Form 4990-PF

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public. OMB No 1545-0052 2018

		pent of the Treasury Revenue Service Do not enter so Go to www irs		•		•	•		pen to Public Inspection	n
F	or cal	endar year 2018 or tax year beginning				and ending	•		, 20	=
		foundation			, 2010	, and chain		Employer identifi		—
	GEO	RGE W TRIMBLE TRUST							6026531	
_		and street (or P O box number if mail is not delivered	to street add	dress)		Room/suite	В		er (see instructions)	_
				•			-			
	ממם	K OF AMERICA, N.A. P.O. BO	x 8310	4 1				. 80	0-357-7094	
		own, state or province, country, and ZIP or foreign post		<u> </u>		<u></u>			0-337-7074	—
	•	, , , , , , , , , , , , , , , , , , , ,					С	If exemption applicat	tion is	٦
	. דבת	LAS, TX 75283-1041					-	pending, check here		_
		ck all that apply: Initial return		Initial return	of a former n	ublic charin	∄_			٦
Ū	One	Final return		Amended ret		abile charte	ין י	Foreign organizati Foreign organizati		ل
		Address change	-	Name change				85% test, check hi	ere and attach	٦
н	Che	ck type of organization: X Section 501	(c)(3) ev	<u> </u>			\dashv	computation .		
ï	$\overline{}$	ection 4947(a)(1) nonexempt charitable trust		her taxable pri		ion ()	E		status was terminated	7
1		market value of all assets at J Acco				rual	H)(1)(A), check here	
•			ounting ii Other (spe		2311	i vai	` F		n a 60-month termination (1)(B), check here	٦
		·	•) must be on ca	eh hasis)		-1	under section 507(b)	// // // // // / / / / / / / / / / / /	٢
		Analysis of Revenue and Expenses (The			5.1 50 <u>514 J</u>				(d) Disbursements	_
لاء	الجانت	total of amounts in columns (b), (c), and (d)	10111	evenue and enses per	(b) Net inve		(c) /	Adjusted net	for charitable	
		may not necessarily equal the amounts in column (a) (see instructions))		books	incom	ie		income	purposes (cash basis only)	
-	1		 							- 1
	2	Contributions, gifts, grants, etc., received (attach schedule). Check X if the foundation is not required to attach Sch. 8.								'
•		attach Sch D								亡
	3	Interest on savings and temporary cash investments.		339,682.	3.3	9,373.			STMT	1
	-	Dividends and interest from securities		337,002.		7,373.			DIM	一
	5a	Gross rents						-1	<u> </u>	
4.		Net rental income or (loss)	 	402,297.				DECENIE	D IN CORRES	<u></u>
Revenue	ьа b	Gross sales price for all 4 014 261				HECEIVE	OSC - 09	寸		
Ver	_		 		4.0	2,297.			000	-;
æ	7	Capital gain net income (from Part IV, line 2)				2,291.		NO,	N 7 2019	亡
	8	Net short-term capital gain					_		7 0 1	-
	9 10a	Income modifications Gross sales less returns								$\vec{-}$
	١.	and allowances	 					<u>, og</u>	DEN, UTAR	一
	l	Gross profit or (loss) (attach schedule)	 			`		1 4 44 13		<u>-</u> i
	11	Other income (attach schedule)			-1	6,344.			STMT	<u>-</u>
	12	Total Add lines 1 through 11		741,979.		5,326.			01111	Ť
_	13	Compensation of officers, directors, trustees, etc	1	115,175.		9,105.			46,07	70.
S	1	Other employee salaries and wages		113/1/3		NONE		NONE		<u> </u>
ıse	15	Pension plans, employee benefits		- -		NONE		NONE		
be	16a	Legal fees (attach schedule)								_
ŭ	· · · ·	Accounting fees (attach schedule) STMT 3		2,425.	-	NONE		NONE	2,42	<u>.</u> 25 .
Ve		Other professional fees (attach scheduler, 4.		12,410.	1	2,410.	-			—
ä	17	Interest								_
and Administrative Expense	18	Taxes (attach schedule) (see instructions, 5.		62,916.	1	0,916.				
Ē	19	Depreciation (attach schedule) and depletion.								- 1
h	20	Occupancy						-		_
۲	21	Travel, conferences, and meetings				NONE		NONE		_
J.	22	Printing and publications				NONE		NONE		_
Ď	23	Other expenses (attach schedule) STMT. 6.		9,462.	2	1,828.				25.
Ë	23 24 25	Total operating and administrative expenses.								_
era	1-7	Add lines 13 through 23		202,388.	11	4,259.		NONE	48,52	20.
ă	25	Contributions, gifts, grants paid		800,123.				======	800,12	
_	26	Total expenses and disbursements Add lines 24 and 25	1	,002,511.	11	4,259.		NONE		_
. –	27	Subtract line 26 from line 12	† 	, ,			_			<u> </u>
	ſ	Excess of revenue over expenses and disbursaments		-260,532.		· · · · ÷		λ		1
	b	Net investment income (if negative, enter -0-)	-		61	1,067.	_			1
		Adjusted net income (if negative, enter -0-).								_
=	ـــِـــ	,							5 000 PE (004	_

JSA For Paperwork Reduction Act Notice, see instructions.
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Form **990-PF**

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Form 990-PF (2018) 91-6026531 Page 2 Attached schedules and amounts in the Beginning of year End of year Part II Balance Sheets description column should be for end-of-year (a) Book Value (b) Book Value (c) Fair Market Value amounts only (See instructions) 481,445. 438,992 438,992 2 Savings and temporary cash investments Accounts receivable ▶ Less allowance for doubtful accounts Pledges receivable Less allowance for doubtful accounts ▶ Grants receivable........... 6 · Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach schedule) Less allowance for doubtful accounts 10a Investments - U S and state government obligations (attach schedule). . 15,148,331. 15,357,652. 15,982,600 b Investments - corporate stock (attach schedule) Investments - corporate bonds (attach schedule) 11 Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule) 12 13 Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) 15 Other assets (describe Total assets (to be completed by all filers - see the 16 instructions Also, see page 1, item I) '. 15,839,097. 15,587,323 16,421,592 17 18 Liabilities 19 Deferred revenue......... 20 Loans from officers, directors, trustees, and other disqualified persons. . 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe NONE 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here **Fund Balances** and complete lines 24 through 26, and lines 30 and 31 24 25 26 Foundations that do not follow SFAS 117, check here ► X and complete lines 27 through 31. 5 15,839,097. 15,587,323 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg , and equipment fund. 29 Retained earnings, accumulated income, endowment, or other funds . . 15,839,097 15,587,323 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see 15,839,097 15,587,323

P	art III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with		
	end-of-year figure reported on prior year's return).	1	15,839,097.
2	Enter amount from Part I, line 27a		-260,532.
3	Other increases not included in line 2 (itemize) SEE STATEMENT 7	3	167,135.
	Add lines 1, 2, and 3	4	15,745,700.
5	Decreases not included in line 2 (itemize) ► SEE STATEMENT 8	5_	158,377.
	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6_	15,587,323.

Form 990-PF (2018)

Part IV Capital Gains	and Losses for Tax on Inve	estment Income			
	scribe the kind(s) of property sold (for exrick warehouse; or common stock, 200	• •	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a PUBLICLY TRADED	SECURITIES		D · Donation		
b OTHER GAINS AND					
c					
d					
е					
(e) Gross sales price	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	
	(or allowable)	plus expense of sale		((e) plus (f) mini	ıs (g))
a 3,597,147.		3,390,551.			206,596.
<u>b</u> 416,984.		221,283.			195,701.
			<u> </u>		
Complete only for secrets of	land and a selection (b) and award by	the foundation on 12/21/60	 		
Complete only for assets sr	nowing gain in column (h) and owned b			Gains (Col (h) ga	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	(k), but not less t Losses (from co	l (h))
a					206,596.
b					195,701.
<u>c</u>					
<u>d</u>			ļ	-	
If gain, also enter in F	or (not capital loce)	tructions. If (loss), enter -0- in $\}$	2		402,297.
	Inder Section 4940(e) for Redu		3		
	the section 4942 tax on the distrib		ase perio	d?	Yes X No
	mount in each column for each year		ng any en	tries	_ .
(a)		(c)	lg arry cri	(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col (b) divided by	col (c))
2017	827,576.	17,763,375.			0.046589
2016	865,513.	16,576,452.			0.052213
2015	878,731.	17,507,507.	<u> </u>		0.050192
2014	833,795.	17,985,238. 17,169,127.			0.046360
2013	776,152.	17,169,127.	 		0.045206
	(d)		2		0.240560
	io for the 5-year base period - divid s foundation has been in existence i		3		0.048112
4 Enter the net value of n	oncharitable-use assets for 2018 fr	om Part X, line 5	4	18,	278,119.
5 Multiply line 4 by line 3	· · · · · · · · · · · · · · · · · · ·		5		879,397.
6 Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		6,111.
7 Add lines 5 and 6			7		885,508.
8 Enter qualifying distribu	itions from Part XII, line 4 greater than line 7, check the box	in Part VI line 1h and complete	8 Part	using a 10/ to	848,643.
Part VI instructions	greater than time /, theth the box	m rate vi, line 10, and complete	mat part	asing a 1/0 ta/	Clare Oce III

•				
	990-PF (2018) 91-6026531			Page 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	e instr	uctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
L	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)		12	221
D	Domestic foundations that meet the section 4940(e) requirements in Part V, check		12,	221
_	here and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			NON:
3	Add lines 1 and 2		12,	221
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			NON
5	Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0		12,	221
6	Credits/Payments			
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 16,089.			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c NONE			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		16,	089
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
0	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		_3,	868
	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ 3,868. Refunded ▶ 11			
	VII-A Statements Regarding Activities	——		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	
	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		Ì	
	instructions for the definition		+	4
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any material	s		
	published or distributed by the foundation in connection, with the activities		-	-
	Did the foundation file Form 1120-POL for this year?	<u>1c</u>	+-	+
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			İ
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers \$		-	-
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	+	╁╌
_	If "Yes," attach a detailed description of the activities			'
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		+	+
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		+	+-
_ b	If "Yes," has it filed a tax return on Form 990-T for this year?	1 -	 	+-
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	 	+	+
c	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or By language in t			
	By state legislation that effectively amends the governing instrument so that no mandatory directions the and the protection of the control of the con	1 -	- X	-
-	conflict with the state law remain in the governing instrument?		$+\frac{x}{x}$	
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			`

WA

8a Enter the states to which the foundation reports or with which it is registered. See instructions.

Form **990-PF** (2018)

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Par	VII-A Statements Regarding Activities (continued)			
		,	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		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		X
13		13	X	
	Website address NONE			
14	The books are in care of ► BANK_OF AMERICA Telephone no ► (206) 358			_
	Located at ▶ <u>800 5TH AVE, 32ND FL, SEATTLE, WA</u> ZIP+4 ▶ <u>98104-</u>	<u>3176</u>		
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			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority	$\overline{}$	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	L	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of	,		
Dar	the foreign country ► VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		<u> </u>
T GIT		1	Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	163	140
Ia	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	Í		
	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?	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)?			
	(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	ľ		
	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	<u> </u>		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b_		<u>X</u>
	Organizations relying on a current notice regarding disaster assistance, check here	ľ		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	<u> </u>		
	were not corrected before the first day of the tax year beginning in 2018?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	ľ		
a	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2018?	ļ		1
L	If "Yes," list the years	ŀ		
a	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)	2b		<u> </u>
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
·	The provisions of section 4542(a)(2) are some approval to any or the years note in 24, not the years not	ļ	,]
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			1
	at any time during the year?	i.		
ь	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or	j		
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2018)	3b		L
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	<u></u>		لــِيــا
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		X
	Fo	rm 99	0-PF	(2018)

–Par	t=VII-B Statements Regarding Activities	for Which Form 4	1720 May Be Rec	uired (continued)			
5a	During the year, did the foundation pay or incur any am	ount to				Yes	Vo
	(1) Carry on propaganda, or otherwise attempt to influ	ence legislation (section	n 4945(e))?	. Yes X No	,		1
	(2) Influence the outcome of any specific public e	lection (see section	4955), or to carry o	n,			- 1
	directly or indirectly, any voter registration drive?			. Yes X No	,	1	ı
	(3) Provide a grant to an individual for travel, study, or	other similar purposes	,	Yes X No	,		
	(4) Provide a grant to an organization other than	a charitable, etc., org	ganization described	ın			ļ
	section 4945(d)(4)(A)? See instructions			. X Yes No	,	1	ı
	(5) Provide for any purpose other than religious,					1	1
	purposes, or for the prevention of cruelty to childre	n or animals?		. Yes X No	,		1
b	If any answer is "Yes" to 5a(1)-(5), did any of th	e transactions fail to	qualify under the e	xceptions described in	، ا <u>ـــ</u> ا		
	Regulations section 53 4945 or in a current notice rega	irding disaster assistar	ce? See instructions.		. 5b		Χ
	Organizations relying on a current notice regarding dis-	ister assistance, check	here				
C	If the answer is "Yes" to question 5a(4), does th	foundation claim e	xemption from the	ax			ŀ
	because it maintained expenditure responsibility for the	grant?STMT.	12	. X Yes No	,		4
	If "Yes," attach the statement required by Regulations s	ection 53 4945-5(d)					
6a	Did the foundation, during the year, receive any for	ınds, directly or indii	ectly, to pay premiu	ms			
	on a personal benefit contract?			Yes X No	·		
b	Did the foundation, during the year, pay premiums, dire	ctly or indirectly, on a	personal benefit contr	act ⁷	. 6b		X
	If "Yes" to 6b, file Form 8870						Ì
7a	At any time during the tax year, was the foundation a p	arty to a prohibited tax	shelter transaction?.	Yes X No	·	-	
ь	If "Yes," did the foundation receive any proceeds or have	e any net income attri	butable to the transact	ion?	. 7b		
8	Is the foundation subject to the section 4960 tax on pa	•				İ	- 1
	remuneration or excess parachute payment(s) during the					i_	
Par	Information About Officers, Direct and Contractors	ors, Trustees, Fol	indation ivianage	s, Hignly Pald Emi	pioyees,		
1	List all officers, directors, trustees, and foundati						
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	e account owances	.,
DANIE							
DWIAY	OF AMERICA, N A.	TRUSTEE		1			
	OF AMERICA, N A. th AVE, FL 32, SEATTLE, WA 98104-3176	TRUSTEE	115, 175	-0-		()-
		- ```	115,175	-0-		-()-
		- ```	115,175	-0-		()-
		- ```	115,175	-0-)-
		- ```	115,175	-0-		1)-
		- ```	115,175	-0-		()-
800 5	th AVE, FL 32, SEATTLE, WA 98104-3176	1					
800 5	th AVE, FL 32, SEATTLE, WA 98104-3176 Compensation of five highest-paid employees	1			ons). If no		
800 5	th AVE, FL 32, SEATTLE, WA 98104-3176	1 - - (other than thos		e 1 - see instruction	<u> </u>	one, er	iter
2	th AVE, FL 32, SEATTLE, WA 98104-3176 Compensation of five highest-paid employees	(other than those hours per week		e 1 - see instruction	ons). If no	one, er	iter
2	Compensation of five highest-paid employees	(other than those (b) Title, and average	se included on lin	e 1 - see instructions to employee benefit	(e) Expens	one, er	iter
2 (a)	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(other than those hours per week	se included on lin	e 1 - see instruction (d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	one, er e account owances	iter
2	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(other than those hours per week	se included on lin	e 1 - see instruction (d) Contributions to employee benefit plans and deferred	(e) Expens other all	one, er	iter
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2 (a)	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(other than those hours per week	se included on lin	e 1 - see instruction (d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	one, er e account owances	iter
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2 (a)	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(other than those hours per week	se included on lin	e 1 - see instruction (d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	one, er e account owances	iter
2 (a)	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(other than those hours per week	se included on lin	e 1 - see instruction (d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	one, er e account owances	iter
2 (a)	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(other than those devoted to position	c) Compensation	e 1 - see instruction (d) Contributions to employee benefit plans and deferred compensation NONE	(e) Expens	one, er e account owances	iter

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emplo and Contractors (continued)	yees,
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONI	."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	NONE
Total number of others receiving over \$50,000 for professional services · · · · · · · · · · · · · · ▶	NONE
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE	
2	
3	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1NONE	
2	
All other program-related investments. See instructions	
3NONE	
Total. Add lines 1 through 3	

Par	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign found	ations,
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	17,984,072.
b	Average of monthly cash balances	1b	572,394.
c	Fair market value of all other assets (see instructions)	1c	NONE
ď		1d	18,556,466.
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	18,556,466.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
-	instructions)	4	278,347.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	18,278,119.
6	Minimum investment return. Enter 5% of line 5	6	913,906.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part.)	idations	
1	Minimum investment return from Part X, line 6	1	913,906.
2 a	Tax on investment income for 2018 from Part VI, line 5 2a 12,221.		
b	Income tax for 2018 (This does not include the tax from Part VI.) 2b][
С	Add lines 2a and 2b	2c	12,221.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	901,685.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	901,685.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	901,685.
Par	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а			848,643.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	NONE
3	Amounts, set aside for specific charitable projects that satisfy the.		
а	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	848,643.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b See instructions	5_	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	848,643.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	lculating	whether the foundation
	qualifies for the section 4940(e) reduction of tax in those years		

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Pai	t XIII / Undistributed Income (see instr	uctions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2018 from Part XI,	Corpus	Years prior to 2017	2017	2018
	line 7				901,685.
2	Undistributed income, if any, as of the end of 2018			1)
а	Enter amount for 2017 only			800,122.	
b	Total for prior years 20,20,20		NONE		<u> </u>
3	Excess distributions carryover, if any, to 2018				ł
а	From 2013 NONE				
b	From 2014 NONE			ا ن	
C	From 2015 NONE			İ	
d	From 2016 NONE				
е	From 2017 NONE				
f	Total of lines 3a through e	NONE			
4	Qualifying distributions for 2018 from Part XII,				Ì
	line 4 ▶ \$848,643.				}
a	Applied to 2017, but not more than line 2a	· · · · · · · · · · · · · · · · · · ·		800,122.	<u> </u>
þ	Applied to undistributed income of prior years		27027		
	(Election required - see instructions)		NONE		
c	Treated as distributions out of corpus (Election	MONT			
	required - see instructions)	NONE			40 501
	Applied to 2018 distributable amount	NONE			48,521.
	Remaining amount distributed out of corpus Excess distributions carryover applied to 2018	NONE	·	 	
•	(If an amount appears in column (d), the same	NONE			NONE
	amount must be shown in column (a))	NONE NONE			NONE
6	Enter the net total of each column as				
	indicated below:	NONE	•		
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	INOINE		· · · · · · · · · · · · · · · · · · ·	<u></u>
þ	Prior years' undistributed income Subtract		NONE		
	Enter the amount of prior years' undistributed		NONE		<u></u>
٠	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 instructions				
f	Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2019				853,164.
7	Amounts treated as distributions out of corpus			•	
′	to satisfy requirements imposed by section			ľ	ĺ
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)	NONE	*		
8	Excess distributions carryover from 2013 not				
	applied on line 5 or line 7 (see instructions)	NONE			
9	Excess distributions carryover to 2019.			ļ	
	Subtract lines 7 and 8 from line 6a	NONE			
10	Analysis of line 9				Į
а	Excess from 2014 NONE			1	i
b	Excess from 2015 NONE				
С	Excess from 2016 NONE				
d	Excess from 2017 NONE			ľ	
_е	Excess from 2018 NONE				

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-Part-XIV- Private Operating Foundations (see instructions and Part VII-A, question 9)

NOT APPLICABLE

1 a	If the foundation has	•		•	ating	
	foundation, and the ruling		·		▶[
	Check box to indicate v		is a private operating		n section 4942	2(j)(3) or 4942(j)(5)
2 8	Enter the lesser of the ad- justed net income from Part	Tax year	// \ 0047	Prior 3 years	/ 10 0045	(e) Total
	I or the minimum investment	(a) 2018	(b) 2017	(c) 2016	(d) 2015	4
	return from Part X for each					
h	year listed					-
	Qualifying distributions from Part			 		-
٠	XII, line 4 for each year listed .	1				
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made					
	directly for active conduct of exempt activities. Subtract line					
3	2d from line 2c Complete 3a, b, or c for the		· · · · · · · · · · · · · · · · · · ·		-	
а	alternative test relied upon "Assets" alternative test - enter					
	(1) Value of all assets				1	
	(2) Value of assets qualifying under section					
b	4942(j)(3)(B)(i) 'Endowment" alternative test-			 		
-	enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed					
С	*Support alternative test - enter					
	(1) Total support other than					
	gross investment income (interest, dividends, rents,					
	payments on securities loans (section 512(a)(5)),					
	or royalties)					
	(2) Support from general public and 5 or more					
	exempt organizations as provided in section 4942					
	(j)(3)(B)(iii)			 	<u> </u>	
	(3) Largest amount of sup- port from an exempt					
	organization				 	
Pai		tary Information (Complete this par	t only if the found	ation had \$5,000	or more in assets at
		uring the year - see				
1	Information Regarding				-	
а						eived by the foundation
	before the close of any	tax year (but only if the	iey nave contributed	more man \$5,000) (S	see section 507(u)(2)	1
-	NONE	Al - f - d - A d - A	100/	-f the steel -f	anation (an an agua	Un large mention of the
D	ownership of a partner					Illy large portion of the
	NONE	omp of other onity) of			·	
	* INOINE					
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarsh	nip, etc., Programs:		·
	Check here ► X If t	he foundation only	makes contributions	to preselected char	ritable organizations	and does not accept
	unsolicited requests for complete items 2a, b, c	or funds If the found	ation makes gifts, gi	ants, etc., to individu	als or organizations	under other conditions,
а	The name, address, an			e person to whom app	lications should be a	ddressed:
ь	The form in which app	lications should be sul	omitted and informat	on and materials they	should include:	
_	4	23				
_	Any submission deadli	nes		<u></u>		
·	Any submission deads	1103.				
ď		mitations on awards	, such as by geog	raphical areas, charit	able fields, kinds o	f institutions, or other
	factors:					

Name and address (home or business) a Paid during the year ORGE W TRIMBLE HOSPITAL FUND BOX 509 LOUISIANA MO 63353-0509 N/A UISIANA ELKS LOUGE #791 PO ELKS LOUISIANA MO 63353-1620 N/A LORADO CENTER FOR BLIND 33 W SHEPPERD AVE LITTLETON CO 80120-2038 LORADO SPRINGS ELKS LODGE #309 BOX 7165 COLORADO SPGS CO 80933-7165 N/A ADVILLE ELKS LODGE #236 ATTN: DONALD PERRIE BOX 856 LEADVILLE CO 80461-0856 N/A N/A N/A N/A N/A N/A N/A N/	3 Grants and Contributions Paid Du		roved for	Future Payment	
a Paid during the year ORGE W TRIMBLE HOSPITAL FUND BOX 509 LOUISIANA NO 63353-0509 N/A UISIANA BLKS LOUGE #791 P O BLKS LOUISIANA NO 63353-1520 N/A LORADO CENTER FOR BLIND 33 W SHEPPERD AVE LITTLETON CO 80120-2038 N/A LORADO SPRINGS BLKS LODGE #309 BOX 7165 COLORADO SPGS CO 80933-7165 N/A ADVILLE BLKS LODGE #326 ATTN: DONALD FERRIE BOX 856 LEADVILLE CO 80461-0856 N/A NC SUPPORT INDIGENT & POOR OF BLAKE COUNTY 311,1 ADVILLE BLKS LODGE #326 ATTN: DONALD FERRIE BOX 856 LEADVILLE CO 80461-0856 N/A NC SUPPORT INDIGENT & POOR OF LAKE COUNTY 88,9 GHTHOUSE FOR THE BLIND INC. 01 S PLUM ST SEATTLE WA 98144-4711 N/A PC INDIGENT & POOR 22,2 SUPPORT INDIGENT & POOR OF LAKE COUNTY 88,9 SUPPORT SERVICES FOR THE 1NDIGENT & POOR 22,2 ILDREN'S HEALTH CARE SYSTEM BOX 50020 SEATTLE WA 98145-5020 N/A PC N/A PC INDIGENT & POOR 44,4		If recipient is an individual, show any relationship to		Purpose of grant or	Ampunt
ORGE W TRIMBLE HOSPITAL FUND BOX 509 LOUISIANA MO 63353-0509 N/A SO III FI SUPPORT INDIGENT & POOR OF PIKE CNTY 177,8 SUPPORT INDIGENT & POOR OF PIKE CNTY 133,3 LORADO CENTER FOR BLIND 33 W SHEPPERD AVE LITTLETON CO 80120-2038 N/A LORADO SPRINGS ELKS LODGE #309 BOX 7165 COLORADO SPGS CO 80933-7165 N/A ADVILLE ELKS LODGE #236 ATTN: DONALD FERRIE BOX 856 LEADVILLE CO 80461-0856 N/A N/A N/A N/A N/A N/A N/A SUPPORT INDIGENT & POOR OF LARE COUNTY 311,1 SUPPORT INDIGENT & POOR OF LARE COUNTY 88,9 GHTHOUSE FOR THE BLIND INC. 01 S PLUM ST SEATTLE WA 98144-4711 N/A PC INDIGENT & POOR SUPPORT INDIGENT & POOR OF LARE COUNTY 88,9 SUPPORT SERVICES FOR THE INDIGENT & POOR 22,2 INDIGENT & POOR SUPPORT SERVICES FOR THE INDIGENT & POOR 44,4	Name and address (home or business)	any foundation manager or substantial contributor		contribution	
BOX 509 LOUISIANA MO 63353-0509 N/A SO III FI POOR OF PIRE CNTY 177,8 UISIANA BLKS LODGE #791 P O BLKS LOUISIANA MO 63353-1620 N/A NC PIRE COUNTY 133,3 LORADO CENTER FOR BLIND 33 W SHEPPERD AVE LITTLETON CO 80120-2038 N/A PC INDIGENT & FOOR 22,2 LORADO SPRINGS ELKS LODGE #309 BOX 7165 COLORADO SPGS CO 80933-7165 N/A NC EL FASO COUNTY 311,1 ADVILLE ELKS LODGE #236 ATTN: DONALD FERRIB BOX 856 LEADVILLE CO 80461-0856 N/A NC LARE COUNTY 88,9 GHTHOUSE FOR THE BLIND INC. 01 S PLUM ST SEATTLE WA 98144-4711 N/A PC INDIGENT & FOOR 22,2 LIDREN'S HEALTH CARE SYSTEM BOX 50020 SEATTLE WA 98145-5020 N/A PC INDIGENT & FOOR 44,4 Total	a Paid during the year				
UISIANA ELKS LODGE #791 P O ELKS LOUISIANA MO 63353-1620 N/A LORADO CENTER FOR BLIND 33 W SHEPPERD AVE LITTLETON CO 80120-2038 N/A LORADO SPRINGS ELKS LODGE #309 BOX 7165 COLORADO SPGS CO 80933-7165 N/A ADVILLE ELKS LODGE #236 ATTN: DONALD FERRIE BOX 856' LEADVILLE CO 80461-0856 N/A GHTHOUSE FOR THE BLIND INC. 01 S PLUM ST SEATTLE WA 98144-4711 N/A DYA TOTAL TOTAL SUPPORT INDIGENT & POOR OF LARE COUNTY SUPPORT INDIGENT & POOR OF LARE COUNTY 88,9 SUPPORT SERVICES FOR THE INDIGENT & POOR OF LARE COUNTY 88,9 SUPPORT SERVICES FOR THE INDIGENT & POOR OF INDIGENT & POOR OF LARE COUNTY 84,9 SUPPORT SERVICES FOR THE INDIGENT & POOR OF INDIGENT	ORGE W TRIMBLE HOSPITAL FUND			MEDICAL CARE FOR INDIGENT &	
P O ELKS LOUISIANA MO 63353-1620 N/A LORADO CENTER FOR BLIND 33 W SHEPPERD AVE LITTLETON CO 80120-2038 N/A LORADO SPRINGS ELKS LODGE #309 BOX 7165 COLORADO SPGS CO 80933-7165 N/A ADVILLE ELKS LODGE #236 ATTN: DONALD FERRIE BOX 856 LEADVILLE CO 80461-0856 N/A NC SUPPORT INDIGENT & POOR OF EL PASO COUNTY SUPPORT INDIGENT & POOR OF LAKE COUNTY 88,9 GHTHOUSE FOR THE BLIND INC. 01 S PLUM ST SEATTLE WA 98144-4711 N/A PC SUPPORT SERVICES FOR THE INDIGENT & POOR 22,2 SUPPORT SERVICES FOR THE INDIGENT & POOR 44,4 TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL **OUTTY** 311,1 **SUPPORT SERVICES FOR THE INDIGENT & POOR 44,4 **SUPPORT SERVICES FOR THE INDIGENT & POOR 44,4 **SUPPORT SERVICES FOR THE INDIGENT & POOR 44,4 **SUPPORT SERVICES FOR THE INDIGENT & POOR 44,4 **SUPPORT SERVICES FOR THE INDIGENT & POOR 44,4 **SUPPORT SERVICES FOR THE INDIGENT & POOR 44,4 **SUPPORT SERVICES FOR THE INDIGENT & POOR 44,4	BOX 509 LOUISIANA MO 63353-0509	N/A	SO III FI	POOR OF PIKE CNTY	177,80
LORADO CENTER FOR BLIND 33 W SHEPPERD AVE LITTLETON CO 80120-2038 N/A PC INDIGENT & POOR 22,2 LORADO SPRINGS BLKS LODGE #309 BOX 7165 COLORADO SPGS CO 80933-7165 N/A NC EL PASO COUNTY 311,1 ADVILLE ELKS LODGE #236 ATTN: DONALD FERRIE BOX 856' LEADVILLE CO 80461-0856 N/A NC LARE COUNTY 88,9 GHTHOUSE FOR THE BLIND INC. SUPPORT SERVICES FOR THE INDIGENT & POOR OP LARE COUNTY 88,9 GHTHOUSE FOR THE BLIND INC. SUPPORT SERVICES FOR THE INDIGENT & POOR 22,2 LILDREN'S HEALTH CARE SYSTEM BOX 50020 SRATTLE WA 98145-5020 N/A PC INDIGENT & POOR 44,4	UISIANA ELKS LODGE #791			SUPPORT INDIGENT & POOR OF	
33 W SHEPPERD AVE LITTLETON CO 80120-2038 N/A PC INDIGENT & POOR 22,2 LORADO SPRINGS ELKS LODGE #309 BOX 7165 COLORADO SPGS CO 80933-7165 N/A NC EL PASO COUNTY 311,1 ADVILLE ELKS LODGE #236 ATTN: DONALD FERRIE BOX 856 LEADVILLE CO 80461-0856 N/A NC LAKE COUNTY 88,9 GHTHOUSE POR THE BLIND INC. 01 S PLUM ST SEATTLE WA 98144-4711 N/A PC INDIGENT & POOR 0P LOREN'S HEALTH CARE SYSTEM BOX 50020 SEATTLE WA 98145-5020 N/A PC INDIGENT & POOR 144,4 TOTAL	P O ELKS LOUISIANA MO 63353-1620	N/A	NC	PIKE COUNTY	133,35
LORADO SPRINGS ELKS LODGE #309 BOX 7165 COLORADO SFGS CO 80933-7165 N/A ADVILLE ELKS LODGE #236 ATTN: DONALD FERRIE BOX 856 LEADVILLE CO 80461-0856 N/A NC SUPPORT INDIGENT & POOR OF LAKE COUNTY 88,9 GHTHOUSE FOR THE BLIND INC. 01 S PLUM ST SEATTLE WA 98144-4711 N/A PC SUPPORT SERVICES FOR THE INDIGENT & POOR 22,2 ILDREN'S HEALTH CARE SYSTEM BOX 50020 SEATTLE WA 98145-5020 N/A PC INDIGENT & POOR 44,4 Total	DLORADO CENTER FOR BLIND			SUPPORT SERVICES FOR THE	
BOX 7165 COLORADO SPGS CO 80933-7165 N/A NC EL PASO COUNTY 311,1 ADVILLE ELKS LODGE #236 ATTN: DONALD FERRIE BOX 856' LEADVILLE CO 80461-0856 N/A NC LAKE COUNTY 88,9 GHTHOUSE FOR THE BLIND INC. 01 S PLUM ST SRATTLE WA 98144-4711 N/A PC INDIGENT & POOR 22,2 ILDREN'S HEALTH CARE SYSTEM BOX 50020 SEATTLE WA 98145-5020 N/A PC INDIGENT & POOR 44,4	233 W SHEPPERD AVE LITTLETON CO 80120-2038	N/A	PC	INDIGENT & POOR	22,22
ADVILLE ELKS LODGE #236 ATTN: DONALD PERRIE BOX 856' LEADVILLE CO 80461-0856 N/A GHTHOUSE FOR THE BLIND INC. O1 S PLUM ST SEATTLE WA 98144-4711 N/A PC SUPPORT INDIGENT & POOR OF LAKE COUNTY 88,9 SUPPORT SERVICES FOR THE INDIGENT & POOR 22,2 SUPPORT SERVICES FOR THE INDIGENT & POOR 44,4 Total Total	DLORADO SPRINGS ELKS LODGE #309			SUPPORT INDIGENT & POOR OF	
BOX 856 LEADVILLE CO 80461-0856 . N/A NC LAKE COUNTY 88,9 GHTHOUSE FOR THE BLIND INC. 01 S PLUM ST SEATTLE WA 98144-4711 N/A PC INDIGENT & POOR 22,2 ILDREN'S HEALTH CARE SYSTEM BOX 50020 SEATTLE WA 98145-5020 N/A PC INDIGENT & POOR 44,4	D BOX 7165 COLORADO SPGS CO 80933-7165	N/A	NC	EL PASO COUNTY	311,15
GHTHOUSE FOR THE BLIND INC. 01 S PLUM ST SEATTLE WA 98144-4711 N/A PC SUPPORT SERVICES FOR THE INDIGENT & POOR 22,2 SUPPORT SERVICES FOR THE INDIGENT & POOR 44,4 Total Total					
01 S PLUM ST SEATTLE WA 98144-4711 N/A PC INDIGENT & POOR 22,2 ILDREM'S HEALTH CARE SYSTEM BOX 50020 SEATTLE WA 98145-5020 N/A PC INDIGENT & POOR 44,4 . Total	BOX 856 LEADVILLE CO 80461-0856 .	N/A	NC	LAKE COUNTY	88,90
ILDREN'S HEALTH CARE SYSTEM BOX 50020 SEATTLE WA 98145-5020 N/A PC INDIGENT & POOR 44,4	GHTHOUSE FOR THE BLIND INC.				
BOX 50020 SEATTLE WA 98145-5020 N/A PC INDIGENT & POOR 44,4 Total	Ol S PLUM ST SEATTLE WA 98144-4711	N/A	PC	INDIGENT & POOR	22,22
Total	IILDREN'S HEALTH CARE SYSTEM				44.45
	BOX 50020 SEATTLE WA 98145-5020	N/A	PC	INDIGENT & POOR	44,45
	•				
			}	}	
			<u> </u>		
		<u> </u>	· · · · · ·	3a	800,12
	Approved for facure payment				
	•				
Total					

Part XVI-A Analysis of Income-Produ	ucing Acti	vities			<u> </u>
nter gross amounts unless otherwise indicated		ated business income	Excluded by	y section 512, 513, or 514	(e) Related or exempt
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a					
b					
c			ļ		
d	<u> </u>		 		
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments	<u> </u>		<u> </u>		
Interest on savings and temporary cash investments			14	339,682.	
Dividends and interest from securities			T.	339,002.	
Net rental income or (loss) from real estate				<u> </u>	
a Debt-financed property					-
b Not debt-financed propertyNet rental income or (loss) from personal property					
Other investment income					
Gain or (loss) from sales of assets other than inventory			18	402,297.	 ,
Net income or (loss) from special events · · ·					
Gross profit or (loss) from sales of inventory					
Other revenue a					
b					
c					
d					
e				<u>-</u> -	
Subtotal Add columns (b), (d), and (e)				741,979.	741,979
accomplishment of the foundation	on's exemp	t purposes (other than	by providing	g funds for such purpose	s) (See instructions.)
		NOT APPLICABI	LE		
1492 1 000					Form 990-PF (20

Form 990-PF (2018)				91-6026531				ge 1								
Par	LX.VII	Informa Exempt				ansfers t	to and Tra	nsaction	s and F	Relatio	nships	Wit	th Nonc	harit	able	
1	Did the	organizatio	n direct	ly or i	ndirectly	engage in	any of the f	ollowing v	vith any	other of	ganızatı	on de	escribed		Yes	N
	in section	on 501(c)	(other	than	section	501(c)(3)	organizatıo	ns) or in	section	527,	relating	to	political			

		•		gage in any of the followi 01(c)(3) organizations) o		•				Yes	No
		ations?	than section 5	organizations, o	i ili sectioi	1 527, 10	ating to	pontical			ļ
			foundation to a i	noncharitable exempt orga	nization of:						
	(1) Cas	h							1a(1)		X
	(2) Oth	er assets							1a(2)		X
		ransactions.								- -	```
				organization					1b(1)		X
	(2) Pur	chases of assets from	n a noncharitable	exempt organization					1b(2)		X
				sets							X
	(4) Rei	mbursement arrange	ements						1b(4)		X
	(5) Loa	ns or loan guarantee	·s		<i>.</i>				1b(5)		X
			•	or fundraising solicitations							<u>X</u>
				other assets, or paid emplo							X_
				complete the following							
				s given by the reporting f							
	value, i	n any transaction or	sharing arranger	nent, show in column (d)	the value of	f the goods	, other a	ssets, or se	ervice	rece	eived
(a) Li	пе по	(b) Amount involved	(c) Name of none	charitable exempt organization	(d) Descri	ption of transf	ers, transact	ions, and shar	ng arra	ngeme	nts
					ļ						
	\perp										
				<u>. </u>							
		- <u>-</u>									
2a				ated with, or related to, o						_	_
	describ	ed in section 501(c)	(other than section	on 501(c)(3)) or in section	527 ⁷				Yo	es 🔼	∐ No
b	If "Yes,	" complete the follow	ving schedule.								
		(a) Name of organization	n	(b) Type of organization			c) Descript	on of relations	hip		
				this return, including accompanying ayer) is based on all information of whice			o the best of	of my knowledg	e and t	elief, it	is true,
Sigr			<i>-</i> •					May the IRS	discus	s this	return
lere		Jaren / Ta	su	09/12/2019	MANAG:	ING DIR		with the pre			below?
iere	Sign	ature of officer or trustee		Date	Title			See instruction	5	Yes	No
	BA	NK OF AMERICA				·					
Paid		Print/Type preparer's nai	me	Preparer's signature		Date	Che	eck ıf F	TIN		
		Ĺ <u></u>	<u></u>	<u> </u>		<u> </u>	self	-employed			
•	arer	Firm's name					Firm's EIN	<u> </u>			
Jse	Only	Firm's address									
							Phone no				
								For	m 99 6	0-PF	(2018)

FORM 990PF, PART I - DIVIDENDS AND INTERÈST FROM SECURITIES

NET INVESTMENT INCOME	10,866. 87,028.	114,621.	43,446.	4,/52. 8,931.	23,586.	41,903.	4,240.	339,373.	
REVENUE AND EXPENSES PER BOOKS	10,866.	2,300. 114,621.	43,446.	4,752. 8,931.	-1,991. 23,586.	41,903.	4,240.	339,682.	
DESCRIPTION	USGI REPORTED AS NONQUALIFIED DIVIDENDS FOREIGN DIVIDENDS	NONDIVIDEND DISTRIBUTIONS	OTHER INTEREST	FOREIGN INTEREST U.S. GOVERNMENT INTEREST (FEDERAL TAXABLE	NON-TAXABLE FOREIGN INCOME NONOMALIFIED FOREIGN DIVIDENDS	NONQUALIFIED DOMESTIC DIVIDENDS	SECTION 199A DIVIDENDS	TOTAL	

	PF, PART I - OTHER INCOME	
		11 11 11 11
•	FORM	

NET INVESTMENT INCOME	1 1 1 1	732.	. 9 / 0 , / T -
REVENUE AND EXPENSES PER BOOKS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 1 1 1 1 1 1 1 1
DESCRIPTION		PARTNERSHIP INCOME	FROM PARTNERSHIP/S-CORP

TOTALS

-16,344.

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TRUST
TRIMBLE
⋈
GEORGE

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	2,425.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	======================================
REVENUE AND EXPENSES PER BOOKS	2,425. 2,425. ====================================
11 11 13 14 11 11 11 11 11 11 11	- BOA TOTALS
DESCRIPTION	TAX PREPARATION FEE -

NET INVESTMENT INCOME	12,410.
REVENUE AND EXPENSES PER BOOKS	12,410.
DESCRIPTION	INVESTMENT ADVISORY FEES TOTALS

FORM 990PF, PART I - TAXES

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NET INVESTMENT INCOME	6,528.	3,188.	10,916.
REVENUE AND EXPENSES PER BOOKS	6,528.	12,000. 3,188. 1,200.	62,916.
DESCRIPTION	FOREIGN TAXES EXCISE TAX - PRIOR YEAR	EXCISE TAX ESTIMATES FOREIGN TAXES ON QUALIFIED FOR FOREIGN TAXES ON NONQUALIFIED	TOTALS

FORM 990PF, PART I

- OTHER EXPENSES

OTHER ALLOCABLE EXPENSE-PRINCI OTHER ALLOCABLE EXPENSE-INCOME	STATE FILING FEE INVESTMENT EXPENSES-DIVIDEND I	PARTNERSHIP EXPENSES	FROM PARTNERSHIP/S-CORP	
OTHER OTHER	STATE	PAR	FRO	

6,991.

6,991.

TOTALS

21,828.

1,223.

1,223. 1,223. 25.

INVESTMENT INCOME

PER BOOKS EXPENSES AND

DESCRIPTION

REVENUE

9

FORM	990PF,	PART	III ·	- OTHER	INCREASES	IN NET	WORTH	OR	FUND 1	BALANCES
=====	======	=====	====	======	========	======	======	===:	=====	======

DESCRIPTION		TNUOMA
NET YEAR-END SALES ADJUSTMENT		126,211.
PARTNERSHIP ADJUSTMENT		28,845.
CTF TIMING ADJUSTMENT		11,891.
NET TIMING ADJUSTMENT		188.
	\mathtt{TOTAL}	167,135.
		=======================================

FORM 990PF,	PART III	- OTHER	DECREASES	IN NET	WORTH C	OR FUND BALANCES
==========	=======	======	========	=====:		=======================================

DESCRIPTION		AMOUNT
NET INCOME ADJUSTMENT BASIS ADJUSTMENT - SALES ROC BASIS ADJUSTMENT NET ROUNDING		38,328. 380. 119,643. 26.
	TOTAL	158,377.

GAINS AND LOSSES FROM PASS-THRU ENTITIES

NET SHORT-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS AND OTHER FIDUCIARIES

COMMON TRUST FUNDS

-54,861.00

TOTAL NET SHORT-TERM GAIN OR LOSS (ROUNDED)

-54,861.00

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NET LONG-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS AND OTHER FIDUCIARIES

COMMON TRUST FUNDS

154,945.00

PARTNERSHIPS, TRUSTS, S CORPORATIONS

91,900.00

TOTAL NET LONG-TERM GAIN OR LOSS (ROUNDED)

246,845.00

FORM 990PF, PART VII-B, LN 5(c) EXPENDITURE RESPONSIBILITY STATEMENT

NAME: .

LOUISIANA LODGE # 791 - BENEVOLENT & PROTECTIVE ORDER OF THE ELKS (BPOE)
GRANT PURPOSE:
SEE ATTACHMENT

NAME:

LEADVILLE ELKS LODGE # 236 - BENEVOLENT & PROTECTIVE ORDER OF THE ELKS (BPOE)
GRANT PURPOSE:
SEE ATTACHMENT

NAME:

GEORGE W TRIMBLE HOSPITAL FUND GRANT PURPOSE: SEE ATTACHMENT

NAME:

COLORADO SPRINGS LODGE #309 - BENEVOLENT & PROTECTIVE ORDER OF THE ELKS (BPOE)
GRANT PURPOSE:
SEE ATTACHMENT

Statement Attached to Form 990-PF, Return of Private Foundation Substantiation of Exercise of Expenditure Responsibility Form 990-PF, Part VII-B, Line 5c

Name of Foundation: George W. Trimble Foundation

EIN: 91-6026531 Tax Year: 12/31/2018

The following information is provided in accordance with IRC § 4945(h)(3) and Reg. § 53.4945-5(d) to demonstrate that the foundation exercised expenditure responsibility with regard to its grants:

Name and Address of Grantee	Date of Grant	Amount of Grant	Purpose of Grant(s)	Amounts Expended by Grantee (based on Grantee Report)	To Grantor's Knowledge, has Grantee Diverted any Portion of the Funds from the Purpose of the Grant?	Dates of any Reports Received from Grantee	Results (and date) of any Verification of the Grantee's Reports (if Required)
Colorado Springs Lodge No. 309 - B.P.O. Elks P.O. Box 7165 Colorado Springs, CO 80933	12/03/18	\$ 311,159	Charitable	\$ 288,505	No	04/10/19	Not Required
Leadville Lodge No. 236 - B.P.O. Elks P.O. Box 856 Leadville, CO 80461	12/04/18	\$ 88,902	Charitable	\$ 69,323	No	10/19/19	Not Required
Louisiana Lodge No. 791 - B.P.O. Elks 120 N 5th St Louisiana, MO 63353	12/04/18	\$ 133,354	Charitable	\$ - 97,725	No	06/14/19	Not Required
George W Trimble Hospital Fund P.O. Box 509 Louisiana, MO 63353	12/04/18	\$ 177,805	Charitable	\$ 177,805	No	04/09/19	Not Required