**Return of Private Foundation** 

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

For	caler	ndar year 2018 or tax year beginning	, 201	8, and 6	ending		, 20
Nam	e of fou	ndation				er identification numb	
The	Walla	ce Kent Foundation, Inc.				20-1945069	
Nun	ber and	street (or P.O box number if mail is not delivered to street address)	Room	n/surte	B Telephor	ne number (see instruct	ions)
		htower Rd NE			L	253 943-5440	)
Crty	or town	, state or province, country, and ZIP or foreign postal code			C If exemp	tion application is pend	
Tac	oma, V	NA 98422			·		
G	Check	call that apply:  Initial return Initial return Initial return	of a former public	charity	D 1. Foreig	n organizations, check	here ▶ [
		🗌 Fınal return 🔲 Amended ı				n organizations meetin	_
		Address change Name char			check	here and attach comp	utation · · ▶ [
		type of organization:  Section 501(c)(3) exempt p				foundation status was 07(b)(1)(A), check here	
	Section	on 4947(a)(1) nonexempt charitable trust   Other tax	able private found	dation	Section 5	or (b)(1)(A), check here	
		narket value of all assets at 🗾 Accounting method	☑ Cash  ☐ A	ccrual	F If the fou	ndation is in a 60-mon	h termination
		f year (from Part II, col. (c),				ction 507(b)(1)(B), chec	
		6) ► \$ 314,206 (Part I, column (d) must be	on cash basis.)				
Pa	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Not	investment	(a) Adjusted set	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books		investment come	(c) Adjusted net income	purposes
		the amounts in column (a) (see instructions).)		ļ			(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	500	<u></u> .			
	2	Check ► ☐ If the foundation is not required to attach Sch. B		ļ	•		<u> </u>
	3	Interest on savings and temporary cash investments		ļ			
	4	Dividends and interest from securities	5583		5583		
	5a	Gross rents			<del></del>		
	b	Net rental income or (loss)					
Revenue	6a	Net gain or (loss) from sale of assets not on line 10		ļ			
ē	ь	Gross sales price for all assets on line 6a		ļ			
ě	7	Capital gain net income (from Part IV, line 2)			9108		
T.	8	Net short-term capital gain		<u> </u>			
	9	Income modifications		<b> </b>			
	10a	Gross sales less returns and allowances		<del> </del>			
	b	Less: Cost of goods sold		ļ			
i	C	Gross profit or (loss) (attach schedule)		<b> </b>			
	11	Other income (attach schedule)	* *			RECE	VEIT
	12	Total. Add lines 1 through 11	6,083	<del>                                     </del>	14,691	I INLUE	V L U
es	13	Compensation of officers, directors, trustees, etc.		<del>                                     </del>		<del>                                       </del>	2010
≅£¢þе́ñses	14 15	Other employee salanes and wages Pension plans, employee benefits		<del> </del>		13 NOV 1	2019
þe	16a			<del> </del>	<del></del>		101
֡֝֝֝֝֝ <b>֡</b>	b	Annual An		<b></b>		OGDE	דט ע
è	C	Other professional fees (attach schedule)	0.4	<b>-</b>			الخنبييسنسا
ati	17	Interest	94	<b>-</b>			94
ग्र	18	Taxes (attach schedule) (see instructions)	400	<del> </del>			400
Ē	19	Depreciation (attach schedule) and depletion	400				400
ᇊ	20	Occupancy		<u> </u>			
Ĭ	21	Travel, conferences, and meetings	4331	<u> </u>			433
בַ	22	Printing and publications	1001	<u> </u>			733
e B	23	Other expenses (attach schedule)		<del> </del>	—		
Ĕ	24	Total operating and administrative expenses.	44.4				41000
ē		Add lines 13 through 23	4825				4825
Operating and Administrative	25	Contributions, gifts, grants paid	19,091				18,091
0	26	Total expenses and disbursements. Add lines 24 and 25	23,916				22,916
	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements	-17,833				L.
	b	Net investment income (if negative, enter -0-) .			14,691		
		Adjusted net income (if negative, enter -0-)		р	,		
or		work Reduction Act Notice, see instructions.	Cat. N	lo 11289)	·	Fo	rm <b>990-PF</b> (2018)

614

P	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
		should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash-non-interest-bearing	10,354	2,157	2,157
	2	Savings and temporary cash investments			
	3	Accounts receivable ►		a recommendation and the	the section of the se
	j	Less: allowance for doubtful accounts ▶			
	4	Pledges receivable	7304 - 200 CETA		
	Ì	Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)		candia balada are yara manaren	TO THE RESERVE AND ADDRESS OF THE PARTY OF T
	7				
	1	Less: allowance for doubtful accounts ▶			
Assets	8	Inventories for sale or use			
28	9	Prepaid expenses and deferred charges			
4	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)		_	
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, huldings, and equipment: basis	construction for the factor of	graph arms a subsulferin	
		Less. accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	250,142	249,614	312,049
	14	Land, buildings, and equipment basis			
		Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe			
	16	<b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item i)	200 400	254 774	314,206
	17	Accounts payable and accrued expenses	260,496	251,771	314,200
	18	Grants payable			
Liabilities	19	Deferred revenue			
#	20	Loans from officers, directors, trustees, and other disqualified persons		·	
ap	21	Mortgages and other notes payable (attach schedule)			
=	22		·		
	23	Other liabilities (describe ►) <b>Total liabilities</b> (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here >			
ès	İ	and complete lines 24 through 26, and lines 30 and 31.			
Ĕ	24	Unrestricted			
Balances	25	Temporarily restricted			
=	26	Permanently restricted			
Net Assets or Fund	Ì	Foundations that do not follow SFAS 117, check here ▶ ☑			
Ē		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds	260,496	251,771	
t A	30	Total net assets or fund balances (see instructions)			
Š	31	Total liabilities and net assets/fund balances (see			
_		instructions)			
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	( ) P 00 (	4	
1		I net assets or fund balances at beginning of year-Part II, colu			200 400
^		of-year figure reported on prior year's return)			260,496
2	CHE	r amount from Part I, line 27a		3	-17,833 9,108
3	Otne - Otne	er increases not included in line 2 (itemize) capital gains lines 1, 2, and 3		4	5,108
4 5					
6	Tota	reases not included in line 2 (itemize) ►	Part II. column (b). III	ne 30 <b>6</b>	251,771
		The second of the second of the or your lines to the of		1.5	C- 000-PE (0010)

Part	V Capital Gains an	a Losses for Tax on Investi	nent income	(b) Harrisan dead		<del></del>	·
		ind(s) of property sold (for example, real e use, or common stock, 200 shs MLC Co		(b) How acquired P—Purchase D—Donation	(c) Date a (mo., da		(d) Date sold (mo., day, yr.)
1a	Am Cent Equity			р	vario	us	various
b	Janus Henderson			р	vario	us	various
С	TRowe Price			р	vario	ius	various
d	Value Line			р	vario	us	various
е		· · · · · · · · · · · · · · · · · · ·					. <u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		er other basis ense of sale		(h) Gain ((e) plus (f)	
а	various		· · · · · · · · · · · · · · · · · · ·	various			2070
b	various			various			1412
С	various			various			3360
<u>d</u>	various			various			2266
<u>e</u>							
	Complete only for assets sh	owing gain in column (h) and owned	by the foundation	n on 12/31/69.			(h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess of col. (i) over col (j), if any		(k), but not i Losses (fro	less than -0-) <b>or</b> om col (h))
a							·
<u>b</u>							
Ć				· · · · · · · · · · · · · · · · · · ·			
d							
ее							
2	Capital gain net income of		also enter in Pa , enter -0- in Pa		2		9,108
3	If gain, also enter in Part	in or (loss) as defined in sections : I, line 8, column (c). See instru	ctions. If (loss		3		
Part		der Section 4940(e) for Redu		Not Invoctment		<del></del>	
	<del></del>	ivate foundations subject to the					
Was th	," the foundation doesn't	section 4942 tax on the distribu	not complete	this part.			☐ Yes ☐ No
1		ount in each column for each yea	ar; see the instr	uctions before ma	aking any	entnes.	
Cale	(a) Base period years ndar year (or tax year beginning ir	(b) Adjusted qualifying distribution	s Net value o	(c) of noncharitable-use as	ssets		(d) ibution ratio ivided by col. (c))
	2017	1	9,506	33	2,610		5.86%
	2016	1	3,673	28	9,476		4.72%
	2015	1	3,699	28	9,672		4.72%
	2014	1	3,349	29	6,534		4.50%
	2013	1	3,086	25	7,329	<del></del>	5.09%
2	Total of line 1, column (d	•			. 2	<del> </del>	24.89
3		for the 5-year base period—divoundation has been in existence			_		4.98%
4	Enter the net value of nor	nchantable-use assets for 2018 f	rom Part X, line	5	. 4		346,490
5	Multiply line 4 by line 3				. 5	<u> </u>	17,255
6	Enter 1% of net investme	ent income (1% of Part I, line 27b	)		. 6		147
7	Add lines 5 and 6				. 7		17,402
8		ons from Part XII, line 4			. 8		23,916
	If line 8 is equal to or gre	ater than line 7, check the box in	n raπ vi, line 11	o, and complete t	nat part u	sing a 19	70 tax rate. See the

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instr	uctio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1. )			T 1	
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		147		
	here $\blacktriangleright$ and enter 1% of Part I, line 27b			li	
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)				
3	Add lines 1 and 2		147		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		147		
6	Credits/Payments:				
а	2018 estimated tax payments and 2017 overpayment credited to 2018 <b>6a</b>				
b	Exempt foreign organizations—tax withheld at source 6b				
C	Tax paid with application for extension of time to file (Form 8868) . 6c 400				
_d	Backup withholding erroneously withheld				
7	Total credits and payments. Add lines 6a through 6d		400		
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶ 10 Enter the amount of line 10 to be: Credited to 2019 estimated tax ▶ 253 Refunded ▶ 11		253		
	Enter the amount of line 10 to be: Credited to 2019 estimated tax ▶ 253 Refunded ▶ 11   VII-A Statements Regarding Activities			<u> </u>	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Γ	Yes	No	
14	participate or intervene in any political campaign?	1a	103	~	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the				
	instructions for the definition	1b		<b>-</b>	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.				
С	Did the foundation file <b>Form 1120-POL</b> for this year?	1c			
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	"			
-	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	1			
	on foundation managers. ▶ \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		~	
	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles				
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .	3		~	
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		~	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	<u> </u>		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	ļ	~	
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that	<del></del>	<del></del>		
7	conflict with the state law remain in the governing instrument?	6	<i>V</i>		
7 8a	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV Enter the states to which the foundation reports or with which it is registered. See instructions. ▶	7	~		
oa	Delaware				
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
b	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	~		
		0.5	<u> </u>	1	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes,"			—,	_
	complete Part XIV	9			_
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
-	names and addresses	10		~	
	Fo	rm <b>99</b>	0-PF	(2018)	

Par	VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		v
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	12		~
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	v	
	Website address ►		<b></b>	
14		3 241-	4340	
	Located at ► 6214 Watchtower Rd NE, Tacoma WA ZIP+4 ►	9842	2	. <b></b>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here and enter the amount of tax-exempt interest received or accrued during the year		•	<b>▶</b> □
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		~
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			
Pari	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>	_	
ı en	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Ţ	Yes	No
12	Dunng the year, did the foundation (either directly or indirectly):			1
14	(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? Yes Vo			
	(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 .	1b		
_	Organizations relying on a current notice regarding disaster assistance, check here			
С	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 2018?	1c		~
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)):			
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(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.)	2b		<u> </u>
	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  ▶ 20 , 20 , 20 , 20			
3a	➤ 20 , 20 , 20 , 20 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 2018 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			
	oundation had excess business holdings in 2018.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		V.,
þ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			اـــا
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		~

Part	VII-B	Statements Regarding Activities	s for W	/hich Form	4720	May Be R	equire	d (contii	nued)			
5a	During tl	ne year, did the foundation pay or incur	any am	ount to:							Yes	No
	• •	on propaganda, or otherwise attempt t		•	•		•	☐ Yes	✓ No	)		
		ence the outcome of any specific public							<b>-</b>			
		tly or indirectly, any voter registration dr						Yes	☑ No	1000000		
		de a grant to an individual for travel, stu						☐ Yes	✓ No	'   Table		
		ide a grant to an organization other than			-			Пу	[Z] N -			
		on 4945(d)(4)(A)? See instructions						☐ Yes	<b>✓</b> No	'   Table		
		oses, or for the prevention of cruelty to o						□Yes	<b>⊘</b> No			
b		swer is "Yes" to 5a(1)-(5), did any of the							_	1303920000		
	•	ations section 53.4945 or in a current no				-	•			5b		
	_	ations relying on a current notice regardi							▶□	20000000		
С	-	swer is "Yes" to question 5a(4), does t	-				the tax					
	because	it maintained expenditure responsibility	for the	grant?				☐ Yes	☐ No			
	If "Yes,"	attach the statement required by Regula	ations s	section 53.49	45–5(d)	<b>.</b>						
		oundation, during the year, receive any	funds,	directly or in	directly	, to pay pre	miums					
		sonal benefit contract?						☐ Yes	✓ No	· [238]		
	If "Yes" to 6b, file Form 8870.											
	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?   Yes  No  If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? . 7b											
	- 1 H - 1 H											
								□Yes	<b>⊘</b> No			
	remuneration or excess parachute payment(s) during the year?											
		and Contractors					•					
1	1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.											
		(a) Name and address	(b) Title, and average hours per week					Contributions to byee benefit plans		(e) Expe		
				ed to position		ter -0-)		rred compe		otner	allowan	ces
	W Kent											
		r Rd NE, Tacoma, WA 98422	Preside	ent .5		-0-			-0-			-0-
John C		DANE T WA 00400	V: D-	:				-0-				-0-
	atchtowe on Russel	r Rd NE, Tacoma, WA 98422	VICE PI	esident 2.0		-0-		-	-0-			
		Vashington, NC 27889	Secreta	arv 25		-0-			-0-			-0-
	th Matthe		300.00	21.7 .20						·		
1306 W	Oak Ave	Fullerton, CA 92833	Board I	Member 0.1		-0-			-0-			-0-
2	Comper	nsation of five highest-paid employee	es (oth	er than tho	se inclu	uded on li	ne 1—s	ee instr	uction	s). If n	one, e	enter
(2	a) Name an	d address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to p	veek	(c) Comper		(d) Contribution (d) Co	benefit deferred	(e) Expe	nse acc allowan	
NONE												
				•								
			<u>_</u>									
Total r	umber o	f other employees paid over \$50,000 .							. ▶		A DE	

Par	t VIII Information About Officers, Directors, Trustees, Foundation Managers, and Contractors (continued)	Highly Paid Employees,
3	Five highest-paid independent contractors for professional services. See instructions. If n	one, enter "NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of	
NON	E	
	I number of others receiving over \$50,000 for professional services	<u> ▶ ]</u>
Par	t IX-A Summary of Direct Charitable Activities	
	st the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information surganizations and other beneficianes served, conferences convened, research papers produced, etc	ch as the number of Expenses
1	Donations made to qualifying 4 environmental groups	
		2,460
2	Donations made to qualifying 3 arts groups	
	***************************************	
3	Donations made to qualifying 5 medical research group	7,500
3	Donations made to qualifying 5 medical research group	
		2.258
4	Donations made to qualifying 8 education & welfare groups	2,200
		6,873
Par	t IX-B Summary of Program-Related Investments (see instructions)	
De	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
_		
2		
All	other program-related investments. See instructions.	
3		
Tota	I. Add lines 1 through 3	▶

Part	X Minimum Investment Return (All domestic foundations must complete this part. Fore	ign foun	dations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	343,297
b	Average of monthly cash balances	1b	8,469
C	Fair market value of all other assets (see instructions)	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	351,766
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	351,766
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	ınstructions)	4	5,276
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	346,490
6	Minimum investment return. Enter 5% of line 5	6	17,324
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ►  and do not complete this part.)	oundation	ons
1	Minimum investment return from Part X, line 6	1	17,324
2a	Tax on investment income for 2018 from Part VI, line 5	<u>'</u>	
b	Income tax for 2018. (This does not include the tax from Part VI.)	]	
C	Add lines 2a and 2b	2c	147
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	17,177
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	17,177
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	17,177
Part	XII Qualifying Distributions (see instructions)		· · · · · · · · · · · · · · · · · · ·
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	23,916
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	23,916
5	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	5	147
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	23,769
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whethe	r the foundation

Part	VIII Undistributed Income (see instruction	ons)			
		(a) Corpus	(b) Years prior to 2017	(c) 2017	<b>(d)</b> 2018
1	Distributable amount for 2018 from Part XI, line 7				
2	Undistributed income, if any, as of the end of 2018.				17,177
a	Enter amount for 2017 only				
b	Total for prior years: 20 , 20 , 20		· · · · · · · · · · · · · · · · · · ·		
3	Excess distributions carryover, if any, to 2018:				
а	From 2013				
b	From 2014				
C	From 2015				
d	From 2016				
e	From 2017				
f	Total of lines 3a through e	1,382			
4	Qualifying distributions for 2018 from Part XII, line 4: ► \$				
<b>a</b>	Applied to 2017, but not more than line 2a.				
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2018 distributable amount				23,916
e	Remaining amount distributed out of corpus	6,739			
5	Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same				4 000
_	amount must be shown in column (a).)	1,382			1,382
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	6,739			
Ь	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				
<i>(</i>	been issued, or on which the section 4942(a) tax has been previously assessed				
	Subtract line 6c from line 6b. Taxable				
d	amount-see instructions				
е	Undistributed income for 2017. Subtract line				1
	4a from line 2a. Taxable amount—see instructions	0			
	Undistributed income for 2018. Subtract lines				
f	4d and 5 from line 1. This amount must be distributed in 2019				
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 2013 not applied on line 5 or line 7 (see instructions) .				
9	Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	6,739		Ì	
10	Analysis of line 9	5,733			
	Excess from 2014				i
b	Excess from 2015			٥	j
C	Excess from 2016				
d	Excess from 2017				ì
e	Excess from 2018 6.739	<b> </b>	1		

Form 99	0-PF (2018)					Page 10
Part	XIV Private Operating Founda	tions (see instr	uctions and Par	rt VII-A, question 9	9)	
1a	If the foundation has received a ruling	or determination	n letter that it is a	a private operating		
	foundation, and the ruling is effective fo					
	Check box to indicate whether the four		e operating found		ection   4942(j)(3	)/or 🔲 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
	each year listed					
	85% of line 2a		<b></b>	<del> </del>		
C	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					·
е	Qualifying distributions made directly		/			
	for active conduct of exempt activities.  Subtract line 2d from line 2c					
2			<del>  /                                   </del>			
3	Complete 3a, b, or c for the alternative test relied upon:					
_	"Assets" alternative test—enter.					
а					1	
	<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under</li></ul>		<del>-  </del>			
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-enter 2/3		<del></del>			
	of minimum investment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test—enter				<b>!</b>	
•	(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		<u> </u>			
Part	• •	•		the foundation h	ad \$5,000 or mo	re in assets at
	any time during the year-		ns.)	<del></del>		
1	Information Regarding Foundation	Managers:	45 65	20/ -645- 4-4-14	ما الممينات ومصاب طاس	u the foundation
а	List any managers of the foundation of before the close of any tax year (but of	who have contrib	uted more than 2	than \$5,000\ (Soo s	ributions received to	by the foundation
		only if they have c	ontributed more	man \$5,000). (See s	section 507 (d)(2).)	
John &	Judy Kent List any managers of the foundation	who own 1006 o	or more of the st	ook of a corporation	n (or an equally lar	ge portion of the
D	ownership of a partnership or other er					ge portion of the
	ownership of a partnership of other of	inty) of willon the	, roundation rido t	a 1070 of groater int	0.001	•
NONE 2	Information Regarding Contribution	Grant Gift Lo	an Scholarship	etc. Programs:		
-	Check here ► ✓ if the foundation				organizations and	does not accept
	unsolicited requests for funds. If the fo	oundation makes	gifts, grants, etc	., to individuals or o	rganizations under	other conditions,
•	complete items 2a, b, c, and d. See in		5 , 5 ,	•		
а	The name, address, and telephone nu	imber or email ac	dress of the pers	on to whom applica	ations should be add	dressed:
-	,			• •		
b	The form in which applications should	l be submitted ar	d information and	d materials they sho	ould include:	
_						
С	Any submission deadlines:					
	Any restrictions or limitations on aw	ards, such as h	ov geographical	areas, charitable fi	elds, kinds of insti	tutions, or other
u	factors:		-, 33pou	,	,	,

Total

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of Amount any foundation manager or substantial contributor contribution Name and address (home or business) recipient a Paid during the year YWCA Pierce Co 405 Broadway, Tacoma 501 c 3 human welfare 2925 Susan G Komen, Seattle WA 501 c 3 medical research 1658 Tacoma Arts Live, Broadway Center, Tacoma WA 501 c 3 arts educ 6000 501 c 3 Calif Casa, Oakland, CA human welfare 1000 Save Habitat & Diversity of Wetlands Renton, WA 501 c 3 environment educ 500 Gig Harbor Arbor Day, gig Harbor WA 501 c 3 environment educ 460 Cincinnati Zoo, Cincinnati OH 501 c 3 environment educ 1000 ALS, Wash DC 501 c 3 medical research 100 **American Red Cross** 501 c 3 human welfare 250 501 c 3 environment educ 250 **Animal Foundation** Arts of the Pamlico 501 c 3 arts educ 1000 501 c 3 **Cystic Fibrosis** medical research 250 **Donor Choose** 501 c 3 human welfare 200 Eastside friends for children 501 c 3 human welfare 200 Forterra 501 c 3 environment educ 500 see attached for additional contributions 2,798 19,091 **b** Approved for future payment

		-A Analysis of Income-Producing A	ctivities				Page 12
Ent	er gros	s amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by secti	4 (e)	
1	Prog	ram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	<b>(d)</b> Amount	Related or exempt function income (See instructions.)
	а				1	···································	
	b ¯						
	c						
	d						
	е						
	f						
	g F	ees and contracts from government agencies					
2	Mem	bership dues and assessments					
3	Intere	est on savings and temporary cash investments					
4	Divid	ends and interest from secunties					
5		ental income or (loss) from real estate:		·			
		ebt-financed property					
		ot debt-financed property					
6		ental income or (loss) from personal property					
7		r investment income					
8		or (loss) from sales of assets other than inventory			<u> </u>		
9		ncome or (loss) from special events			<u> </u>	·	
10		s profit or (loss) from sales of inventory			<del> </del>		
11		r revenue: a			-		
	ь _			<u> </u>	-		
	°. –	<u> </u>			-		
	d _						
40	e _	(L) (A)			<del>  -                                   </del>		
		otal. Add columns (b), (d), and (e)		<u> </u>	<u>li</u>	40	
		i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation				13	
	rt XVI		•	ent of Evemn	t Durnoses		
	e No.			<del> </del>	<del> </del>	A contributed	importantly to the
	▼	Explain below how each activity for which accomplishment of the foundation's exempt pur	rposes (other that	n by providing fur	nds for such purpo	oses). (See instru	ictions.)
					<del></del>		
							-
					•		
					···	<u> </u>	
				· · · · · · · · · · · · · · · · · · ·			
						<u> </u>	
			· · · · · · · · · · · · · · · · · · ·				
						<del></del>	
			<b></b>				<del></del>

		Organizati	ons										
1	in s orga	ection 501(c) (c nizations?	other than section	engage in any of the 501(c)(3) organizati	ons) or	in section	on 527, re					Yes	No
а	Tran	sfers from the rep	porting foundation to	o a noncharitable exe	empt org	anızation	of:						
		Cash									1a(1)	_	٧
	(2)	Other assets .		· · · · · · ·							1a(2)	<u> </u>	~
b	Othe	er transactions:											
			a nonchantable exe								1b(1)		V
	(2) F	Purchases of asse	ets from a noncharit	able exempt organiza	ation .						1b(2)		~
	(3) F	Rental of facilities	, equipment, or othe	er assets							1b(3)		~
	(4) F	Reimbursement a	rrangements								1b(4)		~
	(5) L	oans or loan gua.	ırantees								1b(5)		~
				nip or fundraising soli			<i>.</i>				1b(6)		~
C		_		sts, other assets, or p		-					1c	<u> </u>	~
d				s," complete the follo									
				ces given by the rep									
			<del>,</del>	ement, show in colui			<del></del>						
(a) Line	no	(b) Amount involved	(c) Name of nonc	nantable exempt organizati	ion	(d) Descri	ption of transfe	ers, trans	saction	s, and	sharing arr	angeme	ents
						<del></del>							
				<del></del>									
							<del> </del>						
	_										<del> </del>		
	$\rightarrow$									<u></u>			
					-								
				<del> </del>									
	$\dashv$												
	$\dashv$			<del></del>		<del></del>							
2a b	desc	ribed in section 5		ffiliated with, or rela ction 501(c)(3)) or in s						ation		es X	`No
		(a) Name of organ	<del></del>	(b) Type of org	ganization			(c) Des	cription	of rela	tionship		
	-												
											•		
				d this return, including accor					est of r	ny knov	vledge and	belief, it	ıs true,
Sign Here	<u> </u>	nature of officer or trus	tofult	an taxpayer) is based on all in	Title	M SIA		wieage	[	with th	e IRS discu e preparer s tructions	shown b	elow?
	l Sign	Print/Type preparer		Preparer's signature			Date	Т			PTIN		
Paid			- ::=:::=						Check self-en		1		
Prep		Comple ne					.1	r1					
Use (	Only	Firm's name		<del></del>				Firm's				-	
		Firm's address ▶						Phone	IIU				

## Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2018

Employer identification number

The Wallace Kent Foundation, Inc.  Organization type (check one):				20-1945069		
		•				
Filers of:		Section:				
Form 990 or 990-EZ		501(c)( ) (enter number) organization				
		4947(a)(1) no	pnexempt charitable trust not treated as a private for	undation -'		
		☐ 527 political	organization			
Form 990-PF		✓ 501(c)(3) exempt private foundation				
		4947(a)(1) no	nexempt charitable trust treated as a private founda	ition		
		501(c)(3) tax	able private foundation			
Check if your organization is covered by the <b>General Rule</b> or a <b>Special Rule</b> .  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						
V	For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special Rules						
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), 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 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization Employer identification number The Wallace Kent Foundation, Inc. 20-1945069

Part I	Contributors (see instructions). Use duplicate cope	es of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Adam Wallace 9182 Blackbird Ave, Fountain Valley, CA 92708	\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$   \$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ \$	Person
(a) No.	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person