Form **990-PF**

EXTENDED TO NOVEMBER 15, 2019

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

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 calendar year 2018 or tax year beginning , and ending								
-	Name of foundation , and ending				A Employer identification	number		
	THE GUNNAR AND RUTH LIE FOUNDATION Number and Street (G-P O box number if mail is not delivered to street address) Room/suite					91-2090480		
_			· ·	t address)	Room/suite	B Telephone number		
_	3	24	8 HUNTS POINT ROAD			425-261-10	00	
City or town, state or province, country, and ZIP or foreign postal code BELLEVUE, WA 98004						C If exemption application is p	ending, check here	
-	_		call that apply: Initial return	Initial return of a fo	ormer public charity	D 1 Foreign organizations	, check here	
			Final return	Amended return	,			
			Address change	Name change	1	Foreign organizations me check here and attach co	eting the 85% test, mputation	
F	C	heck	type of organization X Section 501(c)(3) e.	xempt private foundation		E If private foundation stat	tus was terminated	
] Se	ection 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation ()	under section 507(b)(1)		
I	Fa	ır ma	arket value of all assets at end of year J Account	ıng method: 🔼 Cash	Accrual	F If the foundation is in a 6	60-month termination	
	•			ther (specify)		under section 507(b)(1)	(B), check here 🕨 🔲	
/ _	▶		28,899,964. (Part I, colu	mn (d) must be on cash basi	S.)		· · · · · · · · · · · · · · · · · · ·	
L	Pa	rt l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)	
_		1	Contributions, gifts, grants, etc , received	3,017,491.				
		2	Check if the foundation is not required to attach Sch. B		,			
		3	Interest on savings and temporary cash investments	155,261.	139,682.		STATEMENT 2	
		4	Dividends and interest from securities	327,076.	327,076.		STATEMENT 3 1	
			Gross rents					
		_	Net rental income or (loss)	6,383,914.			STATEMENT 1	
	e	ь	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 24,470,663.	0,303,314.		RECEIV		
	Revenue	7	assets on line 6a 24, 470, 003. Capital gain net income (from Part IV, line 2)		9,039,266.	112021		
	8	8	Net short-term capital gain		3,033,200.	CED 1 C	200	
		9	Income modifications			SEP 16	2019	
	ŀ		Gross sales less returns and allowances				<u> </u>	
			Less Cost of goods sold			OGDEN	UT I	
		С	Gross profit or (loss)					
		11	Other income				t	
_	_	12	Total Add lines 1 through 11	9,883,742.	9,506,024.	0.		
		13	Compensation of officers directors, trustees, etc	0.	0.	0.	0.	
		14	Other employee salaries and wages					
5	ဖွ		Pension plans, employee benefits		···········		****	
2019	Sus		: Legal fees : Accounting fees STMT 4	5,870.	1,761.	0.	4,109.	
ර	ăx		Accounting fees S'TM'T' 4 Other professional fees	3,070.	1,701.		1,1031	
0	9	17	Interest					
NNED OCT 0	aţ.	18	Taxes STMT 5	2,658.	2,658.	0.	0.	
2	ist I	19	Depreciation and depletion					
\supset	튑	20	Occupancy					
Ä	됩	21	Travel, conferences, and meetings	:				
Ź	a	22	Printing and publications					
CANNED	5		Other expenses STMT 6	149,467.	148,799.	0.	668.	
ん ろ	Operating	24	Total operating and administrative	155 005	152 010		4 222	
-	န္ပို		expenses Add lines 13 through 23	157,995.	153,218.	0.	4,777. 665,000.	
	-		Contributions, gifts, grants paid	665,000.			005,000.	
		26	Total expenses and disbursements.	822,995.	153,218.	0.	669,777.	
-	\dashv	27	Add lines 24 and 25 Subtract line 26 from line 12:	024,333.	133,210.	0.	000,777.	
				9,060,747.			1	
			Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	2,300,727	9,352,806.			
			Adjusted net income (d positive, enter -0-)			0.		

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Beginning of year

Page	2
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	224	Balance Sheets Attached schedules and amounts in the description	Beginning of year		
Column should be for end-or-year amounts only		column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	420,598.	748,846.	748,846.
	2	Savings and temporary cash investments	2,641,238.	19,605,111.	19,605,111.
	3	Accounts receivable ►			
	1	Less allowance for doubtful accounts			
	4	Pledges receivable ►			
		Less allowance for doubtful accounts		A-p	
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable		 -	
	'	Less allowance for doubtful accounts		<u> </u>	
Ŋ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments - U.S. and state government obligations			
	1	Investments - corporate stock STMT 7	12,660,932.	5,357,275.	5,442,854.
	1	Investments - corporate bonds STMT 8	4,019,944.	3,092,227.	3,103,153.
	i	Investments - land, buildings, and equipment basis	, , , , , , , , , , , , , , , , , , , ,		1
	``	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	į.	Land, buildings, and equipment; basis		-	
		Less accumulated depreciation			
	15	Other assets (describe ►		•	
	I	Total assets (to be completed by all filers - see the			
	'	instructions. Also, see page 1, item I)	19,742,712.	28,803,459.	28,899,964.
_	17	Accounts payable and accrued expenses	23,7,22,7,22,	20,000,2001	1
	I	Grants payable		·	
s	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
夏	21	Mortgages and other notes payable			<u> </u>
ڐ		Other liabilities (describe)			
	~~	7			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_	۳-	Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31.			
es	24	Unrestricted			
afances		Temporarily restricted			
Bal	1	Permanently restricted			
Net Assets or Fund B	~	Foundations that do not follow SFAS 117, check here			
Ŀ		and complete lines 27 through 31			
ŏ	27	Capital stock, trust principal, or current funds	19,742,712.	19,742,712.	
ets		Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
Ass	1	Retained earnings, accumulated income, endowment, or other funds	0.	9,060,747.	·
et	1	Total net assets or fund balances	19,742,712.	28,803,459.	
2	- •				
	31	Total liabilities and net assets/fund balances	19,742,712.	28,803,459.	
_					
٢	art	Analysis of Changes in Net Assets of Fund B	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		<u> </u>
	(mus	t agree with end-of-year figure reported on prior year's return)		_1	19,742,712.
2	Enter	amount from Part I, line 27a		2	9,060,747.
3	Other	increases not included in line 2 (itemize)		3	0.
4	Add I	ines 1, 2, and 3		4	28,803,459.
5	Decre	eases not included in line 2 (itemize)		5	0.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	28,803,459.
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THE GUNNAR AND RUTH LIE FOUNDATION

Part IV Capital Gains a	and Losses for Tax on In	nvestment	t Income						
(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)				(b) I	How ac - Purc - Dona		(c) Date (mo , d	ay, yr.)	(d) Date sold (mo., day, yr)
1a PUBLICLY TRADE							VARI		12/31/18
b PUBLICLY TRADE						P	VARI	ous	12/31/18
c CAPITAL GAINS	DIVIDENDS	 							
<u>d</u>									
e				Ц,	ī				<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus e	st or other basis expense of sale					ain or (loss s (f) minus	(g))
a 3,311,806.			3,293,69						18,109.
b 21,158,317.		1	2,137,70	0.					9,020,617.
c 540.		ļ							540.
d			·					<u> </u>	
<u>e</u>	(1)	16 - 6 4-2	10/01/00						<u> </u>
Complete only for assets showin	g gain in column (h) and owned by					(I) col	Gains (C k) hut r	ol. (h) gain not less tha	ı mınus ın -0-) or
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any				Losses	(from col.	(h))
a									18,109.
b									9,020,617.
С									540.
d			-						
е				_		, <u> </u>			
2 Capital gain net income or (net ca	pital loss) $\begin{cases} If gain, also enter \\ If (loss), enter -0 \end{cases}$	r in Part I, line - in Part I, line	7 7	}[2				9,039,266.
3 Net short-term capital gain or (los	•								
If gain, also enter in Part I, line 8,				}					
If (loss), enter -0- in Part I, line 8				للـ	3	l		N/A	<u> </u>
	nder Section 4940(e) for					nent inc	ome		
(For optional use by domestic private	foundations subject to the section 4	4940(a) tax on	net investment in	come	e)				
If section 4940(d)(2) applies, leave th	us nart hlank								
in Section 4340(0)(2) applies, leave to	no part blank.								
Was the foundation liable for the sect				lods					Yes X No
If "Yes," the foundation doesn't qualif	7.2.								
1 Enter the appropriate amount in e	ach column for each year, see the ir	nstructions be	fore making any e				1		(4)
Base period years	(b) Adjusted qualifying dis	tributions	Net value of no	(c) nchar		use assets		Distri	(d) bution ratio
Calendar year (or tax year beginning	'9 '''/	3,366.				5,945		(coi. (b) di	vided by col (c)) • 066619
2017		0,004.	-			$\frac{3,343}{7,424}$.040753
2016	97	0,004.				$\frac{7,424}{0,713}$.063287
2015	1 27	9,331.				$\frac{0,713}{7,972}$.095787
2014		$\frac{9,331}{1,782}$				2,391			.043360
2013		1,702.			, 5 1	2,371	$+$ \neg		•043300
2. Total of line 1. column (d)							2		.309806
2 Total of line 1, column (d)3 Average distribution ratio for the 5	t year been period, duude the total	on line 2 by 5 (n or by the numb	or of s	voare		-		.303000
the foundation has been in exister		on line 2 by 5.	o, or by the number	ei ui j	years		3		.061961
the loundation has been in exister	ice ii iess iiiaii 5 years						+		.001301
4 Enter the net value of noncharitab	le-use assets for 2018 from Part X,	line 5					4	2	26,504,764.
5 Multiply line 4 by line 3				5		1,642,262.			
	. (40) . (D. A. L. box. 07b.)								93,528.
6 Enter 1% of net investment incom	e (1% 01 Part I, line 2/0)						6		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
7 Add lines 5 and 6							7		1,735,790.
8 Enter qualifying distributions from	Part XII, line 4						8		669,777.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	1b, and comp	lete that part usin	g a 1º	% tax r	rate			

Part VII Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions) 1			090480		Page 4
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) b Demestic fundations that meet the section 4940(s) requirements in Part V, check here of Part I, line 27a 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 (domestics section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 3 Add lines 1 and 2 5 Subbitle A (incompl) lax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 5 Tax based on investment income, Subtract line 4 from line 3.1 ff zero or less, enter -0-) 5 Tax based on investment income, Subtract line 4 from line 3.1 ff zero or less, enter -0-) 5 Exempt foreign organizations - six withhelid at source 6 Tax part with application for extension of line of line (Form 8868) 6 Tax dee, If the found of line 10 be foreign 4 from 2220 is attached 7 Total credits and payments; Add lines 6s through 6d 8 Edited any penalty for underpayment of estimated tax. Check here if it from 2220 is attached 9 Total credits and payments; Add lines 6s through 6d 8 Edited any penalty for underpayment of estimated tax. Check here if it from 2220 is attached 10 Overpayment II line 7 is more than the total or lines 5 and 6 s, enter the amount overpaid 10 Overpayment II line 7 is more than the total or lines 5 and 6 s, enter the amount overpaid 10 Overpayment II line 7 is more than the total or lines 5 and 6 s, enter the amount overpaid 10 Overpayment II line 7 is more than the total or lines 5 and 6 s, enter the amount overpaid 10 Overpayment II line 7 is more than the total or lines 5 and 6 s, enter the amount overpaid 10 Overpayment II line 7 is more than the total or lines 5 and 6 s, enter the amount overpaid 10 Overpayment II line 7 is more than the total or lines 5 and 6 s, enter the amount overpaid 10 Overpayment II line 7 is more than the total or lines 5 and 6 s, enter the amount overpaid 11 Demantary of the total o			ee msuu	Ctio	15)
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	1a	1 1 1			
of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, coll (b) 2 Tax under section 511 (cornestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 3 Add lines 1 and 2 3 L87, 056. 3 L87, 056. 5 Subbitle 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 zer or less, enter -0- 5 Lesent foreign organizations - Isa withheld at source 6 Lester flyengments a 20 Its estimated tax payments and 2017 overpayment credited to 2018 8 Sa 9, 987. 5 Lesent foreign organizations - Isa withheld at source 6 Tax paid with application for extension of time to the (Form 8868) 6 Lester to 190, 0000. 7 Total credits and payments, Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Chick there if I form 2220 is attached 9 Total credits and payments, Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Chick there if I form 2220 is attached 10 Overpayment. If line 7 is more than the lote of lest day to a said, 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the lote of lest day to a said, 8, enter the amount overpaid 10 Overpayment. If line 7 is more than 1800 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1 or 1 th, attach a detailed description of the activities. Did if a lound than 18 of a detailed description of the activities. Did if by the foundation in connection with the activities. Did if the foundation in provide of the less of the activities of the less of the activities of the less of the activities of the less of the less of the seed of the activities. Did the foundation have at less 15,000 or more during the year? 1 (1) On the foundation in connection with the activities. Did the foundation ender any changes, not previ			10	7 ^	
a All other domestic foundations eater 2% of the 27h Exempt foreign organizations, either 4% of Part I, Inc 12, col (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations oal), others, enter -0-) 3 Add hers 1 and 2 4 Subtitle A (income) Iax (domestic section 4947(a)(1) trusts and taxable foundations oal), others, enter -0-) 5 Tax based on investment florone. Subtract line 4 from line 3. If zero or elss, enter -0-) 6 CredistriPayments 2 2 10 Estimated tax payments and 2017 overpayment credited to 2018 8 8 9 , 987 - 6 1 190 , 000 - 1 180	b		10	7,0	30.
2 Tax under section 51 if (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 3 Add lines 1 and 2 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 3.1 zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Exempt foreign organizations - tax withhelid at source 6 December 2 organizations - tax withhelid at source 6 December 2 organizations - tax withhelid at source 6 December 2 organizations - tax withhelid at source 6 December 2 organizations - tax withhelid at source 6 December 2 organizations - tax withhelid at source 6 December 2 organizations - tax withhelid at source 7 Total credits and payments; Add lines 6 at through 6d 8 Enter any penalty for underpayment of estimated tax. Check here december 2 organizations - tax withhelid at source organizations - tax withhelid at 10 lines 5 and 8, enter the amount over plat 10 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 2018 estimated tax. Plat 1 lines the tax mount of line 10 to be Credited to 2018 estimated tax. Plat 1 lines					1
3 187,056. 4 Subtile 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- 5 Tax based on investment income. Subtract line 4 from line 3, if zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3, if zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3, if zero or less, enter -0- 6 Credis/Payments 2 2018 estimated tax payments and 2017 overpayment credited to 2018 6 a 9, 987. 6 b 0, 0. 6 b 0, 0. 7 199, 987. 6 Exempt foreign organizations - tax withheld at source 6 a 190,000. 8 d 0, 0. 7 199, 987. 7 109, 987. 8 Subtracting line 1 line 7 is not provided to 2019 estimated tax. Check here			a		
Subtlife A (income) bax (domestic section 497(a)(1) troits and taxable foundations only; others, enter -0-)		(-1,-1,-1,-1,-1,-1,-1,-1,-1,-1,-1,-1,-1,-	1 Ω	7 0	
5 Tax based on Investment Income. Subtract fine 4 from line 3. If zero or less, enter -0. 6 Credis/Payments 2 2018 estimated tax payments and 2017 overpayment credited to 2018 5 b Exempl foreign organizations - Lax withheld at source 6 Tax paid with application for extension of time to the (Form 8886) 6 Beakup withholding erroneously withheld 7 Total credits and payments Add lines 6 a through 64 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 owner line 7 is more than line 7, enter amount owners and 1 line 7 is more than the total of lines 5 and 8, enter the amount organization 1 line 7 is more than the total of lines 5 and 8, enter the amount organization 1 line 7 is more than 1 lin	-		10	,,,	50.
6 Credits/Payments a 2018 estimated tax payments and 2017 overpayment credited to 2018 b Exempt foreign organizations - tax withheld all source c Tax paid with application for extension of time to file (Form 8868) b Capture (Form 8868) c 190,000. d Backup withholding erroreously withheld 7 Total credits and payments, Add lines 6a through 6d 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, enter the amount owed 9 Tax due. If the total of lines 5 and 8, enter the amount owerpaid 10 Overpayment If line? 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 2018 estimated tax. 12, 931. Refunded ► 10 Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation influence any national, state, or focal legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answers "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. c Did the foundation N S 0. (2) On foundation managers. S 0. 6 Enter the reimbursement (if any) yand by the loundation during the year for political expenditure tax imposed on foundation managers. S 0. 6 Enter the reimbursement (if any) yand by the loundation during the year for political expenditure tax imposed on foundation managers. S 1 Yes, Tax and a detailed description of the activities. 3 Has the foundation have unrelated business gross income of \$1,000 or more during the year? 11 Yes, Tax and a detailed description of the activities. 3 Has the foundation have unrelated business gross income of \$1,000 or more during the year? 11 Yes, Tax and a detailed description of the activities. 4 A total the requirements of section 508(e) (relating	_	(-), (-), (-), (-), (-), (-), (-), (-),	1 Ω	7 0	56
a 2018 estimated tax payments and 2017 overpayment credited to 2018 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld d Total credits and payments, Add lines 6a through 6d Total credits and payments, Add lines 6a through 6d Tax due, If the total of lines 5 and 8 is more than the total of lines 5 and 8 is more than the total of lines 5 and 8 is more than the total of lines 5 and 8 is more than the total of lines 5 and 8, enter the amount overpaid Toverpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Toverpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Toverpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Toverpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Toverpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Toverpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Toverpayment If line 7 is more than 1 to 10 be Credited to 2019 estimated tax Toverpayment If line 7 is more than 1 the total of lines 5 and 8, enter the amount overpaid Toverpayment If line 7 is more than 1 to 10 be Credited to 2019 estimated tax Toverpayment If line 7 is more than 1 to 10 be Credited to 2019 estimated tax Toverpayment If line 7 is more than 1 the total of lines 5 and 8, enter the amount overpaid Toverpayment If line 7 is more than 1 the total of lines 5 and 8, enter the amount overpaid Toverpayment If line 7 is more than 1 the 10 be Credited to 2019 estimated tax Toverpayment If line 7 is more than 1 the total of lines 5 and 8, enter the amount overpaid Toverpayment If line 7 is more than 1 the 10 be Credited to 2019 estimated tax Toverpayment If line 7 is more than 1 the total of lines 5 and 8, enter the amount overpaid Total 1 the 10 the		tex bases on investment meeting, costilion in our meeting and in cost		7,0	30.
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S Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T 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 conflict with the state law remain in the governing instrument? 7 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 7 X 8a Enter the states to which the foundation reports or with which it is registered. See instructions. WA b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (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," complete Part XIV 9 X	4a				<u>X</u>
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year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV			8b	_X	
	9			x	- -
10 Did any persons become substantial contributors during the tax year' if "yes," attach a schedule listing their names and addresses 10 X					
Form 990-PF (2018)	10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			(2018)

Part VII-A	Statements	Regarding /	Activities (continued)

	The state of the s			
			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		Х
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A		0 0 0	
14	The books are in care of ► KIRSTEN MILLER Telephone no. ► 425-26		000	
	Located at ► 2215 MERRILL CREEK PARKWAY, EVERETT, WA ZIP+4 ►98	203		
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	N	/A	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		Yes	
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	ľ		:
_	foreign country	<u> </u>		
Pa	rt 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.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2018?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			ĺ
	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		i	
	before 2018? Yes X No			1
	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			1
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			1
	statement - see instructions) N/A	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.	4 111		
	>		-	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 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,		/s	ا ق _
	Form 4720, to determine if the foundation had excess business holdings in 2018.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from reopardy before the first day of the tax year beginning in 2018?	4b		X

Form	990-	PF ((20	18)
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orm 990-PF (2018) THE GUNNAR AND RUTH LIE			91-20904	80 Page 6
Rart VII⊬B⊱ Statements Regarding Activities for Which ।	Form 4720 May Be F	Required (contin	ued)	
5a During the year, did the foundation pay or incur any amount to:			بَرُ	Yes No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es 🗶 No 🏻	終入 職門人場
(2) Influence the outcome of any specific public election (see section 4955), of		ectly,	5	
any voter registration drive?		Y	es 🗶 No 🖁	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es 🗓 No 🖇	
(4) Provide a grant to an organization other than a charitable, etc., organization			,33	
4945(d)(4)(A)? See instructions			es 🗶 No 🖁	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses or fe			
the prevention of cruelty to children or animals?	or caucational purposes, or h		es 🗶 No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	dar the excentions described ii			
section 53.4945 or in a current notice regarding disaster assistance? See instr		n riegulations	N/A	5b
			N/11 №	****
Organizations relying on a current notice regarding disaster assistance, check		nad		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for			es 🦳 No 🖟	
expenditure responsibility for the grant?	14	/A 10	es ∟ No 🏻 🖔	
If "Yes," attach the statement required by Regulations section 53.4945-5(d)			\$ 1	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	, L	्चि. <u>।</u>	
a personal benefit contract?		Y	es 🗶 No 🙎	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.		_		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Y	es 🗶 No 🔮	A-STATE FOR
b If "Yes," did the foundation receive any proceeds or have any net income attribu	utable to the transaction?		N/A	7b
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	\$1,000,000 in remuneration or			
excess parachute payment(s) during the year?			es 🗶 No 🚆	
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	y	
Paid Employees, and Contractors				
List all officers, directors, trustees, and foundation managers and t		A	F-7-K	
() Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	enter -0-)	and deterred compensation	allowances
GUNNAR LIE	DIRECTOR			
3248 HUNTS POINT ROAD	ì			
BELLEVUE, WA 98004	1.00	0.	0.	0.
RUTH LIE	DIRECTOR			
3248 HUNTS POINT ROAD				
BELLEVUE, WA 98004	1.00	0.	0.	0.
KIRSTEN MILLER	DIRECTOR			
2215 MERRILL CRK PKWY	1			
EVERETT, WA 98202	1.00	0.	0.	0.
	DIRECTOR			
2215 MERRILL CRK PKWY				
EVERETT, WA 98202	1.00	٥.	0.	0.
2 Compensation of five highest-paid employees (other than those inc				
			(d) Contributions to	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
NONE	devoted to position		Compensation	4.00.000
7407472				
	-			
	1			
	-			
				_

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

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ındation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none,	enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant number of organizations and other beneficiaries served, conferences convened, research paper		Expenses
1 N/A		·
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax ye	ar on lines 1 and 2.	Amount
1N/A		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3	>	0.
Total Title Miles Transagne		5 000 DE (0010)

Form **990-PF** (2018)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndation	is, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	26,453,613.
	Average of monthly cash balances	1b	26,453,613. 454,777.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	26,908,390.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	26,908,390.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	403,626.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	26,504,764.
6	Minimum investment return. Enter 5% of line 5	6	1,325,238.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations ar foreign organizations, check here ▶ □ and do not complete this part.)	ıd certai	n
1	Minimum investment return from Part X, line 6	1	1,325,238.
2a	Tax on investment income for 2018 from Part VI, line 5 2a 2a 187, 056.		
b	Income tax for 2018 (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	187,056.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,138,182.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,138,182.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,138,182.
P	art XII Qualifying Distributions (see instructions)	···	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		660 888
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	669,777.
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:		
	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	660 888
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	669,777.
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	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	669,777.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years	jualities	for the section

Form **990-PF** (2018)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI,				
line 7				1,138,182.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only			0.	
b Total for prior years				
,,		0.		
3 Excess distributions carryover, if any, to 2018	तत्ववत्त्वः १० व्यवस्तुत्वकृतामाम्बुवातव्यव्यवस्थानाम्बुवनाः भवानाः य	7 * * 100pt 1 1 1 1 1 1 1 1 1	1 1 WALLER AND WALLES OF A	ALV Aspersage to a source and
a From 2013				
b From 2014 630,904.				
c From 2015 268,847.				
dFrom 2016				
e From 2017 372,785.	•			
f Total of lines 3a through e	1,272,536.			
4 Qualifying distributions for 2018 from				
Part XII, line 4: ►\$669,777.				
a Applied to 2017, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2018 distributable amount				669,777.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d) the same amount must be shown in column (a))	468,405.			468,405.
6 Enter the net total of each column as indicated below.				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	804,131.			
b Prior years' undistributed income Subtract	001,131.	<u>.</u>		1
line 4b from line 2b		0.		
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		0.		, ,
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		•
e Undistributed income for 2017 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2018 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2019				0.
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)	0.			•
8 Excess distributions carryover from 2013				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019				·
Subtract lines 7 and 8 from line 6a	804,131.			•
10 Analysis of line 9:	·			
a Excess from 2014 162,499.				
b Excess from 2015 268,847.				
c Excess from 2016				
d Excess from 2017 372,785.				
e Excess from 2018				
				Form 000 DE (0010)

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Part XV Supplementary Information		_		
3 Grants and Contributions Paid During the		Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
BETHESDA GRACE CHURCH	NONE	501(C)(3)	TO ASSIST ORG. IN	
590 MADISON AVE, FLOOR 21		•	CARRYING OUT	
NEW YORK, NY 10022			CHARITABLE PURPOSES	25,000
		1		
BILLY GRAHAM EVANGELISTIC ASSOC	NONE	501(C)(3)	TO ASSIST ORG. IN	
1 BILLY GRAHAM PARKWAY			CARRYING OUT	
CHARLOTTE, NC 28201			CHARITABLE PURPOSES	1,000
FIRST LIBERTY INSTITUTE	NONE	501(C)(3)	TO ASSIST ORG. IN	
2001 W. PLANO PKWYSUITE 1600	NONE	501(0)(3)	CARRYING OUT	
PLANO, TX 75075		i	CHARITABLE PURPOSES	50,000
		701/01/31	To logge one the	
JUBILEE REACH CENTER	NONE	501(C)(3)	TO ASSIST ORG. IN CARRYING OUT	
14200 SE 13TH PL BELLEVUE, WA 98007			CHARITABLE PURPOSES	200,000
LUIS PALAU ASSOCIATION	NONE	501(C)(3)	TO ASSIST ORG. IN	
PO BOX 50 PORTLAND, OR 97207			CARRYING OUT CHARITABLE PURPOSES	229,000.
	ONTINUATION SHEE	T(S)	► 3a	665,000.
b Approved for future payment				
.,				
NONE				
Total	<u> </u>	<u> </u>	▶ 3b	0.

Form 990-PF (2018) THE GUNNAR ANI					090480 Page
Part XVI-A Analysis of Income-Prod				···	
Enter gross amounts unless otherwise indicated	(a) Business	I Ducinace I		(d)	(e) Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a					
b	_				
c	_				
d	_		+		
e					
f	_				
g Fees and contracts from government agencies					
2 Membership dues and assessments			+		
3 Interest on savings and temporary cash			1 1 1	155 261	
investments			14	155,261. 327,076.	
4 Dividends and interest from securities			14	341,070.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					<u> </u>
6 Net rental income or (loss) from personal					
property					
7 Other investment income		-			
8 Gain or (loss) from sales of assets other			1 0	6 202 014	
than inventory			18	6,383,914.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue	1				
a	-				
b	-				
<u> </u>	-		- - -		
d	-				···
e	-		. 	6,866,251.	
2 Subtotal. Add columns (b), (d), and (e)	<u> </u>	<u>'</u>	J •		6,866,25
3 Total. Add line 12, columns (b), (d), and (e)				13	0,000,23
See worksheet in line 13 instructions to verify calculations)				<u></u>	
Part XVI-B Relationship of Activities	to the Accom	plishment of	Exempt F	Purposes	
Line No Explain below how each activity for which in	come is reported in c	olumn (e) of Part XV	/I-A contribute	ed importantly to the accomp	olishment of
the foundation's exempt purposes (other that				, , ,	
					
	_	·			

THE GUNNAR AND RUTH LIE FOUNDATION 91-2090480 Form 990-PF (2018) Page 13 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of. 1a(1) Х (1) Cash X 1a(2) (2) Other assets **b** Other transactions X 1b(1) (1) Sales of assets to a noncharitable exempt organization X 1b(2) (2) Purchases of assets from a noncharitable exempt organization 1b(3) (3) Rental of facilities, equipment, or other assets 1b(4) (4) Reimbursement arrangements 1b(5) (5) Loans or loan guarantees 1b(6) (6) Performance of services or membership or fundraising solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization (b) Amount involved (d) Description of transfers, transactions, and sharing arrangements (a)Line no N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No Yes in section 501(c) (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (c) Description of relationship (a) Name of organization (b) Type of organization N/A Under penalties of perjury. I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge ind belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign X Yes Here DIRECTOR Signature of officer or trustee Date Title Print/Type preparer's name Preparer sasionature Date Check self-employed Paid 07/18/19 P00030870 KERMIT ANDERSON ANDERSON Firm's EIN ▶ 91-1301672 Preparer Firm's name ▶ SWEENEY CONRAD P.S.

Phone no

Use Only

Firm's address ▶ 2606 116TH AVENUE NE, SUITE 200

BELLEVUE, WA 98004-1422

Schedule B

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

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

Name of the organization

Employer identification number

7	THE GUNNAR AND RUTH LIE FOUNDATION	91-2090480
Organization type(check	cone)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	•
	501(c)(3) taxable private foundation	
• •	n is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Speci	al Rule See instructions
-	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to ny one contributor. Complete Parts I and II. See instructions for determining a contrib	
Special Rules		
sections 509(a)(any one contribu	ion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% sup 1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, utor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the a EZ, line 1 Complete Parts I and II	16a, or 16b, and that received from
year, total contri	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received butions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or uelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of	educational purposes, or for the
year, contributio is checked, ente purpose Don't c	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received in sections or exclusively for religious, charitable, etc., purposes, but no such contributions total in the reference that described on the parts unless the General Rule applies to this organization becauble, etc., contributions totaling \$5,000 or more during the year	ed more than \$1,000 If this box gious, charitable, etc ,
but it must answer "No" o	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990 EZ or on the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

Name of organization

Employer identification number

THE GUNNAR AND RUTH LIE FOUNDATION

91-2090480

			
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GUNNAR & RUTH LIE 3248 HUNTS POINT ROAD BELLEVUE, WA 98004	\$1,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	GUNNAR & RUTH LIE 3248 HUNTS POINT ROAD BELLEVUE, WA 98004	\$ 2,017,491.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash 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 Oncash Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

THE GUNNAR AND RUTH LIE FOUNDATION

91-2090480

(a)			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2 PUB	SLICLY TRADED SECURITIES		
		\$ 2,017,491.	11/08/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
<i></i>			
(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
-			
— I 			

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Page 4 Employer identification number Name of organization 91-2090480 THE GUNNAR AND RUTH LIE FOUNDATION Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year Part III from any one contributor Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (d) Description of how gift is held (c) Use of gift (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual,	Foundation	Purpose of grant or contribution	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
MADE OF THE STATE	NONE	501(C)(3)	TO ASSIST ORG. IN	
MEDICAL TEAMS INTERNATIONAL 1920 116TH AVENUE NE, SUITE 201	NONE	501(0)(3)	CARRYING OUT	
BELLEVUE, WA 98004			CHARITABLE PURPOSES	50,000
YOUNG LIFE	NONE	501(C)(3)	TO ASSIST ORG. IN	
PO BOX 520			CARRYING OUT	100.000
COLORADO SPRINGS, CO 80901			CHARITABLE PURPOSES	100,000
YOUTH FOR CHRIST	NONE	501(C)(3)	TO ASSIST ORG. IN	
7670 S. VAUGHN CT			CARRYING OUT	
ENGLEWOOD, CO 80112			CHARITABLE PURPOSES	10,000
•				
				160,000

FORM 99	0-PF	GAIN OR (1	LOSS)	FROM SALE	OF A	ASSETS		STA	TEMENT	1
DESCRIP'	(A) TION OF PROPERT	Y				MANNER CQUIRED	DA ACQU		DATE	SOLD
PUBLICL	Y TRADED SECURI	TIES			PUF	CHASED	VARI	ous	12/3	1/18
	(B) GROSS SALES PRICE	(C) COST (OTHER BA		(D) EXPENSE SALE	OF	(E) DEPRE		GAIN	(F) OR LO	ss
_	3,311,806.	3,29	3,697.		0.		0.		18,	109.
DESCRIP:	(A) FION OF PROPERT	Y				IANNER CQUIRED	DA ACQU		DATE	SOLD
PUBLICLY	Y TRADED SECURI	TIES			PUF	CHASED	VARI	ous	12/3	1/18
	(B) GROSS SALES PRICE	(C) COST (OTHER B		(D) EXPENSE SALE	OF	(E) DEPRE		GAIN	(F)	SS
_	21,158,317.	14,79	3,052.		0.		0.		6,365,	265.
	GAINS DIVIDEND							-	6,383,	540.
TOTAL TO	J FORM 990-FF,	PARI I, D.	INE OA				:			
FORM 990	O-PF INTEREST	ON SAVINGS	S AND	TEMPORARY	CASI	INVEST	MENTS	STA	TEMENT	2
SOURCE				(A) EVENUE R BOOKS	NET	(B) INVEST INCOME			(C) DJUSTE T INCO	
	INTEREST PAID I INCOME - MUNIO I INCOME - SCHW	CIPAL		-71,245. 15,579. 210,927.			245. 0. 927.		-71, 15, 210,	579.
TOTAL TO	O PART I, LINE	3		155,261.		139,	682.		155,	261.

FORM 990-PF	DIVIDEND	S AND INTER	EST FROM SECUR	ITIES ST	PATEMENT 3
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
DIVIDENDS - SCHWAB #2135	327,616	. 54	0. 327,076.	327,076.	327,076.
TO PART I, LINE 4	327,616	. 54	327,076.	327,076.	327,076.
FORM 990-PF		ACCOUNTI	NG FEES	Sī	CATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	_	5,870.	1,761.	,0.	4,109.
TO FORM 990-PF, PG	1, LN 16B	5,870.	1,761.	0.	4,109.
FORM 990-PF		TAX	ES	rs	ATEMENT 5
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES	_	2,658.	2,658.	0.	0.
TO FORM 990-PF, PG	1, LN 18 =	2,658.	2,658.	0.	0.
FORM 990-PF		OTHER E	XPENSES	ST	TATEMENT 6
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
	-	(A) EXPENSES	(B) NET INVEST- MENT INCOME	ADJUSTED	CHARITABLE
DESCRIPTION INVESTMENT FEES BANK FEES LICENSE FEES	1, LN 23	(A) EXPENSES PER BOOKS 148,585. 357. 25.	(B) NET INVEST- MENT INCOME 148,585. 107. 7.	ADJUSTED NET INCOME 0. 0. 0.	CHARITABLE PURPOSES 0. 250. 18.

THE GUNNAR AND RUTH LIE FOUNDATION

FORM 990-PF	CORPORATE STOCK		STATEMENT 7
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCKS		5,357,275.	5,442,854.
TOTAL TO FORM 990-PF, PART	II, LINE 10B	5,357,275.	5,442,854.
FORM 990-PF	CORPORATE BONDS		STATEMENT 8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CORPORATE BONDS		3,092,227.	3,103,153.
TOTAL TO FORM 990-PF, PART	II, LINE 10C	3,092,227.	3,103,153.
FORM 990-PF	PART XV - LINE 1A ST OF FOUNDATION MANAGI	ERS	STATEMENT 9

NAME OF MANAGER

GUNNAR LIE RUTH LIE