2949113815505 OMB No 1545-0052
9

Form **990-PF**

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

FUSTMARK DATE MAY 1 9 2019 8

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to www irs.gov/Form990PFfor instructions and the latest information.

Open to Public Inspection

| | | endar year 2018 or tax year beginning | | | , 2018, | and ending | | | | , 20 | |
|----------|----------|--|----------|-------------------------------|----------------|---------------|----------|--|-----------------|---------------------------------------|--|
| Na | ame of | foundation | | | | | Α | Employer identifi | ication numb | per | |
| | ERN | EST & MARIE GOSNAY CHARITABL | E TI | R 498604016 | | | | 27- | 611460 | 6 | |
| Νι | umber | and street (or PO box number if mail is not delivered to | o street | street address) Room/suite | | | В | 3 Telephone number (see instructions) | | | |
| | | | | | | | | | | | |
| | PO I | BOX 2127 | | _ | | | | 50 | 9-353- | 3898 | |
| Cı | ty or to | own, state or province, country, and ZIP or foreign posta | ol code | | | | T | | | | |
| | | | | | | | C | If exemption applica pending, check here | | ▶□ | |
| | SPO | KANE, WA 99210-2127 | | | | | | penang, eneck nore | | — | |
| | | ck all that apply: Initial return | | Initial return | of a former p | ublic charity | ٦ | 1 Foreign organizat | ions, check her | e▶ | |
| | | Final return | Γ | Amended ret | turn | | | 2 Foreign organizat | ions meeting th | | |
| | | Address change | Γ | Name change | e | | | 85% test, check h | | ▶□ | |
| Н | Che | ck type of organization: X Section 501(| c)(3) | exempt private for | oundation | () () | ٦_ | | | | |
| Γ | ∃s | ection 4947(a)(1) nonexempt charitable trust | | Other taxable pri | ivate foundati | ion Q | | If private foundation under section 507(b | | ► | |
| ï | | | | method X Ca | | | ٦, | If the foundation is i | | | |
| | end | | _ | specify) | | | ' | under section 507(b | | | |
| | | , | | n (d) must be on ca | sh basis) | | - | | | <u> </u> | |
| Ŀ | art | Analysis of Revenue and Expenses (The | - |) Payanya and | | | | | | ursements | |
| | | total of amounts in columns (b), (c), and (d) | , , , |) Revenue and expenses per | (b) Net inve | | (c) | Adjusted net income | | aritable poses | |
| | | may not necessarily equal the amounts in column (a) (see instructions).) | | books | mcom | ie | | mcome | | asis only) | |
| | 1 | Contributions, gifts, grants, etc., received (attach schedule) . | | | | | | | | | |
| | 2 | Check Y if the foundation is not required to | | | | | | | | • | |
| | 3 | Interest on savings and temporary cash investments- | | | | | | | <u> </u> | 1 | |
| | 4 | Dividends and interest from securities | | 29,884. | 2 | 9,884. | | · | <u> </u> | | |
| | _ | | | 25,001. | | 5,001. | | | | | |
| | 5a | Gross rents | | | • • | | _ | | | • | |
| | | Net rontal income or (loss) | | 50,233. | | | 1 | RECEN | (1-1) | | |
| evenue | ьа b | Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 687, 185. | · | | | | - 1 | | | اد | |
| é | i _ | assets on time ou | | | | 0,233. | 649 | MAY 1 7 | _ | 31 | |
| Ě | | Capital gain net income (from Part IV, line 2). | | | | 0,233. | <u>E</u> | WATE | | 01 | |
| _ | 8 | Net short-term capital gain | | | | | | | | | |
| | 10a | Income modifications | | | | | | OGDEN | U | | |
| | | and allowances | | | | | | | | | |
| | ŀ | Less Cost of goods sold . | _ | | | | | | | | |
| | | Gross profit or (loss) (attach schedule) | | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| | 11 | Other income (attach schedule) | | 00 117 | 0 | 0 117 | | | | | |
| - | 12 | Total. Add lines 1 through 11 | <u> </u> | 80,117. | | 0,117. | | | - | 4 127 | |
| s | 13 | Compensation of officers, directors, trustees, etc | | 16,548. | | 2,411. | | RT/NTT | - | <u>4,137</u> . | |
| ě | 14 | Other employee salaries and wages · · · · · | | | | NONE | | NONE | 1 | | |
| ĕ | 15 | Pension plans, employee benefits | _ | | | NONE | | NONE | | | |
| × | 16a | Legal fees (attach schedule) | | | | NIONIT | | RICATE | | 750 | |
| ە | b | Accounting fees (attach schedule) STMT. 1. | | 750. | | NONE | | NONE | | 750 | |
| ≥ | с | Compensation of officers, directors, trustees, etc Other employee salaries and wages Pension plans, employee benefits Legal fees (attach schedule) Accounting fees (attach schedule) STMT. 1 Other professional fees (attach schedule) Taxes (attach schedule) (see instructions Occupancy Travel, conferences, and meetings | | 45. | | | | | | <u>45</u> . | |
| ta | 17 | Miterest | | 2 22- | | 455 | | | | | |
| ııs | 18 2 | Saxes (attach schedule) (see instructions). 3. | | 2,225. | | 457. | | | | | |
| Ē | 19 🗲 | Depreciation (attach schedule) and depletion. | | | | | | | | | |
| g | 20 | Occupancy | | | | | | | ļ <u>.</u> | | |
| و | 210 | Travel, conferences, and meetings | | | | NONE | | NONE | | | |
| a | 22: | Printing and publications | | | | NONE | | NONE | | | |
| <u>6</u> | 23 | Other expenses (attach schedule) | | | | | | | <u> </u> | | |
| a | 24 | Total operating and administrative expenses | | | | | | | J | | |
| ĕ | > | Travel, conferences, and meetings | | 19,568. | 1 | 2,868. | | NONE | | <u>4,932</u> . | |
| Į, | 25 | Contributions, gifts, grants paid | | 83,186. | | | | | | <u>83,186</u> . | |
| Ē | 26 | Total expenses and disbursements Add lines 24 and 25 | | 102,754. | 1 | 2,868. | | NONE | | <u>88,118</u> . | |
| | 27 | Subtract line 26 from line 12 | | | | | | | | ; | |
| | а | Excess of revenue over expenses and disbursements | | -22,637. | | | | | | | |
| | ь | Net investment income (if negative, enter -0-) | | | 6 | 7,249. | | | | • 4 | |
| | С | Adjusted net income (if negative, enter -0-) | | | | | | | | • | |
| Fo | r Pap | erwork Reduction Act Notice, see instructions | | | | | | | | 90-PF (2018) | |
| 10 | 1 000 | CYM194 N347 04/26/2019 17:34 | 1:23 | 4 | 98604016 | | | 6 | 416 | 3 | |

| | Attached schedules and amounts in the description column should be for end-of-year | | Beginning of year | | f year | |
|----------------------|--|--|---|--|--|---|
| <u>_</u> | art II | Balance Sneets | amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash a non-interest-bearii | ng | | | |
| | 2 , | Savings and temporary o | ash investments | 85,641. | 157,674. | <u>157,674</u> . |
| | | Accounts receivable - | | - Parlament and American Control and Control and | | المستنسنة |
| | | Less. allowance for doub | tful accounts | | | |
| | | | | | | |
| | | Less. allowance for doub | etful accounts | | | |
| | | | | | | |
| | _ | | officers, directors, trustees, and other | | | |
| | | | sch schedule) (see instructions) | | | |
| | | | ceivable (attach schedule) | | | |
| | | | otful accounts NONE | | | |
| ssets | | | e | | | |
| SS | | | eferred charges | | | |
| 4 | | | government obligations (attach schedule) | | | |
| | | | stock (attach schedule) | | | |
| | | Investments - corporate Investments - land, building: | bonds (attach schedule) | | , | , 1 |
| | | and equipment basis Less accumulated deprecia | | | kase sprije situaretika (. semenia – rispris v | |
| | | (attach schedule) | | | | |
| | | | loans | 1 288 126 | 1 194 577 | 1 239 018 |
| | 14 | Land, buildings, and | | 1,200,120. | <u> </u> | 1,239,018. |
| | | equipment basis Less accumulated deprecia | tion | to the second control of the second | | |
| | 15 | (attach schedule) |) | | | |
| | 16 | Total assets (to be | completed by all filers - see the | | | |
| | | | age 1, item !) | | 1.352.251. | 1,396,692. |
| П | - | | ccrued expenses | 2,0.0,00 | | '. |
| | | | | | | |
| ŝ | | | | | | |
| lities | | | rs, trustees, and other disqualified persons. | | | , |
| ā | | • | tes payable (attach schedule) | | | · |
| Ĕ | 22 | Other liabilities (describe | · • | | - | |
| | | | | | | |
| | 23 | Total liabilities (add line | s 17 through 22) | | NONE | 7, , |
| | | Foundations that follow | SFAS 117, check here | | | ' ' |
| ces | | " | hrough 26, and lines 30 and 31. | | | , ; |
| | 24 | | | | | |
| 3a | 25 | | | | <u>. </u> | · |
| 9 | 26 | | | | | . , |
| Assets or Fund Balan | | | t follow SFAS 117, check here | | | • |
| 5 | | and complete lines 27 t | - | 1 282 868 | 1 250 251 | |
| S | 27 | | ipal, or current funds | 1,373,767. | 1,352,251. | |
| set | 28 | · · | land, bldg , and equipment fund | | · | |
| As | 29 | • . | ated income, endowment, or other funds | 1 272 767 | 1 252 251 | |
| ᇹ | 30 | | balances (see instructions) | 1,373,767. | 1,352,251. | , , , , |
| 2 | | | net assets/fund balances (see | 1 272 767 | 1 252 251 | · · · · · · · · · · · · · · · · · · · |
| D | | | ges in Net Assets or Fund Bala | 1,373,767. | 1,352,251. | <u>' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' </u> |
| - | | * | palances at beginning of year - Part | | must agree with | |
| ' | | | d on prior year's return) | | | 1,373,767. |
| 2 | | | line 27a | | | -22,637. |
| | | | led in line 2 (itemize) ► MUTUAL FUND | | 3 | 3,870. |
| | | | Motorn Fond | | | 1,355,000. |
| | | | line 2 (itemize) ► SEE STA | | 5 | 2,749. |
| | | | plances at end of year (line 4 minus ! | | | 1,352,251. |
| _ | | | | | - API, | 200 DE |

D72#1752

Capital Gains and Losses for Tax on Investment Income

Part IV

| Page | 3 |
|------|---|
| | |

| | (a) List and des 2-story br | cribe the kind(s) of property sold (for rick warehouse, or common stock, 200 | example, real estate, | (b) How acquired P - Purchase D - Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
|----------|---|--|--|---|--|----------------------------------|
| 1 a | PUBLICLY TRADED | SECURITIES | | ļ | | |
| b | | | | | | |
| С | | | | | | |
| d | | | | | | |
| <u>е</u> | | | T | | | |
| | (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | | (h) Gain or (lo ((e) plus (f) mini | ıs (g)) |
| a | 687,185. | | 636,952. | | | 50,233. |
| <u>b</u> | | | | | | |
| c | | | | | | |
| <u>d</u> | | | | | | |
| <u> </u> | | | | | | |
| | Complete only for assets sh | owing gain in column (h) and owned | by the foundation on 12/31/69. | | Gains (Col (h) ga | |
| | (i) FMV as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (ı) over col (յ), ıf any | col | (k), but not less t Losses (from co | l (h)) |
| а | | | | | | 50 <u>,</u> 233. |
| b | | | | | | |
| С | | | | · | | |
| d | | | | | | |
| e | | | | | | |
| _ | | (If g | gain, also enter in Part I, line 7 | | | |
| 2 | Capital gain net income | or (net capital loss) | loss), enter -0- in Part I, line 7 | 2 | | 50,233. |
| 3 | If gain, also enter in P | | structions. If (loss), enter -0- in | | | |
| | | | | 3 | | |
| | | | duced Tax on Net Investment I e section 4940(a) tax on net invest | | | |
| | | the section 4942 tax on the distri 't qualify under section 4940(e). [| butable amount of any year in the b | oase perio | d? X | Yes No |
| 1 | | | ar; see the instructions before maki | ng any en | tries | |
| <u> </u> | (a) | | | Tig arry err | (d) | |
| Cale | Base period years indar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | | Distribution ra (col (b) divided by | |
| | 2017 | | | | · | |
| | 2016 | | ļ | | | |
| | 2015 | | | | | |
| | 2014 | | | | | |
| | 2013 | | <u> </u> | | | |
| | | | | | | |
| 2 | Total of line 1, column (| | | 2 | - | |
| 3 | • | • | de the total on line 2 by 5.0, or by | | | |
| | the number of years the | foundation has been in existence | if less than 5 years | 3 | | |
| 4 | Enter the net value of no | oncharitable-use assets for 2018 f | from Part X, line 5 | 4 | | |
| 5 | Multiply line 4 by line 3. | | | 5 | · | |
| 6 | Enter 1% of net investme | ent income (1% of Part I, line 27b |) | 6 | | |
| 7 | Add lines 5 and 6 | | | 7 | | |
| 8 | Enter qualifying distribut If line 8 is equal to or g Part VI instructions. | tions from Part XII, line 4 | x ın Part VI, line 1b, and complete | that part | using a 1% tax | rate. See the |

| | 7- 1 • • • • • • • • • • • • • • • • • • • | |
|-------|---|---------------|
| orm : | 990-PF (2018) 27-6114606 | Page 4 |
| Part | VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see | instructions) |
| 1a | Exempt operating foundations described in section 4940(d)(2), check here | <i>.</i> |
| | | أعد يستعلم |
| | Domestic foundations that meet the section 4940(e) requirements in Part V, check | 1,345. |
| | here and enter 1% of Part I, line 27b | 1 - L |
| 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-) | NONE |
| 3 | Add lines 1 and 2 | 1,345. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) | NONE |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0 | 1,345. |
| 6 | Credits/Payments. | |
| a | 2018 estimated tax payments and 2017 overpayment credited to 2018 6a 1,168 . · | , |
| b | Exempt foreign organizations - tax withheld at source | |
| c | Tax paid with application for extension of time to file (Form 8868) 6c NONE | - 1 |
| ų | Backup withholding erroneously withheld | |
| 7 | Total credits and payments. Add lines 6a through 6d | 1,168. |
| 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 | 177. |
| - | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | - |
| 11 | Enter the amount of line 10 to be Credited to 2019 estimated tax NONE Refunded 11 | |
| | VII-A Statements Regarding Activities | |
| | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | Yes No |
| | participate or intervene in any political campaign? | 1a X |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the | ; [|
| _ | instructions for the definition | 16 X |
| | 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 Form 1120-POL for this year? | 1c X |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | , |
| _ | (1) On the foundation ►\$ (2) On foundation managers ►\$ | _ '. |
| e | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | |
| • | on foundation managers. > \$ | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 X |
| _ | 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 X |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a X |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b |
| | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 X |
| | If "Yes," attach the statement required by General Instruction T. | 2 . 1 |
| | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either | |
| J | | |
| | By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that | |
| | | 6 X |
| | conflict with the state law remain in the governing instrument? | 7 X |
| | 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 | |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instructions. ► WA | |
| μ. | | |
| Ď | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | 8b X |
| | (or designate) of each state as required by General Instruction G?If "No," attach explanation | |
| 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," 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

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|----------|--|---------------|----------|------|---------|
| Par | t VII-A Statements Regarding Activities (continued) | | | | |
| | | 1 | | 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)7 If "Yes," attach schedule See instructions | | 1 | | X |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disquali | | | | |
| | person had advisory privileges? If "Yes," attach statement. See instructions | _ | 2 | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption applications. | on? 1 | 3 | X | |
| | Website address ► N/A | | | | |
| 14 | The books are in care of ► WASHINGTON TRUST BANK Telephone no. ► (509). | 353- <u>3</u> | 898 | 8 | |
| | Located at ► PO BOX 2127, SPOKANE, WA ZIP+4 ► 992: | <u> 10-21</u> | 27 | | , , |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here | | | | |
| | and enter the amount of tax-exempt interest received or accrued during the year | 5 | , | | |
| 16 | At any time during calendar year 2018, did the foundation have an interest in or a signature or other auth | ority | | Yes | No |
| | over a bank, securities, or other financial account in a foreign country? | 1 | 6 | | X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name | e of ' | | | , , |
| | the foreign country ▶ | 1 | | • | |
| Par | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | 1 | | Yes | No |
| 1a | During the year, did the foundation (either directly or indirectly). | i | - 1 | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X | No | | | i |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a | | | | |
| | disqualified person? | | | | i 4 |
| | | No . | Ì | | |
| | (1) 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | No | - 1 | | 1 |
| | (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)? | | | | i |
| | | 40 | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" if the | 3 | | | |
| | 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.) | \la | | | . [|
| . | olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulation | l' | 1 | | |
| U | section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions | _ | b | | X |
| | Organizations relying on a current notice regarding disaster assistance, check here | | | | 1 |
| c | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, 1 | that | 1 | | . [|
| Ī | were not corrected before the first day of the tax year beginning in 2018? | i . | С | | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private of the foundation of the found | /ate | | | |
| | operating foundation defined in section 4942(j)(3) or 4942(j)(5)). | | | | . 1 |
| а | At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and | | | | . 1 |
| | 6e, Part XIII) for tax year(s) beginning before 2018? | Vo | | | |
| | If "Yes," list the years | | | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a |)(2) | | | , |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) | to | | | |
| | all years listed, answer "No" and attach statement - see instructions) | 2 | 2b | | |
| C | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | | | . 1 |
| | | | Ì | ٠ | 1 1 |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise | | | | |
| | at any time during the year? | - 1 | | | į |
| b | olf "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation | I | | | |
| | disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by | | | | , , |
| | Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse | li, | | | . 1 |
| | the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if | | <u>.</u> | | لـــــا |
| | foundation had excess business holdings in 2018) | | Ь | | v |
| | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpos | | a | | X |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize | - 1 | | | |
| | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 20 | | b | O DE | |

NONE Form **990-PF** (2018)

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

27-6114606

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|------------|--|------------------|
| Par | Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emploand Contractors (continued) | yees, |
| 3 | Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE | ." |
| | (a) Name and address of each person paid more than \$50,000 (b) Type of service | (c) Compensation |
| NON | JE . | NONE |
| | | |
| | | |
| | | |
| | | |
| | | |
| Tota | I number of others receiving over \$50,000 for professional services | NONE |
| Par | t IX-A Summary of Direct Charitable Activities | |
| Lı: Or | st the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
| 1 1 | IONE | |
| - | | |
| 2 | | |
| - | | |
| 3 _ | | |
| - | | |
| 4 | | |
| | | |
| | t IX-B Summary of Program-Related Investments (see instructions) | A |
| | escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 IONE | Amount |
| - 1 | ONE | |
| 2 | | |
| - | | |
| Al | other program-related investments. See instructions | |
| 3 <u>J</u> | IONE | |
| | | |
| Tota | I. Add lines 1 through 3 | |

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| Par | Minimum Investment Return (All domestic foundations must complete this part. For see instructions.) | eign foundations, | |
|-------|--|--|---------------|
| 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 1 | ,438,024. |
| b | Average of monthly cash balances | | 49,461. |
| C | Fair market value of all other assets (see instructions) | 1c | NONE |
| d | Total (add lines 1a, b, and c) | | ,487,485. |
| е | | | |
| | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | . 2 | NONE |
| 3 | Subtract line 2 from line 1d | | ,487,485. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see | | |
| | instructions) | | 22,312. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 1 | ,465,173. |
| 6 | Minimum investment return. Enter 5% of line 5 | | 73,259. |
| Par | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations, check here ▶ and do not complete this part.) | ındations | - |
| 1 | Minimum investment return from Part X, line 6 | . 1 | 73,259. |
| 2a | 1 245 | . 3 | |
| b | Income tax for 2018. (This does not include the tax from Part VI.) 2b | in the second se | |
| c | Add lines 2a and 2b, | 7 _ 1 | 1,345. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | · | 71,914. |
| 4 | Recoveries of amounts treated as qualifying distributions | l l | NONE |
| 5 | Add lines 3 and 4 | | 71,914. |
| 6 | Deduction from distributable amount (see instructions) | | NONE |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, | | |
| • | line 1 | , , | 71,914. |
| Par | t XII Qualifying Distributions (see instructions) | | • |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | م سائم | |
| а | Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 | · 1a | 88,118. |
| b | Program-related investments - total from Part IX-B | | |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes | . 2 | NONE |
| 3 | Amounts set aside for specific charitable projects that satisfy the | | |
| а | Suitability test (prior IRS approval required) | - · · · · · · · · · · · · · · · · · · · | NONE |
| b | Cash distribution test (attach the required schedule) | . 3b | NONE |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | | 88,118. |
| 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 | | |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 88,118. |
| | Blocks The amount on line 6 will be used in Part V column (b) in subsequent years when | alculating whather t | ha foundation |

Form **990-PF** (2018)

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

Page 9

| Pa | rt XIII Undistributed Income (see instru | uctions) | | - | |
|----|--|-----------|---------------------|-------------|--------------------|
| | | (a) | (b) | (c) | (d) |
| 1 | Distributable amount for 2018 from Part XI, | Corpus | Years prior to 2017 | 2017 | 2018 |
| | line 7 | | | | 71,914. |
| 2 | Undistributed income, if any, as of the end of 2018 | | | | |
| а | Enter amount for 2017 only | | | 55,735. | |
| b | Total for prior years 20,20,20 | | NONE | | |
| 3 | Excess distributions carryover, if any, to 2018 | | | | |
| а | From 2013 NONE | | | | |
| b | From 2014 NONE | | | | , |
| | From 2015 NONE | | | | |
| | From 2016 NONE NONE | | | | |
| | . 110111 2017 1 1 1 1 1 1 | NONB | | · | |
| | Total of lines 3a through e | NONB | | | |
| 4 | Qualifying distributions for 2018 from Part XII, line 4 > \$ 88,118. | | | | |
| | Applied to 2017, but not more than line 2a | | | 55,735. | ł |
| | | | | | |
| b | Applied to undistributed income of prior years (Election required - see instructions) | | NONE | | • |
| _ | · | | | | |
| C | Treated as distributions out of corpus (Election required - see instructions) | NONB | • | | |
| d | Applied to 2018 distributable amount | | | | 32,383. |
| | Remaining amount distributed out of corpus | NONE | | | |
| 5 | Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same | | | | |
| | amount must be shown in column (a)) | NONB | | | NONE |
| 6 | Enter the net total of each column as | | | | |
| | indicated below: | NOM | | | |
| а | Corpus Add lines 3f, 4c, and 4e Subtract line 5 | NONB | | | |
| b | Prior years' undistributed income Subtract | | NONE | | |
| _ | Inne 4b from line 2b | | NOME | | |
| C | income for which a notice of deficiency has | | | | , |
| | been issued, or on which the section 4942(a) | | NONE | | |
| | tax has been previously assessed | | | | |
| d | Subtract line 6c from line 6b. Taxable amount - see instructions | | NONE | | |
| е | Undistributed income for 2017. Subtract line | - | | | |
| | 4a from line 2a. Taxable amount - see | | | | |
| | Hadambutad income for 2019. Subtreet lines | | | | |
| 1 | Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be | | | | |
| | distributed in 2019 | | | | 39,531. |
| 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 | 110111 | | | |
| | required - see instructions) | NONB NONB | | | |
| 8 | Excess distributions carryover from 2013 not | NONE | | | |
| | applied on line 5 or line 7 (see instructions) | NONB | | | |
| 9 | Excess distributions carryover to 2019. | NONE | | | |
| 10 | Subtract lines 7 and 8 from line 6a | 1101115 | | | _ |
| | Excess from 2014 NONE | | | | |
| | Excess from 2015 NONE | | | | 1 |
| | Excess from 2016 NONE | | | | |
| | Excess from 2017 NONE | | | | , |
| | Excess from 2018 NONE | <u> </u> | | |) ⁱ |
| | | | | | Farm 990-PE (2018) |

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

- a The name, address, and telephone number or email address of the person to whom applications should be addressed:
- b The form in which applications should be submitted and information and materials they should include:
- c Any submission deadlines:
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

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| Part XV Supplementary Information 3 Grants and Contributions Paid Dur | | roved for | Future Payment | |
|---|--|------------------------|-----------------|---------|
| Recipient | If recipient is an individual. | Foundation | | |
| Name and address (home or business) | show any relationship to any foundation manager or substantial contributor | status of recipient | contribution | Amount |
| a Paid during the year | or substantial commoditor | | | |
| POKANE MASONIC LODGE NO. 34 C/O JEREMY THOM | | | | |
| 514 W CHELAN AVE SPOKANE WA 99205 | NONE | PC | PROGRAM SUPPORT | 11,646. |
| RIENDS OF KSPS KSPS PUBLIC TV RIENDS OF KSPS C/O GARY A STOKES Spokane WA | NONE | PC | PROGRAM SUPPORT | 1,664. |
| Chriners Hospital for Children CRUST & INVESTMENT ACCOUNT MGR Tampa FL 3363 | NONE | PC | PROGAM SUPPORT | 11,646. |
| THITWORTH UNIVERSITY C/O LUZ MERKEL 000 W HAWTHORNE RD SPOKANE WA 99251-2515 | NONE . | PC | PROGRAM SUPPORT | 11,646. |
| POKANE HUMANE SOCIETY O BOX 6247 SPOKANE WA 99217 | NONE | PC | PROGRAM SUPPORT | 11,646. |
| ASHINGTON STATE UNIV FOUNDATION O BOX 641925 PULLMAN WA 99164-1925 | NONE | PC | PROGRAM SUPPORT | 11,646. |
| POKANIMAL C.A.R.E. C/O GAIL MACKIE 10 N NAPA ST SPOKANE WA 99202 | NONE | PC | PROGRAM SUPPORT | 11,646. |
| POKANE SCOTTISH RITE CHARITIES 108 W RIVERSIDE AVE SPOKANE WA 99201-1106 | NONE | PC | PROGRAM SUPPORT | 11,646. |
| | | | | |
| | | | | |
| | | | | |
| Total | | | ▶ 3a | 83,186. |
| b Approved for future payment | | • | | |
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| nter gross amounts unless otherwise indicated | Unreia | ivities ated business income | Excluded by | section 512, 513, or 514 | (e) |
|---|----------------------|---------------------------------------|-----------------------|--|-----------------------------------|
| | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | Related or exempt function income |
| 1 Program service revenue. a | | | Excitation code | 7 | (See instructions.) |
| b | | | | | . <u>.</u> |
| С | | | | | |
| d | | | | | |
| e | | | | | |
| f | | | | <u> </u> | ···· |
| g Fees and contracts from government agencies | | | ļ | | |
| 2 Membership dues and assessments | | | <u> </u> | | |
| Interest on savings and temporary cash investments | | | 14 | 29,884. | |
| Dividends and interest from securities | <u> </u> | | | 25,004. | |
| Net rental income or (loss) from real estate a Debt-financed property | | | <u> </u> | | |
| b Not debt-financed property | | | | | |
| Net rental income or (loss) from personal property | | | | | |
| Other investment income | | | | | |
| Gain or (loss) from sales of assets other than inventory | | | 18 | 50,233. | |
| Net income or (loss) from special events • • • | | | | | |
| Gross profit or (loss) from sales of inventory | | · - | | | |
| Other revenue. a | | | | | |
| b | | | | | |
| c | | | | | ···· · <u>-</u> |
| d | | | | | |
| e Subtotal. Add columns (b), (d), and (e) | | | | 80,117. | |
| B Total. Add line 12, columns (b), (d), and (e) | | · · · · · · · · · · · · · · · · · · · | <u> </u> | | 80,117 |
| ee worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities | | seemplishment of E | vomnt Bur | 2000 | |
| Line No. Explain below how each activity | | | | | |
| ▼ accomplishment of the foundation | | | | e) of Part XVI-A contribu funds for such purposes | |
| | | | | | |
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| | | t purposes (other than | by providing | | |
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| l e e e e e e e e e e e e e e e e e e e | | t purposes (other than | by providing | | |
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| | | t purposes (other than | by providing | | |

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| Form 99 | 0-PF (201 | | | | | | 27-6114606 | | | | ge 13 |
|----------|-----------|------------------------------|---------------------------------------|--------------------------------|--------------------------------------|-------------|--------------------------------|---------------------------------------|-------------|-----------|------------|
| Part 2 | (VII_ | Information R Exempt Orga | legarding Tr | ransfers to and | Transactio | ns and | d Relationships W | /ith Nonc | harit | able | |
| 1 D | id the | | | engage in any of t | he following | with ar | ny other organization | described | | Yes | No |
| ir | n section | on 501(c) (other | | | | | on 527, relating to | | | | • |
| | rganiza | | | | | | | | | | |
| | | · · | _ | o a noncharitable ex | - | | | | | | v |
| • | • | | | | | | | | | | X |
| • | • | | | | | | | | 1a(2) | - | |
| | | ensactions | aharitahla ayai | mnt organization | | | | | 16/11 | | X. |
| | | | | | | | | | | | X |
| | | | | | | | | | | | X |
| | | | | | | | | | | | Х |
| | | | | | | | | | | | Х |
| ((| 6) Perfo | ormance of services | s or membersh | ip or fundraising sol | licitations | | | | 1b(6) | | X |
| | | | | | | | | | | | _ X_ |
| | | | | | | | Column (b) should a | | | | |
| | | | | | | | If the foundation re- | | | | |
| | | | · · · · · · · · · · · · · · · · · · · | | | | of the goods, other | | | | |
| (a) Line | no | (b) Amount involved | (c) Name of | noncharitable exempt org | janization | (a) Des | cription of transfers, transac | ctions, and snar | ing arra | ingeme | nts |
| | | | | | | • | | | | | |
| | - | | | | | | | | | | |
| | - | | - | | | • | | · · · · · · · · · · · · · · · · · · · | | | |
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| d | escribe | · · |) (other than se | ection 501(c)(3)) or | in section 52 | | | | | es 🔼 | X No |
| | | (a) Name of organization | on | (b) Type of | organization | | (c) Descrip | tion of relations | hip | | |
| | | | | | - | + | | | - | | |
| | | | | | | + | | | | <u> </u> | |
| | | | | | | | | | | | |
| | | | | <u> </u> | ···································· | | | | | | |
| | Under p | enalties of perjury, I decl | are that I have exan | nined this return, including | accompanying sc | nedules and | statements, and to the best | of my knowledg | e and t | elief, it | is true |
| Sign | correct, | and complete Declaration of | of preparer (other than | taxpayer) is based on all info | rmation of which p | reparer has | any knowledge | May the IBS | dianu | a this | |
| | | 7 (MZ | line | _ 04/26/2 | 019 | Auth | . Officer | May the IRS with the pre | | | |
| Here | Signa | ture of officer or trustee | | Date | | Title | | See instruction | s X | Yes | No |
| | | HORIZED OFFI | | | | | A | | | | |
| Paid | | Print/Type preparer's na | | Porting y | Vinal | 1 1 | 7 1 | " " | PTIN | | |
| | , L | KELLY KOWALC | | jeven | MIN. | m | 101/20/2019 | | P013 | | <u> 36</u> |
| Prepa | | | RNST & YOU | | | | Firm's Elf | N ► 34-0 | <u>6565</u> | 596 | |
| Use (| וחע | Firm's address > 15 | 55 N WACKE | K DKIAE | | | | | | | |

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498604016

Phone no 312-879-2000 Form **990-PF** (2018)

15

CHICAGO, IL

STATEMENT

ERNEST & MARIE GOSNAY CHARITABLE TR 498604016

498604016

| 990PF, PART I - ACCOUNTING FEES | | |
|---|---------------|----------|
| 90PF, PART I - =================================== | CCOUNTING FEE | |
| 90PF, PART | | II II |
| 90PF, ===== | RT | |
| FORM | M 990P | |

| CHARITABLE PURPOSES | 750. |
|---|---------------------|
| ADJUSTED NET INCOME | NONE |
| NET INVESTMENT INCOME | NONE |
| REVENUE AND EXPENSES PER BOOKS | 750. |
| | TOTALS |
| DESCRIPTION | TAX PREPARATION FEE |

ERNEST & MARIE GOSNAY CHARITABLE TR 498604016

18 - 1

27-6114606

- OTHER PROFESSIONAL FEES PART I

FORM 990PF,

REVENUE AND

EXPENSES

PER BOOKS

45.

CHARITABLE PURPOSES

STATE OF WA RENEWAL FEE

DESCRIPTION

TOTALS

45.

STATEMENT

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498604016

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ERNEST & MARIE GOSNAY CHARITABLE TR 498604016

27-6114606

498604016

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| IAXES | |
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| PAKI | |
| 990PF, | |
| FORM | |

| NET INVESTMENT INCOME | 308. 149. 457. |
|---|--|
| REVENUE AND EXPENSES PER BOOKS | 600. 1,168. 308. 149. 2,225. |
| DESCRIPTION | FEDERAL TAX - PRIOR YR FEDERAL ESTIMATES FOREIGN TAXES ON QUALIFIED FOR FOREIGN TAXES ON NONQUALIFIED |

ERNEST & MARIE GOSNAY CHARITABLE TR 498604016

27-6114606

| FORM 990PF, | PART I | III - | OTHER | DECREASES | IN NET | WORTH | OR FU | ND BALANCES |
|-------------|--------|-------|-------|-----------|--------|--------|-------|-------------|
| ========= | ====== | ===== | ===== | | ====== | ====== | ===== | |

ROC ADJUSTMENT ON SALES

ROUNDING ADJUSTMENT

ADJUSTMENT DUE TO CORP ACTION

2,736.

TOTAL 2,749.