

For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

Name of foundation TUCKER FAMILY FOUNDATION		A Employer identification number 26-1492603	
Number and street (or P O box number if mail is not delivered to street address) PO 538		Room/suite	B Telephone number (see instructions) (360) 319-8153
City or town, state or province, country, and ZIP or foreign postal code MOUNTLAKE TERRACE, WA 98043		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) <b>\$ 9,205,238</b>	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) <u>(Part I, column (d) must be on cash basis )</u>		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	360,000			
	2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities . . .	165,106	165,106		
	5a Gross rents . . . . .	18,000	18,000		
	b Net rental income or (loss) <u>18,000</u>				
	6a Net gain or (loss) from sale of assets not on line 10	472,422			
	b Gross sales price for all assets on line 6a <u>1,475,334</u>				
	7 Capital gain net income (from Part IV, line 2) . . .		472,422		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .				
	12 <b>Total.</b> Add lines 1 through 11 . . . . .	1,015,528	655,528		
	13 Compensation of officers, directors, trustees, etc	36,000	36,000		0
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .				
	b Accounting fees (attach schedule) . . . . .	7,601	7,601		0
	c Other professional fees (attach schedule) . . . . .				
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . .	1,532	0		0
	19 Depreciation (attach schedule) and depletion . . .	4,788	4,788		
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	19,076	18,905		171
	24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	68,997	67,294		171
	25 Contributions, gifts, grants paid . . . . .	385,000			385,000
	26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	453,997	67,294		385,171
	27 Subtract line 26 from line 12				
	a <b>Excess of revenue over expenses and disbursements</b>	561,531			
	b <b>Net investment income</b> (if negative, enter -0-)		588,234		
c <b>Adjusted net income</b> (if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	<b>1</b>	Cash—non-interest-bearing . . . . .			4,341	4,341
	<b>2</b>	Savings and temporary cash investments . . . . .	1,210,956	1,512,406	1,512,406	
	<b>3</b>	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____				
	<b>4</b>	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____				
	<b>5</b>	Grants receivable . . . . .				
	<b>6</b>	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .				
	<b>7</b>	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____				
	<b>8</b>	Inventories for sale or use . . . . .				
	<b>9</b>	Prepaid expenses and deferred charges . . . . .				
	<b>10a</b>	Investments—U S and state government obligations (attach schedule)	962,526	737,906	754,247	
	<b>b</b>	Investments—corporate stock (attach schedule) . . . . .	3,648,165	3,407,865	5,151,613	
	<b>c</b>	Investments—corporate bonds (attach schedule) . . . . .				
	<b>11</b>	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
	<b>12</b>	Investments—mortgage loans . . . . .				
	<b>13</b>	Investments—other (attach schedule) . . . . .	693,972	1,421,786	1,595,623	
	<b>14</b>	Land, buildings, and equipment basis ▶ <u>248,128</u> Less accumulated depreciation (attach schedule) ▶ <u>61,120</u>	194,162	187,008	187,008	
<b>15</b>	Other assets (describe ▶ _____)					
<b>16</b>	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	6,709,781	7,271,312	9,205,238		
Liabilities	<b>17</b>	Accounts payable and accrued expenses . . . . .				
	<b>18</b>	Grants payable . . . . .				
	<b>19</b>	Deferred revenue . . . . .				
	<b>20</b>	Loans from officers, directors, trustees, and other disqualified persons				
	<b>21</b>	Mortgages and other notes payable (attach schedule). . . . .				
	<b>22</b>	Other liabilities (describe ▶ _____)				
	<b>23</b>	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0		
Net Assets or Fund Balances	<b>Foundations that follow FASB ASC 958, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 24, 25, 29 and 30.</b>					
	<b>24</b>	Net assets without donor restrictions . . . . .	6,709,781	7,271,312		
	<b>25</b>	Net assets with donor restrictions . . . . .				
	<b>Foundations that do not follow FASB ASC 958, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 26 through 30.</b>					
	<b>26</b>	Capital stock, trust principal, or current funds . . . . .				
	<b>27</b>	Paid-in or capital surplus, or land, bldg, and equipment fund				
	<b>28</b>	Retained earnings, accumulated income, endowment, or other funds				
	<b>29</b>	<b>Total net assets or fund balances</b> (see instructions) . . . . .	6,709,781	7,271,312		
<b>30</b>	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	6,709,781	7,271,312			

Part III Analysis of Changes in Net Assets or Fund Balances		
<b>1</b>	Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	<b>1</b> 6,709,781
<b>2</b>	Enter amount from Part I, line 27a . . . . .	<b>2</b> 561,531
<b>3</b>	Other increases not included in line 2 (itemize) ▶ _____	<b>3</b> 0
<b>4</b>	Add lines 1, 2, and 3 . . . . .	<b>4</b> 7,271,312
<b>5</b>	Decreases not included in line 2 (itemize) ▶ _____	<b>5</b> 0
<b>6</b>	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	<b>6</b> 7,271,312

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<b>1a</b> See Additional Data Table				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				

  

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

<b>2</b> Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	<b>2</b>	472,422
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		<b>3</b>	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?



Yes



No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

**1** Enter the appropriate amount 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-use assets	(d) Distribution ratio (col (b) divided by col (c))
2018	286,129	7,671,834	0 037296
2017	165,000	5,685,834	0 029019
2016	196,000	3,459,544	0 056655
2015	226,000	3,932,465	0 057470
2014	244,250	4,563,598	0 053521
<b>2</b> Total of line 1, column (d)			<b>2</b> 0 233961
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years			<b>3</b> 0 046792
<b>4</b> Enter the net value of noncharitable-use assets for 2019 from Part X, line 5			<b>4</b> 8,283,539
<b>5</b> Multiply line 4 by line 3			<b>5</b> 387,603
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)			<b>6</b> 5,882
<b>7</b> Add lines 5 and 6			<b>7</b> 393,485
<b>8</b> Enter qualifying distributions from Part XII, line 4			<b>8</b> 385,171

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	11,765
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	11,765
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	11,765
<b>6</b>	Credits/Payments		
<b>a</b>	2019 estimated tax payments and 2018 overpayment credited to 2019	<b>6a</b>	1,191
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	0
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	0
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	1,191
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	39
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	<b>9</b>	10,613
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	<b>10</b>	
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2020 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). . . . . If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ 0 (2) On foundation managers <input type="checkbox"/> \$ 0		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . If "Yes," attach a detailed description of the activities	<b>2</b>	No
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T	<b>5</b>	No
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	<b>6</b>	No
<b>7</b> 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 . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> WA		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	<b>8b</b>	Yes
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	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. . . . .	<b>11</b>		<b>No</b>
<b>12</b>	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. . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ▶ <u>LAURA HULTEN</u> Telephone no ▶ <u>(360) 319-8153</u>			

Located at ▶ PO 538 MOUNTLAKE TERRACE WAZIP+4 ▶ 98043

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here . . . . . ▶ <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year . . . . . ▶ <b>15</b>			
<b>16</b>	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . .	<b>16</b>	<b>Yes</b>	<b>No</b>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶			

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required****File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

		<b>Yes</b>	<b>No</b>
<b>1a</b>	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(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)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. . . . . <input type="checkbox"/>	<b>1b</b>	
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019? . . . . .	<b>1c</b>	<b>No</b>
<b>2</b>	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))		
<b>a</b>	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____		
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions). . . . .	<b>2b</b>	
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____		
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019). . . . .	<b>3b</b>	
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>	<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	<b>4b</b>	<b>No</b>

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

		Yes	No
<b>5a</b>	During the year did the foundation pay or incur any amount to		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.	<b>5b</b>	
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>	
<b>c</b>	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870	<b>6b</b>	
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>b</b>	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?	<b>7b</b>	
<b>8</b>	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

<b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>				
(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) Expense account, other allowances
See Additional Data Table				
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
<b>Total number of other employees paid over \$50,000.</b>				<b>0</b>

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total</b> number of others receiving over \$50,000 for professional services. . . . . ►		0

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**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
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . . ►	0

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	7,032,230
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	1,190,446
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	187,008
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	8,409,684
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	8,409,684
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	126,145
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	8,283,539
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	414,177

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	414,177
<b>2a</b>	Tax on investment income for 2019 from Part VI, line 5.	<b>2a</b>	11,765
<b>b</b>	Income tax for 2019 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	11,765
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	402,412
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	402,412
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	402,412

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	385,171
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	385,171
<b>5</b>	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.	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	385,171

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
<b>1</b> Distributable amount for 2019 from Part XI, line 7				402,412
<b>2</b> Undistributed income, if any, as of the end of 2019				
<b>a</b> Enter amount for 2018 only. . . . .			128,487	
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2019				
<b>a</b> From 2014. . . . .				
<b>b</b> From 2015. . . . .				
<b>c</b> From 2016. . . . .				
<b>d</b> From 2017. . . . .				
<b>e</b> From 2018. . . . .				
<b>f</b> Total of lines 3a through e. . . . .	0			
<b>4</b> Qualifying distributions for 2019 from Part XII, line 4 ▶ \$ 385,171				
<b>a</b> Applied to 2018, but not more than line 2a			128,487	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2019 distributable amount. . . . .				256,684
<b>e</b> Remaining amount distributed out of corpus	0			
<b>5</b> Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
<b>6 Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2019 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2020 . . . . .				145,728
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .	0			
<b>8</b> Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions). . . . .	0			
<b>9 Excess distributions carryover to 2020.</b> Subtract lines 7 and 8 from line 6a . . . . .	0			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2015. . . . .				
<b>b</b> Excess from 2016. . . . .				
<b>c</b> Excess from 2017. . . . .				
<b>d</b> Excess from 2018. . . . .				
<b>e</b> Excess from 2019. . . . .				

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

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. . . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

**2a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .

	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

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

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed

**b** The form in which applications should be submitted and information and materials they should include

**c** Any submission deadlines

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b>			<b>3a</b>	385,000
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b>			<b>3b</b>	0

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount		
<b>1</b> Program service revenue						
<b>a</b> _____						
<b>b</b> _____						
<b>c</b> _____						
<b>d</b> _____						
<b>e</b> _____						
<b>f</b> _____						
<b>g</b> Fees and contracts from government agencies						
<b>2</b> Membership dues and assessments. . . .						
<b>3</b> Interest on savings and temporary cash investments . . . . .						
<b>4</b> Dividends and interest from securities. . . .			14	165,106		
<b>5</b> Net rental income or (loss) from real estate						
<b>a</b> Debt-financed property. . . . .						
<b>b</b> Not debt-financed property. . . . .			16	18,000		
<b>6</b> Net rental income or (loss) from personal property						
<b>7</b> Other investment income. . . . .						
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .			18	472,422		
<b>9</b> Net income or (loss) from special events						
<b>10</b> Gross profit or (loss) from sales of inventory						
<b>11</b> Other revenue <b>a</b> _____						
<b>b</b> _____						
<b>c</b> _____						
<b>d</b> _____						
<b>e</b> _____						
<b>12</b> Subtotal Add columns (b), (d), and (e). . .		0		655,528		0
<b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . . (See worksheet in line 13 instructions to verify calculations )			<b>13</b>			<b>655,528</b>

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

**Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

<b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			<b>Yes</b>	<b>No</b>
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of				
<b>(1)</b> Cash. . . . .		<b>1a(1)</b>		<b>No</b>
<b>(2)</b> Other assets. . . . .		<b>1a(2)</b>		<b>No</b>
<b>b</b> Other transactions				
<b>(1)</b> Sales of assets to a noncharitable exempt organization. . . . .		<b>1b(1)</b>		<b>No</b>
<b>(2)</b> Purchases of assets from a noncharitable exempt organization. . . . .		<b>1b(2)</b>		<b>No</b>
<b>(3)</b> Rental of facilities, equipment, or other assets. . . . .		<b>1b(3)</b>		<b>No</b>
<b>(4)</b> Reimbursement arrangements. . . . .		<b>1b(4)</b>		<b>No</b>
<b>(5)</b> Loans or loan guarantees. . . . .		<b>1b(5)</b>		<b>No</b>
<b>(6)</b> Performance of services or membership or fundraising solicitations. . . . .		<b>1b(6)</b>		<b>No</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .		<b>1c</b>		<b>No</b>
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received				

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

<b>Sign Here</b>	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.		
	*****	2020-08-30	*****
	_____ Signature of officer or trustee	_____ Date	_____ Title

May the IRS discuss this return with the preparer shown below  
 (see instr.) ☒ **Yes** ☐ **No**

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	KARI MOORE CPA		2020-08-30		P01392605
	Firm's name ▶ JACOBSON JARVIS & CO PLLC				Firm's EIN ▶ 91-2011386
	Firm's address ▶ 200 FIRST AVE WEST SUITE 200 SEATTLE, WA 981194219				Phone no (206) 628-8990

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
INVESCO		2018-10-18	2019-11-01
INVESCO		2018-10-24	2019-11-01
SPDR S&P 400 MID CAP		2017-03-14	2019-01-10
SPDR S&P 400 MID CAP		2017-03-21	2019-01-10
SPDR S&P 400 MID CAP		2017-04-04	2019-01-10
US TREASURY NT 1 625%		2018-02-14	2019-04-30
US TREASURY NT 1%		2017-09-18	2019-11-30
US TREASURY STRIP		2018-07-17	2019-05-15
ABBVIE INC COM		2014-08-12	2019-02-11
ASTRAZENECA PLC SPON ADR		2017-03-28	2019-04-05

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
22,195		20,552	1,643
4,439		3,949	490
7,149		6,921	228
2,860		2,751	109
4,289		4,152	137
40,000		40,000	0
40,000		40,000	0
40,000		40,000	0
157,892		106,946	50,946
120,374		96,036	24,338

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			1,643
			490
			228
			109
			137
			0
			0
			0
			50,946
			24,338

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
BOEING COMPANY		2017-02-17	2019-04-08
BOEING COMPANY		2017-04-28	2019-04-08
SQUARE INC CL A		2018-07-09	2019-04-29
HP INC		2019-04-29	2019-10-09
BANK OF AMER CORP		2014-02-17	2019-10-18
BANK OF AMER CORP		2014-02-13	2019-10-18
HP INC		2014-05-16	2019-10-09
HP INC		2015-11-04	2019-10-09
BANK OF AMER CORP		2014-02-13	2019-12-10
CAPITAL GAINS DIVIDENDS	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
184,524		87,416	97,108
184,524		93,591	90,933
72,061		66,174	5,887
64,807		79,971	-15,164
149,177		84,870	64,307
149,177		84,820	64,357
32,404		30,995	1,409
32,403		28,948	3,455
165,559		84,820	80,739
1,500			1,500

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			97,108
			90,933
			5,887
			-15,164
			64,307
			64,357
			1,409
			3,455
			80,739
			1,500

**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

<b>(a)</b> Name and address	Title, and average hours per week <b>(b)</b> devoted to position	<b>(c)</b> Compensation (If not paid, enter -0-)	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	Expense account, <b>(e)</b> other allowances
RICHARD TUCKER	PRESIDENT AND CHAIRMAN 5 00	7,500	0	0
919 CHUCKANUT SHORE ROAD BELLINGHAM, WA 98229				
FLEET RATLIFF	VICE PRESIDENT 1 00	7,500	0	0
6427 TRALEE COURT NW OLYMPIA, WA 98502				
DANA OTTERHOLT	VICE PRESIDENT 1 00	7,500	0	0
4002 RIDGE WAY MT VERNON, WA 98273				
LAURA HULTEN	SECRETARY/TREASURER 5 00	6,000	0	0
22501 68TH PL W MOUNTLAKE TERRACE, WA 98043				
RICHARD HOSS	DIRECTOR 1 00	7,500	0	0
300 N POTLATCH ROAD SHELTON, WA 98584				



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AAUW-WA SPECIAL PROJECTS FUND 14100 NE 4TH STREET BELLEVUE, WA 98007	NONE	PC	GENERAL SUPPORT	2,000
BELLINGHAM CHILDCARE AND LEARNING CENTER 2600 SQUALICUM PARKWAY BELLINGHAM, WA 98225	NONE	PC	GENERAL SUPPORT	6,000
BELLINGHAM FOOD BANK1824 ELLIS ST BELLINGHAM, WA 98225	NONE	PC	ASSIST INDIGENT FAMILIES	4,000
<b>Total . . . . . ▶ 3a</b>				385,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
BELLINGHAM YWCA 1256 N STATE STREET BELLINGHAM, WA 98225	NONE	PC	YOUTH SERVICES	7,000
BOYS AND GIRLS CLUBS OF THURSTON COUNTY 2424 HERITAGE COURT SW 301 OLYMPIA, WA 98502	NONE	PC	GENERAL SUPPORT	750
CAMPFIRE USA SAMISH COUNCIL 1321 KING ST STE 3 BELLINGHAM, WA 98229	NONE	PC	YOUTH SERVICES	5,000
<b>Total . . . . . ▶ 3a</b>				385,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CARSON SCHOLARS FUND INC 305 W CHESAPEAKE AVE STE 310 TOWSON, MD 21204	NONE	PC	EDUCATIONAL SERVICES	1,500
CHRISTMAS GIVING ARTS & CRAFTS FAIR 110 E DAY SPRING ROAD SHELTON, WA 98584	NONE	PC	PUBLIC ASSISTANCE	4,000
CLASSICAL 981 10 HARRISON STREET NO 100 SEATTLE, WA 98109	NONE	PC	GENERAL SUPPORT	1,000
<b>Total . . . . . ▶ 3a</b>				385,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CRYSTAL SPRINGS ELEMENTARY 21615 9TH AVE SE BOTHELL, WA 98021	NONE	PC	YOUTH SERVICES	2,000
DOMESTIC VIOLENCE & SAS WHATCOM COUNTY 1407 COMMERICAL STREET BELLINGHAM, WA 98225	NONE	PC	SOCIAL SERVICES	5,000
GIRLS ON THE RUN OF SNOHOMISH COUNTY PO BOX 994 LYNNWOOD, WA 98046	NONE	PC	GENERAL SUPPORT	3,000
<b>Total . . . . . ▶ 3a</b>				385,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
GLOBAL FOUNDATION FOR CHILDREN WITH HEARING LOSS 19631 2ND AVE NE POULSBO, WA 983707565	NONE	PC	GENERAL SUPPORT	5,000
HOOD CANAL FOOD BANKPO BOX 995 HOODSPORT, WA 98548	NONE	PC	ASSIST INDIGENT FAMILIES	3,000
LIGHTHOUSE MISSION MINISTRIES PO BOX 548 BELLINGHAM, WA 98225	NONE	PC	ASSIST INDIGENT FAMILIES	5,000
<b>Total . . . . .</b> ▶ <b>3a</b>				385,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
LINCOLN THEATREPO BOX 2313 MOUNT VERNON, WA 98273	NONE	PC	GENERAL SUPPORT	5,250
NEWELL PIONEER VILLAGE 8089 CHAMPOEG RD NE ST PAUL, OR 97137	NONE	PC	GENERAL SUPPORT	1,000
NORTHWEST YOUTH SERVICES 1020 NORTH STATE STREET BELLINGHAM, WA 98225	NONE	PC	GENERAL SUPPPORT	6,000
<b>Total . . . . .</b> ▶ <b>3a</b>				385,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
OLYMPIA SYMPHONY ORCHESTRA 3400 CAPITAL BLVD S STE 203 OLYMPIA, WA 98501	NONE	PC	CULTURAL ENHANCEMENT	10,000
PANORAMA1751 CIRCLE LANE SE LACEY, WA 98503	NONE	PC	GENERAL SUPPORT	1,000
PIONEER COMMUNITY KIWANIS 450 E BERGESON ROAD SHELTON, WA 98584	NONE	PC	YOUTH SERVICES	5,000
<b>Total . . . . . ▶ 3a</b>				385,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PIONEER FOOD BANK 500 E NORTH ISLAND DRIVE SHELTON, WA 98584	NONE	PC	ASSIST INDIGENT FAMILIES	5,000
SAN DIEGO RESCUE MISSION INC PO BOX 80427 SAN DIEGO, CA 92138	NONE	PC	GENERAL SUPPORT	5,000
SEATTLE OPERA1020 JOHN STREET SEATTLE, WA 98109	NONE	PC	CULTURAL ENHANCEMENT	5,000
<b>Total . . . . . ▶ 3a</b>				385,000



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SKAGIT DOMESTIC VIOLENCE PO BOX 301 MOUNT VERNON, WA 98273	NONE	PC	GENERAL SUPPORT	14,000
SKAGIT PRESCHOOL AND RESOURCE CENTER 320 PACIFIC PLACE MOUNT VERNON, WA 98273	NONE	PC	GENERAL SUPPORT	5,000
SKAGIT VALLEY 1ST GEN FOUNDATION 2405 E COLLEGE WAY MOUNT VERNON, WA 98273	NONE	PC	EDUCATIONAL SERVICES	15,000
<b>Total . . . . .</b> ► <b>3a</b>				385,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SKAGIT VALLEY FAMILY YMCA 215 E FULTON MOUNT VERNON, WA 98273	NONE	PC	YOUTH SERVICES	5,000
SKAGIT VALLEY HOSPITALITY HOUSE ASSOCIATION PO BOX 517 MOUNT VERNON, WA 98273	NONE	PC	GENERAL SUPPORT	16,500
SKOOKUM KIDSP PO BOX 4148 BELLINGHAM, WA 98225	NONE	PC	GENERAL SUPPORT	9,250
<b>Total . . . . . ▶ 3a</b>				385,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SOUTH SOUND YMCA SHELTON 1530 YELM HWY SE OLYMPIA, WA 98501	NONE	PC	YOUTH SERVICES	51,000
TURNING POINTE DOMESTIC VIOLENCE SERVICES PO BOX 2014 SHELTON, WA 98584	NONE	PC	GENERAL SUPPORT	3,000
UNITED CHURCH OF FERNDALE PO BOX 186 FERNDALE, WA 98248	NONE	PC	RELIGIOUS SERVICES	4,000
<b>Total . . . . . ▶ 3a</b>				385,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
UNIVERSITY OF WASHINGTON FOUNDATION PO BOX 357137 SEATTLE, WA 98195	NONE	PC	GENERAL SUPPORT	6,000
WHATCOM FAMILY YMCA 1256 N STATE STREET BELLINGHAM, WA 98225	NONE	PC	YOUTH SERVICES	1,000
WHATCOM SYMPHONY ORCHESTRA PO BOX 5892 BELLINGHAM, WA 98227	NONE	PC	CULTURAL ENHANCEMENT	6,000
<b>Total . . . . . ▶ 3a</b>				385,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HELP US MOVE IN 2645 CHAMBERS LAKE LANE SE LACEY, WA 98503	NONE	PC	GENERAL SUPPORT	45,000
BALLET NORTHWESTPO BOX 2888 OLYMPIA, WA 98507	NONE	PC	GENERAL SUPPORT	5,000
KCTS CHANNEL 9 TELEVISION 401 MERCER ST SEATTLE, WA 98109	NONE	PC	GENERAL SUPPORT	1,000
<b>Total . . . . . ▶ 3a</b>				385,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE FIELD355 EIGHTH AVE APT 16G NEW YORK, NY 10001	NONE	PC	GENERAL SUPPORT	5,000
GINGERBREAD NURSERY SCHOOL 602 VILLA DRIVE NORMAN, OK 73071	NONE	PC	GENERAL SUPPORT	4,000
TRUMAN PTA600 PARKSIDE RD NORMAN, OK 73072	NONE	PC	GENERAL SUPPORT	1,000
<b>Total . . . . . ▶ 3a</b>				385,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
TREEHOUSE 2100 24TH AVE S SUITE 200 SEATTLE, WA 98114	NONE	PC	GENERAL SUPPORT	3,000
CANINE COMPANIONS FOR INDEPENDENCE 2965 DUTTON AVE SANTA ROSA, CA 95402	NONE	PC	GENERAL SUPPORT	2,000
COUNCIL FOR THE HOMELESS 2500 MAIN STREET VANCOUVER, WA 98660	NONE	PC	GENERAL SUPPORT	5,000
<b>Total . . . . . ▶ 3a</b>				385,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CLARK COUNTY FOOD BANK 6502 NE 47TH AVENUE VANCOUVER, WA 98661	NONE	PC	GENERAL SUPPORT	5,000
PACIFIC NW TRAIL ASSOCIATION 1851 CHARLES JONES MEMORIAL CIR 4 SEDRO WOOLLEY, WA 98284	NONE	PC	GENERAL SUPPORT	4,000
SKAGIT ADULT DAY CARE 116 N SKAGIT ST BURLINGTON, WA 98233	NONE	PC	GENERAL SUPPORT	14,000
<b>Total . . . . . ▶ 3a</b>				385,000



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SAVE THE CHILDREN 501 KINGS HIGHWAY EAST SUITE 400 FAIRFIELD, CT 06825	NONE	PC	GENERAL SUPPORT	1,250
WOLF HOLLOW REHABILITATION CENTER PO BOX 391 FRIDAY HARBOR, WA 98250	NONE	PC	GENERAL SUPPORT	1,250
WORLD VISION 34834 WEYERHAUSER WAY S FEDERAL WAY, WA 98001	NONE	PC	GENERAL SUPPORT	1,250
<b>Total . . . . . ▶ 3a</b>				385,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CHILDREN OF THE VALLEY 1318 S 18TH ST MOUNT VERNON, WA 98274	NONE	PC	GENERAL SUPPORT	2,500
NOOKSACK SALMON ENHANCEMENT ASSOCIATION 2445 E BAKERVIEW RD BELLINGHAM, WA 98226	NONE	PC	GENERAL SUPPORT	5,000
EXPLORATIONS ACADEMY 1701 ELLIS ST SUITE 215 BELLINGHAM, WA 98225	NONE	PC	GENERAL SUPPORT	5,000
<b>Total . . . . . ▶ 3a</b>				385,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
LYDIA PLACEPO BOX 28487 BELLINGHAM, WA 98228	NONE	PC	GENERAL SUPPORT	7,000
IPA FOUNDATION1621 CORNWALL AVE BELLINGHAM, WA 98225	NONE	PC	GENERAL SUPPORT	1,000
BEAUTIFUL SOLESPO BOX 2484 LYNNWOOD, WA 98037	NONE	PC	GENERAL SUPPORT	5,000
<b>Total . . . . . ▶ 3a</b>				385,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CHILD STRIVE14 E CASINO RD BLDG A EVERETT, WA 98208	NONE	PC	GENERAL SUPPORT	5,000
FOOD LIFELINE815 S 96TH ST SEATTLE, WA 98108	NONE	PC	GENERAL SUPPORT	5,250
HOST807 WEST PINE ST SHELTON, WA 98584	NONE	PC	GENERAL SUPPORT	4,000
<b>Total . . . . . ▶ 3a</b>				385,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ADOPT A PET940 E JENSEN RD SHELTON, WA 98584	NONE	PC	GENERAL SUPPORT	2,250
HABITAT FOR HUMANITY - MASON COUNTY PO BOX 1549 SHELTON, WA 98584	NONE	PC	GENERAL SUPPORT	3,000
COMMUNITY LIFELINEPO BOX 698 SHELTON, WA 98584	NONE	PC	GENERAL SUPPORT	3,000
<b>Total . . . . . ▶ 3a</b>				385,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
K HILBUM CANCER FUNDPO BOX 1668 SHELTON, WA 98584	NONE	PC	GENERAL SUPPORT	2,000
NORTHWEST HARVESTPO BOX 12272 SEATTLE, WA 98102	NONE	PC	GENERAL SUPPORT	2,000
SURFRIDER FOUNDATIONPO BOX 73550 SAN CLEMENTE, CA 92673	NONE	PC	GENERAL SUPPORT	2,000
<b>Total . . . . . ▶ 3a</b>				385,000

**TY 2019 Accounting Fees Schedule****Name:** TUCKER FAMILY FOUNDATION**EIN:** 26-1492603

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING AND TAX PREP	7,601	7,601		0

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2019 Amortization Schedule

**Name:** TUCKER FAMILY FOUNDATION

**EIN:** 26-1492603

### Amortization Schedule

Description of Amortized Expenses	Date Acquired, Completed, or Expended	Amount Amortized	Deduction for Prior Years	Amortization Method	Current Year Amortization	Net Investment Income	Adjusted Net Income	Total Amount of Amortization
ORGANIZATIONAL COSTS	2008-06-19	35,488	25,039	180 0000000000000	2,366	2,366		27,405



**Note:** To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**TY 2019 Depreciation Schedule**

**Name:** TUCKER FAMILY FOUNDATION

**EIN:** 26-1492603

Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
DENTAL BUILDING	2012-12-14	186,720	28,927	SL	39 0000000000000	4,788	4,788		
LAND	2012-12-14	25,920		L		0	0		

**TY 2019 Investments Corporate Stock Schedule**

**Name:** TUCKER FAMILY FOUNDATION  
**EIN:** 26-1492603

**Investments Corporation Stock Schedule**

Name of Stock	End of Year Book Value	End of Year Fair Market Value
SCHWAB ACCT - 3M COMPANY	20,104	17,642
SCHWAB ACCT - ABBOTT LABORATORIES	11,259	17,372
SCHWAB ACCT - AIR PROD & CHEMICALS	16,969	29,374
SCHWAB ACCT - ALPHABET	22,335	26,740
SCHWAB ACCT - AMAZON	16,188	27,718
SCHWAB ACCT - AMERICAN WATER WORKS	3,812	6,143
SCHWAB ACCT - APPLE	17,621	35,238
SCHWAB ACCT - AT&T INC	16,150	15,632
SCHWAB ACCT - AUTO DATA PROCESSING	16,992	25,575
SCHWAB ACCT - BECTON DICKINSON & CO	18,339	27,197
SCHWAB ACCT - BERKSHIRE HATHAWAY	21,001	22,650
SCHWAB ACCT - BLACKROCK INC	19,092	25,135
SCHWAB ACCT - CHECK PT SOFTWARE	20,892	22,192
SCHWAB ACCT - CHEVRON CORPORATION	21,417	24,102
SCHWAB ACCT - CISCO SYSTEMS	17,437	19,184
SCHWAB ACCT - THE COCA COLA COMPANY	13,806	16,605
SCHWAB ACCT - COLGATE PALMOLIVE CO	7,373	6,884
SCHWAB ACCT - CONOCOPHILLIPS	12,471	16,258
SCHWAB ACCT - COSTCO WHOLESALE	22,745	41,149
SCHWAB ACCT - DANAHER CORP	16,889	30,696
SCHWAB ACCT - EXXON MOBIL CORP	26,434	24,423
SCHWAB ACCT - INTEL CORPORATION	19,801	29,925
SCHWAB ACCT - JOHNSON & JOHNSON	22,841	26,257
SCHWAB ACCT - KIMBERLY-CLARK CORP	20,944	23,384
SCHWAB ACCT - L3HARRIS TECHNOLOGIES INC	20,250	29,681
SCHWAB ACCT - MICROSOFT CORP	17,512	31,540
SCHWAB ACCT - NEXTERA ENERGY INC	6,510	12,108
SCHWAB ACCT - NORFOLK SOUTHERN CO	17,395	29,120
SCHWAB ACCT - NOVO-NORDISK A-S	15,454	23,152
SCHWAB ACCT - PACCAR INC	16,173	19,775

## Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
SCHWAB ACCT - PHILLIPS 66	12,054	16,712
SCHWAB ACCT - PROCTOR & GAMBLE	23,271	37,470
SCHWAB ACCT - ROYAL DUTCH SHELL	21,996	23,592
SCHWAB ACCT - SAP SE	9,706	13,399
SCHWAB ACCT - SCHLUMBERGER LTD	14,184	8,040
SCHWAB ACCT - SNAP ON INC	16,549	16,940
SCHWAB ACCT - STARBUCKS CORP	17,181	26,376
SCHWAB ACCT - STRYKER CORP	13,135	20,994
SCHWAB ACCT - TOTAL SA	15,765	16,590
SCHWAB ACCT - UNITED PARCEL SERVICE	22,154	23,412
SCHWAB ACCT - UNITED TECHNOLOGIES	23,548	29,952
SCHWAB ACCT - UNITEDHEALTH GRP INC	16,668	29,398
SCHWAB ACCT - WALGREENS BOOTS ALLI	29,841	23,584
SCHWAB ACCT - WALT DISNEY CO	20,442	28,926
SCHWAB ACCT - WASHINGTON FEDERAL	6,608	7,330
SCHWAB ACCT - WASTE MANAGEMENT INC	10,838	17,094
UBS ACCT - ALPHABET INC	184,302	267,878
UBS ACCT - ALTERYX	118,532	100,070
UBS ACCT - AMAZON.COM INC	216,491	369,568
UBS ACCT - APPLE INC	142,489	440,475
UBS ACCT - AXSOME THERAPEUTICS INC	79,758	206,720
UBS ACCT - BANK OF AMERICA	353,505	704,400
UBS ACCT - BP PLC	95,226	75,480
UBS ACCT - CENTURYLINK INC	244,298	158,520
UBS ACCT - CITIGROUP INC	163,335	239,670
UBS ACCT - GOLUB CAPITAL	126,314	129,185
UBS ACCT - ILLUMINA INC	146,006	165,870
UBS ACCT - IOVANCE THERAPEUTICS	100,313	276,800
UBS ACCT - JP MORGAN CHASE	65,991	278,800
UBS ACCT - NORDSTROM INC	42,708	40,930

## Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
UBS ACCT - PFIZER INC	120,029	156,720
UBS ACCT - ROYAL DUTCH SHELL	88,808	89,955
UBS ACCT - SALESFORCE.COM INC	103,983	179,392
UBS ACCT - SEATTLE GENETICS INC	225,631	228,520

**TY 2019 Investments Government Obligations Schedule****Name:** TUCKER FAMILY FOUNDATION**EIN:** 26-1492603**US Government Securities - End  
of Year Book Value:**

737,906

**US Government Securities - End  
of Year Fair Market Value:**

754,247

**State & Local Government  
Securities - End of Year Book  
Value:**

0

**State & Local Government  
Securities - End of Year Fair  
Market Value:**

0

**TY 2019 Investments - Other Schedule**

**Name:** TUCKER FAMILY FOUNDATION  
**EIN:** 26-1492603

**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
Schwab ACCT - iShares MSCI Germany	AT COST	20,011	20,580
Schwab ACCT - iShares NASDAQ Biotechnology ETF	AT COST	38,847	46,999
Schwab ACCT - Invesco S&P SmallCap	AT COST	29,251	38,384
Schwab ACCT - Schwab Emerging Markets Equity ETF	AT COST	65,561	68,425
Schwab ACCT - Schwab Intl Index Fund	AT COST	75,000	79,769
Schwab ACCT - Schwab Small Cap Index Fund	AT COST	30,000	29,623
Schwab ACCT - Schwab US Mid Cap Index Fund	AT COST	10,000	11,253
Schwab ACCT - Schwab Total Stock Market	AT COST	25,000	29,052
Schwab ACCT - SPDR Fund Materials Select Sctr ETF	AT COST	15,821	18,426
Schwab ACCT - Vanguard Financials ETF	AT COST	25,707	26,698
Schwab ACCT - Vanguard Total International Bond ETF	AT COST	10,813	11,316
UBS ACCT - iShares Biotechnology	AT COST	173,544	180,765
Vanguard ACCT - Vanguard Growth Index Admiral	AT COST	50,000	58,687
Vanguard ACCT - Vanguard Information Technology Index	AT COST	100,000	128,311
Vanguard ACCT - Vanguard Tax Managed Small Cap	AT COST	55,728	54,295
Vanguard ACCT - Vanguard Dividend Appreciation ETF	AT COST	108,355	124,660
Vanguard ACCT - Vanguard Extended Market ETF	AT COST	116,435	125,990
Vanguard ACCT - Vanguard High Dividend Yield ETF	AT COST	85,425	93,710
Vanguard ACCT - Vanguard Russell 1000 Growth Index FD ETF	AT COST	150,590	180,930
Vanguard ACCT - Vanguard Russell 1000 Value Index FD ETF	AT COST	108,035	119,850
Vanguard ACCT - Vanguard S&P 500 Index ETF	AT COST	127,663	147,900

**TY 2019 Land, Etc.  
Schedule****Name:** TUCKER FAMILY FOUNDATION**EIN:** 26-1492603

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
ORGANIZATIONAL COSTS	35,488	27,405	8,083	
DENTAL BUILDING	186,720	33,715	153,005	
LAND	25,920	0	25,920	

**TY 2019 Other Expenses Schedule****Name:** TUCKER FAMILY FOUNDATION**EIN:** 26-1492603**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	275	275		0
INVESTMENT FEES	16,093	16,093		0
OFFICE SUPPLIES	342	171		171
AMORTIZATION	2,366	2,366		0



**TY 2019 Taxes Schedule****Name:** TUCKER FAMILY FOUNDATION**EIN:** 26-1492603

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
FEDERAL INCOME TAX PAYMENTS	1,532	0		0

<b>Schedule B</b> (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	<b>Schedule of Contributors</b>  ▶ <b>Attach to Form 990, 990-EZ, or 990-PF</b> ▶ <b>Go to <u>www.irs.gov/Form990</u> for the latest information</b>	OMB No 1545-0047  <b>2019</b>
Name of the organization TUCKER FAMILY FOUNDATION		<b>Employer identification number</b> 26-1492603

Organization type (check one)

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization  
TUCKER FAMILY FOUNDATION

Employer identification number  
26-1492603

**Part I**

**Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ESTATE OF RICHARD V TUCKER CO RICHARD D TUCKER 919 CHUCKANUT SHORE ROAD BELLINGHAM, WA 982298925	\$ 360,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions )
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions )
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions )
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions )
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions )
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions )
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions )
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions )

Name of organization TUCKER FAMILY FOUNDATION	Employer identification number 26-1492603
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given <small>(see instructions) Use duplicate copies of Part II if additional space is needed</small>	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	

Name of organization TUCKER FAMILY FOUNDATION	Employer identification number 26-1492603
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<b>Part III</b>	<b>Exclusively</b> religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of <b>exclusively</b> religious, charitable, etc., contributions of <b>\$1,000 or less</b> for the year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	_____ _____ _____	_____ _____ _____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	_____ _____ _____	_____ _____ _____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	_____ _____ _____	_____ _____ _____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	_____ _____ _____	_____ _____ _____	