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2019

OMB No. 1545-0052

Return of Private Foundation

Department of the Treasury

Form 990-PF

Internal Revenue Service

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.
 Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public

						•
		ndar year 2019, or tax year beginning 01-01-20 Indation	, ar	nd ending 12-31	-2019 lentification numbe	
		TH FAMILY FOUNDATION			entification numbe	r
	KEVIN		I	20-0477535		
		l street (or P.O. box number if mail is not delivered to street address) 85TH STREET	Room/suite	B Telephone nu	ımber (see instruction	ns)
City	or town	state or province, country, and 7ID or foreign postal code		(206) 715-761	1	
		, state or province, country, and ZIP or foreign postal code A 981153913		C If exemption	application is pendin	g, check here
G C	neck al	l that apply: \Box Initial return \Box Initial return of a	former public charity	D 1. Foreign or	ganizations, check he	re
		\square Final return \square Amended return			rganizations meeting ck here and attach co	
		Address change Name change		<u> </u>	undation status was t	· -
		pe of organization: $lacksquare$ Section 501(c)(3) exempt private $lacksquare$			on $507(b)(1)(A)$, chec	
			e private foundation	 		
of	year (f	xet value of all assets at end from Part II, col. (c), ▶\$ 31,705,580 J Accounting method: □ Other (specify) (Part I, column (d) must	✓ Cash ☐ Accru		ation is in a 60-montl on 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and			(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	905,361			
	2	Check ▶ ☐ if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	4,806	4,806	i	
	4	Dividends and interest from securities	670,759	670,759)	
	5a	Gross rents				
	b	Net rental income or (loss)	247.454			
KIE	6a	Net gain or (loss) from sale of assets not on line 10	247,156			
Revenue	b	Gross sales price for all assets on line 6a 944,386				
2	7	Capital gain net income (from Part IV, line 2)		247,156	i	
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less: Cost of goods sold				
	11	Other income (attach schedule)				
	12	Total. Add lines 1 through 11	1,828,082	922,721		
	13	Compensation of officers, directors, trustees, etc.	0	·		
	14	Other employee salaries and wages				
Ņ	15	Pension plans, employee benefits				
ารe	16a	Legal fees (attach schedule)	9 305	С	0	305
<u></u>	b	Accounting fees (attach schedule)	9,766	4,883	0	4,883
Administrative Expenses	C	Other professional fees (attach schedule)	210,096	210,096	0	C
tive	17	Interest				
stra	18	Taxes (attach schedule) (see instructions)	4,262	4,262	. 0	C
Ē	19	Depreciation (attach schedule) and depletion				
Ē	20	Occupancy				
۲ ک	21	Travel, conferences, and meetings				
an	22	Printing and publications				
ing	23	Other expenses (attach schedule)	145	С	0	145
Operating and	24	Total operating and administrative expenses.				
<u>6</u>		Add lines 13 through 23	224,574		. 0	5,333
_	25	Contributions, gifts, grants paid	1,756,190			1,756,190
	26	Total expenses and disbursements. Add lines 24 and 25	1,980,764	219,241	0	1,761,523
	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	-152,682			
	b	Net investment income (if negative, enter -0-)		703,480)	
	С	Adjusted net income (if negative, enter -0-)				

For	n 990-	-PF (2019)					Page 2
Pa	rt II	Balance Sheets Attached schedules and amounts in the description colur should be for end-of-year amounts only. (See instruction		Beginning of year (a) Book Value	()	End o b) Book Value	f year (c) Fair Market Value
	1	Cash—non-interest-bearing		(,		,	(-)
	2	Savings and temporary cash investments	.	2,197,292		1,041,806	1,041,806
	3	Accounts receivable ▶					
		Less: allowance for doubtful accounts ▶					
	4	Pledges receivable					
		Less: allowance for doubtful accounts ▶					
	5	Grants receivable	.				
	6	Receivables due from officers, directors, trustees, and other	-				
		disqualified persons (attach schedule) (see instructions)	.				
	7	Other notes and loans receivable (attach schedule)	-				
		Less: allowance for doubtful accounts ▶	_				
	8	Inventories for sale or use	.				
Assets	9	Prepaid expenses and deferred charges	- ⊢				
Ass	10a	Investments—U.S. and state government obligations (attach schedul	- ⊢				
-	b	Investments—corporate stock (attach schedule)	´ F	19,080,955	∞ ,	20,074,781	28,206,105
	c	Investments—corporate bonds (attach schedule)	⊢				
	11	Investments—land, buildings, and equipment: basis ▶	⊢ ⊢				
		Less: accumulated depreciation (attach schedule) ▶					
	12	Investments—mortgage loans	一上				
	13	Investments—other (attach schedule)	- ⊢	1,534,600	∞ ,]	2,043,366	2,381,297
	14	Land, buildings, and equipment: basis ▶	-	' '			<u> </u>
		Less: accumulated depreciation (attach schedule) ▶					
	15	Other assets (describe >)	_	9 .J 0	∞ ,	76,372	% 76,372
	16	Total assets (to be completed by all filers—see the	F	_		· ·	<u></u>
		instructions. Also, see page 1, item I)		22,812,847		23,236,325	31,705,580
	17	Accounts payable and accrued expenses					
	18	Grants payable	.				
es	19	Deferred revenue	.				
<u>=</u>	20	Loans from officers, directors, trustees, and other disqualified persor	ns				
Liabilities	21	Mortgages and other notes payable (attach schedule)	.				
	22	Other liabilities (describe					
	23	Total liabilities(add lines 17 through 22)	.	0		0	
_		Foundations that follow FASB ASC 958, check here					
ce		and complete lines 24, 25, 29 and 30.					
直	24	Net assets without donor restrictions	.				
8	25	Net assets with donor restrictions	.				
Fund Balances		Favordations that do not fall our FACE ACC OFC Street 1					
Ŧ		Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30.					
ŏ	26	Capital stock, trust principal, or current funds					
ets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	·				
Assets	28	Retained earnings, accumulated income, endowment, or other funds	-	22,812,847		23,236,325	
	29	Total net assets or fund balances (see instructions)	- ⊢	22,812,847		23,236,325	
Net	30	Total liabilities and net assets/fund balances (see instructions)	- ⊢	22,812,847		23,236,325	
Рa	30 rt 111			22,012,017		23,230,323	
1		al net assets or fund balances at beginning of year—Part II, column (a)), line	29 (must agree with	end-		
		year figure reported on prior year's return)				1	22,812,847
2		er amount from Part I, line 27a				2	-152,682
3		er increases not included in line 2 (itemize)				3	576,160
4 5		I lines 1, 2, and 3			•	5	23,236,325
6		creases not included in line 2 (itemize) > al net assets or fund balances at end of year (line 4 minus line 5)—Part				6	23,236,325
<u> </u>	, 0.0	a grant and bulances at end of year (line + fillings line 5)—rate	,	\5), mie 25	<u> </u>		

Page **3**

	e the kind(s) of property sold (e.g., irehouse; or common stock, 200 shs		How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a SHORT TERM			Р	2019-01-01	2019-12-31
b CAPITAL GAIN DIVIDEND)S		P		
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain ò	h) r (loss)) minus (q)
a 69	9,975		697,230		2,745
b					244,411
c					·
d					
e					
Complete only for assets	s showing gain in column (h) and ow	ned by the foundation o	on 12/31/69	,	I)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col. (i) . (j), if any	Gains (Col. (l col. (k), but not	h) gain minus less than -0-) or om col.(h))
a			(3)		2,745
b					
С					
d					
e					
	or (net capital loss) gain or (loss) as defined in sections 1 rt I, line 8, column (c) (see instructions 1		Part I, line 7	3	247,156
	Jnder Section 4940(e) for Re				
f "Yes," the foundation does no	e section 4942 tax on the distributab ot qualify under section 4940(e). Do	not complete this part.			es 🗹 No
	nount in each column for each year;	see instructions before	making any entries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable	le-use assets	(d) Distribution rati (col. (b) divided by c	
2018	3,682,760		29,985,719		0.122817
2017	2,296,130		30,410,775		0.075504
2016	1,266,983		29,157,284		0.043453
2015	764,275		28,275,860		0.027029
2014	812,744		20,894,596		0.038897
number of years the four 4 Enter the net value of no 5 Multiply line 4 by line 3	d) of for the 5-year base period—divide to the standard of th	the total on line 2 by 5. than 5 years n Part X, line 5			0.3077 0.06154 30,017,014 1,847,247 7,035
7 Add lines 5 and 6					1,854,282
8 Enter qualifying distribut If line 8 is equal to or gre	ons from Part XII, line 4 , eater than line 7, check the box in Pa		8	g a 1% tax rate. Se	1,761,523
instructions.					rm 000-DE (2010)

Page **6**

5a	During the year did the foundation p	oay o	r incur any amount to:							Yes	No
	(1) Carry on propaganda, or otherw	vise a	ttempt to influence legisl	ation (section 4945(e))?		☐ Yes	✓	Nο			
	(2) Influence the outcome of any sp		•								
	on, directly or indirectly, any voter registration drive?										
	(3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described							No			
							_				
	in section 4945(d)(4)(A)? See in					☐ Yes	✓	No			
	(5) Provide for any purpose other the		- ·	* **			_				
h	educational purposes, or for the If any answer is "Yes" to $5a(1)-(5)$,	•	•		· · centions des	Yes	✓	No			
b	Regulations section 53.4945 or in a		•	· · ·		cribed iii			5b		
	Organizations relying on a current n								36		
С	If the answer is "Yes" to question 5a										
_	tax because it maintained expenditu					П.,					
	If "Yes," attach the statement requir					☐ Yes	Ш	No			
6a	Did the foundation, during the year,		-		ıms on						
	a personal benefit contract?					п.,	. 🗷				
b	Did the foundation, during the year,					Yes	. Y	No	6b		No
	If "Yes" to 6b, file Form 8870.		,	,,							
7a	At any time during the tax year, was	s the	foundation a party to a p	orohibited tax shelter tran	saction?	☐ Yes		N.			
b	If "Yes", did the foundation receive a	any p	roceeds or have any net	income attributable to th	e transaction	1?		NO	7b		
8	Is the foundation subject to the sect	tion 4	960 tax on payment(s) o	of more than \$1,000,000	in remunerat	tion or					
	excess parachute payment during th	ne ye	ar?			☐ Yes	✓	No			
	Information About C	Offic	ers, Directors, Trust	tees, Foundation Ma	nagers, H				yees,		
Pal	and Contractors			•				-	•		
1	List all officers, directors, trustee	es, fo	undation managers ar	nd their compensation.	See instru	tions					
		(b) Title, and average	(c) Compensation (If		tributions t		(e)	Expen	se acc	ount
	(a) Name and address		hours per week devoted to position	not paid, enter -0-)	employee be	enefit plans compensati				lowand	
See	Additional Data Table		devoted to position	-0-7	deletted	.ompensac	1011	1			
,	tuditional Bata Table	1									
		1									
		1									
		1									
2	Compensation of five highest-pai	id en	ployees (other than t	hose included on line 1	.—see instri	ıctions). I	[f no	ne, e	nter "	NONE.	"
			(b) Title, and average		(d) Con	tributions t	:0				
(a)	Name and address of each employee	paid	hours per week	(c) Compensation		ee benefit				se acco	
	more than \$50,000		devoted to position			nd deferred sensation	1	ot	ner all	owance	25
					'						
Tota	I number of other employees paid over	er \$5	0,000	.		. ▶					
								For	m 99 0	D-PF (2019)

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

Form 990-PF (2019)		Page 7
Part VIII Information About Officers, Directors, Trus and Contractors (continued)	stees, Foundation Managers, Highly Paid E	Employees,
3 Five highest-paid independent contractors for professiona	l services (see instructions). If none, enter "NO	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
PINNACLE WEALTH MGMT LLC (KEVIN SMITH)	INVESTMENT ADVISOR	210,096
4963 NE 8TH STREET SEATTLE, WA 981153913		
Total number of others receiving over \$50,000 for professional service	es	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Incorganizations and other beneficiaries served, conferences convened, research papers		Expenses
2		
3		
4		
Part IX-B Summary of Program-Related Investments	s (see instructions)	
Describe the two largest program-related investments made by the foundation	•	Amount
1		
2		
All other program-related investments. See instructions.		
3		 -
Total. Add lines 1 through 3		•
		Form 990-PF (2019)

2b

2c

3

4

5

6

7

1a

1b

2

3a 3b

4

5

14,070

1,486,781

1,486,781

1,486,781

1,761,523

1,761,523

1,761,523

Form 990-PF (2019)

Income tax for 2019. (This does not include the tax from Part VI.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

3

4 5

6

1

2

3

4

5

b

Part XII

Distributable amount before adjustments. Subtract line 2c from line 1.

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

income. Enter 1% of Part I, line 27b. See instructions.

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

c From 2016. . **d** From 2017. .

e From 2018.

4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ 1,761,523 a Applied to 2018, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions).

d Applied to 2019 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a).)

5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 **b** Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. **d** Subtract line 6c from line 6b. Taxable amount —see instructions e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions) . . .

6 Enter the net total of each column as

9 Excess distributions carryover to 2020.

10 Analysis of line 9: a Excess from 2015. **b** Excess from 2016. .

c Excess from 2017. .

d Excess from 2018. .

e Excess from 2019. .

Subtract lines 7 and 8 from line 6a

indicated below:

1,486,781

Form **990-PF** (2019)

P	art XIII	Undistributed Income (see instruc	ctions)			
			(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable	amount for 2019 from Part XI, line 7				1,486,781
2	Undistributed	income, if any, as of the end of 2019:				
а	Enter amoun	t for 2018 only			0	
b	Total for prio	r years: 2017 , 2016 , 2015				
_						

3 Excess distributions carryover, if any, to 2019: a From 2014. **b** From 2015. . . . 828.531

2,198,874 f Total of lines 3a through e.

3,027,405

274.742

3,302,147

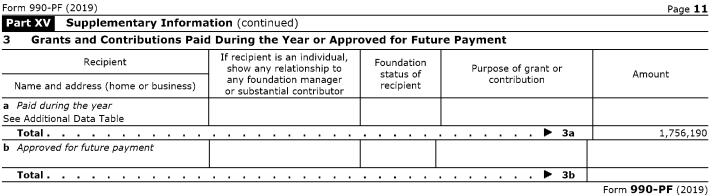
3,302,147

828.531

274.742

2,198,874

- - **b** The form in which applications should be submitted and information and materials they should include:
 - c Any submission deadlines:
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:



ter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
. Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
a b					
C					
d					
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments Interest on savings and temporary cash			+		
investments			14	4,806	
Dividends and interest from securities			14	670,759	
Net rental income or (loss) from real estate:					
Debt-financed property.					
b Not debt-financed property					
Other investment income					
Gain or (loss) from sales of assets other than					
inventory			18	247,156	
Net income or (loss) from special events:					
Gross profit or (loss) from sales of inventory					
Other revenue: a					
c					
d					
e					
Subtotal. Add columns (b), (d), and (e)				922,721	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)			13	922,721	
Subtotal. Add columns (b), (d), and (e).	ılations.)			· · · · · · · · · · · · · · · · · · ·	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculated at the columns (b). Relationship of Activities to the columns (b). Explain below how each activity for which the accomplishment of the foundation's or	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,721
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second activity for which	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,721
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculate to the second	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,721
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculate to the second	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,721
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculate to the second	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,723
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculate to the second	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,721
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcurt XVI-B Relationship of Activities to the second sec	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,723
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calcurt XVI-B Relationship of Activities to the service of the	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,723
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calcurt XVI-B Relationship of Activities to the service of the	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,723
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calcurt XVI-B Relationship of Activities to the service of the	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,72
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcurt XVI-B Relationship of Activities to the service of th	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,72
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcurt XVI-B Relationship of Activities to the second sec	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,723
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcurt XVI-B Relationship of Activities to the second below how each activity for which the accomplishment of the foundation's expenses.	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,723
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculate to the second	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,723
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculate to the second	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,723
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcurt XVI-B Relationship of Activities to the second sec	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,72
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcurt XVI-B Relationship of Activities to the second below how each activity for which the accomplishment of the foundation's expenses.	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,72
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcurt XVI-B Relationship of Activities to the second sec	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,72
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcurt XVI-B Relationship of Activities to the service of th	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,72
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcurt XVI-B Relationship of Activities to the second sec	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,723
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcurt XVI-B Relationship of Activities to the service of th	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,723
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculate to the second	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	922,723

Form 990-PF (2019)		Pa	ge 13
Part XVII Information Regarding Transfers To and Transactions and Relationships With Nonc Exempt Organizations	haritable		
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section (c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?	501	Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of:			
(1) Cash	1a(1)		No
(2) Other assets	. 1a(2)		No
b Other transactions:			
(1) Sales of assets to a noncharitable exempt organization	. 1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization	. 1b(2)		No
(3) Rental of facilities, equipment, or other assets	. 1b(3)		No
(4) Reimbursement arrangements	1b(4)		No
(5) Loans or loan guarantees			No
(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair ma of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair marke in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services receive	t value		
(a) Line No. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and	nd sharing arra	ngemer	nts

2a Is the fo	oundation directly or indire	ectly affiliated with	, or related to, one or moi	e tax-exem	ot organizations
describe	ed in section 501(c) (other	than section 501(c)(3)) or in section 527? .		□ Yes ☑ No
	' complete the following s		,,,,		
D 11 103,	(a) Name of organization		(b) Type of organiza	ation	(c) Description of relationship
	(a) Name of organization	/11	(b) Type or organiza	icioi I	(c) rescription of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best

of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. May the IRS discuss this 2020-07-15 return Here with the preparer shown

Paid

Firm's address ▶

Sign

Signature of officer or trustee Title Date Print/Type preparer's name Preparer's Signature Date PTIN Check if selfemployed ▶ 🔲 SUSAN B QUEARY **Preparer** Firm's name ▶ BADER MARTIN PS Firm's EIN ▶ **Use Only**

1000 2ND AVE 34TH FLOOR

SEATTLE, WA 981041022

Phone no. (206) 621-1900 Form **990-PF** (2019)

(see instr.) 🗹 Yes 🗆 No

P00099025

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, Contributions to hours per week not paid, enter (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred

			compensation	
kevin smith	director	0	0	0
4963 NE 85TH STREET SEATTLE, WA 981153913	8.0			
Karen Smith	Director	0	0	0
4963 NE 85TH STREET SEATTLE, WA 981153913	1.0			

SEATTLE, WA 981153913				
Jessica Smith	Director	0	0	0
4963 NE 85TH STREET SEATTLE, WA 981153913] 1.0			
Mari Smith	Director	0	0	0

SEATTLE, WA 901133913				
Jessica Smith	Director	0	0	0
4963 NE 85TH STREET SEATTLE, WA 981153913	1.0			
Mari Smith	Director	0	0	0

1.0

Director 1.0

4963 NE 85TH STREET SEATTLE, WA 981153913

4963 NE 85TH STREET SEATTLE, WA 981153913

Lauren Smith

4963 NE 85TH STREET SEATTLE, WA 981153913				
Jessica Smith	Director	0	0	0
4963 NE 85TH STREET SEATTLE, WA 981153913	1.0			

SEATTLE, WA 981153913				
Jessica Smith	Director	0	0	0
4963 NE 85TH STREET SEATTLE, WA 981153913	1.0			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

a Paid during the year				
ConSERVATION INTERNATIONAL 2011 Crystal Drive Suite 500 Arlington, VA 22202	None	PC	Spend Down Fund	250,000
PLYMOUTH HOUSING GROUP	NONE	PC	SPONSORSHIP IN SUPPORT OF	5.000

Arlington, VA 22202				
PLYMOUTH HOUSING GROUP 2113 3RD AVENUE SEATTLE, WA 98121	NONE	PC	SPONSORSHIP IN SUPPORT OF POP SOME TOPS 2113 3RD AVENUE OF POP SOME TOPS	5,000
UNIVERSITY OF WASHINGTON FOUNDATION BOX 359505	NONE	PC	ORIN SMITH ENDOWED DEANSHIP IN THE FOSTER SCHOOL OF BUSINESS	598,250

SEATTLE, WA 98121		AVENUE OF POP SOME TOPS	1
UNIVERSITY OF WASHINGTON FOUNDATION BOX 359505 SEATTLE, WA 981959505	NONE	ORIN SMITH ENDOWED DEANSHIP IN THE FOSTER SCHOOL OF BUSINESS	598,250
Total		 ▶ 3a	1,756,190

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

THE CHEHALIS FOUNDATION PO BOX 1608 CHEHALIS, WA 98532	NONE	PC	EDUCATION EXCELLENCE	50,000
UNIVERSITY OF WASHINGTON FOUNDATION	NONE	PC	ORIN AND JANET SMITH FUND FOR THE INSTITUTE FOR STEM	689,940

F B	ONIVERSITY OF WASHINGTON COUNDATION BOX 359505 SEATTLE, WA 981959505	NONE	PC	FOR THE INSTITUTE FOR STEM CELL AND REGENERATIVE MEDICINE - UW MEDICINE	689,940
2	olymouth housing group	none	PC	GENERAL FUND	18,000

SEATTLE, WA 981959505			MEDICINE - UW MEDICINE	
plymouth housing group 2113 3rd avenue seattle, WA 98121	none	PC	GENERAL FUND	18,000
				i e

Total .

1,756,190

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
BOYS & GIRLS CLUB OF CHEHALIS	NONE	PC	GENERAL FUND	5,000

2071 JACKSON HWY CHEHALIS, WA 98532	NONE	<u>.</u>	GENERAL FUND	5,000
HOT BREAD KITCHEN NYC 630 FLUSHING AVE	NONE	PC	GENERAL FUND	15,000

CHEHALIS, WA 98532				
HOT BREAD KITCHEN NYC 630 FLUSHING AVE BROOKLYN, NY 11206	NONE	PC	GENERAL FUND	15,000
CAMPAIGN FOR FREE COLLEGE 3820 MERIDIAN AVE N	NONE	PC	GENERAL FUND	25,000

630 FLUSHING AVE BROOKLYN, NY 11206	NONE		SENERAL FORD	13,000
CAMPAIGN FOR FREE COLLEGE 3820 MERIDIAN AVE N SEATTLE, WA 98103	NONE	PC	GENERAL FUND	25,000
Total			▶ 3a	1,756,190

Recipient If recipient is an individual, Purpose of grant or Foundation Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

	or substantial contributor			
a Paid during the year				
TETON RAPTOR CENTERPO BOX 1805 WILSON, WY 83014	NONE	PC	GENERAL FUND	50,000

WILSON, WI 65614				
COMMUNITY FOUNDATION OF JACKSON HOLE	NONE	PC	GENERAL FUND	50,000
245 E SIMPSON AVE PO BOX 574				
IACKCON MV 920010E74		I		i

Total			▶ 3a	1,756,190
HOLE 245 E SIMPSON AVE PO BOX 574 JACKSON, WY 830010574				
COMMUNITY FOUNDATION OF JACKSON	INONE	I PC	GENERAL FUND	50,000

efile GRAPHIC print - DO NOT P	ROCESS As File	ed Data -	D	DLN: 93491188001380		
TY 2019 Accounting Fees Schedule						
5						
Name: ORIN SMITH FAMILY FOUNDATION						
	EIN: 20-0477535					
Category	Amount	Net Investme Income	ent Adjusted Net Income	Disbursements for Charitable Purposes		

4,883

9,766

ACCOUNTING FEES

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491188001380 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. TY 2019 Depreciation Schedule Name: ORIN SMITH FAMILY FOUNDATION

EIN: 20-0477535

efile GRAPHIC print - DO	NOT PROCESS A	As Filed Data -	

DLN: 93491188001380

TY 2019 Investments Corporate Stock Schedule

Name: ORIN SMITH FAMILY FOUNDATION

EIN: 20-0477535

Investments Corporation Stock Schedule				
Name of Stock	End of Year Book Value	End of Year Fair Market Value		
DFA EMERGING MKTS SMALL CAP PO	274,723	317,104		
DFA EMERGING MKTS VALUE PORTFO	161,652	164,552		
DFA EMERGING MKTS PORTFOLIO	238,212	296,482		
DFA INTL SMALL CAP VALUE PORTF	317,647	328,498		
DFA INTL SMALL COMPANY PORTFOL	386,417	430,221		
DFA INTL VALUE PORTFOLIO	446,125	415,961		
DFA LARGE CAP INTL PORTFOLIO	402,504	474,921		
DFA REAL ESTATE SECURITIES POR	1,021,883	1,567,397		
DFA US CORE EQUITY 2 (PURCHASE	976,262	1,873,654		
DFA U.S. LARGE CAP VALUE PORTF	978,533	1,501,711		
DFA U.S. LARGE CO PORTFOLIO	675,630	1,505,074		
DFA U.S. SMALL CAP PORTFOLIO	442,649	683,823		
DFA U.S. SNAKK CAO VALUE PORTF	372,209	458,054		
DFA TAX MANAGED US 5-10(CONTR)	1,091,987	1,270,066		
DFA TAX MANAGED US 5-10(PURCH)	356,711	297,917		
DFA TAX MANAGED US MKT (CONTR)	1,822,100	2,056,799		
DFA TAX MANAGED US MKT (PURCH)	419,263	685,600		
DFA US CORE EQUITY 2 (CONTR)	1,655,387	3,190,275		
STARBUCKS CORPORATION (CONTR)	1,750,673	4,414,815		
DFA FIVE YEAR GLOBAL FIXED INC	1,069,504	1,051,039		
DFA ONE YEAR FIXED INCOME PORT	2,059,175	2,063,285		
DFA SHORT DURATION REAL RETURN	1,052,052	1,046,794		
DFA SHORT TERM EXTENDED QUALIT	1,045,932	1,054,765		
DFA SELECTIVELY HEDGED GLOBAL	1,057,551	1,057,298		

TY 2019 Investments - Other Schedule	

Name: ORIN SMITH FAMILY FOUNDATION

	EIN:	20-0477535)	
Investments Other Schedule 2				

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COLUMBIA PACIFIC INCOME FUND I

Category / Item		Listed at Cost or	Rook Value
Investments Other Schedule 2			
ETIN	20-04//535)	

1,043,366

DLN: 93491188001380

1,041,036

Listed at Cost or FMV	Book Value	End of Year Fair Market Value

Category/Item	FMV	BOOK Value	Market Value
CELLO FIXED INCOME FUND LTD	AT COST	1,000,000	1,340,261

AT COST

efile GRAPHIC print - DO NOT PROCES	SS As Filed Data	-	DLI	N: 93491188001380	
TY 2019 Legal Fees Schedule					
_					
Name: ORIN SMITH FAMILY FOUNDATION EIN: 20-0477535					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
LEGAL FEES	305			305	

As Filed Data -

Name: ORIN SMITH FAMILY FOUNDATION

EIN: 20-0477535

DIVIDEND RECEIVABLE

Market Value

76,372

DLN: 93491188001380

Other Assets Schedule

Book Value

End of Year - Book

76,372

Value

End of Year - Fair

Beginning of Year -

Description

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491188001380	
TY 2019 Other Expenses Schedule					
Name: ORIN SMITH FAMILY FOUNDATION					
EIN: 20-0477535					
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
WIRE FEES AND CHARGES	145	0	0	145	

DLN: 93491188001380

Name: ORIN SMITH FAMILY FOUNDATION

EIN: 20-0477535

As Filed Data -

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efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491188001380			
TY 2019 Other Increases Schedule					
Name:	ORIN SMITH FAMILY FOUR	NDATION			
EIN:	20-0477535				
D	escription	Amount			
GRANT OF MARKETABLE SECURITIES		0			

efile GRAPHIC print - DO NOT PROCES	SS As Filed Data	-	DLI	N: 93491188001380	
TY 2019 Other Professional Fees Schedule					
Name: ORIN SMITH FAMILY FOUNDATION					
EIN: 20-0477535					
Category	Amount	Net Investment	Adjusted Net	Disbursements	
Category	Aillouit	Mer Tilvestillellr	Aujusteu Net	Dispuisements	

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

210,096

INVESTMENT FEES

210,096

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 934911880013	80		
TY 2019 Substantial Contributors						
Schedule						
Name: ORIN SMITH FAMILY FOUNDATION						
EIN: 20-0477535						
Name Address						
ESTATE OF ORIN C SMITH			963 NE 85TH STREET EATTLE, WA 98115			

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491188001380 TY 2019 Taxes Schedule					
Name: ORIN SMITH FAMILY FOUNDATION EIN: 20-0477535					
Category	Ar	mount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

4,262

4,262

FOREIGN TAX

efile GRAPHIC print - DO	NOT PROCESS As Filed Data	-		DLN: 93491188001380	
Schedule B	Sche	dule of Contributors		OMB No. 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	00-PF) ► Attach to Form 990, 990-EZ, or 990-PF. tment of the Treasury ► Go to <u>www.irs.gov/Form990</u> for the latest information.			2019	
Name of the organization ORIN SMITH FAMILY FOUN	DATION		Employer i	dentification number	
Organization type (chec			20-0477535	5	
Organization type (oneo	K Offe).				
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization			
	4947(a)(1) nonexempt ch	naritable trust not treated as a p	orivate foundation		
	☐ 527 political organization				
Form 990-PF	✓ 501(c)(3) exempt private	foundation			
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
	cion filing Form 990, 990-EZ, or 990 property) from any one contributor.				
Special Rules					
under sections 50 received from any	on described in section 501(c)(3) fi 9(a)(1) and 170(b)(1)(A)(vi), that c one contributor, during the year, t 11, or (ii) Form 990-EZ, line 1. Co	hecked Schedule A (Form 990 otal contributions of the greater	or 990-EZ), Part II, line 13	, 16a, or 16b, and that	
during the year, to	on described in section 501(c)(7), (otal contributions of more than \$1,0 ne prevention of cruelty to children	000 <i>exclusively</i> for religious, cha	aritable, scientific, literary,		
during the year, c If this box is chec purpose. Don't co	on described in section 501(c)(7), (contributions exclusively for religious ked, enter here the total contribution mplete any of the parts unless the le, etc., contributions totaling \$5,00	s, charitable, etc., purposes, buns that were received during the General Rule applies to this or	it no such contributions tot ne year for an e <i>xclusively</i> r rganization because it rece	aled more than \$1,000. eligious, charitable, etc., eived <i>nonexclusively</i>	
990-EZ, or 990-PF), but i	that isn't covered by the General t must answer "No" on Part IV, line rt I, line 2, to certify that it doesn't i	e 2, of its Form 990; or check th	e box on line H of its Form	·	
For Paperwork Reduction Ac	t Notice, see the Instructions	Cat. No. 30613X	Schedule B (Form 99	0, 990-EZ, or 990-PF) (2019)	

for Form 990, 990-EZ, or 990-PF.

Employer identification number 20-0477535

— SMITH FAMI	EL TOURDATION	20-0477333	
Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if add	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ESTATE OF ORIN C SMITH 4963 NE 85TH STREET SEATTLE, WA 98115	\$ 905,361	Person Payroll Noncash (Complete Part II for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	contributions.) (d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ Schodulo P. (5	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2019)		Page 4
	rganization TH FAMILY FOUNDATION		Employer identification number 20-0477535
Part III	than \$1,000 for the year from any one contributo	or. Complete columns (a) of exclusively religious, uctions.) ▶ \$	cribed in section 501(c)(7), (8), or (10) that total more through (e) and the following line entry. For charitable, etc., contributions of \$1,000 or less for
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and ZIP 4	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and ZIP 4	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	c) Use of gift	(d) Description of how gift is held
ŀ			
	Transferee's name, address, and ZIP 4	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and ZIP 4	(e) Transfer of gift	Relationship of transferor to transferee
		_	Schedule B (Form 990, 990-EZ, or 990-PF) (2019)