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.

Fore	calen	idar year 2019 or tax year	Deginning		, and ending		
Nar	ne of	f foundation				A Employer identification	number
C	OL	SON FAMILY F	OUNDATION			93-1326316	
		and street (or P O box number if		B Telephone number			
6	01	S. 74TH PLA	CE, SUITE 1	00		360/213-15	50
City	or t	own, state or province, cou	intry, and ZIP or foreign i	postal code		C If exemption application is p	ending, check here
R	ID	GEFIELD, WA	98642				
G	Check	call that apply:	Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	s, check here
			Final return	Amended return		Foreign organizations me check here and attach co	eeting the 85% test.
			Address change	Name change		check here and attach co	moutation
2 H			_	xempt private foundation	αl	E If private foundation sta	
1 -		ection 4947(a)(1) nonexem arket value of all assets at e		Other taxable private foundating method: X Cash	Accrual	under section 507(b)(1)	
		arket value of all assets at t Part II, col. (c), line 16)	· 1 —	Other (specify)	Acciual	F If the foundation is in a under section 507(b)(1)	
	-\$	6.464	. 564 . (Part I, colu	mn (d), must be on cash bas	IS.)		/(D), check here
	_			(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) (a) Revenue and expenses per books income			income	for charitable purposes (cash basis only)		
	1	Contributions, gifts, grant	s, etc., received	4,368,747.		N/A	
	2		n is not required to altach Sch. B				
	3	Interest on savings and tempo cash investments		26,827.	26,827.		STATEMENT 1
	4	Dividends and interest fro	om securities	124,873.	124,873.	 	STATEMENT 2
		Gross rents					,
	<u> </u>	Net rental income or (loss)	nonte pet en lune 10	<6,156.>		KE	EIVED
23	Ь	Net gain or (loss) from sale of a Gross sales price for all assets on line 6a	1,997,340.	10/2007		l _m r	To To
1 2020	7	Capital gain net income (from l			0.	MUL 19	
Œ	8	Net short-term capital gai	n			IA	100
0	9	Income modifications					1 1 1 T
100	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					
ם ה	i i	Gross profit or (loss)			•		
Ž	11	Other income		4,514,291.	151,700.	-	
≨ —	12	Total Add lines 1 throug		4,514,291.	151,700.		0.
CANNED -	13	Compensation of officers, dire Other employee salaries a					
()	15	Pension plans, employee	· ·				
es		Legal fees	501101115		<u> </u>		
		Accounting fees	STMT 3	1,650.	825.		825.
Expens	c	Other professional fees	STMT 4	22,930.	16,379.		6,551.
ve	17	Interest					
تَّت	18	Taxes	STMT 5	3,209.	<u> </u>		1,168.
	19	Depreciation and depletio	n				·
S O E	20	Occupancy					
e V	21	Travel, conferences, and reprinting and publications	neetings			-	
Sec F	22	Other expenses	STMT 6	50.	0.	 	50.
it ca	24	Total operating and admi					
V uapbo buruates CC ul paviacies Sperating and Administrative Es		expenses. Add lines 13 t		27,839.	17,204.		8,594.
AUG	25	Contributions, gifts, grant	s paid	5,706,500.			8,594. 5,706,500.
	26	Total expenses and disbu	ursements.				
21	<u> </u>	Add lines 24 and 25		5,734,339.	17,204.	ļ <u> </u>	5,715,094.
1 2 ¹ 2020	27	Subtract line 26 from line		<1,220,048.>	وه برغه پر در	ایه خیر قور شدید چه در	The Robbinson
_	l	Excess of revenue over expens Net investment income ()		1,240,040.>	134,496.	 	7 3.4
	ı	Adjusted net income (if ne				N/A	
92350			work Reduction Act Notic	e, see instructions.	<u>^ u</u>	<u> </u>	Form 990-PF (2019)
		у 		1	G-4		(==)

P	art	Balance Sheets Allached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	
Ė		column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	5,680,004.	6,457,092.	6,457,092.
	3	Accounts receivable		•	
		Less: allowance for doubtful accounts ▶			<u> </u>
	4	Pledges receivable ▶	,		
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable		•	•
		Less: allowance for doubtful accounts ▶			
σ.	l a	Inventories for sale or use			
ssets		Prepaid expenses and deferred charges			
As		Investments - U.S. and state government obligations			
		Investments - corporate stock			
	1	Investments - corporate bonds	1,995,840.	0.	0.
			1,333,040.		
	' '	Investments - land, buildings, and equipment basis			
	40	Less accumulated depreciation			
	ŀ	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis			
	ŀ	Less accumulated depreciation	0 860	T 450	F 450
		Other assets (describe INTEREST RECOGNIZED)	8,768.	7,472.	7,472.
	16	Total assets (to be completed by all filers - see the			
	_	instructions. Also, see page 1, item I)	7,684,612.	6,464,564.	6,464,564.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
iabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
ت	22	Other liabilities (describe >)		·	
	23	Total liabilities (add lines 17 through 22)	0.	0.	Value (-
		Foundations that follow FASB ASC 958, check here			
(A)		and complete lines 24, 25, 29, and 30			· ·
nces	24	Net assets without donor restrictions	7,684,612.	6,464,564.	
Ē	25	Net assets with donor restrictions			
or Fund Bala		Foundations that do not follow FASB ASC 958, check here ▶			
Ĕ		and complete lines 26 through 30.			
Ē	26	Capital stock, trust principal, or current funds			
	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
set	28	Retained earnings, accumulated income, endowment, or other funds		——————————————————————————————————————	
As	29	Total net assets or fund balances	7,684,612.	6,464,564.	
Net Assets	29	Total liet assets of fully balances	7,004,012.	0/101/5011	
	30	Total liabilities and net assets/fund balances	7,684,612.	6,464,564.	
_			•	0/101/0010	
<u> P</u>	art	Analysis of Changes in Net Assets or Fund Ba	liances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	29 ^r		
		t agree with end-of-year figure reported on prior year's return)		1	7,684,612.
		amount from Part I, line 27a		2	<1,220,048.>
		increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	6,464,564.
		eases not included in line 2 (itemize)		5	0,404,304.
			dumo (h) lina 20	6	6,464,564.
6	rotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	numm (b), mic 29		Form 990-PF (2019)
		_			FULLI 220-1-1 (2019)

Part IV	Capital Gains a	nd Losse	s for Tax on Inv	vestment	ncome					
			low acquired - Purchase - Donation	(c) Da (mo.	te acquired ., day, yr.)	(d) Date sold (mo., day, yr.)				
1a PUBI	LICLY TRADED	SECUR	ITIES				P			
b PUBI	LICLY TRADED SECURITIES P			ļ						
С						ļ				
<u>d</u>						1		<u> </u>		
е						۲.,		<u></u>		
(e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale) Gain or (loss plus (f) minus	(g))				
a	1,397,494.				1,400,32					<2,832.>
b	599,846.				603,17	٥.				<3,324.>
<u> </u>								 -		
<u>d</u>						\dashv				
Comple	to only for accets chawge	a asin in colur	on (b) and owned by t	ha foundation	on 12/21/60			(I) Counc	(Cal (b) ages	
Comple	te only for assets showing			·					i (Col. (h) gain ut not less tha	
(i) FN	MV as of 12/31/69		ljusted basis of 12/31/69		cess of col. (1) col. (j), if any			Loss	es (from col. (h))
							• • • • • • • • • • • • • • • • • • • •			<2,832.>
<u>a</u> b										<3,324.>
		.								(0) 52217
d					 		'			
e										
	ain net income or (net cap	pıtal loss)	If gain, also enter			}	2			<6,156.>
3 Net shor	t-term capital gain or (los	s) as defined i								
	Iso enter in Part I, line 8,			- (o).		}				
If (loss),	enter -0- in Part I, line 8					الب	3		N/A	
Part V	Qualification Ur	nder Sect	ion 4940(e) for	Reduced	lax on Net	inve	stment in	come		
(For optiona	I use by domestic private	foundations s	ubject to the section 4	940(a) tax on	net investment in	come.)			
If section 49	940(d)(2) applies, leave th	us part blank.								
						- 10				Yes X No
	ndation liable for the secti foundation doesn't qualify			, , .	•	100?				Yes A No
	e appropriate amount in e					ntries	·		··	
- Littor til	(a)	don donamin to	(b)		or making any or	(c)		-		(d)
Calendar	Base periód years year (or tax year beginnin	na in) A	djusted qualifying dist	tributions	Net value of no			ets	Distrit	(d) pution ratio rided by col. (c))
Calcilidai	2018	9/	9.74	8,505.		11	,568,06	0.	(00:: (5) 0::	.842709
	2017			7,151.			,459,56			.566063
	2016			6,451.			,507,46			.319679
	2015			3,120.	·····		,062,00		-	.293247
	2014		9,62	9,797.		22	,860,99	6.		.421233
	. =									
2 Total of	line 1, column (d)							2		2.442931
3 Average	distribution ratio for the 5	5-year base pe	riod - divide the total c	on line 2 by 5.0	, or by the number	er of y	ears	ŀ		
the found	dation has been in existen	ice if less than	5 years					3		.488586
								ľ		
4 Enter the	e net value of noncharitable	le-use assets f	or 2019 from Part X, I	ine 5				4		<u>6,403,231</u>
								ļ		
5 Multiply	line 4 by line 3							5		<u>3,128,529.</u>
										4 045
6 Enter 1%	of net investment incom-	e (1% of Part	l, line 27b)					6		1,345.
										2 100 054
7 Add lines	s 5 and 6							7		3,129,874.
8 Enter au	alifying distributions from	Part XII line	4					8		5,715,094.
•	is equal to or greater than	•		1b, and comp	lete that part usin	ıg a 19	% tax rate.		.	
	Part VI instructions.	,		.,		J				

923521 12-17-19

	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	48 -	see in	strii	tion	raye 4
	"		,	Ju ul	, (1011)	 -
1 2	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				1,3	45
0	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	_1_			1,3	45.
_	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)					0.
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2			1,3	
	Add lines 1 and 2 Subtatle A (cooper) to a (demantic posture 4047(s)(4) tracte and to able to a detailed a strong solve others and a cooper solve of the strong solve	3 4			1,3	0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)				1,3	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		-	1,5	-
6	Credits/Payments: 2019 estimated tax payments and 2018 overpayment credited to 2019 1,680.					ĺ
	2019 estimated tax payments and 2018 overpayment credited to 2019 Exempt foreign organizations - tax withheld at source 6b 0.					ļ
	Tax paid with application for extension of time to file (Form 8868) 6c 6c 0.					
	Backup withholding erroneously withheld 6d 0.	.				
	Total credits and payments. Add lines 6a through 6d	7			1,6	80
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			1,0	0.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		_		<u> </u>
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			3	35.
	Enter the amount of line 10 to be: Credited to 2020 estimated tax	11				0.
Pa	rt VII-A Statements Regarding Activities	11 1				<u> </u>
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene i	n			Yes	No
	any political campaign?	•		1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definit	ion	Ì	1b		X
Ī	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.					
С	Did the foundation file Form 1120-POL for this year?		ľ	1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		ľ			
	(1) On the foundation. \blacktriangleright \$ 0 . (2) On foundation managers. \blacktriangleright \$ 0 .					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			٠	-	'
	managers. ▶ \$ 0.					'
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		İ	2		X
	If "Yes," attach a detailed description of the activities.		- 1			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		i		,	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		Ī	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		[4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N.	/A [4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T					-
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state I	aw				
	remain in the governing instrument?		ļ	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		ļ	7	X	
				´.		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.					' 1
_	OR The state of th					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		ļ	<u>.</u> . 8b	 _	
_	of each state as required by General Instruction G? If "No," attach explanation				X	
9	9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar					
40	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV		}	9		X
111	Did any persons become substantial contributors during the tay year? If "yes," attach a schedule listing their names and addresses			10		

Pa	rt VII-A Statements Regarding Activities (continued)			
		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		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
12	If "Yes," attach statement. See instructions	12		х
10	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	х	<u> </u>
13	Website address N/A			
44	The books are in care of ► THE FOUNDATION Telephone no. ► 360/2	3-1	550	
14	Located at 601 S. 74TH PLACE, SUITE 100, RIDGEFIELD, WA ZIP+4 9			
		70 42	_	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	N	/A	لسسا
	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,	<u> </u>	163	X
	securities, or other financial account in a foreign country?	16	$\vdash \vdash$	<u> </u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	'	·	
D.	foreign country ► irt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
F 6		$\overline{}$	Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	163	140
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? Yes X No			,
		l' .		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			1
	a disqualified person?	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? X Yes No	1.		١
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	1	ţ,	37
	(5) Transfer any income or assets to a disqualified person (or make any of either available	· '	1 .	
	for the benefit or use of a disqualified person)?	-	. ,	' '
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	Ι.	-	-
	If the foundation agreed to make a grant to or to employ the official for a period after	+		١
	termination of government service, if terminating within 90 days.)	1.		
t	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		igsqcup	· -
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		X
	Organizations relying on a current notice regarding disaster assistance, check here	. page		·
C	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?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	. '	S .	
	defined in section 4942(j)(3) or 4942(j)(5)):		,	
a	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines		ا, ا	
	6d and 6e) for tax year(s) beginning before 2019?	1		
	If "Yes," list the years	1		l . `
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	1 1	<i>.</i> •	ĺ '.
	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.) N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	1 .	١. ا	١ ٠ ،
t	of "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after],		
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	1,.	.	1
	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,	1'		1
	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3b		
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	,		بر
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X

Page 6

Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be R	equired _{(contin}	ued)			
5a During the year, did the foundation pay or incur any amount to:				`	Yes	No
'(1) Carry on propaganda, or otherwise attempt to influence legislation (section	on 4945(e))?	Y	es 🗓 No	,		, ,
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire				'	
any voter registration drive?			es X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es 🗶 No	· `	``	
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section			_ , ,	. '`	
4945(d)(4)(A)? See instructions			es 🗓 No	· '	·	,
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f		- 1	•		
the prevention of cruelty to children or animals?			es 🗶 No	'		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur		n Regulations	NT / N			
section 53.4945 or in a current notice regarding disaster assistance? See instr			N/A	5b		
Organizations relying on a current notice regarding disaster assistance, check		and				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		_ ,				
expenditure responsibility for the grant?	1		es L No	1		٠, ,
If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to	and promitime on					
a personal benefit contract?	pay premiums on		es X No		•	-
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	nerconal henefit contract?		68 [21] 140	6b		X
If "Yes" to 6b, file Form 8870.	personal benefit contract.		l			
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?		es X No		٠,	
b If "Yes," did the foundation receive any proceeds or have any net income attrib			N/A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than			-,,,		£ 19	35.2
excess parachute payment(s) during the year?	+ ,, • • • , • • • · · · · · · · · · · ·		es X No		·, :	, ,
Part VIII Information About Officers, Directors, Trust	ees, Foundation Mar			•		
Paid Employees, and Contractors						
List all officers, directors, trustees, and foundation managers and t	their compensation.		···			
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plan and deferred	s (e	e) Exp	ense other
(a) Name and address	to position	enter -0-)	compensation	a	illowar	nces
		_	_			
SEE STATEMENT 8		0.	0.	•		0.
	_			1		
	4					
				-		
	_					
	_					
· · · · · · · · · · · · · · · · · · ·		-				
	4					
	4]			
Compensation of five highest-paid employees (other than those inc	oluded on line 1) If none	ntor "NONE "	1			
. Compensation of the mignest-paid employees (other trial triose int	(b) Title, and average	INCHE.	(d) Contributions to	le) Fxn	ense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	a acc	e) Expe count, illowar	other
NONE	devoted to position		compensation	a	iiiUwai	1062
NONE	-					
				+		
	1	1				
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*****		 	, ,	+-		
	1	1				
				\top		
	7					
otal number of other employees paid over \$50,000						0

Total. Add lines 1 through 3

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 457,579. a Average monthly fair market value of securities 1a 6,043,163. b Average of monthly cash balances 1b c Fair market value of all other assets 10 6,500,742 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 6,500 Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 6,403,231. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 320,162 Minimum investment return Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here
and do not complete this part.) 320,162. Minimum investment return from Part X, line 6 1 1,345. Tax on investment income for 2019 from Part VI, line 5 Income tax for 2019. (This does not include the tax from Part VI.) 2c 1,345 Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1 3 3 4 Recoveries of amounts treated as qualifying distributions Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 318,817 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 5,715,094. 1a b Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 3 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b 4 5,715,094. Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 1,345. income. Enter 1% of Part I, line 27b Adjusted qualifying distributions Subtract line 5 from line 4 6 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

· · · · · · · · · · · · · · · · · · ·				
	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
	Corpus	Tears prior to 2010	2010	2010
1 Distributable amount for 2019 from Part XI,			i	318,817.
line 7				310,017.
2 Undistributed income, if any, as of the end of 2019			0.	
a Enter amount for 2018 only			0.	
b Total for prior years:		0.		
5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	·			
3 Excess distributions carryover, if any, to 2019:				
a From 2014 8,488,209.		•		
b From 2015 4,880,020.				
c From 2016 4,991,870.				
d From 2017 8,496,789.				
e From 2018 9,173,456.	26 020 244			
f Total of lines 3a through e	36,030,344.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: ► \$ 5,715,094.		!	_	
a Applied to 2018, but not more than line 2a			0.	
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.			040 04-
d Applied to 2019 distributable amount				318,817.
e Remaining amount distributed out of corpus	5,396,277.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount				•
must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	41,426,621.			
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.		
e Undistributed income for 2018. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract	,			
lines 4d and 5 from line 1. This amount must	<i>;</i>		-	
be distributed in 2020				0.
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	8,488,209.			
9 Excess distributions carryover to 2020	- , , ,			·
Subtract lines 7 and 8 from line 6a	32,938,412.			
10 Analysis of line 9:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
a Excess from 2015 4,880,020.				
b Excess from 2016 4,991,870.				
c Excess from 2017 8,496,789.				
d Excess from 2018 9,173,456.				•
e Excess from 2019 5, 396, 277.		t.		
CENTRO II CITTED TO				

923581 12-17-19

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

c Any submission deadlines:

Part XVI-A	Analysis	of Income-F	Producing	Activities
------------	----------	-------------	-----------	------------

Enter gross amounts unless otherwise indicated.	Unrelated	business income		d by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code	-	Code		
a	-		+		
b			 		
<u> </u>			+		
d			+		
e	-		 -		
	-		++-		
g Fees and contracts from government agencies			 		
2 Membership dues and assessments					
3 Interest on savings and temporary cash	1		14	26 927	
Investments			14	26,827. 124,873.	
4 Dividends and interest from securities	, ,		14,		
5 Net rental income or (loss) from real estate:	'		+	· · · · · · · · · · · · · · · · · · ·	· · ·
a Debt-financed property			+-+		
b Not debt-financed property			+ +	+	
6 Net rental income or (loss) from personal					
property 7. Other investment income	+		-		
7 Other investment income					
8 Gain or (loss) from sales of assets other			18	<6,156.>	
than inventory	 		+ 10	(0,130.)	 -
Net income or (loss) from special events Gross profit or (loss) from sales of inventory	 	 	+		
11 Other revenue:	-		 		
a					
c	1 1				.
	I I				
e	-				
12 Subtotal. Add columns (b), (d), and (e)	-	0.	1	145,544.	0.
13 Total. Add line 12, columns (b), (d), and (e)	<u>. </u>	 		13	145,544.
(See worksheet in line 13 instructions to verify calculations.)					
	to the Asses	nlishment of Ev	omnt D	urnaga	
Part XVI-B Relationship of Activities	to the Accon	ipiisiinent oi Ex	empte	urposes	
Line No Explain below how each activity for which inc	ome is reported in	column (e) of Part XVI-A	contribut	ed importantly to the accomp	lishment of
▼ the foundation's exempt purposes (other than					
		•			
,					

Form 99		N FAMILY				93-13		Pa	ige 13
Part			sfers to a	nd Transactions ar	nd Relationsh	ips With Noncha	ritable		
4 0	Exempt Organ		of the fallows	as with any other executation	an decembed in cost	·on 501(a)		Yes	No
	d the organization directly or ind her than section 501(c)(3) orga				ni described in sect	1011 30 1(6)			
-	ansfers from the reporting found								
	Cash	ation to a nononant	orompt or	gamzanon on			1a(1)		Х
	Other assets						1a(2)		Х
	her transactions:								
	Sales of assets to a noncharit	able exempt organiza	ition				1b(1)		Х
٠,	Purchases of assets from a no						1b(2)		Х
	Rental of facilities, equipment		·				1b(3)		Х
(4)	Reimbursement arrangements	5					1b(4)		Х
(5)	Loans or loan guarantees						1b(5)		X
(6)	Performance of services or m	embership or fundra	ising solicitatio	ons			1b(6)	ļ	Х
c Sh	aring of facilities, equipment, m	ailing lists, other ass	ets, or paid em	ployees			1c	<u></u>	X
	he answer to any of the above is							sets,	
	services given by the reporting			ed less than fair market valu	e in any transaction	or sharing arrangement,	show in		
	lumn (d) the value of the goods,				T (4) =				
(a) Line r	(b) Amount involved	(c) Name o		e exempt organization	(0) Descriptio	n of transfers, transactions, an	id sharing arr	angemer	nts
		<u> </u>	N/A						
					+				
		 						 .	
	 								
						· · · · · · · · · · · · · · · · · · ·			
							·		
ın	the foundation directly or indired section 501(c) (other than section Yes," complete the following scl	on 501(c)(3)) or in s		or more tax-exempt organi	zations described		Yes	X	No
	(a) Name of or			(b) Type of organization	}	(c) Description of relatio	nship		
	N/A								
٥:	Under penalties of perjury, I declare and belief the true, correct, and co					an any knowledge	May the IRS		
Sign He″a	1 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	AXL SO	0 1	6/10/20	► Treas		return with the	? See ins	er Str
111 6	- Color in	WILLE		19181302		JEN'L	X Yes	:_	J No
	Signature of officer or truste Print/Type preparer's n	 	Preparer's s	Date	Title Date	Check If PTII	NI		
	ANGELA M.		Tiparer 35	ignature .	50.0	self- employed	•		
Paid	CPA	HODDIIG,	Shanb	· Malunti	امدا دراها	· · · I	01274	011	
Prep		OVE. MIJELI	ER & S	WANK, P.C.	12/12/00	Firm's EIN ▶ 93-			
l lea i	Thin shall by Oak	, 	~ ~ · · ·			1		- ·	

Phone no. (503) 581-7788

Firm's address ▶ 475 COTTAGE STREET NE, SUITE 200

SALEM, OR 97301

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.

OMB No 1545-0047

2019

Name of the organization

COLSON FAMILY FOUNDATION

Employer identification number

93-1326316

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		X 501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
Note: O	nly a section 501(c)(s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions					
General	Rule						
X	=	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special	Rules						
	sections 509(a)(1) a any one contributor	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 ir, 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, line 1. Complete Parts I and II					
	year, total contribut	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the ty to children or animals. Complete Parts I, II, and III.					
	year, contributions is checked, enter he purpose Don't com	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., inplete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year.					
but it mi	ust answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 he filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)					

Name of organization

Employer identification number

C	OLSON	FAMILY	FOUNI	NOITAC

93-1326316

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	HUGH D. COLSON CHARITABLE LEAD ANNUITY TRUST 601 S. 74TH PLACE, SUITE 100 RIDGEFIELD, WA 98642	\$ <u>4,368,747</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)

Name of organization

Employer identification number

COLSON FAMILY FOUNDATION

93-1326316

Part II	Noncash 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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) . FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Employer identification number Name of organization COLSON FAMILY FOUNDATION 93-1326316 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

923454 11-06-19

•									
FORM 990-PF INTERES	ET ON SAV	INGS A	ND TEM	PORARY	CASH	IN	VESTMENTS	ST	ATEMENT 1
SOURCE			(A) REVENUE PER BOOKS		NET	(B) NET INVESTMENT INCOME		(C) ADJUSTED NET INCOME	
WELLS FARGO			2	6,827.			26,827.		
TOTAL TO PART I, LINE 3			26,827.			26,827.			
FORM 990-PF	DIVIDEN	DS ANI	O INTER	EST FF	OM SE	CUR:	ITIES	ST	ATEMENT 2
SOURCE	GROSS AMOUNT		CAPITAL GAINS IVIDENDS		(A) REVENUI		(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOME
WELLS FARGO	124,87	3.		0.	124,8	73.	124,873.		
TO PART I, LINE 4	124,87	3.		0.	124,8	73.	124,87	 3.	
FORM 990-PF		AC	CCOUNTI	NG FEE	is			ST	ATEMENT 3
DESCRIPTION		EXP	(A) ENSES BOOKS	NET I	B) NVEST- INCOM		(C) ADJUSTED NET INCOM		(D) CHARITABLE PURPOSES
ACCOUNTING	-		1,650.		82	 5.			825.
TO FORM 990-PF, PG	1, LN 16B		1,650.		82	— - 5• — =		 =	825.
FORM 990-PF		OTHER	PROFES	SIONAI	FEES			ST	ATEMENT 4
DESCRIPTION		EXPI	(A) ENSES BOOKS	NET 1	B) NVEST		(C) ADJUSTED NET INCOM		(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMEN GRANT ADMINISTRATION			16,379. 6,551.		16,37	9. 0.		 -	0. 6,551.
TO FORM 990-PF, PG	1, LN 16C		22,930.		16,37	9.	•		6,551.

FORM 990-PF	TAX	ES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
CT-12 FILING FEE FEDERAL TAX	1,168. 2,041.	0.		1,168.	
TO FORM 990-PF, PG 1, LN 18	3,209.	0.		1,168.	
<u> </u>	OTHER EXPENSES		STATEMENT 6		
FORM 990-PF	OTHER E	XPENSES	S	татемент 6	
DESCRIPTION	OTHER E (A) EXPENSES PER BOOKS	XPENSES (B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	TATEMENT 6 (D) CHARITABLE PURPOSES	
	(A) EXPENSES	(B) NET INVEST-	(C) ADJUSTED	(D) CHARITABLE	

FORM 990-PF	OTHER ASSETS	STATEMENT 7	
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
INTEREST RECOGNIZED, NOT YET RECEIVED	8,768.	7,472.	7,472.
TO FORM 990-PF, PART II, LINE 15	8,768.	7,472.	7,472.

	ST OF OFFICERS, DI FOUNDATION MANAG	STATEMENT 8		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
BARTON G. COLSON 601 S 74TH PLACE, SUITE 100 RIDGEFIELD, WA 98642	PRESIDENT 1.00	0.	0.	0.
BRADLEY A. COLSON 601 S 74TH PLACE, SUITE 100 RIDGEFIELD, WA 98642	VICE PRESIDENT 1.00	0.	0.	0.
NORMAN L. BRENDEN 601 S 74TH PLACE, SUITE 100 RIDGEFIELD, WA 98642	VICE PRESIDENT 1.00	0.	0.	0.
PATRICK KENNEDY 601 S 74TH PLACE, SUITE 100 RIDGEFIELD, WA 98642	VICE PRESIDENT 1.00	0.	0.	0.
BRUCE D. THORN 601 S 74TH PLACE, SUITE 100 RIDGEFIELD, WA 98642	SECRETARY 1.00	0.	0.	0.
SUSAN HAIDER 601 S 74TH PLACE, SUITE 100 RIDGEFIELD, WA 98642	TREASURER 1.00	0.	0.	0.
BONNIE COLSON 601 S 74TH PLACE, SUITE 100 RIDGEFIELD, WA 98642	DIRECTOR 1.00	0.	. 0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	5, PART VIII	0.	0.	0.