV Line 3 - Gran	ts 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				
CONSUMER REPORTS 101 TRUMAN AVENUE YONKERS, NY 10703	NONE	501(C)(3)	TO PROVIDE YOU WITH TRUSTWORTHY INFORMATION	250
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
CONSTRUCTION FOR CHANGE 805 KIRKLAND AVE 200 KIRKLAND, WA 98033	NONE	501(C)(3)	EVERY PERSON REGARDLESS OF WHERE THEY LIVE HAS ACCESS TO WELL-BUILT SPACES WHERE THEY CAN MANAGE THEIR HEALTH, FURTHER THEIR EDUCATION, OR INCREASE	6,000

CONSTRUCTION FOR CHANGE 805 KIRKLAND AVE 200 KIRKLAND, WA 98033	NONE	501(C)(3)	EVERY PERSON REGARDLESS OF WHERE THEY LIVE HAS ACCESS TO WELL-BUILT SPACES WHERE THEY CAN MANAGE THEIR HEALTH, FURTHER THEIR EDUCATION, OR INCREASE THEIR ECONOMIC MOBILITY	6,000
•				

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, 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				
CHILDHAVEN316 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
CARNEGIE MELLON UNIVERSITY 5000 FORBES AVE PITTSBURGH, PA 15213	NONE	501(C)(3)	TO CREATE A TRANSFORMATIVE EDUCATIONAL EXPERIENCE FOR STUDENTS FOCUSED ON DEEP DISCIPLINARY KNOWLEDGE, PROBLEM SOLVING, LEADERSHIP, COMMUNICATION, AND INTERPERSONAL SKILLS, AND PERSONAL HEALTH AND WELL-BEING	5,000
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	500

			AND INTERPERSONAL SKILLS, AND PERSONAL HEALTH AND WELL-BEING	
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	500

За

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 BOY SCOUTS3120 RAINIER AVE S NONE 501(C)(3) TO GIVE BOYS ALL THE 25 SEATTLE, WA 98144 EXPERIENCE THEY NEED TO BECOME MEN

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

BELLEVUE SCHOOL FOUNDATION 12241 MAIN ST BELLEVUE BELLEVUE, WA 98005	NONE	501(C)(3)	TO DEVELOP, PROMOTE, AND FUND THE BEST POSSIBLE LEARNING OPPORTUNITIES FOR ALL STUDENTS IN BELLEVUE'S PUBLIC SCHOOLS	970
API CHAYAPO BOX 14047	NONE	501(C)(3)	TO END INTIMATE PARTNER	2,850

580,658

			PUBLIC SCHOOLS	
API CHAYAPO BOX 14047 SEATTLE, WA 98114	NONE	501(C)(3)	TO END INTIMATE PARTNER VIOLENCE AND OTHER FORMS OF EXPLOITATION	2,8

Total .

3a

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

a Paid during the year				
AIDS LIFECYCLE1035 MARKET ST SAN FRANCISCO, CA 94103	NONE	501(C)(3)	TO REDUCE NEW HIV INFECTIONS AND IMPROVE THE QUALITY OF LIFE FOR PEOPLE LIVING WITH HIV/AIDS	500
ACT THEATRE700 UNION ST SEATTLE, WA 98101	NONE	501(C)(3)	TO PRODUCING RELEVANT WORKS ON CONTEMPORARY THEMES	1,000
TOYS FOR TOTS FOUNDATION		501(C)(3)	TO COLLECT UNWRAPPED TOYS	249

SEATTLE, WA 98101			WORKS ON CONTEMPORARY THEMES	
TOYS FOR TOTS FOUNDATION 18251 QUANTICO GATEWAY DRIVE TRIANGLE, VA 221721776	501	-(-)(-)	TO COLLECT UNWRAPPED TOYS AND DISTRIBUTE THOSE TOYS AS CHRISTMAS GIFTS TO LESS FORTUNATE CHILDREN IN THE COMMUNITY IN WHICH THE CAMPAIGN IS CONDUCTED	249
Total				580.658

За

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)

a Paid during the year			
UNIVERSITY DISTRICT FOOD BANK 5017 ROOSEVELT WAY SEATTLE, WA 98105		TO PROVIDE CHRISTMAS FOOD BOXES AND GIFTS FOR PEOPLE STRUGGLING DURING THE	200

HOLIDAYS

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

or substantial contributor

За

Total. 580,658

efile GRAPHIC print - DO NOT PRO	CESS	As Filed D	ata -	DL	N: 93491240000218			
TY 2017 Accounting Fees Schedule								
Name: SATYA AND RAO REMALA FOUNDATION								
C/O SMITH BUNDAY BERMAN BRITTON PS								
	EIN:	91-6477	106					
Accounting Fees Schedule								
Category	Amo	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
ACCOUNTING FEES		9,604	4,802	0	4,802			

TY 2017 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 2017 TAX YEAR, FOUNDATION MADE A DONATION OF \$172,170 TO THE SEATTLE FOUNDATION IN A DONOR ADVISED FUND THE FOUNDATION TREATED THE ENTIRE \$172,170 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

etile GRAPHIC print - DO NOT PROCESS	AS FIIEG Data -	DLN: 93491240000218						
TY 2017 Investments Corporate Bonds Schedule								
·								
Name:	SATYA AND RAO REMALA FOUND	DATION						
	C/O SMITH BUNDAY BERMAN BR	ITTON PS						

Investments Corporate Bonds Schedule

Name of Bond

End of Year Book
Value

Market Value

1,659,454

1,657,696

VARIOUS BONDS - SEE ATTACHED

TY 2017 Investments Corpora	te Stock Schedule
Name:	SATYA AND RAO REMALA FOUNDATION

DLN: 93491240000218

End of Year Fair

Market Value

11,930,391

Value

9,428,422

C/O SMITH BUNDAY BERMAN BRITTON PS

EIN: 91-6477106

Name of Stock End of Year Book

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

VARIOUS EQUITIES - SEE ATTACHED

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491240000218
TY 2017 Other Assets Scheduk	e	

Name: SATYA AND RAO REMALA FOUNDATION

C/O SMITH BUNDAY BERMAN BRITTON PS

6,473

Book Value

Other	Assets	Schedul

AMOUNTS TAXED, BUT NOT RECEIVED

Description		Beginning of Year -	End of Year
Other Assets Schedule			
	EIN: 91-64//106	•	

6,582

ır - Book Value

End of Year - Fair Market Value

6,582

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491240000218			
TY 2017 Other Expenses Schedule							
Name: SATYA AND RAO REMALA FOUNDATION							
	C/O SMITH BUNDAY BERMAN BRITTON PS						
EIN:	EIN: 91-6477106						
Other Expenses Schedule				·			
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
PARKING	188	0	0	188			
BUSINESS EXPENSES	6,631	0	0	6,631			
CREDIT CARD FEES	390	0	0	390			

STATE OF WASHINGTON LICENSE

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491240000218		
TY 2017 Other Increases Schedule					
Name:	SATYA AND RA	AO REMALA FOUNDATION			
	C/O SMITH BL	JNDAY BERMAN BRITTON PS			
EIN:	91-6477106				
Di	escription		Amount		
UNREALIZED GAIN			84,383		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		D	LN: 93491240000218		
TY 2017 Other Liabilities Schedule						
Name:	SATYA AND RA	AO REMALA F	OUNDATION			
	C/O SMITH BU	JNDAY BERMA	AN BRITTON PS			
EIN:	91-6477106					
Description	n		Beginning of Year - Book Value	End of Year - Book Value		
CREDIT CARDS PAYABLE			5,319	31,897		

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLI	N: 93491240000218	
TY 2017 Other Professional Fees Schedule					
Nar	me: SATYA AND	RAO REMALA FOU	NDATION		
	C/O SMITH	C/O SMITH BUNDAY BERMAN BRITTON PS			
EIN: 91-6477106					
Category	Amount	Net Investment	Adjusted Net	Disbursements	

EIN: 91-6477106				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

35,790

INVESTMENT ADVISOR

efile GRAPHIC print - DO NOT I	PROCESS	As Filed Data	-	DLI	N: 93491240000218		
TY 2017 Taxes Schedu	TY 2017 Taxes Schedule						
Name: SATYA AND RAO REMALA FOUNDATION							
	C/O SMITH BUNDAY BERMAN BRITTON PS						
EIN: 91-6477106							
Category	Ar	nount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
					<u>-</u>		

0

4,034

FOREIGN TAX

efile GRAPHIC print - De	O NOT PROCESS	As Filed Data -		-		DLN: 93491240000218
Schedule B		Schedu	ule of Contributo	ors		OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Attach to Form 990, 990-EZ, or 990-PF Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at					2017
Name of the organization SATYA AND RAO REMALA	FOUNDATION					lentification number
C/O SMITH BUNDAY BERM Organization type (check					91-6477106	
Filers of:	Sections					
riiers or.	Section:					
Form 990 or 990-EZ	☐ 501(c)() (enter number) o	organization			
	4947(a)(1) nonexempt char	ritable trust not treated a	s a private founda	tion	
	☐ 527 politi	cal organization				
Form 990-PF	✓ 501(c)(3)	exempt private fo	undation			
	4947(a)(1) nonexempt char	ritable trust treated as a p	orivate foundation		
	☐ 501(c)(3)	taxable private fo	undation			
			PF that received, during to omplete Parts I and II S			
Special Rules						
under sections 50 received from any	9(a)(1) and 170(b)	(1)(A)(vi), that che uring the year, tota	g Form 990 or 990-EZ th cked Schedule A (Form al contributions of the gre plete Parts I and II	990 or 990-EZ), P	art II, line 13,	16a, or 16b, and that
during the year, to	otal contributions o	f more than \$1,000	or (10) filing Form 990 of the control of the contr	, charitable, scient		
during the year, of If this box is chect purpose Don't co	ontributions <i>exclus</i> ked, enter here the implete any of the p	eively for religious, total contributions parts unless the G o	or (10) filing Form 990 or charitable, etc., purpose is that were received duril eneral Rule applies to the or more during the year	s, but no such con ng the year for an ns organization be	itributions tota exclusively re cause it recei	led more than \$1,000 ligious, charitable, etc , ved <i>nonexclusively</i>
Caution. An organization 990-EZ, or 990-PF), but if Form 990-EZ or on its Fo 990-EZ, or 990-PF)	t must answer "No	on Part IV, line 2	, of its Form 990, or che	ck the box on line	H of its	
For Paperwork Reduction Ad for Form 990, 990-EZ, or 990		ructions	Cat No 30613X	Schedu	ıle B (Form 990	, 990-EZ, or 990-PF) (2017)

	, , , , , , , , , , , , , , , , , , , ,		9
	EMALA FOUNDATION	Employer identification 91-6477106	number
Part I	AY BERMAN BRITTON PS Contributors (See instructions) Use duplicate copies of Part I if ad	Iditional enace is needed	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
	RAO AND SATYA REMALA		Person
1			Payroll
	8827 NE 36TH STREET	\$ 387,175	
			Noncash 🗸
	BELLEVUE, WA 98004		(Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person
-			Payroll
		\$	Noncash
			Noncasii
			(Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person
-			Payroll
		\$	Noncash
			(Complete Part II for noncash
(2)	(h)	(a)	contributions) (d)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	Type of contribution
	, ,		Person
-			Payroll
			- Ш
		\$	Noncash
			(Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person
-	-		Payroll
		\$	Noncash
			(Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person
-			Payroll
		\$	Noncash
		 	
			(Complete Part II for noncash contributions)

Schedule B (Form 9	990, 990-EZ, or 990-PF) (2017)		Page 4
Name of organizat SATYA AND RAO REN C/O SMITH BUNDAY			Employer identification number 91-6477106
than \$1, organiza the year	000 for the year from any one contributo	r. Complete columns (a) throu 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 ZIP 4 F	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	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	Relationship of transferor to transferee
	Transieree's name, address, and		terationship 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	` ,	Relationship of transferor to transferee

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)