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2019

OMB No. 1545-0052

## **Return of Private Foundation**

Department of the Treasury Internal Revenue Service

Form 990-PF

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

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

Open to Public

For	caler	ndar year 2019, or tax year beginning 01-01-20	)19 . ar	nd ending 12-31	-2019	•
		indation	, ui		lentification number	er
		FOUNDATION		91-2065635		
	ber and	street (or P.O. box number if mail is not delivered to street address)	Room/suite	<b>B</b> Telephone nu	umber (see instructio	ns)
P	JBUX	/3334		(206) 459-301	2	
		, state or province, country, and ZIP or foreign postal code A 981750554	•	C If exemption	application is pendin	ig, check here
G CH	neck al	I that apply:	former public charity	D 1. Foreign or	ganizations, check h	ere
<b>.</b> C.	icci ui	☐ Final return ☐ Amended return	Torrier public charley	1	rganizations meeting	▶ ⊔
		Address change Name change		test, chec	ck here and attach co	mputation 🕨 🔲
H Ch	neck ty	pe of organization: $\checkmark$ Section 501(c)(3) exempt private 1	foundation		undation status was on 507(b)(1)(A), chec	
	Section	1 4947(a)(1) nonexempt charitable trust  Other taxable	e private foundation		. , , , , ,	
of	year (f	xet value of all assets at end from Part II, col. (c),  ▶\$ 13,424,955   J Accounting method:  □ Other (specify) (Part I, column (d) must	☑ Cash ☐ Accru		ation is in a 60-mont on 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and			(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	157,590			
	2	Check ▶ ☐ if the foundation is <b>not</b> required to attach Sch. B				
	3	Interest on savings and temporary cash investments	17	17	7	
	4	Dividends and interest from securities	302,564	302,564	1	
	5a	Gross rents				
<b>a</b> )	b	Net rental income or (loss)  Net gain or (loss) from sale of assets not on line 10	383,978			
3	6a b	- , ,	303,570			
Revenue	"	Gross sales price for all assets on line 6a 4,228,147				
~	7	Capital gain net income (from Part IV, line 2)		383,978	3	
	8	Net short-term capital gain				
	10a	Gross sales less returns and allowances				
	ь	Less: Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)				
	12	Total. Add lines 1 through 11	844,149	686,559	9	
	13	Compensation of officers, directors, trustees, etc.	0	(	)	C
	14	Other employee salaries and wages				
ses	15	Pension plans, employee benefits	00.1			
ens	16a	Legal fees (attach schedule)	285	(	1	285
χ	b	Accounting fees (attach schedule)	18,136	,		9,068
ve L	_ c	Other professional fees (attach schedule)	93,067	81,357	/	11,710
ra tj	17	Interest	4,167	4,167	7	C
i st	18 19	Taxes (attach schedule) (see instructions)  Depreciation (attach schedule) and depletion	4,107	4,107		
Administrative Expenses	20	Occupancy				
Αd	21	Travel, conferences, and meetings				
n D	22	Printing and publications				
g Di	23	Other expenses (attach schedule)	3,481	(		3,481
Operating and	24	Total operating and administrative expenses.				
ber		Add lines 13 through 23	119,136	94,592	2	24,544
0	25	Contributions, gifts, grants paid	720,000			720,000
_	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	839,136	94,592	2	744,544
	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	5,013			
	ь	Net investment income (if negative, enter -0-)		591,967	7	
	С	Adjusted net income (if negative, enter -0-)	-			

Attached schedules and amounts in the description column

should be for end-of-year amounts only. (See instructions.)

Beginning of year

(a) Book Value

Page 2

(c) Fair Market Value

End of year

(b) Book Value

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**Balance Sheets** 

and complete lines 26 through 30.

of-year figure reported on prior year's return)

Add lines 1, 2, and 3 . . . . . . .

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

**Analysis of Changes in Net Assets or Fund Balances** 

Paid-in or capital surplus, or land, bldg., and equipment fund

26

27

28

29

30

Part III

2

3

Part II

	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶			l	
	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 ▶			l	
S	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments—U.S. and state government obligations (attach schedule)	505,667	<b>%</b>	504,656	516,298
	b	Investments—corporate stock (attach schedule)	5,271,284	<b>چ</b>	6,264,070	9,712,969
	С	Investments—corporate bonds (attach schedule)	387,225	ارچ	336,523	385,215

## Investments—land, buildings, and equipment: basis ▶ 11 s: accumulated depreciation (attach schedule)

		Less: accumulated depreciation (attach schedule) ▶						
	12	Investments—mortgage loans						
	13	Investments—other (attach schedule)		1,483,378	<b>چ</b>	1,973,638		2,539,809
	14	Land, buildings, and equipment: basis ▶						
		Less: accumulated depreciation (attach schedule) ▶				'		
	15	Other assets (describe )	<b>%</b> J	27	<b>چ</b> ا	0	<b>%</b>	4,465
	16	Total assets (to be completed by all filers—see the						
		instructions. Also, see page 1, item I)		9,340,073		9,345,086		13,424,955
	17	Accounts payable and accrued expenses						
	18	Grants payable						
Liabilities	19	Deferred revenue						
iit	20	Loans from officers, directors, trustees, and other disqualified persons						
iat	21	Mortgages and other notes payable (attach schedule)						
-	22	Other liabilities (describe						
	23	Total liabilities(add lines 17 through 22)		0		0		
secu		Foundations that follow FASB ASC 958, check here ▶ □ and complete lines 24, 25, 29 and 30.						

Net Assets or Fund Balan 24 Net assets without donor restrictions 25 Net assets with donor restrictions . Foundations that do not follow FASB ASC 958, check here 🕨 🗹

9,340,073

9,340,073

9,340,073

9,345,086

9,345,086

9,345,086

9,340,073

9,345,086

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5,013

1

2

3

4

5

6

Page **3** 

	e the kind(s) of property sold (e.g., arehouse; or common stock, 200 sh		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a PUBLICALLY TRADED SE	CURITIES		Р		
<b>b</b> PUBLICALLY TRADED SE			Р		
c CAPITAL GAINS DIVIDE	IDS		Р		
d					
e					
	(f)		(g)		h)
(e)	Depreciation allowed		other basis		or (loss)
Gross sales price	(or allowable)		ense of sale		) minus (g)
a 1,72	3,553		1,678,168		45,385
<b>b</b> 2,50	2,314		2,166,001		336,313
С	2,280				2,280
d					
e					
Complete only for asset	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69	,	1)
Complete only for asset	(i)	<u> </u>	(k)		( <b>I)</b> h) gain minus
(i)	Adjusted basis		of col. (i)		less than -0-) <b>or</b>
F.M.V. as of 12/31/69	as of 12/31/69		l. (j), if any	Losses (fr	om col.(h))
a					45,385
b					336,313
С					2,280
d					
e					
•	gain or (loss) as defined in sections rt I, line 8, column (c) (see instructi	. , . , .	Part I, line 7	3	383,978
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net	Investment Inc		
<del></del>	private foundations subject to the se				
, o, opinoma, ase 2, asmestic p		31.01. 15 15(a) tax 511 116		·.,	
f section 4940(d)(2) applies, l	eave this part blank.				
	ne section 4942 tax on the distributant of qualify under section 4940(e). Do		· ·	γ	es 🔽 No
1 Enter the appropriate ar	nount in each column for each year;	see instructions before	making any entries	;.	
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rat (col. (b) divided by o	
2018	659,856		11,774,813	(cor. (b) divided by c	0.056040
2017	570,194		11,115,086		0.051299
2016	627,595		10,586,994		0.059280
2015	569,890		10,625,380		0.053635
2014	538,968		10,787,611		0.049962
2 Total of line 1, column (	,				0.270216
	o for the 5-year base period—divide				_
	ndation has been in existence if less		3		0.054043
<b>4</b> Enter the net value of no	ncharitable-use assets for 2019 fror	m Part X, line 5	4		12,335,477
<b>5</b> Multiply line 4 by line 3			5		666,646
	ent income (1% of Part I, line 27b)		6		5,920
<b>7</b> Add lines 5 and 6			7		672,566
	ions from Part XII, line 4 ,				744,544
If line 8 is equal to or gra	eater than line 7, check the box in P	art VI, line 1b, and com	plete that part usin	g a 1% tax rate. Se	e the Part VI

Form	990-PF (20	019)								P	Page <b>6</b>
Pai	t VII-B	Statements Regar	ding	<b>Activities for Which F</b>	orm 4720 May Be I	Required (coi	ntinued)				
5a	During the	e year did the foundation	pay o	r incur any amount to:						Yes	No
	(1) Carry	on propaganda, or other	wise a	ttempt to influence legislat	ion (section 4945(e))?		Yes 🗸	No			
	(2) Influe	ence the outcome of any s	pecifi	c public election (see section	on 4955); or to carry		ies 🖭	NO			
	on, di	rectly or indirectly, any v	oter re	egistration drive?			Yes 🗸	No			
	(3) Provid	de a grant to an individua	l for t	ravel, study, or other simila	ar purposes?	F	Yes 🗸	No			
	(4) Provid	de a grant to an organiza	ion ot	her than a charitable, etc.,	organization described		ies 🖭	NO			
	in sec	tion 4945(d)(4)(A)? See	instru	ctions		. $\Box$	Yes 🗸	No			
	(5) Provid	de for any purpose other	than r	eligious, charitable, scientif	fic, literary, or		ies 🖭	NO			
	educa	tional purposes, or for th	e prev	ention of cruelty to childre	n or animals?	. 🗆	Yes 🗸	Na			
b	If any ans	swer is "Yes" to $5a(1)-(5)$	, did a	any of the transactions fail	to qualify under the exc	ت eptions describe	d in	NO			
	Regulation	ns section 53.4945 or in a	curre	ent notice regarding disaste	er assistance? See instru	ctions			5b		
	Organizat	ions relying on a current	notice	regarding disaster assistar	nce check here		. ▶ □				
С	If the ans	wer is "Yes" to question 5	ia(4),	does the foundation claim	exemption from the		ш				
	tax becau	se it maintained expendit	ure re	sponsibility for the grant?.			Yes 🗌	No			
	If "Yes," a	attach the statement requ	ired b	y Regulations section 53.49	945-5(d).		ies 🗀	NO			
6a	Did the fo	undation, during the year	r, rece	ive any funds, directly or in	ndirectly, to pay premiur	ns on					
	a persona	I benefit contract?				. $\Box$					
b	Did the fo	undation, during the year	, pay	premiums, directly or indir	ectly, on a personal bend	efit contract? .	Yes 🗹	No	6b		No
		6b, file Form 8870.			,, .						
7a	At any tim	ne during the tax year, w	as the	foundation a party to a pro	ohibited tax shelter trans	action?	Yes 🗸				
b	-	= -		proceeds or have any net in			Yes 💌	NO	7b		
8	Is the fou	ndation subject to the se	tion 4	1960 tax on payment(s) of	more than \$1,000,000 ir	remuneration	or				
	excess pa	rachute payment during	he ye	ar?		🗆	Yes 🗸				
				ers, Directors, Truste					VAA6		•
Pai	t VIII	and Contractors	01110	cis, Directors, Truste	cs, i oundation inal	iagers, mgm	y i did Li	iipio	y ccs,		
1	List all of	ficare directors trusts	oc fe	oundation managers and	their compensation	Saa instruction	<b>16</b>				
	LIST AII OI	incers, un ectors, truste	$\overline{}$	(b) Title, and average	(c) Compensation (If	(d) Contrib		Τ.,	_		
	(a) Na	ame and address		hours per week	not paid, enter	employee be			Exper ther a		
				devoted to position	-0-)	and deferred co	mpensatio	ר וי	illei a	lowali	
	RD RINGNES	SS	MAN/ 1.00	AGER/DIRECTOR/PRESIDENT	0			0			0
	X 75554 LE, WA 981	750554	1.00								
	DRIE RINGNE		MAN	AGER/DIRECTOR/TREASURER	0						0
	X 75554		1.00	,,				Ĭ			·
	LE, WA 981										
_2_	Compens	ation of five highest-pa	aid en	nployees (other than the	se included on line 1-	-see instructio	ns). If no	ne, e	nter "I	NONE.	<u>."                                    </u>
(2)	Name and a	address of each employee	, naid	(b) Title, and average		(d) Contribu employee b	l I	(0)	Expens		nt
(a)		ore than \$50,000	: paiu	hours per week	(c) Compensation	plans and de			her all		
				devoted to position		compensa	4.5				
NON	<b>.</b>										
_											
Tota	I number o	f other employees paid o	/er \$5	0,000			<b>•</b>				n
								For	m <b>99</b> (	)_DE /	(2019)

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional servic	es (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 rele organizations and other beneficiaries served, conferences convened, research papers produ		r of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see i	nstructions)	
Describe the two largest program-related investments made by the foundation during the	<u> </u>	Amount
1	,	
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		• o
Total Add Mico Landagn 5		Form <b>990-PF</b> (2019)

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign

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

2a |

2b

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

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

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

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

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

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

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

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

organizations check here 

and do not complete this part.)

Tax on investment income for 2019 from Part VI, line 5. . . . . .

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

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

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616.774

616,774

5.920

610.854

610.854

610.854

744,544

744.544

5.920

738.624

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6

2c

3

4

5

6

7

1a

1b

2

3a 3b

4

5

5,920

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6

1

2a

3

4 5

6

1

2

3

4

5

b

Part XII

Part XI

Page **9** 

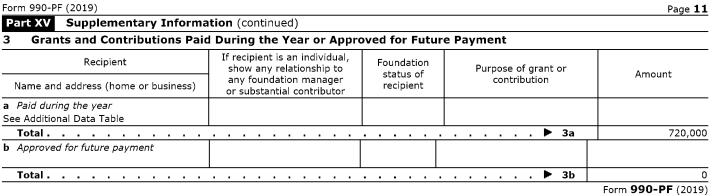
	art XIII Undistributed Income (see instruc	ctions)			
		(a) Corpus	(b) Years prior to 2018	(c) 2018	<b>(d)</b> 2019
1	Distributable amount for 2019 from Part XI, line 7				610,854
2	Undistributed income, if any, as of the end of 2019:				
а	Enter amount for 2018 only			190,614	
b	Total for prior years: 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2019:				
а	From 2014				
b	From 2015				
С	From 2016				
d	From 2017				
е	From 2018				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2019 from Part				
e f	From 2018	0			

d	From 2017				
е	From 2018				
f	Total of lines 3a through e	 0			
4	Qualifying distributions for 2019 from Part				
	XII, line 4: ► \$ 744,544				
а	Applied to 2018, but not more than line 2a			190,614	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
С	Treated as distributions out of corpus (Electic required—see instructions)	0			
d	Applied to 2019 distributable amount				553,930
е	Remaining amount distributed out of corpus	0			

а	Applied to 2018, but not more than line 2a			190,614	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
С	Treated as distributions out of corpus (Election required—see instructions)	0			
d	Applied to 2019 distributable amount				553,930
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2019.	0			0
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
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.		0		
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			0	
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must				

	required—see instructions)				
d	Applied to 2019 distributable amount				553,930
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2019.	0			0
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d	Subtract line 6c from line 6b. Taxable amount —see instructions		0		
е	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				56,924
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	0			
10	Analysis of line 9:				

·	income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d	Subtract line 6c from line 6b. Taxable amount —see instructions		0		
е	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				56,924
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	0			
10	Analysis of line 9:				_
а	Excess from 2015				
b	Excess from 2016				
С	Excess from 2017				
	F 6				



nter gross a	amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt
_	service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions.)
е						
	nd contracts from government agencies					
2 Members 3 Interest	ship dues and assessments on savings and temporary cash					
investme  4 Dividend	ents			14 14	17 302,564	
	al income or (loss) from real estate: nanced property					
<b>b</b> Not del	bt-financed property					
	al income or (loss) from personal property vestment income.					
<b>3</b> Gain or ( inventory	(loss) from sales of assets other than			18	383,978	
• Net incor	me or (loss) from special events:			10	303,970	
	ofit or (loss) from sales of inventory venue: a					
d						
c d e	Add (-) (-) (-)				606 550	
c d e 2 Subtotal 3 Total. A	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e)		0	1	686,559 <b>3</b>	
c d e 2 Subtotal 3 Total. A (See wor	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e)	ılations.)		1	· · · · · · · · · · · · · · · · · · ·	
cde2 Subtotal 3 Total. At (See wor Part XVI-	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e)	llations.) ne Accomplisi income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3	
c d e 2 Subtotal 3 Total. Ar (See wor Part XVI-	. Add columns (b), (d), and (e)	llations.) ne Accomplisi income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3	
c d e 2 Subtotal 3 Total. Ar (See wor Part XVI-	. Add columns (b), (d), and (e)	llations.) ne Accomplisi income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3	
c d e 2 Subtotal 3 Total. Ar (See wor Part XVI-	. Add columns (b), (d), and (e)	llations.) ne Accomplisi income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3	
c d e 2 Subtotal 3 Total. Ar (See wor Part XVI-	. Add columns (b), (d), and (e)	llations.) ne Accomplisi income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3	
c d e 2 Subtotal 3 Total. Ar (See wor Part XVI-	. Add columns (b), (d), and (e)	llations.) ne Accomplisi income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3	
c d e 2 Subtotal 3 Total. Ar (See wor Part XVI-	. Add columns (b), (d), and (e)	llations.) ne Accomplisi income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3	
c d e 2 Subtotal 3 Total. Ar (See wor Part XVI-	. Add columns (b), (d), and (e)	llations.) ne Accomplisi income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3	
c d e 2 Subtotal 3 Total. Ar (See wor Part XVI-	. Add columns (b), (d), and (e)	llations.) ne Accomplisi income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3	
c d e 2 Subtotal 3 Total. Ar (See wor Part XVI-	. Add columns (b), (d), and (e)	llations.) ne Accomplisi income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3	
c d e 2 Subtotal 3 Total. Ar (See wor Part XVI-	. Add columns (b), (d), and (e)	llations.) ne Accomplisi income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3	
c d e 2 Subtotal 3 Total. Ar (See wor Part XVI-	. Add columns (b), (d), and (e)	llations.) ne Accomplisi income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3	
c d e 2 Subtotal 3 Total. Ar (See wor Part XVI-	. Add columns (b), (d), and (e)	llations.) ne Accomplisi income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3	
c d e 2 Subtotal 3 Total. Ar (See wor Part XVI-	. Add columns (b), (d), and (e)	llations.) ne Accomplisi income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3	
c d e 2 Subtotal 3 Total. Ar (See wor Part XVI-	. Add columns (b), (d), and (e)	llations.) ne Accomplisi income is report	nment of Exem	pt Purposes f Part XVI-A contribu	3	
cde e2 Subtotal 3 Total. Ar (See wor Part XVI-	. Add columns (b), (d), and (e)	llations.) ne Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contribu	3	686,559

orm 9	90-PF	(2019)						Pa	ge <b>13</b>
Pari	t XVI	Information Re Exempt Organi		ers To and Transact	ions and Relat	tionships With Nonchari	table		
				any of the following with an section 527, relating to		ation described in section 501 ions?		Yes	No
a Tra	ansfers	from the reporting foun	dation to a nonchar	ritable exempt organizatio	on of:				
(1	) Cas	h					1a(1)		No
(2	) Oth	er assets					1a(2)		No
<b>b</b> Otl	her tra	nsactions:							
•	•	es of assets to a nonchar					1b(1)		No
•	•	thases of assets from a r					1b(2)		No
-	-	tal of facilities, equipmer	•				1b(3)		No
-	-	nbursement arrangemen					1b(4)		No
•	-	ns or loan guarantees.		aising solicitations.			1b(5)		No No
-	-		•	assing solicitations issets, or paid employees			1b(6) 1c		No
	_		- '			always show the fair market			140
in .	any tra	ansaction or sharing arra	ngement, show in o	column (d) the value of t	ne goods, other a	vived less than fair market valussets, or services received.			
(a) Lin	e No.	(b) Amount involved	(c) Name of noncha	ritable exempt organization	(d) Description	of transfers, transactions, and sha	aring arra	ngemer	its
		,	•	or related to, one or mor			_		
			•	c)(3)) or in section 527? .		∐Yes	<b>⊻</b> No		
b If '	"Yes,"	complete the following s		(I) T	1	<b>4.5</b> 5			
		(a) Name of organization	on	<b>(b)</b> Type of organiza	ation	(c) Description of relat	onship		
						nying schedules and statemer ner than taxpayer) is based or			

which preparer has any knowledge.

Sign May the IRS discuss this return with the preparer shown 2020-11-15 Here Signature of officer or trustee Date Title (see instr.) Ves 🗆 No Preparer's Signature Date

Paid **Use Only** 

Print/Type preparer's name PATRICK E GREEN **Preparer** 

PTIN

SMITH BUNDAY BERMAN BRITTON PS Firm's address ▶ 11808 NORTHUP WAY SUITE 240

Check if selfemployed ightharpoonup

Phone no. (425) 827-8255

P00166052

Firm's EIN ▶91-1275259

Form 990PF Part XV Line 1a - 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).

EDWARD RINGNESS

MARJORIE RINGNESS

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 status of contribution

Recipient

Recipient

Amount

Show any relationship to status of contribution

recipient

SERVICES.

▶ 3a

720,000

any foundation manager

Name and address (home or business)

2915 NE MARTIN LUTHER KING BLVD

PORTLAND, OR 97212

· ·	or substantial contributor			
a Paid during the year				
ACT - A CONTEMPORARY THEATRE 700 UNION STREET SEATTLE, WA 98101		501(C)(3)	SUPPORT FOR YOUNG PLAYWRIGHTS PROGRAM	10,000
ARTS CORPS 4408 DELRIDGE WAY SW STE 110 SEATTLE, WA 98106		501(C)(3)	SUPPORT FOR ARTS INTEGRATION PROGRAMS	10,000
BLACK PARENT INITIATIVE		501(C)(3)	SUPPORT FOR EMPLOYMENT	10,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (home or husiness)

realine and address (nome or business)	or substantial contributor			
a Paid during the year				
BOZEMAN ART MUSEUMPO BOX 10547 BOZEMAN, MT 59719		501(C)(3)	SUPPORT FOR TEACHING THE STUDENTS OF GALLATIN AND	10,000

BOZEMAN, MI 39719		PARK COUNTIES.	
CARNEIGIE PICTURE LABPO BOX 3223 WALLA WALLA, WA 99362	501(C)(3)	OPERATING SUPPORT FOR GENERAL OPERATIONS	10,000
CLARK COUNTY VOLUNTEER LAWYERS	501(C)(3)	OPERATING SUPPORT FOR	10.000

CARNEIGIE PICTURE LABPO BOX 3223 WALLA WALLA, WA 99362	` '\ '	OPERATING SUPPORT FOR GENERAL OPERATIONS	10,000
CLARK COUNTY VOLUNTEER LAWYERS PROGRAM 1104 MAIN STREET PLAZA SUITE ONE VANCOUVER, WA 98660	( - / ( - /	OPERATING SUPPORT FOR ELDER LAW PROGRAM	10,000

Total	 	▶ 3a	720,000
CLARK COUNTY VOLUNTEER LAWYERS PROGRAM 1104 MAIN STREET PLAZA SUITE ONE VANCOUVER, WA 98660	501(C)(3)	OPERATING SUPPORT FOR ELDER LAW PROGRAM	10,000
WALLA WALLA, WA 99362		GENERAL OPERATIONS	

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

a Paid during the year			
COA HUMAN SERVICESPO BOX 107 COLFAX, WA 99111	501(C)(3)	OPERATING SUPPORT FOR COAST TRANSPORTATION	10,000

COLFAX, WA 99111		COAST TRANSPORTATION	
CASA LATINA317 17TH AVE S SEATTLE, WA 98144	501(C)(3)	OPERATING PROGRAM SUPPORT FOR ESL CLASSES.	10,000
COLLEGE DREAMSDO BOY 1407	501(C)(3)	ODEDATING SUBBODT FOR	10.000

SEATTLE, WA 98144		FOR ESL CLASSES.	·
COLLEGE DREAMSPO BOX 1407 GRANTS PASS, OR 97528	501(C)(3)	OPERATING SUPPORT FOR CAREER BUILDING PROGRAM.	10,000

COLLEGE DREAMSPO BOX 1407	501(C)(3)	OPERATING SUPPORT FOR	10,000
GRANTS PASS, OR 97528		CAREER BUILDING PROGRAM.	

720,000

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

a Paid during the year

Total .

1	I .			
CONSTRUCTING HOPE 405 NE CHURCH ST PORTLAND, OR 97211		501(C)(3)	OPERATING SUPPORT FOR CONSTRUCTION TRADES FOR DISADVANTAGED YOUTH.	10,000
CREATE COMMON GOOD		501(C)(3)	OPERATING SUPPORT FOR FOOD	10,000

CREATE COMMON GOOD 2513 S FEDERAL WAY 100 BOISE, ID 83705	501(C)(3)	OPERATING SUPPORT FOR FOOD SERVICE TRAINING & JOB PLACEMENT PROGRAM.	10,000
COUNCIL ON AGING OF CENTRAL OREGON 373 NE GREENWOOD AVENUE	501(C)(3)	OPERATING SUPPORT FOR MEALS ON WHEELS PROGRAM.	10,000

BOISE, ID 83705		PLACEMENT PROGRAM.	
COUNCIL ON AGING OF CENTRAL OREGON 373 NE GREENWOOD AVENUE BEND, OR 97701	501(C)(3)	OPERATING SUPPORT FOR MEALS ON WHEELS PROGRAM.	10,000

720,000

COUNCIL ON AGING OF CENTRAL OREGON 373 NE GREENWOOD AVENUE BEND, OR 97701  501(C)(3) OPERATING SUPPORT FOR MEALS ON WHEELS PROGRAM.
---

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

a Paid during the year			
FAMILY WORKS1501 N 45TH ST SEATTLE, WA 98103	501(C)(3)	GENERAL OPERATIONS SUPPORT FOR NUTRITION PROGRAM FOR SENIORS.	10,000

		SENIORS.	
EDITH BISHEL CENTER FOR THE BLIND AND VISUALLY IMPAIRED 628 NORTH ARTHUR STREET KENNEWICK, WA 99336	501(C)(3)	OPERATING SUPPORT FOR INDEPENDENT LIVING AND REHABILITATION PROGRAM.	10,000
EL CENTRO DE LA DAZA	E04 (0) (3)	ODEDATING CURRORT FOR	10.000

AND VISUALLY IMPAIRED 628 NORTH ARTHUR STREET KENNEWICK, WA 99336	301(C)(3)	INDEPENDENT LIVING AND REHABILITATION PROGRAM.	10,000
EL CENTRO DE LA RAZA 2524 16TH AVENUE SOUTH SEATTIE WA 98144	501(C)(3)	OPERATING SUPPORT FOR YOUTH JOB REDINESS TRAINING PROGRAM	10,000

628 NORTH ARTHUR STREET KENNEWICK, WA 99336		REHABILITATION PROGRAM.	
EL CENTRO DE LA RAZA 2524 16TH AVENUE SOUTH SEATTLE, WA 98144	501(C)(3)	OPERATING SUPPORT FOR YOUTH JOB REDINESS TRAINING PROGRAM.	10,000

EL CENTRO DE LA RAZA 2524 16TH AVENUE SOUTH SEATTLE, WA 98144	501(C)(3)	OPERATING SUPPORT FOR YOUTH JOB REDINESS TRAINING PROGRAM.	10,000
			i

2524 16TH AVENUE SOUTH SEATTLE, WA 98144		YOUTH JOB REDINESS TRAINING PROGRAM.	
Total	 	▶ 3a	720,000

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

a Paid during the year			
GRUB2016 ELLIOTT AVE NE OLYMPIA, WA 98502	501(C)(3)	OPERATING SUPPORT FOR THE GROUNDED PROGRAM.	10,000
HIGH DESERT MUSEUM	501(C)(3)	ODEDATING SUBBODT FOR STEM	10.000

OLIMPIA, WA 98302		GROONDED FROGRAM.	
HIGH DESERT MUSEUM 59800 SOUTH HWY 97 BEND, OR 97702	501(	(C)(3) OPERATING SUPPORT F CONNECT PROGRAM.	FOR STEM 10,000
FARESTART700 VIRGINIA ST	501(	(C)(3) OPERATING SUPPORT F	

BEND, OR 97702		SOUNDS! THE SIGN III	
FARESTART700 VIRGINIA ST SEATTLE, WA 98101	501(C)(3)	OPERATING SUPPORT FOR YOUTH PROGRAMS SUPPORTING THE HOMELESS YOUTH.	10,000
Total	 	▶ 3a	720,000

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

a Paid during the year			
HILLTOP ARTISTS IN RESIDENCE PO BOX 6829 TACOMA, WA 98417	501(C)(3)	OPERATING SUPPORT FOR INSCHOOL ELECTIVES AT JASON LEE MIDDLE SCHOOL.	10,000
FIRST WASHINGTON 21238 68TH AVENUE S	501(C)(3)	OPERATING SUPPORT FOR TEACHER PROFESSIONAL	10,000

21238 68TH AVENUE S KENT, WA 98032		TEACHER PROFESSIONAL DEVELOPMENT TRAINING FOR TEACHERS IN CNTRL & EASTERN WA.	
FRIENDLY HOUSE INC 2617 NW SAVIER ST	501(C)(3)	OPERATING SUPPORT FOR SENIOR PROGRAM WORKING	10,0

		WA.	
FRIENDLY HOUSE INC 2617 NW SAVIER ST PORTLAND, OR 97210	501(C)(3)	OPERATING SUPPORT FOR SENIOR PROGRAM WORKING WITH OLDER ADULTS TO SUPPORT INDEPENDENT LIVES.	10,000

Total		▶ 3a	720,000
FRIENDLY HOUSE INC 2617 NW SAVIER ST PORTLAND, OR 97210	501(C)(3)	OPERATING SUPPORT FOR SENIOR PROGRAM WORKING WITH OLDER ADULTS TO SUPPORT INDEPENDENT LIVES.	10,00

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

recipient

720,000

any foundation manager

or substantial contributor

Name and address (home or business)

or substantial contributor			
	501(C)(3)	OPERATING SUPPORT FOR SELF SUFFICIENCY PROGRAMS FOR HIGH-PRIORITY YOUTH.	10,000
	501(C)(3)	PROGRAM SUPPORT FOR EMPLOYMENT PROGRAM.	10,000
		501(C)(3)	501(C)(3)  OPERATING SUPPORT FOR SELF SUFFICIENCY PROGRAMS FOR HIGH-PRIORITY YOUTH.  501(C)(3)  PROGRAM SUPPORT FOR

PORTLAND, OR 97212			
HOUSING HOPE5830 EVERGREEN WAY EVERETT, WA 98203	501(C)(3)	PROGRAM SUPPORT FOR EMPLOYMENT PROGRAM.	10,0
IMAGINE HOUSING	501(C)(3)	OPERATING SUPPORT FOR	10,0

HOUSING HOPE5830 EVERGREEN WAY EVERETT, WA 98203	501(C)(3)	PROGRAM SUPPORT FOR EMPLOYMENT PROGRAM.	10,0
IMAGINE HOUSING 10604 NE 38TH PL SUITE 2015	501(C)(3)	OPERATING SUPPORT FOR SENIOR HOUSING.	10,0

MAGINE HOUSING 10604 NE 38TH PL SUITE 2015	501(C)(3)	OPERATING SUPPORT FOR SENIOR HOUSING.	10,00

MAGINE HOUSING LO604 NE 38TH PL SUITE 2015 (IRKLAND, WA 98033		501(C)(3)	SENIOR HOUSING.	10,000
	•			

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

,	or substantial contributor			
a Paid during the year				
IMPACT NWPO BOX 33530		501(C)(3)	PROGRAM SUPPORT FOR	10,000

ISLAND SENIOR RESOURCES 501(C)(3) OPERATING SUPPORT FOR 10	TORTERIO, OR 37232		SENIOR SERVICES.	
PO BOX 939 FREELAND, WA 98249  MEALS ON WHEELS.	PO BOX 939	501(C)(3)		10,000

PO BOX 939 FREELAND, WA 98249	301(0)(3)	MEALS ON WHEELS.	10,000
JEROME SENIOR CITIZENS INC 520 N LINCOLN AVE	501(C)(3)	FUNDING SUPPORT FOR NUTRITION PROGRAM.	10,000

FREELAND, WA 98249			
JEROME SENIOR CITIZENS INC 520 N LINCOLN AVE	( - / ( - /	FUNDING SUPPORT FOR NUTRITION PROGRAM.	10,000

DEROME SENIOR CITIZENS INC 520 N LINCOLN AVE	501(C)(3)	FUNDING SUPPORT FOR NUTRITION PROGRAM.	10,000
JEROME, ID 83338			

720,000

0 N LINCOLN AVE	(-)(-)	NUTRITION PROGRAM.
ROME, ID 83338		

20 11 2211002117112	l .	11011121201111100101111	1
IEROME, ID 83338			

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

recipient

720,000

any foundation manager

or substantial contributor

Name and address (home or business)

a Paid during the year			
JUNA VENTURES900 1ST AVE SPITJ 307 SEATTLE, WA 98134	501(C)(3)	OPERATING SUPPORT FOR YOUTH CONNECT.	10,000
HUNGER INTERVENTION PROGRAM 3841 NE 123RD STREET SEATTLE, WA 98125	501(C)(3)	OPERATING SUPPORT FOR SENIOR COMMUNITY MEAL PROGRAM.	10,000

HUNGER INTERVENTION PROGRAM 3841 NE 123RD STREET SEATTLE, WA 98125	501(C	OPERATING SUPPORT FOR SENIOR COMMUNITY MEAL PROGRAM.	10,00
KLAMATH BASIN SENIOR CITIZENS'CENTER INC	501(C	OPERATING SUPPORT FOR GENERAL OPERATIONS.	10,00

SEATTLE, WA 98125		PROGRAM.	
KLAMATH BASIN SENIOR CITIZENS'CENTER INC PO BOX JE	501(C)(3)	OPERATING SUPPORT FOR GENERAL OPERATIONS.	10,00

3				
	KLAMATH BASIN SENIOR	501(C)(3)	OPERATING SUPPORT FOR	10,000
	CITIZENS'CENTER INC		GENERAL OPERATIONS.	
	PO BOX JE			
	KLAMATH FALLS, OR 97602			

PO BOX JE		
KLAMATH FALLS, OR 97602		

KLAMATH FALLS, OR 97602		

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

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
LEARNING LAB INC308 E 36TH STREET		501(C)(3)	OPERATING SUPPORT FOR	10,000

GARDEN CITY, ID 83714		GENERAL OPERAIONS.	
LIFEWIREPO BOX 6398 BELLEVUE, WA 98008	( - )( - )	OPERAING SUPPORT FOR ADVOCACY AND ECONOMIC STABILITY SERVICES.	10,000

BELLEVUE, WA 98008		501(C)(3)	OPERAING SUPPORT FOR ADVOCACY AND ECONOMIC STABILITY SERVICES.	10,000
LOG CABIN LITERACY CENTER INC	_	501(C)(3)	OPERATING SUPPORT FOR	10,000

		STABILITY SERVICES.	
LOG CABIN LITERACY CENTER INC 801 S CAPITAL BLVD BOISE, ID 83702	\ - / \ - /	OPERATING SUPPORT FOR WRITERS IN THE SCHOOLS.	10,000

720,000

LOG CABIN LITERACY CENTER INC 801 S CAPITAL BLVD BOISE, ID 83702  501(C)(3) OPERATING SUPPORT FOR WRITERS IN THE SCHOOLS.

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

Daid during the year

Total .

a Faid during the year			
LOPEZ ISLAND FAMILY RESOURCE CENTER PO BOX 732 LOPEZ ISLAND, WA 98261	\ /\ /	OPERATING SUPPORT FOR SOCIAL SUPPORT FOR SENIORS PROGRAMS.	10,000

20, 22, 102, 11, 10, 10, 10, 10, 10, 10, 10, 10, 10			
LOWER COLUMBIA COMMUNITY ACTION COUNCIL 1526 COMMERCE AVE LONGVIEW, WA 98632	501(C)(3)	SUPPORTING PROGRAMS FOR SENIOR NUTRITION.	10,000
MUSTARD SEED PROJECTPO BOX 182	501(C)(3)	OPERATING SUPPORT FOR	10.000

LONGVIEW, WA 98632			
MUSTARD SEED PROJECTPO BOX 182 VAUGHN, WA 98394	501(C)(3)	OPERATING SUPPORT FOR MUSTARD SEED PROJECT CREATING AN ELDER-FRIENDLY KEY PENINSULA.	10,000

▶ 3a

720,000

LONGVIEW, WA 98632			
MUSTARD SEED PROJECTPO BOX 182 VAUGHN, WA 98394	501(C)(3)	OPERATING SUPPORT FOR MUSTARD SEED PROJECT CREATING AN ELDER-FRIENDLY KEY PENINSULA.	10,00

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

	or substantial contributor			
a Paid during the year				
MAKING A DIFFERENCE FOUNDATION PO BOX 94545 SEATTIF WA 98124		501(C)(3)	OPERATING SUPPORT FOR ELOISE'S COOKING POT FOOD BANK HOME DELIVERY	10,000

EATTLE, WA 98124		BANK HOME DELIVERY.	
APS MEDIA INSTITUE515 MADISON AMILTON, MT 59840	(-)(-)	OPERATING SUPPORT FOR GENERAL OPERAIONS.	

Total.

02/11/22/11/1 90121		Brank Horiz Beerrekii	
MAPS MEDIA INSTITUE515 MADISON HAMILTON, MT 59840	(-/(-/	OPERATING SUPPORT FOR GENERAL OPERAIONS.	10,000
MISSOULA AGING SERVICES	501(C)(3)	OPERATING SUPPORT FOR	10,000

HAMILTON, MT 59840	, , ,	GENERAL OPERAIONS.	,
MISSOULA AGING SERVICES 337 STEPHENS AVENUE MISSOULA, MT 59801	( - / ( - /	OPERATING SUPPORT FOR MEALS ON WHEELS.	10,000

720,000

■ 3a

MISSOULA AGING SERVICES 337 STEPHENS AVENUE MISSOULA, MT 59801	501(C)(3)	OPERATING SUPPORT FOR MEALS ON WHEELS.	10,00

MISSOULA AGING SERVICES		301(0)(3)	OF LINE SOFFORT TOR	10,0
337 STEPHENS AVENUE			MEALS ON WHEELS.	
MISSOULA, MT 59801				
	l .			

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

(	or substantial contributor			
a Paid during the year				
OPERATION NIGHTWATCH PO BOX 21181 SEATTLE, WA 98111		( )( )	OPERATING SUPPORT FOR THE SENIOR HOUSING PROGRAM PROVIDING LOW-COST,	10,000

SEATTLE, WA 90111		HOUSING FOR SENIORS.	
MORNINGSIDEPO BOX 7936 OLYMPIA, WA 98507	501(C)(3)	OPERATING SUPPORT FOR HIGH SCHOOL TRANSITION PROGRAM.	10,000

MORNINGSIDEPO BOX 7936 OLYMPIA, WA 98507	501(C)(3)	OPERATING SUPPORT FOR HIGH SCHOOL TRANSITION PROGRAM.	10,000
NEW HORIZONS MINISTRIES	501(C)(3)	OPERATING SUPPORT FOR STREET BEAN EXPANSION.	10,000

OLYMPIA, WA 98507		SCHOOL TRANSITION PROGRAM.	25,555
NEW HORIZONS MINISTRIES 2709 3RD AVE SEATTLE, WA 98121	501(C)(3)	OPERATING SUPPORT FOR STREET BEAN EXPANSION.	10,000

		PROGRAM.	
NEW HORIZONS MINISTRIES 2709 3RD AVE SEATTLE, WA 98121	501(C)(3)	OPERATING SUPPORT FOR STREET BEAN EXPANSION.	10,000
Total	 	▶ 3a	720,000

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

	or substantial continuator			
a Paid during the year				
PIKE MARKET SENIOR CENTER & FOOD BANK 85 PIKE STREET SUITE 200		501(C)(3)	OPERATING SUPPORT FOR A PROGRAM PROVIDING LONG- TERM, ONE-ON-ONE SOCIAL	10,000

85 PIKE STREET SUITE 200 SEATTLE, WA 98101		TERM, ONE-ON-ONE SOCIAL WORK CASE MGMT FOR SENIORS.	
NORTHWEST HOUSING ALTERNATIVES 2316 SE WILLARD ST MILWAUKIE, OR 97222	501(C)(3)	OPERATING SUPPORT FOR SENIOR HEALTH & HOUSING.	10

NORTHWEST HOUSING ALTERNATIVES 2316 SE WILLARD ST MILWAUKIE, OR 97222	501(C)(3)	OPERATING SUPPORT FOR SENIOR HEALTH & HOUSING.	10,000
NW FURNITURE BANK	501(C)(3)	OPERATING SUPPORT FOR	10,000

Total .

2316 SE WILLARD ST MILWAUKIE, OR 97222		SENIOR HEALTH & HOUSING.	
NW FURNITURE BANK 117 PUYALLUP AVE	501(C)(3)	OPERATING SUPPORT FOR GENERAL OPERATIONS.	10,000

W FURNITURE BANK 17 PUYALLUP AVE ACOMA, WA 98421		501(C)(3)	OPERATING SUPPORT FOR GENERAL OPERATIONS.	10,00
--	--	-----------	---	-------

720,000

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 status of contribution

Purpose of grant or contribution

recipient

▶ 3a

720,000

any foundation manager

Name and address (home or business)

· ·	or substantial contributor			
a Paid during the year				
SAFEFUTURES YOUTH CENTER 6337 35TH AVE SW SEATTLE, WA 98126		501(C)(3)	OPERATING SUPPORT FOR HIGH SCHOOL YOUTH COLLEGE AND CAREER PREPARATION PROGRAM.	10,000
OPEN SCHOOL7633 N WABASH AVE PORTLAND, OR 97217		501(C)(3)	OPERATING SUPPORT FOR OPEN SCHOOL EAST-ARTS PROGRAM.	10,000
PACIFIC NORTHWEST BALLET 301 MERCER ST SEATTLE, WA 98109		501(C)(3)	OPERATING SUPPORT FOR DISCOVER DANCE.	10,000

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

SOUND LEARNINGP O BOX 2529 SHELTON, WA 98584	501(C)(3)	GENERAL OPERATING SUPPORT FOR ADULT EDUCATION PROGRAMS SERVING MASON AND THURSTON COUNTIES.	10,000
SOUTH PARK SENIOR CITIZENS	501(C)(3)	GENERAL OPERATING SUPPORT	10,000

SOUTH PARK SENIOR CITIZENS 8201 10TH AVE S SUITE 4 SEATTLE, WA 98108	501(C)(3)	GENERAL OPERATING SUPPORT FOR SENIOR PROGRAMS.	
PORTLAND OPPORTUNITIES	501(C)(3)	PROGRAM SUPPORT FOR	

Total .

SEATTLE, WA 98108		FOR SENIOR PROGRAMS.	
PORTLAND OPPORTUNITIES INDUSTRIALIZATION CENTER INC 717 N KILLINGSWORTH CT	(-)(-)	PROGRAM SUPPORT FOR CONSTRUCTION PRE- APPRENTICESHIP PROGRAM.	10,000

SEATTLE, WA 98108			
PORTLAND OPPORTUNITIES INDUSTRIALIZATION CENTER INC 717 N KILLINGSWORTH CT	501(C)(3)	PROGRAM SUPPORT FOR CONSTRUCTION PRE-APPRENTICESHIP PROGRAM.	10,0

NDOSTRIALIZATION CENTER INC.	CONSTRUCTION FRE-	
17 N KILLINGSWORTH CT	APPRENTICESHIP PROGRAM.	
ORTLAND OR 97217		

ORTLAND, OR 97217	I / N KILLINGSWORTH CT		APPRENTICESHIP PROGRAM.	
	ORTLAND, OR 97217			

720,000

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 status of contribution

Purpose of grant or contribution

recipient

▶ 3a

720,000

any foundation manager

Name and address (home or business)

,	or substantial contributor			
a Paid during the year				
PORTLAND YOUTHBUILDERS 4816 SE 92ND AVE PORTLAND, OR 97266		501(C)(3)	PROGRAM SUPPORT FOR CONSTRUCTING PATHWAYS OUT OF POVERTY.	10,000
REFUGEE ARTISAN INITIATIVE 4616 25TH AVE NE UNIT 428 SEATTLE, WA 98105		501(C)(3)	GENERAL OPERATING SUPPORT FOR ARTISAN TRAINING PROGRAM.	10,000
SEATTLE SHAKESPEARE COMPANY PO BOX 19595 SEATTLE, WA 98109		501(C)(3)	OPERATING SUPPORT FOR INSCHOOL RESIDENCY PROGRAM.	10,000

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

a Paid during the year			
TRANSITIONS3128 N HEMLOCK SPOKANE, WA 99205	501(C)(3)	OPERATING SUPPORT FOR NEW LEAF BAKERY CAFE JOB TRAINING PROGRAM IN FOOD SERVICE SKILLS TRAINING	10,000

		SERVICE SKILLS TRAINING.	
SEATTLE YOUTH SYMPHONY ORCHESTRA 11065 FIFTH AVE NE SUITE A	501(C)(3)	OPERATING SUPPORT FOR SCHOOL-BASED MUSIC PROGRAMS.	10,000

	l .			
SEATTLE YOUTH SYMPHONY ORCHESTRA 11065 FIFTH AVE NE SUITE A SEATTLE, WA 98125		501(C)(3)	OPERATING SUPPORT FOR SCHOOL-BASED MUSIC PROGRAMS.	10,000
VENTURES2100 24TH AVE S SUITE 380 SEATTLE, WA 98144		501(C)(3)	GENERAL OPERATING SUPPORT FOR FINANCIAL LITERACY	10,000

SEATTLE, WA 98125			
VENTURES2100 24TH AVE S SUITE 380 SEATTLE, WA 98144	(-)(-)	GENERAL OPERATING SUPPORT FOR FINANCIAL LITERACY TRAINING & COACHING.	10,00

VENTURES2100 24TH AVE S SUITE 380 SEATTLE, WA 98144	501(C)(3)	GENERAL OPERATING SUPPORT FOR FINANCIAL LITERACY TRAINING & COACHING.	10,00
Total	 	▶ 3a	720,000

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

VINE MAPLE PLACEPO BOX 1092 MAPLE VALLEY, WA 98038	501(C)(3)	OPERTING SUPPORT FOR THE STABLE FAMILIES FINANCIAL LITERACY AND EMPLOYMENT SERVICES PROGRAM.	10,000
WASILLA AREA SENIORS INC	501(C)(3)	GENERAL OPERATING SUPPORT	10,000

		SERVICES PROGRAM.	
WASILLA AREA SENIORS INC 1301 S CENTURY CIRCLE WASILLA, AK 99654	501(C)(3)	GENERAL OPERATING SUPPORT FOR AREA SENIOR PROGRAMS.	10,000
WHATCOM LITERACY COUNCIL PO BOX 1292 BELLINGHAM, WA 98227	501(C)(3)	GENERAL OPERATING SUPPORT FOR LITERACY PROGRAMS INCLUDING TUTORING AND	10,000

WASILLA, AN 99054			
WHATCOM LITERACY COUNCIL PO BOX 1292 BELLINGHAM, WA 98227	( )( )	GENERAL OPERATING SUPPORT FOR LITERACY PROGRAMS INCLUDING TUTORING AND SMALL GROUP CLASSES.	10,000
Total	 	▶ 3a	720,000

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

a Paid during the year			
SHORELINE-LAKE FOREST PARK ARTS COUNCIL 18560 1ST AVE NE	501(C)(3)	OPERATING SUPPORT FOR ARTISTS IN SCHOOLS.	10,000

SHORELINE, WA 98155			
YWCA OF GREATER PORTLAND PO BOX 4587 PORTLAND, OR 97208	501(C)(3)	OPERATING SUPPORT FOR SENIOR SERVICES.	10

YWCA OF GREATER PORTLAND PO BOX 4587 PORTLAND, OR 97208	501(C)(3)	OPERATING SUPPORT FOR SENIOR SERVICES.	10,0
SKAGIT ADULT DAY PROGRAM	501(C)(3)	OPERATING SUPPORT FOR DAY	10,0

YWCA OF GREATER PORTLAND PO BOX 4587 PORTLAND, OR 97208	(-)(-)	OPERATING SUPPORT FOR SENIOR SERVICES.	10,000
SKAGIT ADULT DAY PROGRAM 116 N SKAGIT	( - ) ( - )	OPERATING SUPPORT FOR DAY PROGRAM FOR ADULTS WITH	10,000

PORTLAND, OR 97208		SENIOR SERVICES.	
SKAGIT ADULT DAY PROGRAM 116 N SKAGIT BURLINGTON, WA 98233	( )( )	OPERATING SUPPORT FOR DAY PROGRAM FOR ADULTS WITH DEMENTIA.	10,000

SKAGIT ADULT DAY PROGRAM 116 N SKAGIT BURLINGTON, WA 98233	501(C)(3)	OPERATING SUPPORT FOR DAY PROGRAM FOR ADULTS WITH DEMENTIA.	10,000
Total	 	▶ 3a	720,000

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

or substantial contributor

a Paid during the year			
YWCA SPOKANE930 NORTH MONROE SPOKANE, WA 99201	501(C)(3)	SUPPORT FOR THE WOMEN'S OPPORTUNITY CENTER FOR WOMEN.	10,000

SPORAINE, WA 99201		WOMEN.	
THE COFFEE OASIS837 4TH STREET BREMERTON, WA 98337	501(C)(3)	OPERATING SUPPORT FOR HOPE INC.	10,000
TREEHOUSE	501(C)(3)	GENERAL OPERATING SUPPORT.	10.000

THE COFFEE OASIS837 4TH STREET BREMERTON, WA 98337	501(C)(3)	OPERATING SUPPORT FOR HOPE INC.	10,000
TREEHOUSE 2100 24TH AVE S SUITE 200 SEATTLE, WA 98144	501(C)(3)	GENERAL OPERATING SUPPORT.	10,000

BREMERTON, WA 98337		INC.	
TREEHOUSE 2100 24TH AVE S SUITE 200 SEATTLE, WA 98144	501(C)(3)	GENERAL OPERATING SUPPORT.	10,000
Total	 	▶ 3a	720,000

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

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

	or substantial contributor			
a Paid during the year				
UNITED INDIANS OF ALL TRIBES FOUNDATION PO BOX 99100		501(C)(3)	OPERATING SUPPORT FOR NATIVE ELDERS PROGRAM.	10,000

SEATTLE, WA 98139			
VOLUNTEERS OF AMERICA WESTERN WASHINGTON 2802 BROADWAY EVERETT, WA 98201	( )( )	OPERATING SUPPORT FOR SKY VALLEY SENIOR SERVICES.	10,000

WASHINGTON 2802 BROADWAY EVERETT, WA 98201		VALLEY SENIOR SERVICES.	
VOZ WORKERS' RIGHTS EDUCATION PROJECT 330 SE 11TH AVE	501(C)(3)	OPERATING SUPPORT FOR ENGLISH SKILLS.	10,000

EVERETT, WA 98201			
VOZ WORKERS' RIGHTS EDUCATION PROJECT 330 SE 11TH AVE PORTLAND, OR 97214	501(C)(3)	OPERATING SUPPORT FOR ENGLISH SKILLS.	10,000

Total	 	▶ 3a	720,000	
330 SE 11TH AVE PORTLAND, OR 97214	1			
PROJECT	, , , ,	ENGLISH SKILLS.		
VOZ WORKERS RIGHTS EDUCATION	501(C)(3)	OPERATING SUPPORT FOR	10,00	

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

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

a Paid during the year			
WHATCOM COUNCIL ON AGING 315 HALLECK ST BELLINGHAM. WA 98225	501(C)(3)	OPERATING SUPPORT FOR MEALS ON WHEELS AND MORE.	10,000

, , , , , , , , , , , , , , , , , , ,			
WORDCRAFTERS IN EUGENE 425 LINCOLN ST	501(C)(3)	OPERATING SUPPORT FOR WRITERS IN THE	10,000
EUGENE, OR 97401		SCHOOLS/WITS WRITERS RESIDENCY SERIES.	

425 LINCOLN ST EUGENE, OR 97401		WRITERS IN THE SCHOOLS/WITS WRITERS RESIDENCY SERIES.	
YOUTHCARE2500 NE 54TH STREET	501(C)(3)	OPERATING SUPPORT FOR	

Total .

EUGENE, OR 97401		RESIDENCY SERIES.	
YOUTHCARE2500 NE 54TH STREET SEATTLE, WA 98105	501(C)(3)	OPERATING SUPPORT FOR EDUCATION AND EMPLOYMENT	10,0

		RESIDENCY SERIES.	
YOUTHCARE2500 NE 54TH STREET SEATTLE, WA 98105	( )( )	OPERATING SUPPORT FOR EDUCATION AND EMPLOYMENT PROGRAM.	10,000

720,000

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491321005020
TY 2019 Accounting Fees Scho	edule	
Name:	HARVEST FOUNDATION	
EIN:	91-2065635	

EIN: 91-2005035				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

9,068

18,136

SMITH BUNDAY BERMAN BRITTON, P.S. - FORM 990-PF PREPARATION

DLN: 93491321005020

## Name: HARVEST FOUNDATION

**EIN:** 91-2065635

ldon4ific =	Do to one	Evaloration
Identifier	Return Reference	Explanation
INVESTMENTS CORPORATE STOCK	PART II, LINE 10B	HARVEST FOUNDATIONN/ESTNEMTS. COPRORATE STOCK STATEMENT 9. SUPPORTING SCHEDULE DETAL OF PART II, LINE 108 COST BASIS FAIR MARKET VALLE5000 SHARES CISCO SYSTEMS INC 101,900 239,8 002500 SHARES SOUTHERN CALIFORNIA EDISON 98,946 61,4503000 SHARES CISCO SYSTEMS INC 101,900 239,8 9,6302966 SHARES ATAT 81,839 115,910 2550 SHARES BCE INC 103,704 118,193752 SHARES CHUBB 8 5,626 117,0952007 SHARES CISCO SYSTEMS INC 91,459 62,5550301 SHARES CORNING INC 53,926 58,249338 SHARES DAGEO R.C. 64,251 90,6101155 SHARES DOW INC 65,337 63,213441 SHARES ELILLLY 8, CO 27,713 57,960667 SHARES GENUINE PARTS CO 51,043 70,855125 SHARES HERE LID CR.C. 42,24 9,1361803 SHARES INTEL CORP 71,754 107,910663 SHARES JOHNSON AND JOHNSON 067,779 125,8 862615 SHARES SHORED CORP 58,810 77,4312414 SHARES MCROSON SHARES JOHNSON AND JOHNSON 07,779 125,8 862615 SHARES SIMBERLY CLARK 48,417 83,768939 SHARES MERCK AND CO INC 53,113 85,402491 SHARES MCROSOFT CORP 58,810 77,4312414 SHARES MCRASC AND CO INC 53,113 85,402491 SHARES MCROSOFT CORP 58,810 77,4312414 SHARES MCRASC MCROSOFT CORP 58,810 74,417 83,768939 SHARES MCROSOFT CORP 58,810 74,417 83,768939 SHARES MCROSOFT CORP 58,810 77,4312415 SHARES MCROSOFT CORP 58,920 78,941 78,94

ldentifier	Return Reference	Explanation
	PART II, LINE 10B	VIDIA 16,067 29,17750 SHARES ORACLE CORP 2,396 2,649103 SHARES PARKER HANNIFIN CORP 17,099 21,199280 SHARES PERRIGG CO PLC 15,321 14,4661561 SHARES FIZER INC 61,238 61,160230 SHAR ES PICE INC. SERVES GR 30,459 36,715136 SHARES PROBLED IND C1 4,886 18,156132 SHARES PROBLED AL FINANCIAL GRP 7,267 7,260294 SHARES PROLOGIS INC 21,881 26,20721 SHARES PRUDENTIAL FIN INC 2,039 1,969340 SHARES PUBLS SERVES GR 30,459 36,715136 SHARES PROLOGIS INC 21,881 26,20721 SHARES PRUDENTIAL FIN INC 2,039 1,969340 SHARES PUBLS DES REVISION SERVICES INC 16,88 31 5,55494 ALFRES SHARES PUB SVC ENTERPRISE GRP 15,699 20,077 98 SHARES QUALCOMMINC 5,32 2,8,647143 SHARES CUEST DIAGNOSTICS INC 13,181 15,27178 SHARES REPUBLIC SERVICES INC 16,88 31 5,55494 SHARES ROCKWELL AUTOMATION INC 13,665 19,051451 SHARES SCHWAB CHARLES CORP 17, 146 21,450311 SHARES SEAGATE TECH H.C. 11,308 18,5056 SHARES SEMPRA ENDERGY \$80 0989 SHARES SHERWIN WILLAMS 4,043 5,252308 SHARES STARBUCKS CORP 7,451 11,34213 SHARES STRY KER CORP 2, 134 2,7729224 SHARES STARES STARBUCKS CORP 7,451 11,34213 SHARES STRY KER CORP 2, 134 2,7729224 SHARES SYGOO CORP 12,120 19,161218 SHARES TARGET CORP 12,772 27,950222 SHARES TE CONNECTIVITY LTD 17,340 21,27646 SHARES TEXAS INSTRUMENTS 4,159 5,901157 SHARES TRAVELERS COS INC 19,422 21,50173 SHARES TY SON FOODS INC 5,238 6,646176 SHARES UNITED HALTH ROBUS HLOGS 14,597 15,50440 SHARES UNITED PARCEL SVG 9,293 9,365257 SHARES UNITED HALTH ROBUS HLOGS 14,597 15,50440 SHARES UNITED PARCEL SVG 9,293 9,365257 SHARES UNITED HALTH ROBUS HLOGS 14,597 15,6440 SHARES UNITED PARCEL SVG 9,293 9,365257 SHARES UNITED HALTH ROBUS HLOGS 14,597 15,047 15,

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491321005020
TY 2019 Investments Corporat	e Bonds Sche	dule

\$50,000 COCA-COLA CO 3.2% MATURES 11/1/23

Investments Corporate Bonds Schedule			
Name of Bond	End of Year Book	End of Year Fair	
	Value	Market Value	

\$140,000 MERRILL LYNCH & CO INC. 6.22% MATURES 9/15/2026

\$140,000 BELLSOUTH TELECOM 6.375% MATURES 6/1/2028

**EIN:** 91-2065635

165,452

167,318

52,445

142,126

144,176

50,221

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491321005020
TY 2019 Investments Corporat	e Stock Sche	dule
Name:	HARVEST FOUNDA	ATION

2,297,689

7,415,280

736,638

5,527,432

## **EIN:** 91-2065635

14570 SHS MICROSOFT CORPORATION

SEE STATEMENT

Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491321005020			
TY 2019 Investments Government Obligations Schedule						
Name:	HARVEST FOUN	NDATION				
EIN:	91-2065635					
US Government Securities - End of Year Book Value:		504,656				
US Government Securities - End of Year Fair Market Value:		516,298				
State & Local Government Securities - End of Year Book Value:		0				
State & Local Government Securities - End of Year Fair Market Value:		0				

effie GRAPHIC	print - DC	IONCI	RUCESS	AS	riiea Da	ita -		DLN:	934913	2100502	U
	_	_									

## **TY 2019 Investments - Other Schedule**

Name: HARVEST FOUNDATION

ETNI. 01 206E62E

<b>EIN:</b> 91-2065635					
Investments Other Schedule 2  Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value		
2841 SHS HEALTHPEAK (FORMERLY HCP)	AT COST	79,896	97,927		
1548 SHS WELLTOWER REIT	AT COST	102,849	126,595		
325 SHS VENTAS INC REIT	AT COST	18,309	18,766		
2810 INVESCO FUNDAMENTAL HIGH YIELD	AT COST	53,703	54,121		
143 SHS EQUITY RESIDENTIAL REIT	AT COST	9,497	11,572		
2000 SHS INVESCO S&P 500 EQUAL	AT COST	63,976	231,440		
1000 SHS ISHARES TIPS	AT COST	97,484	116,570		
3400 ISHARES MSCI USA	AT COST	176,099	455,668		
2435 SHS ISHARES 7-10 YEAR	AT COST	252,283	268,386		
3955 SHS ISHARES SHORT-TERM	AT COST	204,853	212,107		
19 SHS PUBLIC STORAGE REIT	AT COST	4,019	4,046		
44719 SHS SERIES R FIXED INC SHS	AT COST	391,859	420,359		
3995 SHS ISHARES 1-3 YR	AT COST	518,811	522,252		

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DL	N: 93491321005020			
TY 2019 Legal Fees Schedule							
Nai	me: HARVEST FO	DUNDATION					
E	<b>IN:</b> 91-2065635						
Category	Amount	Net Investment	Adjusted Net	Disbursements			
Category	Amount	Income	Income	for Charitable Purposes			
JEPPESEN GRAY SAKAI P.S GENERAL	285	0		285			

CORPORATE COUNSELING

DLN: 93491321005020

Name: HARVEST FOUNDATION **EIN:** 91-2065635

Other Assets Schedule						
Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value			
DIVIDENDS RECEIVABLE FROM BROKER	27					
ACCRUED INTEREST RECEIVABLE			4,465			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491321005020		
TY 2019 Other Expenses Schedule						
Name:	HARVEST FOUN	IDATION				
EIN:	91-2065635					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

Other Expenses Schedule							
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
LICENSES & FEES	25	0		25			

456

3,000

456

3,000

OFFICE EXPENSES

MEMBERSHIPS

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491321005020  TY 2019 Other Professional Fees Schedule							
Name: HARVEST FOUNDATION							
EIN: 91-2065635							

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

81,357

11,710

93,067

MERRILL LYNCH - INVESTMENT SERVICES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491321005020		
TY 2019 Taxes Schedule						
Name:	HARVEST FO	DUNDATION				
EIN:	91-2065635					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FOREIGN TAX WITHHOLDING	4,167	4,167		0		

Schedule B	DO NOT PROCESS	As Filed Data -	ula af Camérilaut			OMB No. 1545-0047
(Form 990, 990-EZ,		Schedule of Contributors				
or 990-PF)  Department of the Treasury Internal Revenue Service  Attach to Form 990, 990-EZ, or 990-PF.  Go to <u>www.irs.gov/Form990</u> for the latest information.			2019			
Name of the organization HARVEST FOUNDATION					' '	lentification number
Organization type (che	eck one):				91-2065635	
Filers of:	Section:					
Form 990 or 990-EZ	☐ 501(c)(	) (enter number) c	organization			
	☐ 4947(a)( <sup>2</sup>	1) nonexempt char	ritable trust <b>not</b> treated	as a private founda	ition	
	☐ 527 politi	cal organization				
Form 990-PF	<b>✓</b> 501(c)(3)	exempt private fo	oundation			
	☐ 4947(a)( <sup>2</sup>	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	☐ 501(c)(3)	☐ 501(c)(3) taxable private foundation				
			PF that received, during Complete Parts I and II.			
Special Rules						
under sections 5 received from ar	509(a)(1) and 170(b)	(1)(A)(vi), that che uring the year, tota	g Form 990 or 990-EZ t ecked Schedule A (Form al contributions of the g plete Parts I and II.	n 990 or 990-EZ), P	art II, line 13,	16a, or 16b, and that
during the year,	total contributions of	f more than \$1,000	, or (10) filing Form 990 0 e <i>xclusively</i> for religiou r animals. Complete Par	ıs, charitable, scien		
during the year, If this box is che purpose. Don't o	contributions exclus cked, enter here the complete any of the p	ively for religious, total contributions parts unless the <b>G</b>	, or (10) filing Form 990 charitable, etc., purpose s that were received dur <b>eneral Rule</b> applies to to or more during the yea	es, but no such cor ring the year for an this organization be	ntributions tota exclusively re ecause it recei	aled more than \$1,000. Higious, charitable, etc.
Caution: An organization 990-EZ, or 990-PF), but or on its Form 990PF, F990-EZ, or 990-PF).	t it <b>must</b> answer "No	" on Part IV, line 2	2, of its Form 990; or che	eck the box on line	H of its Form	
For Paperwork Reduction A for Form 990, 990-EZ, or 99		ructions	Cat. No. 30613X	Schedu	ule B (Form 990	, 990-EZ, or 990-PF) (2019)

91-2065635

**Employer identification number** 

Contributors	,	р	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	EDWARD AND MARJORIE RINGNESS  PO BOX 75554  SEATTLE, WA 981750554	\$ 157,590	☐ Person ☐ Payroll ☑ Noncash (Complete Part II for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	contributions.)  (d)  Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ Schedule B (Fr	Person Payroll Noncash (Complete Part II for noncash contributions.) prm 990, 990-EZ, or 990-PF) (2019)

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2019)			Page 4
	rganization FOUNDATION			ployer identification number
Part III	Exclusively religious, charitable, etc., contri than \$1,000 for the year from any one contri organizations completing Part III, enter the t the year. (Enter this information once. See in Use duplicate copies of Part III if additional spa	butor. Complete colum otal of exclusively relignstructions.) ► \$	ns described in s ins (a) through (	ection 501(c)(7), (8), or (10) that total more e) and the following line entry. For
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held
	(e) Transfer of ç Transferee's name, address, and ZIP 4		•	hip of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, and ZI	(e) Transfer		hip of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held
	Transferee's name, address, and ZI	(e) Transfer		hip of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held
	Transferee's name, address, and Zl	(e) Transfer P 4		hip of transferor to transferee
			Scheo	lule B (Form 990, 990-EZ, or 990-PF) (2019)