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DLN: 93491316020769

OMB No 1545-0052

Return of Private Foundation

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

2018 Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public. Open to Public ▶ Go to www.irs.gov/Form990PF for instructions and the latest information. Inspection For calendar year 2018, or tax year beginning 01-01-2018 , and ending 12-31-2018 A Employer identification number GEORGE & AUDREY RASMUSSEN FAMILY FOUNDATION Number and street (or P O box number if mail is not delivered to street address) 204 VIEWCREST RD B Telephone number (see instructions) (925) 954-0100 City or town, state or province, country, and ZIP or foreign postal code BELLINGHAM, WA 98229 ${f C}$ If exemption application is pending, check here ☐ Initial return ☐ Initial return of a former public charity G Check all that apply D 1. Foreign organizations, check here Amended return ☐ Final return 2 Foreign organizations meeting the 85% test, check here and attach computation ✓ Address change ☐ Name change E If private foundation status was terminated ☑ Section 501(c)(3) exempt private foundation H Check type of organization under section 507(b)(1)(A), check here \square Section 4947(a)(1) nonexempt charitable trust \square Other taxable private foundation I Fair market value of all assets at end J Accounting method ✓ Cash ☐ Accrual If the foundation is in a 60-month termination of year (from Part II, col (c), under section 507(b)(1)(B), check here Other (specify) line 16) **>\$** 1,440,669 (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total Disbursements Revenue and (b) Net investment (c) Adjusted net for charitable of amounts in columns (b), (c), and (d) may not necessarily expenses per books purposes equal the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc , received (attach 18,057 schedule) Check ► ☐ If the foundation is **not** required to attach 2 3 Interest on savings and temporary cash investments Dividends and interest from securities 67,786 53,926 Gross rents 5a b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications . 10a Gross sales less returns and allowances Less Cost of goods sold Gross profit or (loss) (attach schedule) c Other income (attach schedule) 11 Total. Add lines 1 through 11 85,843 53,926 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Operating and Administrative Expenses 16a Legal fees (attach schedule) . . . 2,700 2,700 Accounting fees (attach schedule) Other professional fees (attach schedule) ارجه 1,118 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 19 20 21 Travel, conferences, and meetings 22 Printing and publications . . 23 Other expenses (attach schedule) 2.567 1.982 85 Total operating and administrative expenses. 24 Add lines 13 through 23 6,385 1,982 2,785 69,689 69,689 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 76,074 1,982 72,474 27 Subtract line 26 from line 12 Excess of revenue over expenses and 9,769 disbursements Net investment income (if negative, enter -0-) 51,944 Adjusted net income (if negative, enter -0-) . . .

217,823

1,203,962

1,203,962

1,203,962

1,203,962

194,976

1,215,810

1,215,810

1,215,810

1,215,810

2

3

4

5

6

1,203,962

1,215,810

1,215,810 Form 990-PF (2018)

9,769

2,079

182,996

1,440,669

Investments—corporate bonds (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

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 beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

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.

Land, buildings, and equipment basis ▶

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -_

Temporarily restricted

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) -

Grants payable

	7
જ	8
Assets	9
As	10a
	Ŀ
	(
	11

12

13

14

15

16

17

18

19

20 21

22

23

24

25

28

29

31 Part III

Liabilities

Balances

Fund 26

ō

Assets 27

Net 30

2

3

(a) List and describe the kind(s) of property sold (e g , real estate,

2-story brick warehouse, or common stock, 200 shs MLC Co)

(mo , day, yr)

Page **3**

1 a MERRILL LYNCH CO			Р	2010-01-21	2018-07-16
b US TSY BILL			Р	2017-07-31	2018-07-19
c					
d					
e					
(e)	(f)		(g)		h)
Gross sales price	Depreciation allowed		other basis		r (loss)
75.00	(or allowable)	pius expe	ense of sale) mınus (g)
a 75,000			75,000 30,000		
b 30,000	7		30,000	 	
<u>c</u>					
d					
e					
Complete only for assets show	ving gain in column (h) and ow	i			I)
(i)	(j)		(k)		h) gain minus less than -0-) or
F M V as of 12/31/69	Adjusted basis as of 12/31/69		of col(ı) (j), ıf any		om col (h))
a			(3// .: =/	 	
b				+	
c				+	
d				+	
e				+	
-	1	If gain, also enter in P	art I lina 7	 	
2 Capital gain net income or (r	net capital loss)	If (loss), enter -0- in F		2	0
3 Net short-term capital gain o	or (loss) as defined in sections :	1222(5) and (6)		_	
	ine 8, column (c) (see instructi		- 1		
ın Part I, line 8	·		}	3	
			1		
_	er Section 4940(e) for Re				
For optional use by domestic private	e foundations subject to the sec	ction 4940(a) tax on ne	t investment incon	ne)	
f section 4940(d)(2) applies, leave t	this part blank				
	·				
Vas the foundation liable for the sec			in the base period	.? L Ye	es 🗹 No
f "Yes," the foundation does not qua	· · · · · · · · · · · · · · · · · · ·				
1 Enter the appropriate amount	in each column for each year,	see instructions before	making any entrie		
(a) Base period years Calendar	(b)	(c)		(d) Distribution rati	.0
year (or tax year beginning in)	djusted qualifying distributions	Net value of noncharitab	ie-use assets	(col (b) divided by c	ol (c))
2017	80,345		1,574,191		0 051039
2016	75,155		1,457,575		0 051562
2015	90,663		1,519,627		0 059661
2014	72,337		1,651,916		0 043790
2013	76,337		1,649,029		0 046292
, , ,			2		0 252344
3 Average distribution ratio for t			0, or by the 3		0.050460
4 Enter the net value of nonchar	on has been in existence if less		: : : : 3	+	<u>0 050469</u> 1,568,882
		•	5	+	79,180
6 Enter 1% of net investment in	6	+			
		+	519		
				+	79,699
8 Enter qualifying distributions f	rom Part XII, line 4 , than line 7, check the box in Pa				72,474
instructions	man line 7, check the box in Pa	ait vi, ille ib, and com	ipiete tilat part USII	ny a 170 tax fate Se	e tile Fait VI
				Fc	orm 990-PF (2018

(b)

How acquired

P—Purchase

D—Donation

(c)

Date acquired

(mo, day, yr)

Pai	rt VII-B	Statements Regard	ling	Activities for Which	Form 4720 May Be	Required (c	ontinue	ed)				
5a	During th	e year did the foundation p	ay o	r incur any amount to							Yes	No
(1) Carry on propaganda, or otherwise a			ise a	attempt to influence legislation (section 4945(e))?								
	(2) Influence the outcome of any specific			public election (see sect	tion 4955), or to carry	_	_ 163		"			
	on, d	rectly or indirectly, any vo	ter re	egistration drive?		٠	Yes	~	No			
	(3) Provi	de a grant to an individual	for t	ravel, study, or other sım	ılar purposes?	Ī	Yes	~	No			
		de a grant to an organizati				_						
		tion 4945(d)(4)(A)? See ir				• • [Yes	✓	No			
	• •	de for any purpose other th		- '								
		ational purposes, or for the		· ·		L	່∏Yes	✓	No			
b	-	swer is "Yes" to 5a(1)-(5),		=	· ·	•	oed in					
	_	ns section 53 4945 or in a sions relying on a current n							⊦	5b		
_	-	wer is "Yes" to question 5a						Ш				
٠		se it maintained expenditu			•		_					
		attach the statement requi				- · L	」Yes	Ш	No			
6 a		oundation, during the year,		-		ıms on						
		Il benefit contract?				·	٦		_			
b	Did the fo	oundation, during the year,	pay	premiums, directly or ind	lirectly, on a personal be	nefit contract? .	⊢ Yes		No	6b		No
	If "Yes" to	o 6b, file Form 8870	•	•					Ī			
7a	At any tir	ne during the tax year, was	s the	foundation a party to a p	prohibited tax shelter trai	nsaction?	Yes	✓	No			
b	If yes, did	d the foundation receive an	y pro	ceeds or have any net in	come attributable to the	transaction?.			""	7 b		
8		ndation subject to the sect					or					
	excess pa	rachute payment during th	ne ye	ar ⁹		[Yes	✓	No L			
Par	rt VIII	Information About C and Contractors	Offic	ers, Directors, Trust	tees, Foundation Ma	inagers, Hig	nly Pa	id En	nploy	ees,		
	Liekelle				. d &b . i	Can imptumeti						
1	LIST All O	ficers, directors, trustee		b) Title, and average	(c) Compensation (If	(d) Contrib		:0				
	(a) N	ame and address	'	hours per week	not paid, enter	employee bene	fit plan	s and			se acc Iowano	
ALIDI	N D DANZ		DDEC	devoted to position IDENT AND DIRECTOR	-0-)	deferred cor	npensat					
	EN R RANZ IEWCREST R	D.	2 00	IDENT AND DIRECTOR	0			0				0
	NGHAM, WA											
SARY	E RANZ			TREAS AND DIRECTOR	0			0				0
	IEWCREST R NGHAM, WA		2 00									
	P RANZ	30223	V P	AND DIRECTOR	0			0				0
	IEWCREST R	.D	2 00					·				·
	NGHAM, WA											
	EANNE R RA		EXEC 2 00	UTIVE DIRECTOR	0			0				0
	IEWCREST R NGHAM, WA											
2	Compens	ation of five highest-pai	id en	ployees (other than t	hose included on line 1	—see instruct	ions).	If nor	ne, en	ter "	NONE.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(-)	Nama and		لمنسسا	(b) Title, and average		(d) Contril			/-\ T			
(a)		address of each employee ore than \$50,000	paid	hours per week	(c) Compensation	employee plans and					se acco	
		·		devoted to position		comper	sation					
ION												
						+						
						+						
Гota	I number o	f other employees paid over	er \$5	0,000	.							0
									Forr	n 99 (D-PF	(2018)

Form 990-PF (2018)		Page 7
Part VIII Information About Officers, Directors, Trustees, F and Contractors (continued)	Foundation Managers, Highly Pa	id Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relev organizations and other beneficiaries served, conferences convened, research papers produc		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see in	astructions)	
Describe the two largest program-related investments made by the foundation during the	<u>'</u>	Amount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		P 0
		Form 990-PF (2018)

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

2

3a 3h

4

5

72,474

72.474

Form 990-PF (2018)

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

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

77,405

3,213

74,192

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0

(d)

Page 9

90-PF	(2	018)	
XIII		u	n

Form 990-PF (2	018)
Part XIII	Un

- distributed Income (see instructions)
- 1 Distributable amount for 2018 from Part XI, line 7
- 2 Undistributed income, if any, as of the end of 2018

(a)

Corpus

(b)

Years prior to 2017

<u>~</u>

0

0

(c)

2017

69.261

69,261

- a Enter amount for 2017 only.
- **b** Total for prior years Excess distributions carryover, if any, to 2018
- a From 2013. **b** From 2014. . . . c From 2015. . .
- d From 2016.
- e From 2017.
- 4 Qualifying distributions for 2018 from Part
- f Total of lines 3a through e. XII, line 4 ▶ \$

required—see instructions).

d Applied to 2018 distributable amount. . . . e Remaining amount distributed out of corpus

5 Excess distributions carryover applied to 2018

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 2017 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019

(If an amount appears in column (d), the

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 2013 not

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . . **b** Excess from 2015. . c Excess from 2016. . . . d Excess from 2017. . . e Excess from 2018. . .

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

Subtract lines 7 and 8 from line 6a

indicated below:

- a Applied to 2017, but not more than line 2a
 - (Election required—see instructions).

same amount must be shown in column (a))

b Applied to undistributed income of prior years c Treated as distributions out of corpus (Election



Enter gros	s amounts unless otherwise indicated	Unrelated bu	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
1 Progra	m service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
<u>-</u>	and contracts from government agencies					
	ership dues and assessments					
	st on savings and temporary cash ments					
	nds and interest from securities			14	67,786	
	ntal income or (loss) from real estate					
	-financed property					
	ntal income or (loss) from personal property					
	investment income					
invent	` ,			18		
	come or (loss) from special events					
	profit or (loss) from sales of inventory revenue a					
b						
	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)		0		67,786	C
13 Total	Add line 12, columns (b), (d), and (e)	lations)		13	B	67,786
	I-B Relationship of Activities to the		ment of Exem	pt Purposes		
Line No. ▼	Explain below how each activity for which the accomplishment of the foundation's expressions (income is report kempt purposes (ed in column (e) of other than by prov	f Part XVI-A contribu viding funds for such	ted importantly to purposes) (See	
	,					

120	,10,
	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations
	EXCIIDI OLUBIIIZALIDIIS

Part	IIVX	Exempt Organi	-	msicis io a	ilia iralisactioi	is and Relatio	iisiiips With Noii	Charleable		
		anization directly or in than section 501(c)(3)	directly engage					n 501	Yes	No
` '	,	rom the reporting foun	- '			-				
								. 1a(1)		No
•	•	assets						. 1a(2)		No
b Oth	ner trans	sactions								
(1) Sales	of assets to a nonchar	ıtable exempt o	organization.				. 1b(1)		No
(2) Purcha	ases of assets from a r	noncharitable ex	xempt organiz	ation			1b(2)		No
(3) Renta	of facilities, equipmen	nt, or other ass	ets				1b(3)		No
(4) Reimb	oursement arrangemer	its					. 1b(4)		No
(5) Loans	or loan guarantees.						. 1b(5)		No
(6) Perforr	mance of services or m	embership or f	undraising soli	icitations			. 1b(6)		No
c Sh	arıng of	facılıtıes, equipment, r	nailing lists, oth	ner assets, or	paid employees.			. 1c		No
		er to any of the above ls, other assets, or ser								
		saction or sharing arra								
		_								
(a) Lin	e No	(b) Amount involved	(c) Name of no	ncharitable exer	mpt organization	(d) Description of	transfers, transactions,	and sharing arra	ngemen	ts
2a Is i	the foun	dation directly or indire	ectly affiliated v	with, or related	d to, one or more t	ax-exempt organ	zations			
		n section 501(c) (othe	•	•	•			s 🔽 No		
		mplete the following s		01(0)(3)) 01 1	11 30001011 327					
D 11	163, 60	(a) Name of organization		(6) Type of organizatio	n I	(c) Description	of relationship		
		.,,		,	, ,,		, ,			
	of my	r penalties of perjury, y knowledge and belief n preparer has any kno	, it is true, corr							
Sign Here	. *	****	-	2019-11-01				May the IRS d return with the prepa		
	s	ignature of officer or t	rustee		Date	Title		below (see instr)?	_	
	•	Print/Type preparer's	s name P	reparer's Signature		Date	Check if self-	PTIN		
Paid		WARD PYNN				2019-11-01	employed ▶ ✓	P00184	+3/0	
-	arer Only	Firm's name ▶ RGP	LLP			1	F	irm's EIN ▶81	-07420	89
		Firm's address ► 34	78 BUSKIRK A	VE STE 308						
		PL	EASANT HILL,	CA 94523			P	Phone no (925) 954-0	0100
		i .					l l			

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				
AUDUBON220 MONTGOMERY ST SAN FRANCISCO, CA 94104	NONE	501(C)(3)	GENERAL OPERATION	20,000
THE NATURE CONSERVANCY (FROG LAKE) 201 MISSION ST 4	NONE	501(C)(3)	GENERAL OPERATION	10,000

THE NATURE CONSERVANCY (FROG LAKE) 201 MISSION ST 4 SAN FRANCISCO, CA 94105	NONE	501(C)(3)	GENERAL OPERATION	10,000
SAVE THE REDWOOD LEAGUES 111 SUTTER STREET 11TH FLOOR SAN FRANCISCO. CA 94104	NONE	501(C)(3)	GENERAL OPERATION	10,000

Total			▶ 3a	69,689
SAVE THE REDWOOD LEAGUES 111 SUTTER STREET 11TH FLOOR SAN FRANCISCO, CA 94104	NONE	501(C)(3)	GENERAL OPERATION	10,000
201 MISSION ST 4 SAN FRANCISCO, CA 94105				

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

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
EUPHRATESPO BOX 990924 REDDING, CA 96099	NONE	501(C)(3)	GENERAL OPERATION	2,060
WEFOREST (GLOBAL GIVING)	NONE	501(C)(3)	GENERAL OPERATION	1,500

REBBING, CR 30033				
WEFOREST (GLOBAL GIVING) 2015440 E 2ND ST PERRYSBURG, OH 43551	NONE	501(C)(3)	GENERAL OPERATION	1,500
NOOKSACK SALMON ENHANCEMENT ASSOCIATION 3057 E BAKERVIEW RD BELLINGHAM WA 98226	NONE	501(C)(3)	GENERAL OPERATION	1,250

2015440 E 2ND ST PERRYSBURG, OH 43551		, ,, ,		,
NOOKSACK SALMON ENHANCEMENT ASSOCIATION 3057 E BAKERVIEW RD BELLINGHAM, WA 98226	NONE	501(C)(3)	GENERAL OPERATION	1,250
Total			▶ 3a	69.689

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				
HOPE INTERNATIONAL 227 GRANITE RUN DRIVE SUITE 250	NONE	501(C)(3)	GENERAL OPERATION	1,250

LANCASTER, PA 17601				
GREENWAVE3057 E BAKERVIEW RD BELLINGHAM, WA 98226	NONE	501(C)(3)	GENERAL OPERATION	1,25

BELLINGHAM, WA 98226	NONE	301(0)(3)	GENERAL OF ERATION	1,2.
FIBERSHEDPO BOX 221	NONE	501(C)(3)	GENERAL OPERATION	1,25

Total .

BELLINGHAM, WA 98226				
FIBERSHEDPO BOX 221	NONE	501(C)(3)	GENERAL OPERATION	1,250

FIBERSHEDPO BOX 221	NONE	501(C)(3)	GENERAL OPERATION	1,250
SAN GERONIMO, CA 94963				

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

or substantial contributor

Name and address (home or business)

Total .

	or substantial contributor			
a Paid during the year				
WORLD CENTRAL KITCHEN 1875 CONNECTICUT AVE NW 10TH FLOOR WASHINGTON DC, DC 20009	NONE	501(C)(3)	GENERAL OPERATION	1,000

recipient

WASHINGTON DC, DC 20009				
TREE HOUSE2100 24TH AVE SUITE 200 SEATTLE, WA 98144	NONE	501(C)(3)	GENERAL OPERATION	1,000
EARTH ISLAND (PROJECT COYOTE) 2150 ALLSTON WAY SUITE 460	NONE	501(C)(3)	PROJECT COYOTE	1,000

SEATTLE, WA 98144	NONE	501(C)(3)	GENERAL OPERATION	1,000
EARTH ISLAND (PROJECT COYOTE) 2150 ALLSTON WAY SUITE 460 BERKELEY, CA 94704	NONE	501(C)(3)	PROJECT COYOTE	1,000

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

	or substantial continuation			
a Paid during the year				
OHANA OASISPO BOX 758	NONE	501(C)(3)	GENERAL OPERATION	1,000

LAUEA, HI 96754				
ILLIONAIR CLUB CHARITY 515 WESTERN AVE	NONE	501(C)(3)	GENERAL OPERATION	

MILLIONAIR CLUB CHARITY	NONE	501(C)(3)	GENERAL OPERATION	1,000
2515 WESTERN AVE				
SEATTLE, WA 98121				

2515 WESTERN AVE SEATTLE, WA 98121				
KUOW4518 UNIVERSITY WAY NE 310	NONE	501(C)(3)	GENERAL OPERATION	1,000

SEATTLE, WA 98121				
KUOW4518 UNIVERSITY WAY NE 310	NONE	501(C)(3)	GENERAL OPERATION	1,00

, , , , , , , , , , , , , , , , , , ,				
KUOW4518 UNIVERSITY WAY NE 310 SEATTLE, WA 98105	NONE	501(C)(3)	GENERAL OPERATION	1,0
SLATILL, WA SOLOS				

	NONE	501(C)(3)	GENERAL OPERATION	1,00
SEATTLE, WA 98105				

SEATTLE, WA 98105	HONE	301(0)(3)	GENERAL OF ENAMION	1,00
Total			▶ 3a	69,689

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				
EVERY MOM COUNTS 180 VARICK STREET SUITE 1116	NONE	501(C)(3)	GENERAL OPERATION	1,000

180 VARICK STREET SUITE 1116 NEW YORK, NY 10014		,,,,		,
CORNELL LAB ORINTHOLOGYITHACA	NONE	501(C)(3)	GENERAL OPERATION	1,000

CORNELL LAB ORINTHOLOGYITHACA NEW YORK, NY 14853	NONE	501(C)(3)	GENERAL OPERATION	1,000
CENTER FOR BIOLOGICALPO BOX 710	NONE	501(C)(3)	GENERAL OPERATION	1,000

NEW YORK, NY 14853	NONE	501(C)(3)	GENERAL OPERATION	1,000
CENTER FOR BIOLOGICALPO BOX 710	NONE	501(C)(3)	GENERAL OPERATION	1,000

NEW YORK, NY 14853				
CENTER FOR BIOLOGICALPO BOX 710	NONE	501(C)(3)	GENERAL OPERATION	1,000
TUCSON, AZ 85702				

CENTER FOR BIOLOGICALPO BOX 710 TUCSON, AZ 85702	NONE	501(C)(3)	GENERAL OPERATION	1,000
				<u> </u>

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				
BRONX DEFENDERS360 EAST 161ST ST BRONX, NY 10451	NONE	501(C)(3)	GENERAL OPERATION	1,000

BRONX, NY 10451				
WATCH MT BIKE COALITION (WMBC) 501 MEADOR AVE SUITE 106 BELLINGHAM, WA 98225	NONE	501(C)(3)	GENERAL OPERATION	500

501 MEADOR AVE SUITE 106 BELLINGHAM, WA 98225	NONE	501(C)(3)	GENERAL OPERATION	500
UNCHAINED AT LAST 208 LENOX AVENUE 189	NONE	501(C)(3)	GENERAL OPERATION	500

BELLINGHAM, WA 98225				
UNCHAINED AT LAST 208 LENOX AVENUE 189 WESTFIELD, NJ 07090	NONE	501(C)(3)	GENERAL OPERATION	500

69,689

UNCHAINED AT LAST	NONE	501(C)(3)	GENERAL OPERATION	5
208 LENOX AVENUE 189				
WESTFIELD, NJ 07090				

INCHAINED AT LAST 208 LENOX AVENUE 189 VESTFIELD, NJ 07090	NONE	501(C)(3)	GENERAL OPERATION	

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				
TRANS CASCADIA 6763 E CAPT JOHN MULLAN RD COEUR D ALENE, ID 83814	NONE	501(C)(3)	GENERAL OPERATION	500

COEUR D ALENE, ID 83814				
SAN FRANCISCO SPCA250 FLORIDA ST SAN FRANCISCO, CA 94103	NONE	501(C)(3)	GENERAL OPERATION	50

SAN FRANCISCO SPCA250 FLORIDA ST SAN FRANCISCO, CA 94103	NONE	501(C)(3)	GENERAL OPERATION	500
RECREATION NORTHWESTPO BOX 2771	NONE	501(C)(3)	GENERAL OPERATION	500

SAN FRANCISCO, CA 94103				
RECREATION NORTHWESTPO BOX 2771	NONE	501(C)(3)	GENERAL OPERATION	50

Total .

SAN FRANCISCO, CA 94103				
RECREATION NORTHWESTPO BOX 2771 BELLINGHAM, WA 98227	NONE	501(C)(3)	GENERAL OPERATION	500

RECREATION NORTHWESTPO BOX 2771	NONE	[501(C)(3)	GENERAL OPERATION	500
BELLINGHAM, WA 98227				

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 PROPUBLIC NONE 501(C)(3) **GENERAL OPERATION** 500 155 AVENUE OF THE AMERICAS 13TH

FLOOR NEW YORK, NY 10013				
OREGON TIMBER TRAIL ALLIANCE 6763 E CAPT JOHN MULLAN RD COUER D ALENE, ID 83814	NONE	501(C)(3)	GENERAL OPERATION	500
NORTH VALLEY ANIMAL DISASTER GROUP PO BOX 441	NONE	501(C)(3)	GENERAL OPERATION	500

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69,689

CHICO, CA 95927

Recipient If recipient is an individual, show any relationship to status of status of

recipient

69,689

any foundation manager

PASADENA, CA 91189

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
NORTH CASCADES AUDUBON PO BOX 5805 BELLINGHAM, WA 98227	NONE	501(C)(3)	GENERAL OPERATION	500
MT DIABLO AUDUBONPO BOX 53 WALNUT CREEK, CA 94597	NONE	501(C)(3)	GENERAL OPERATION	500
LOS ANGELES ANIMAL CARE FOUNDATION PO BOX 100515	NONE	501(C)(3)	GENERAL OPERATION	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

Name and address (home or husiness)

Total .

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
INTERNATIONAL RESCUE COMMITTEE 440 GRAND AVENUE OAKLAND, CA 94610	NONE	501(C)(3)	GENERAL OPERATION	500
HUMANE SOCIETY OF VENTURA COUNTY 402 BRYANT STREET 0141 CA 93023	NONE	501(C)(3)	GENERAL OPERATION	500

recipient

OAKLAND, CA 94610				
HUMANE SOCIETY OF VENTURA COUNTY 402 BRYANT STREET OJAI, CA 93023	NONE	501(C)(3)	GENERAL OPERATION	
HAWK WATCH INTERNATIONAL	NONE	501(C)(3)	GENERAL OPERATION	

402 BRYANT STREET OJAI, CA 93023		, , ,		
HAWK WATCH INTERNATIONAL 2240 SOUTH 900 EAST SALT LAKE CITY UT 84106	NONE	501(C)(3)	GENERAL OPERATION	50

HAWK WATCH INTERNATIONAL 2240 SOUTH 900 EAST SALT LAKE CITY, UT 84106 NONE 501(C)(3) GENERAL OPERATION 500	OJAI, CA 93023				
	2240 SOUTH 900 EAST	NONE	501(C)(3)	GENERAL OPERATION	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				
FREEDOM OF THE PRESS FOUNDATION 601 VAN NESS AVE SUITE E731 SAN FRANCISCO, CA 94102	NONE	501(C)(3)	GENERAL OPERATION	500
DANIEL JENSEN ASSOCIATION	NONE	501(C)(3)	GENERAL OPERATION	500

SAN FRANCISCO, CA 94102				İ
DANIEL JENSEN ASSOCIATION 1215 RHUS STREET SAN MATEO, CA 94402	NONE	501(C)(3)	GENERAL OPERATION	5

DANIEL JENSEN ASSOCIATION 1215 RHUS STREET SAN MATEO, CA 94402	NONE	501(C)(3)	GENERAL OPERATION	5
BUTTE HUMANE SOCIETY2580 FAIR ST	NONE	501(C)(3)	GENERAL OPERATION	5

SAN MATEO, CA 94402				
BUTTE HUMANE SOCIETY2580 FAIR ST	NONE	501(C)(3)	GENERAL OPERATION	500

SAN MATEO, CA 94402				
BUTTE HUMANE SOCIETY2580 FAIR ST CHICO, CA 95928	NONE	501(C)(3)	GENERAL OPERATION	500

69,689

BUTTE HUMANE SOCIETY2580 FAIR ST CHICO, CA 95928	NONE	501(C)(3)	GENERAL OPERATION	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				
4 SEASONS ARTS 2930 DOMINGO AVENUE 190	NONE	501(C)(3)	GENERAL OPERATION	500

2930 DOMINGO AVENUE 190 BERKELEY, CA 94705		, ,,		
KQED2601 MARIPOSA STREET SAN FRANCISCO, CA 94110	NONE	501(C)(3)	GENERAL OPERATION	254

KQED2601 MARIPOSA STREET SAN FRANCISCO, CA 94110	NONE	501(C)(3)	GENERAL OPERATION	254
WEST SEATTLE FOOD BANK 3419 SOUTHWEST MORGAN STREET	NONE	501(C)(3)	GENERAL OPERATION	250

SAN FRANCISCO, CA 94110				
WEST SEATTLE FOOD BANK 3419 SOUTHWEST MORGAN STREET SEATTLE, WA 98126	NONE	501(C)(3)	GENERAL OPERATION	250

WEST SEATTLE FOOD BANK 3419 SOUTHWEST MORGAN STREET SEATTLE, WA 98126	NONE	501(C)(3)	GENERAL OPERATION	250

Total .

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				
SUWA425 EAST 100 SOUTH SALT LAKE CITY, UT 84111	NONE	501(C)(3)	GENERAL OPERATION	250
	NONE	501(C)(3)	GENERAL OPERATION	

PARENT SUPPORT OF PUGET SOUND PO BOX 1912 BOTHELL, WA 980411912	NONE	501(C)(3)	GENERAL OPERATION	250
NATIONAL PARK FOUNDATION	NONE	501(C)(3)	GENERAL OPERATION	250

BOTHELL, WA 980411912				
NATIONAL PARK FOUNDATION 1110 VERMONT AVE NW SUITE 200 WASHINGTON, DC 20005	NONE	501(C)(3)	GENERAL OPERATION	250

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				i
NATIONAL PARK FOUNDATION 1110 VERMONT AVE NW SUITE 200 WASHINGTON, DC 20005	NONE	501(C)(3)	GENERAL OPERATION	

Recipient If recipient is an individual, show any relationship to status of contribution.

Recipient Purpose of grant or Amount show any relationship to status of contribution.

Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year				
EARTH JUSTICE 50 CALIFORNIA STREET SUITE 500 SAN FRANCISCO, CA 94111	NONE	501(C)(3)	GENERAL OPERATION	250
350 ORG20 JAY ST BROOKLYN, NY 11201	NONE	501(C)(3)	GENERAL OPERATION	250
CALIFORNIA COUNCIL FOR WILDLIFE REHABILITATORS PO BOX 7203 COTATI, CA 94931	NONE	501(C)(3)	GENERAL OPERATION	175

69,689

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

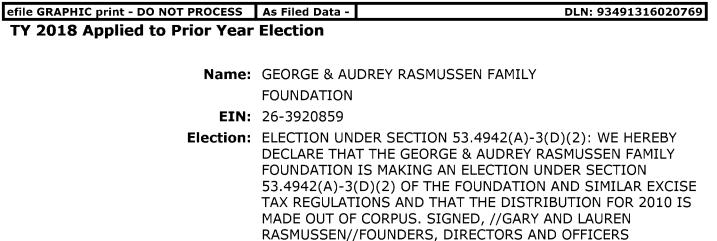
or substantial contributor.

Name and address (home or business)

a Paid during the year				
RUTH BANCROFT GARDEN 1552 BANCROFT RD WALNUT CREEK, CA 94598	NONE	501(C)(3)	GENERAL OPERATION	100
ORINDA COMMUNITY CHURCH	NONE	501(C)(3)	GENERAL OPERATION	100

ORINDA COMMUNITY CHURCH	NONE	501(C)(3)	GENERAL OPERATION	1
10 IRWIN WAY				
ORINDA, CA 94563				

efile GRAPHIC print - DO NOT	PROCESS	As Filed D	ata -	D	LN: 93491316020769		
TY 2018 Accounting Fees Schedule							
		GEORGE FOUNDA ⁻ 26-39208		SSEN FAMILY			
Category	Amo	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
ACCOUNTING FEES		2,700	0		2,700		



eine GRAPHIC PINIC - DO NOT PROCESS	AS FIIEU Data -	DLN. 93491310020709
TY 2018 Investments Corporat	e Ronds Schedule	
11 2010 investments corporat	c bonds schedule	

DI N. 02/01216020760

Name: GEORGE & AUDREY RASMUSSEN FAMILY

FOUNDATION

3110/1110

EIN: 26-3920859

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Investments Corporate Bonds Schedule						
Name of Bond	End of Year Book Value	End of Year Fair Market Value				
JP MORGAN CHASE 6.0%	44,797	39,100				
PROTECTIVE LIFE, 75,000 7.375% 10152019	75,542	77,096				
CHARLES SCHWAB CORP, 20,000 7% FIXED TO 2022	21,327	20,675				
CITIGROUP FXD 6.3%	53,310	46,125				

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TY 2018 Investments Corporate Stock Schedule

Name: GEORGE & AUDREY RASMUSSEN FAMILY

FOUNDATION

EIN: 26-3920859

Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
1,731.2 SHS CROPP COOPERATIVE	86,599	86,599
1000 SHS P10 HOLDINGS (ACTIVE POWER)	5,527	780
1000 SHS IBM	83,550	113,670
1000 SHS SCHLUMBERGER LTD	55,340	36,080
4000 SH FIRST REPUBLIC BANK - PREFERRED STOCK	98,613	90,080
2011 SHS WALMART STORES INC	101,013	187,325
2999 SHS CHEVRON CORP	207,366	326,261
1237 SHS WESTPORT FUEL SYSTEM	19,376	1,645
505 SHS ALLSTATE CORP	12,817	41,728
984 SHS DOWDUPONT INC.	16,723	52,624
988 SHS DIEBOLD INC	26,518	2,460

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491316020769
TY 2018 Investments Govern	nent Obligat	ions Schedule	
Name:	GEORGE & AU	DREY RASMUSSEN FAMILY	
	FOUNDATION		
EIN:	26-3920859		
US Government Securities - End of Year Book Value:		29,605	
US Government Securities - End of Year Fair Market Value:		29,901	
State & Local Government Securities - End of Year Book Value:		183,993	
State & Local Government Securities - End of Year Fair Market Value:		194,726	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DL	N: 93491316020769
TY 2018 Other Expenses Sche	dule			
Name:	GEORGE & AUD	REY RASMUSSEN	N FAMILY	
	FOUNDATION			
EIN:	26-3920859			
Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FILING FEES	85	0		85
MISCELLANEOUS EXPENSE	500	0		0
BOND AMORTIZATION	1,081	1,081		0
ACCRUED INTEREST PAID	901	901		0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491316020769					
TY 2018 Other Increases Schedule								
Name:	GEORGE & AU	DREY RASMUSSEN FAMILY						
	FOUNDATION							
EIN:	26-3920859							
De	escription		Amount					
COST BASIS ADJUSTMENTS			2,079					

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DL	N: 93491316020769
TY 2018 Taxes Schedule	_	_		
Name	: GEORGE & A	AUDREY RASMUSS	EN FAMILY	
	FOUNDATIO	N		
EIN	: 26-3920859			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAXES	1,118	0		0

efile GRAPHIC print - D	O NOT PROCESS As Fil	ed Data -				DLN: 93491316020769
Schedule B	;	Schedule o	f Contributors			OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service			990, 990-EZ, or 990-PF <u>1990</u> for the latest infor			2018
Name of the organization GEORGE & AUDREY RASM					Employer ide	entification number
FOUNDATION Organization type (chec	ok one)				26-3920859	
Organization type (one)	or one)					
Filers of:	Section:					
Form 990 or 990-EZ 501(c)() (enter number) organization						
	☐ 4947(a)(1) nonex	empt charitable t	rust not treated as a	private foundat	ion	
	☐ 527 political orga	nızatıon				
Form 990-PF	✓ 501(c)(3) exempt	private foundation	on			
4947(a)(1) nonexempt charitable trust treated as a private foundation						
	☐ 501(c)(3) taxable	private foundation	on			
	tion filing Form 990, 990-E property) from any one con					
Special Rules						
under sections 50 received from any	on described in section 501 99(a)(1) and 170(b)(1)(A)(vi y one contributor, during the e 1h, or (ii) Form 990-EZ, lir), that checked S e year, total contr	chedule A (Form 990 butions of the greate	or 990-EZ), Pa	art II, line 13, 1	16a, or 16b, and that
during the year, t	on described in section 501 otal contributions of more the he prevention of cruelty to o	nan \$1,000 <i>exclu</i>	<i>sively</i> for religious, ch	arıtable, scienti		
during the year, of If this box is check purpose Don't co	on described in section 501 contributions exclusively for ked, enter here the total complete any of the parts unlike, etc., contributions totali	religious, charita ntributions that w ess the General	ble, etc., purposes, but were received during the Rule applies to this o	ut no such cont he year for an <i>e</i> organization bed	ributions total exclusively reli cause it receiv	ed more than \$1,000 igious, charitable, etc , red nonexclusively
990-EZ, or 990-PF), but	n that isn't covered by the G t must answer "No" on Par orm 990PF, Part I, line 2, to	t IV, line 2, of its	Form 990, or check the	he box on line H	of its	
For Paperwork Reduction A for Form 990, 990-EZ, or 990	ct Notice, see the Instructions -PF		Cat No 30613X	Schedul	e B (Form 990,	990-EZ, or 990-PF) (2018)

Name of organization

Employer identification number

SEORGE & AUDRI	EY RASMUSSEN FAMILY	26-3920859	
Part I	Contributors (See instructions) Use duplicate copies of Part I if ad	ditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WAYNE BARBARA RASMUSSEN P O BOX 2857 MARTINEZ, CA 94553	\$ 18,057	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
		\$	Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
·			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ Schedule R (Fr	Person Payroll Noncash (Complete Part II for noncash contributions) orm 990, 990-EZ, or 990-PF) (2018)

Schedule B (Form 99	00, 990-EZ, or 990-PF) (2018)		Page 3	
Name of organizatio GEORGE & AUDREY RA			Employer identification number	
FOUNDATION		26-39	20859	
Part II	Noncash Property			
(a) No. from Part I	(See instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
=				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
=		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
=				
		Schedule B (Form 9	990, 990-EZ, or 990-PF) (2018)	

Schedule B (Form	990, 990-EZ, or 990-PF) (2018)		Page 4	
Name of organization GEORGE & AUDREY RASMUSSEN FAMILY FOUNDATION			Employer identification number 26-3920859	
than \$1, organiz the year	,000 for the year from any one contributor	r. Complete columns (a) through exclusively religious, charictions.) ▶ \$	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)	(b) Purpose of gift	(a) Use of suff	(d) Description of how wift is hold	
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	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	(e) Transfer of gift Transferee's name, address, and ZIP 4 Relationship of transferor to transfer		Relationship of transferor to transferee	
			Schedule B (Form 990, 990-EZ, or 990-PF) (2018)	