SCANNED MAY 1 9 2021

Form, **9.90-PF**

Department of the Treasury Internal Revenue Service **Return of Private Foundation**

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

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

		ıdar year 2019 or tax year beginning Janua	ry 1 , 20	<u>19, and</u>		December 31	<u> </u>	19	
Nan	ne of fou	ndation			A Employe	er identification number	er ·		
		Three Nine Foundation				81-1811421			
Nun	nber and	street (or P O. box number if mail is not delivered to street address)	Roc	m/suite	B Telephor	ne number (see instruct	ions)		
138	27 51s	t Dr. SE				425-337-3696	j		
		, state or province, country, and ZIP or foreign postal code			C if exemp	tion application is pend			
Eve	rett, W	'a 98208	ı			.,	•	(
			n of a former publ	ic charity	D 1. Foreig	n organizations, check	here .	▶□	
		☐ Final return ☐ Amended					anizations meeting the 85% test,		
		☐ Address change ☐ Name cha	nge			here and attach compu		" ▶□	
H	Check	type of organization: 📝 Section 501(c)(3) exempt p	private foundation	04	E If private	foundation status was	terminated un		
	Section	on 4947(a)(1) nonexempt charitable trust Other tax	xable private four	ndation	section 5	i07(b)(1)(A), check here		. ▶ 🔲	
ī		narket value of all assets at J Accounting method			E If the four	ndation is in a 60-mont	h termination	1 -	
	end o	f year (from Part II, col. (c),	1		under se	ction 507(b)(1)(B), chec	k here	. ▶□	
	line 16		e on cash basis.)			?			
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disburse		
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per		t investment ncome	(c) Adjusted net income	for chanta		
		the amounts in column (a) (see instructions).)	books	1			(cash basis		
	1	Contributions, gifts, grants, etc., received (attach schedule)	997	מ				,	
	2	Check ▶ ☐ if the foundation is not required to attach Sch. B		1					
	3	Interest on savings and temporary cash investments		1	1	0			
	4	Dividends and interest from securities	222	4	2224	0			
	5a	Gross rents		0	0	· - 0		 ,	
	b	Net rental income or (loss)							
Revenue	6a	Net gain or (loss) from sale of assets not on line 10		0]	
	b	Gross sales price for all assets on line 6a							
Š	7	Capital gain net income (from Part IV, line 2)			0				
ď	8	Net short-term capital gain				· o		1	
	9	Income modifications				0			
	10a	Gross sales less returns and allowances			•				
	b	Less: Cost of goods sold						}	
	С	Gross profit or (loss) (attach schedule)	•	0		1 1 0		{	
	11	Other income (attach schedule) Attachment I	4	3	. 43	11 0		•	
	12	Total. Add lines 1 through 11	1224	7	2268				
S	13	Compensation of officers, directors, trustees, etc.		0	` 0		- ,	0	
Se	14	Other employee salaries and wages		<u>o</u> .	0		'	0	
kpenses	15	Pension plans, employee benefits		o	1 + 0	•	j.	0	
	16a	Legal fees (attach schedule),		0 ' `	· · · · 0			0	
9	b	Accounting fees (attach schedule)	1 11 7	0	. 0	C	1	<u>', 0</u>	
⋛	C	Other professional fees (attach schedule)	-CORRES -	0	0			 ;	
ţ	17	Other professional fees (attach schedule) Interest Taxes (attach schedule) (see instructions) AGENCE Depreciation (attach schedule) and depletion RS Occupancy	N Co	0	. 0			<u> </u>	
Ę.	18	Taxes (attach schedule) (see instructions) (30%). O	BU 1 1 3	1	.e . 31	., **			
Ē	19	Depreciation (attach schedule) and depletion "."	£ 2020 .	0	0				
ğ	20	occupancy	1000	0	0 در	1		0	
g	21	Travel conferences and meetings	1 .50%	0 7	. 1 0		'	0	
<u>e</u>	22	Printing and publications	300	0	0		<u> </u>	0	
g	23 24	Other expenses (attach schedule) Attachment 3	6	1	0	1		<u>61</u>	
a <u>ti</u>	24	Total operating and administrative expenses.	* 4.1 1.		1				
Operating and Administrative E		Add lines 13 through 23		2	31		· · · · · ·	61	
o	25	Contributions, gifts, grants paid	370				· ·	3706	
	26	Total expenses and disbursements. Add lines 24 and 25	385	9	. 31			3828	
	27	Subtract line 26 from line 12:		1				1	
	a	Excess of revenue over expenses and disbursements	838	8			 		
	b	Net investment income (if negative, enter -0-) .		 	2237		 		
	C	Adjusted net income (if negative, enter -0-)	L	1		<u> </u>		1	

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 11289X

9/20 Porm

S 12:10

Pa	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
	•	should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash-non-interest-bearing	188	110	· · 110
	2	Savings and temporary cash investments	5	5	′ 5
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶		•	
	4	Pledges receivable ▶			
	ļ	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 ▶			
şţ	8	Inventories for sale or use		+	· · · · · · · · · · · · · · · · · · ·
Assets	9	Prepaid expenses and deferred charges		<u> </u>	'
₹	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) Attch 4	15410	23361	23922
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶	_		
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans		-	
	13	Investments—other (attach schedule)	·		
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶		· · · · · · · · · · · · · · · · · · ·	
	15	Other assets (describe ► See Attachment 5	. 69	68	68
	16	Total assets (to be completed by all filers—see the	_	_	&
	47	instructions. Also, see page 1, item I)	15672	23544	24105
	17	Accounts payable and accrued expenses			
Sa	18	Grants payable			
Liabilities	19	Deferred revenue			
ā	20 21	Loans from officers, directors, trustees, and other disqualified persons			
ت	22	Mortgages and other notes payable (attach schedule) Other liabilities (describe ▶)			
	23	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)			
- <u></u>	20	Foundations that follow FASB ASC 958, check here	. 0	0	
alances		and complete lines 24, 25, 29, and 30.			,
ä	24	Net assets without donor restrictions			
Bal	25	Net assets with donor restrictions			-
豆		Foundations that do not follow FASB ASC 958, check here ▶ ☑	 		
Ę		and complete lines 26 through 30.			1
or Fund	26	Capital stock, trust principal, or current funds	15410	23361	į
S	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
iet	28	Retained earnings, accumulated income, endowment, or other funds	193	115	١
Ş	29	Total net assets or fund balances (see instructions)	15603	23476	1
Net Assets	30	Total liabilities and net assets/fund balances (see	7.1		,
ž		instructions)	15603	23476	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1	Tota	I net assets or fund balances at beginning of year-Part II, colur	mn (a), line 29 (must	agree with	
		of-year figure reported on prior year's return)			15603
2	Ente	er amount from Part I, line 27a		2	8388
3	Othe	er increases not included in line 2 (itemize) Increase market value	e	' 3	767
4	Add	lines 1, 2, and 3		<u>4</u>	23991
5	Deci	reases not included in line 2 (itemize) ► If net assets or fund balances at end of year (line 4 minus line 5)—I	5	0	
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)—I	e 29 6	24758	

Part	V Capital Gains and	Losses for Tax on Investr	nent Income				
		nd(s) of property sold (for example, real ese; or common stock, 200 shs MLC Co	(s) of property sold (for example, real estate,		(c) Date acquired (mo., day, yr.)	(d) Date sold (mo , day, yr)	
1a							
<u> </u>	·			L			
<u>C</u>				<u> </u>		ļ	
<u>d</u>				 	 		
е			T "			<u> </u>	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or , plus expe	other basis nse of sale		ın or (loss) (f) minus (g))	
a_			-				
<u> </u>			 				
d						······································	
e							
.	Complete only for assets sho	wing gain in column (h) and owned	by the foundation	on 12/31/69.	(I) Gains (Co	(h) gain minus	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) . (j), if any	(I) Gains (Coi (h) gain minus coi (k), but not less than -0-) or Losses (from coi (h))		
a							
<u>b</u>		<u> </u>					
- c							
e							
		/ If gain	also enter in Pa	rt l line 7			
2	Capital gain net income or), enter -0- in Pa		2		
3	If gain, also enter in Part	n or (loss) as defined in sections I, line 8, column (c). See instru					
Part	Part I, line 8	er Section 4940(e) for Red	· · · · · · ·		3		
		vate foundations subject to the					
Was th	s," the foundation doesn't o	e this part blank. section 4942 tax on the distribu jualify under section 4940(e). Do bunt in each column for each ye	not complete t	his part.	· · · · · · · · · · · · · · · · · · ·	Ų Yes ☑ No	
Cale	(a) Base penod years ndar year (or tax year beginning in)	(b) Adjusted qualifying distribution	ns Net value o	(c) f nonchantable-use as		(d) tnbution ratio divided by col. (c))	
	2018		3389	1	2806 0.	264641574	
	2017		2916			.33536626	
	2016		3344		4560 0.	733219891	
	2015				,		
	2014						
2	Total of line 1, column (d)				. 2	1.333227725	
3		for the 5-year base period—dioundation has been in existence				0.444409242	
4	Enter the net value of non-	charitable-use assets for 2019 t	from Part X, line	5	. 4	18,847	
5	Multiply line 4 by line 3		1		. 5	8,376	
6	Enter 1% of net investmen	, nt income (1% of Part I, line 27b)		. 6	22	
7	Add lines 5 and 6				. 7	8,398	
8	Enter qualifying distribution	ns from Part XII, line 4			. 8		
	If line 8 is equal to or great Part VI instructions.	ter than line 7, check the box i	n Part VI, line 1b	, and complete t	hat part using a	1% tax rate. See the	

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instru	ictio	<u>15)</u>	-
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.				1
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)				1
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		,	45	5
	here ▶ ☐ and enter 1% of Part I, line 27b				1
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)				ì
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			ſ	D
3	Add lines 1 and 2			45	<u>.</u> 5
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0	_
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			45	_
6	Credits/Payments:				7
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a				ŧ
b	Exempt foreign organizations—tax withheld at source				;
С	Tax paid with application for extension of time to file (Form 8868) 6c				ļ
d	Backup withholding erroneously withheld				
7	Total credits and payments. Add lines 6a through 6d	_		45	5
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			0	3
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				<u>.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10	-		0	5
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶ 11·				<u> </u>
Part	VII-A Statement's Regarding Activities				-
1a	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?	1a	Yes	No	_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b	٠,	✓'	-
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.				-
C	Did the foundation file Form 1120-POL for this year?	1c	_ ~ ~	7	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				- .
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$	ł	İ	1	Ť
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		\ {		i.
	on foundation managers. ► \$				اُ
2	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.	2		✓	-] -
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	3		-, ·	Ì
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		1	-
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		-	-
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.	5		√	- -
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or				1
	• 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?	6	/		, , 4
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	1		-
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶				
p ^t i	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				1
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b		1	~
9 ,	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	<u> </u>		<u> </u>	ĩ
9	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes,"	-			<u></u>
	complete Part XIV	9		✓	_
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				-
	names and addresses	10			. 1

Part	VII-A Statements Regarding Activities (continued)			
	ľ	T	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11	-	1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12	,	1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	<u> </u>
44	Website address ► http://proverbsthreenine.org/contact.html			
14		25-337		
45	Located at ► 13827 51st Dr. SE, Everett, WA ZIP+4 ►	9820	18	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here and enter the amount of tax-exempt interest received or accrued during the year	· · ·	· 	
16	At any time during calendar year 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?	16	Yes	No ✓
	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.	\top	Yes	No
1a	During the year, did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	the benefit or use of a disqualified person)?			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
С	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?	10	,	, 7
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			1
a	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines :: 6d and 6e) for tax year(s) beginning before 2019?	.		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)			
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation of 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 Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.)			
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		1
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?			

Pari	VII-B Statements Regarding Activities			4720	May Be F	equire	ed (conti	nued)			
5a	During the year, did the foundation pay or incur							_		Yes	No
	(1) Carry on propaganda, or otherwise attempt						☐ Yes	✓ No	' }		1
	(2) Influence the outcome of any specific pub								-{	ľ l	
-	- directly or indirectly, any voter registration of						Yes	☑ No			
	(3) Provide a grant to an individual for travel, st							✓ No	'	1	
	(4) Provide a grant to an organization other than	an a cna	iritable, etc.,	organiz	ation desc	nbed ir		_	Ì		1 1
	section 4945(d)(4)(A)? See instructions							✓ No	'		, ,
	(5) Provide for any purpose other than religiou purposes, or for the prevention of cruelty to							(T)	1		
h	If any answer is "Yes" to 5a(1)–(5), did any of							No 🔽	4		. 1
, D	in Regulations section 53.4945 or in a current n	otice re	nardina disas	o quaii	istance? Si	e exce; ee instr	uctions	scribea			
	Organizations relying on a current notice regard								5b		
С	If the answer is "Yes" to question 5a(4), does								' [. 1
	because it maintained expenditure responsibilit							No			
	If "Yes," attach the statement required by Regulations section 53.4945-5(d).						1	}			
6a	Did the foundation, during the year, receive any					emiums	, }				(
	on a personal benefit contract?		5 .				☐ Yes	✓ No		l	
b	Did the foundation, during the year, pay premiu	ıms, dire	ctly or indire	ctly, on	a personal	benefi	t contract	? .	6b	1	
	If "Yes" to 6b, file Form 8870.		•								
7a	At any time during the tax year, was the foundation		•						·		لـــا
b	If "Yes," did the foundation receive any proceed							n? .	7b		
8	Is the foundation subject to the section 4960 tremuneration or excess parachute payment(s) of							E2	. [, {
Dari	VIII Information About Officers, Dire							No No			!
Fai	and Contractors	Ciors,	rusiees, r	ounda	uon man	agers,	rigiliy r	alu E	проу	ees,	
1	List all officers, directors, trustees, and foun	dation	managers ar	nd their	compens	ation.	See instru	uctions	 }_		
		(b) Titi	e, and average	(c) Co	mpensation	(d)	Contribution	s to		nse acc	
	(a) Name and address	hours per week , (If				ployee benefit plans eferred compensation		(e) Expense acco			
Raymo	nd Ruppert , , , , , ,	Preside	ent /								
13827	51st Dr. SE, Everett, WA 98208		rer 1 hour		o			0			0
Terri R	uppert	Vice P	resident /	[
13827	51st Dr. SE, Everett, WA 98208		ary 1 hour		0					<u>. </u>	0
	r Gordon	Board	Member / 1	l							
	Sunnyside Avenue North, Seattle, WA 98133	hours		ļ	0		0				
	Gordon	1	Member / 1					_		10	_
13022	Sunnyside Avenue North, Seattle, WA 98133 Compensation of five highest-paid employe	hours	er than tho	se incl	uded on li	no 1	coo inetr	Uction	e) If n	<u>, , , , , , , , , , , , , , , , , , , </u>	ontor
~	"NONE."	es (ou	er alan alo	36 11101	uded on n	116 1	3CC 1113U	uctions	əj. 11 111	one, t	3111G1
			(C. Tu'		Ţ.		(d) Contribu	tions to			
(a) Name and address of each employee paid more than \$50,0	000	(b) Title, and a hours per v	veek 🛺	(c) Compe	nsation	employee	benefit	(e) Expe	nse acc	ces
			devoted to p	osition	İ		compens				000
None	,			•	1						
	·										
			į	•	ĺ		ĺ	İ			
			 		ļ						
					1]				
		·	<u> </u>		 		 				
],	,	(۱ ،		ı		
			 		 		 		1		
			1		1		l			•	
				•	i		l ' ·				
Total	number of other employees paid over \$50,000 .		<u> </u>		<u> </u>		<u> </u>	. •			

and Contractors (continued)		<u> </u>
		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None		
	14 (, , , , , , , , , , , , , , , , , , , ,
, ,	,	
*		- ,
,	. ,	+ *
		1.15
η	<u> </u>	
C) DI C (C) TILL		^
		·
Total number of others receiving over \$50,000 for professional services	neuga a a aga zei a a▶	- 4 ₂ ;
Part IX-A Summary of Direct Charitable Activities	1.4	.a
		Expenses
1 None		, ,
		[
***************************************	,	•
. 2		
(,	
······································		
, ,		
4		
***************************************	······································	;
1.4. 3.10	30 0 1	1.
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 None Total number of others receiving over \$50,000 for professional services 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		
		Amount
	٠,	
	,	
2		,
		• -
All other program-related investments See instructions :		r
	•	;
	r.	
		1.
Total. Add lines 1 through 3		
		Form 990-PF (201

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn founda	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	,	
а	Average monthly fair market value of securities	1a	18916
b	Average of monthly cash balances	1b	150
C	Fair market value of all other assets (see instructions)	1c	68
ď	Total (add lines 1a, b, and c)	1d	19134
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	19134
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	287
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	18847
6	Minimum investment return. Enter 5% of line 5	6	942
Part 2		oundation	IS
1	Minimum investment return from Part X, line 6	1	942
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.) 2b 0		
С	Add lines 2a and 2b	2c	45
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	898
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	898
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	898
Part	XII Qualifying Distributions (see instructions)	•	· · · · · · · · · · · · · · · · · · ·
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	3828
b	Program-related investments—total from Part IX-B	1b	· 0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	3828
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3828
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculatin qualifies for the section 4940(e) reduction of tax in those years.	g whether	

Part	XIII - Undistributed Income (see instruction	ins) ;		فيد 	
		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7	r			898
2	Undistributed income, if any, as of the end of 2019:				, ,
а	Enter amount for 2018 only			a	
b	Total for prior years: 20 , 20 , 20	*	0		
3	Excess distributions carryover, if any, to 2019:	· · · · · · · · · · · · · · · · · · ·			·
а	From 2014				
b	From 2015				1
C	From 2016				
d	From 2017			11	
е	From 2018 2780				
f	Total of lines 3a through e	8434			
4	Qualifying distributions for 2019 from Part XII, line 4: ► \$ 3828	3.3,		,~I	
а	Applied to 2018, but not more than line 2a .			it. o	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
c	Treated as distributions out of corpus (Election required—see instructions)	0			
d	Applied to 2019 distributable amount				898
e	Remaining amount distributed out of corpus	2930			
5	Excess distributions carryover applied to 2019				
	(If an amount appears in column (d), the same amount must be shown in column (a).)	0			,
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	11364			
b	Prior years' undistributed income. Subtract line 4b from line 2b		_ 0		
C	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		و د ر	•	
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0		
е	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)	0	,		·
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions)	0			
9	Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	11364		· · · · · · · · · · · · · · · · · · ·	
10	Analysis of line 9:				ĺ
а	Excess from 2015				
b	Excess from 2016				
C	Excess from 2017				
d	Excess from 2018			•	ļ
e	Excess from 2019 2930				
	·		 		Form 990-PF (2019)

Form 99	90-PF (2019)				/	,Page 10
Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question 9)	
1a	If the foundation has received a ruling				•	
	foundation, and the ruling is effective for		•		5 / F3 49494	,
b	Check box to indicate whether the four		operating foundat		ection 🗌 4942()	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
	each year listed				<u> </u>	ļ
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4, for each year listed					
d	Amounts included in line 2c not used directly)	Y		1
	for active conduct of exempt activities , .					
е	Qualifying distributions made directly					1
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c	 				
3	Complete 3a, b, or c for the alternative test relied upon:			1		
а	"Assets" alternative test-enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under					†*************************************
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-enter 2/3/					
	of minimum investment return shown in			ļ		
	Part X, line 6, for each year listed	i		•		,
C	"Support" alternative test - enter:		1			
	(1) Total support other than gross			'		
	investment income (interest,	ı.	ļ	1		ļ
•	dividends, rents, payments on securities Joans (section				•	
	512(a)(5)), or royalties)					ļ
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from	-		,		
	an exempt organization		}		•	
	(4) Gross investment income					<u> </u>
Part		n (Complete th	is part only if the	he foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-	see instruction	ıs.)			
1	Information Regarding Foundation	Managers:				
а	List any managers of the foundation v	who have contribu	ted more than 2%	6 of the total contr	ibutions received	l by the foundation
	before the close of any tax year (but o	nly if they have co	ontributed more th	ıan \$5,000). (See s	ection 507(d)(2).)	,
Raymo	ond and Terri Ruppert					
b	List any managers of the foundation			•	• •	arge portion of the
	ownership of a partnership or other er	ntity) of which the	foundation has a	10% or greater inte	erest.	
2	Information Regarding Contribution		•	. •		
	Check here ► ☑ if the foundation					
	unsolicited requests for funds. If the fo		gitts, grants, etc.,	to individuals or o	rganizations unde	er other conditions,
	complete items 2a, b, c, and d. See in		- 			
а	The name, address, and telephone nu	mber or email add	dress of the person	n to whom applica	tions should be a	ddressed:
						,
					40 (f 7	·····
þ	The form in which applications should	be submitted and	d information and	materials they sho	uld include:	
	Any submission doadlines:					
C	Any submission deadlines:					
d	Any restrictions or limitations on aw	ards, such as b	y geographical ar	reas, charitable fie	elds, kinds of ins	stitutions, or other
-	factors:	,	, J. J. H. H.	,	.,	

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient Foundation show any relationship to Purpose of grant or status of Amount any foundation manager contribution Name and address (home or business) recipient or substantial contributor Paid dunng the year Our Daily Bread, PO Box 2222, Grand Rapids, MI, 59501 PC Spreading the Christian Gospel 176 Multnomah University, 8435 N.E. Glison St. Portland, OR, 97220 PC Student Scholarships 480 Jews for Jesus, 60 Haight Street, San Francisco, CA PC 94102 Jewish Evangelism 552 J. PC Jesus Project, PO Box 628222, Orlando, FL, 32862 Production of Jesus DVDs 360 n. Every Home for Christ, PO Box 64000, Colorado **Springs, CO, 80962** PC Door to Door Evangelism 180 Care Net of Puget Sound, 1924 S. Cedar St Ste. B. Tacoma, WA 98405 PC Prenatal Care program 188 Billy Graham Association, 1 Billy Graham Parkway, Charlotte, NC, 28201 PC Ministry of BGEA 184 American Bible Association, 101 North Independence Mall East FL8, Philadelphia, PA 19106 PC Bible distribution 172 Deaf Missions, 21199 Greenview Rd, Council Bluffs, IA 51503 130 . PC ASL Bible Translation -564 Prisoners For Christ, PO Box 1530, Woodinville, WA PC Prison Ministry 400 Vertical World Solutions, 12137 W Villa Hermosa Ct. Sun City, AZ 85373 NC School Books, aid for poor. 400 The Ranch 25615 E 3000 North Road Chenoa, IL 61726 Christian encouragement PC SO 3a Total 3706 Approved for future payment None, **Total** 3b

Pa	LAV	Analysis of income Producing Ac					
Ente	r gro	ss amounts unless otherwise indicated.	Unrelated bu	siness income.	Excluded by sect	ion 512, 513; or 514	'- (e)
			(a) Business code	(b) Amount	(c) Exclusion code	(d)	Related or exempt function income (See instructions.)
1	Prog	gram service revenue:		,,,		, ,	(See instructions.)
	а	-					
	b						
	C			, 7	the chartains	٠	
	ď				. 1	1.	4 41
	e ¯						
	f				• •	,	L _p
	g	ees and contracts from government agencies					, ,
' 2		nbership dues and assessments		· · · · · · · · · · · · · · · · · · ·			
3		rest on savings and temporary cash investments	900001		1 7 - 0	3) " " (2. 1
4		dends and interest from securities	900001	2224			
_		rental income or (loss) from real estate:	300001	2224	<u> </u>		
•		Debt-financed property					
•			<u> </u>				
_		rental income or (loss) from personal property	· · · · · · · · · · · · · · · · · · ·		 -	· · · · · · · · · · · · · · · · · · ·	4 * 10 P
7		er investment income	7'			· · · · · · · · · · · · · · · · · · ·	
8		or (loss) from sales of assets other than inventory			1		
9		income or (loss) from special events	ļ	<u> </u>	,,,,		
10		ss profit or (loss) from sales of inventory				,	•
11	Othe	er revenue: a Royalties from books	900001	43			·
1.	b _	<u> </u>				, ,	٠, ١
	С		,				
٠	d ¯			,	1	7 e . () = .)	, _ t,
	e ¯		-				
	_						
12	Sub	total. Add columns (b), (d), and (e)		2268	•	n	
		total. Add columns (b), (d), and (e)		2268		13 - 14	<u> </u>
13	Tota	al. Add line 12, columns (b), (d), and (e)					<u> </u>
13 See	Tota work	al. Add line 12, columns (b), (d), and (e)	ıs.)				<u> </u>
13 See Pa	Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	ıs.) Accomplishm	ent of Exemp	t Purposes	13 <u>* 1 %</u>	, 2268
13 See Par Lin	Tota work	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	ıs.) Accomplishm	ent of Exemp	t Purposes	13 <u>* 1 %</u>	, 2268
13 See Par Lin	Tota work t XV e No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	ıs.) Accomplishm	ent of Exemp	t Purposes	13 <u>* 1 %</u>	, 2268
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Firm's name

Firm's address 🕨

Use Only

Part .	XVII	intormatio Organizati	n Kegaruing Trans ons	sters to and I rans	sactions a	ind Helation	snips W	nn Nonc	naritabi	e Exe	mpi
1	Did th	ne organization of	directly or indirectly extension than section to	ngage in any of the to	following wi	th any other o	rganizatio	n describ	ed	Yes	No
		nizations?	Allor William Sociation (or (o)(o) organizatio	2113) 01 111	3000001 027,	rolating	to point	-	1	ı
	_		porting foundation to	a noncharitable exe	mpt organiz	ation of:			Ì		I
	(1) C	ash			. , . ,				1a(1)		1
	(2) 0	ther assets .							1a(2)	+	1
b	Othe	r transactions:									
	(1) S	ales of assets to	a noncharitable exer	npt organization .					1b(1)		1
			ets from a noncharital						1b(2	_	1
			, equipment, or other						1b(3)	-	1
			rrangements						1b(4)	+	1
			rantees						1b(5)	_	1
			ervices or membershi							_	1
			quipment, mailing list								1
			of the above is "Yes,							fair m	<u> </u>
			ther assets, or servic								
			on or sharing arrange								
(a) Line		(b) Amount involved		intable exempt organization) Description of tr					
		· · · · · · · · · · · · · · · · · · ·		_ 		·			·		

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	-										
			ļ								
			ļ								
			ectly or indirectly aff								
			501(c) (other than sec	tion 501(c)(3)) or in s	ection 527				. □ Y (es 🗹	No
b	If "Ye	es," complete the	following schedule.						<u> </u>		
		(a) Name of organ	nization	(b) Type of org	anızatlon		(c) Des	caption of re	elationship		
				<u> </u>		<u> </u>					
			declare that I have examined					est of my kn	owledge and	belief, rt	is true
Sign	corre	ect, and complete. Decl	laration of preparer (other than	taxpayer) is based on all in	formation of whi	ch preparer has an	y knowledge,	May	the IRS disci	uss this	retum
lere		Kunne	L SIKMANT	- 17/10/20	Pre	sident	•	with	the preparer	shown b	elow?
		ature of officer or tru	stee	Date	Title			See 1	nstructions.	∐Yes[
)aid	-	Print/Type preparer	's name	Preparer's signature		Date	T	Check	, PTIN		
Paid	rer	Ì		Ì			}	self-employ			

Firm's EIN ▶

Phone no.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. 2019

OMB No. 1545-0047

Employer identification number Name of the organization **Proverbs Three Nine Foundation** 81-1811421 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation ☐ 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 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 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 331/3% 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

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 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Page 2 Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Name of organization **Employer identification number** Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (a) (c) (d) Name, address, and ZIP + 4 **Total contributions** No. Type of contribution Person 1 Raymond and Terri Ruppert **Payroll** Noncash 7 9,964 (Complete Part II for noncash contributions.) Everett, WA 98208-9543 (d) (a) (c) · Name, address, and ZIP + 4 Type of contribution No. **Total contributions** Person Payroll Noncash (Complete Part II for noncash contributions.) (d) (c) (a) Type of contribution **Total contributions** No. Name, address, and ZIP + 4 Person □: * Payroll Noncash (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) ' (d) (c) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person -. Payroll Noncash (Complete Part II for noncash contributions.) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person * **Payroll** Noncash (Complete Part II for

noncash contributions)

Name of organization

Employer identification number

Part II	loncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.				
(a) No. from Part I	(b) Description of noncash property given	(c) , FMV (or estimate) (See instructions.)	(d) Date received		
1	NYMT - New York Mortgage Trust Inc Real Estate Trust	\$ 1,260	2/14/2019		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
1	NYMT - New York Mortgage Trust Inc Real Estate Trust	\$, 1,212	5/20/2019		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
1	NYMT - New York Mortgage Trust Inc Real Estate Trust	\$	8/5/2019		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received		
1	NYMT - New York Mortgage Trust Inc Real Estate Trust	\$	11/1/2019		
(a) No. from Part I	(b) Description of noncash property given	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		
		\$			

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Employer identification number

Part III	(10) that total more than \$1,00 the following line entry. For orga contributions of \$1,000 or less	Of for the year from any one of anizations completing Part III, of for the year. (Enter this information	anizations described in section 501(c)(7), (8), or contributor. Complete columns (a) through (e) and enter the total of exclusively religious, charitable, etc., ation once. See instructions.) > \$		
(a) No.	Use duplicate copies of Part III				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
1	religious, charitable	religious, charitable	Stocks held for religious, charitable		
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
(a) No. from Part I	(b) Purposé of gift	(c) Use of gift	(d) Description of how gift is held		
:	Transferee's name, addre	(e) Transfer of ss, and ZIP + 4	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		
	(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		
	Transferee's name, addre	(e) Transfer of ss, and ZIP + 4	gift Relationship of transferor to transferee		
			4		

ATTACHMENT 1

FORM 990-PF,	PART I	-LINE 11	- OTHER	INCOME
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Description	(a) Revenue per Books	(b) Net investment income	(c) Adjusted Net Income
Royalties Received	43		14
TOTAL OTHER			Take the first of the first of the
INCOME	43		

ATTACHMENT 2

FORM 990-PF, PART I - LINE 18 - TAXES

Description	(a) Revenue and Expenses per Books	(b) Net investment income		(d) Disburs charitable pu basis	- ` ;
	Expenses per Books	meome	· · · · · · · · · · · · · · · · · · ·		omy)
Federal Tax 2018	31			1 2 3 2 2 2	, (1)
TOTAL TAXES	31				
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ATTACHMENT-3

FORM 990-PF, PART I - LINE 23 - OTHER EXPENSES '

Description	(a) Revenue and Expenses per Books	(b) Net investment income	(d) Disbursements for charitable purposes (cash basis only)
Banking Fees	6		6
Licenses	10		10
Internet Domain	17		17
Supplies	28		28
TOTAL OTHER EXPENSES	61		61

ATTACHMENT 4

FORM 990-PF, PART II - LINE 10B - CORPORATE STOCKS

	Beginning of year book		
Description	value	Ending Book Value	Ending FMV
NYMT - New York Mortgage Trust		7	
Inc Real Estate Trust	14,451	21,635	22,708
ANH - Anworth Mtg Asset Corp	1,726	1,726	1,214
TOTAL CORPORATE STOCKS	16,177	23,361	23,922

ATTACHMENT 5

FORM 990-PF, PART II - LINE 15 - OTHER ASSETS

	Beginning of year book	•	
Description	value	Ending Book Value	Ending FMV
Copyright for 999 Years After		,	y # #
Armageddon	38	38	38
Copyright for Battling Satan with the			
Armor of God	4	4	4
Copyright for Reflections on First and			
Second Peter	21	21	21
Copyright for The Voice of Con		2	2
Copyright for Revelation Book Series	, 3	3	.13
TOTAL OTHER ASSETS	68	. 68	. 68

ATTACHMENT 6

FOKM 990-PF, PART VII-A - LINE 8B - EXPLANATION

State of Washington does not require filing of 990-PF with the Attorney General.