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Form 990-PF

Department of the Treasury
Internal Revenue Service

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

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

OMB No. 1545-0052

2019

Open to Public Inspection

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

Name of foundation
GLASSYBABY WHITE LIGHT FUND

Number and street (or P.O. box number if mail is not delivered to street address)
3406 E UNION STREET

City or town, state or province, country, and ZIP or foreign postal code
SEATTLE, WA 98122

G Check all that apply:

☐ Initial return

☒ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

H Check type of organization:

☒ Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust

☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \blacktriangleright \$ 300,975

J Accounting method:

☒ Cash

☐ Accrual

☐ Other (specify) _____
(Part I, column (d) must be on cash basis.)

A Employer identification number
47-2335650

B Telephone number (see instructions)
(206) 518-9060

C If exemption application is pending, check here ☐

D 1. Foreign organizations, check here..... ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ... ☐

E If private foundation status was terminated under section 507(b)(1)(A), check here ☐

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

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) (see instructions).)

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	1,490,645		
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B			
	3 Interest on savings and temporary cash investments			
	4 Dividends and interest from securities			
	5a Gross rents			
	b Net rental income or (loss) _____			
	6a Net gain or (loss) from sale of assets not on line 10			
	b Gross sales price for all assets on line 6a _____			
	7 Capital gain net income (from Part IV, line 2)		0	
	8 Net short-term capital gain			
	9 Income modifications			
	10a Gross sales less returns and allowances _____			
b Less: Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
12 Total. Add lines 1 through 11	1,490,645	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	31,678	0	31,678
	14 Other employee salaries and wages			
	15 Pension plans, employee benefits	2,380	0	2,380
	16a Legal fees (attach schedule)	632	0	632
	b Accounting fees (attach schedule)	6,100	0	6,100
	c Other professional fees (attach schedule)			
	17 Interest			
	18 Taxes (attach schedule) (see instructions)			
	19 Depreciation (attach schedule) and depletion			
	20 Occupancy			
	21 Travel, conferences, and meetings			
	22 Printing and publications			
	23 Other expenses (attach schedule)	5,481	0	5,481
	24 Total operating and administrative expenses. Add lines 13 through 23	46,271	0	46,271
	25 Contributions, gifts, grants paid	1,147,304		1,147,304
	26 Total expenses and disbursements. Add lines 24 and 25	1,193,575	0	1,193,575
	27 Subtract line 26 from line 12:			
	a Excess of revenue over expenses and disbursements	297,070		
	b Net investment income (if negative, enter -0-)		0	
c Adjusted net income (if negative, enter -0-)				

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 11289X

Form 990-PF (2019)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	3,905	300,975	300,975
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	3,905	300,975	300,975	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	0	0	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	3,905	300,975	
	29 Total net assets or fund balances (see instructions)	3,905	300,975	
30 Total liabilities and net assets/fund balances (see instructions) .	3,905	300,975		

Part III Analysis of Changes in Net Assets or Fund Balances		
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	3,905
2 Enter amount from Part I, line 27a	2	297,070
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	300,975
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	300,975

Part IV Capital Gains and Losses for Tax on Investment Income

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

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

2 Capital gain net income or (net capital loss) <div style="float: right; border-left: 1px solid black; padding-left: 5px;"> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div>	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	3	

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

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

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

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

☐ Yes☐ No

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

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018			
2017			
2016			
2015			
2014			

2 Total of line 1, column (d)	2	
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	
5 Multiply line 4 by line 3	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	
8 Enter qualifying distributions from Part XII, line 4	8	

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

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

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

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>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.</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ _____ (2) On foundation managers. ▶ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>	5	No
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 law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ CA, OR, WA _____		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i>	8b	No
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 year 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	10	No

Part VII-A Statements Regarding Activities (continued)

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		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW.GLASSYBABYWHITELIGHTFUND.ORG	13	Yes	
14	The books are in care of DAVID ROBINSON Telephone no. (206) 518-9060			

Located at **3406 E UNION STREET SEATTLE WA**ZIP+4 **98122**

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

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

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

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

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

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

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
LEE RHODES 3406 E UNION STREET SEATTLE, WA 98122	PRESIDENT 0.40	0	0	0
ELIZA CUMMINGS 3406 E UNION STREET SEATTLE, WA 98122	EXECUTIVE DIRECTOR 20.00	31,678	0	0
PEGGY VANCE 3406 E UNION STREET SEATTLE, WA 98122	DIRECTOR 0.40	0	0	0
DAVID ROBINSON 3406 E UNION STREET SEATTLE, WA 98122	TREASURER 2.00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000. ▶ 0

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

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

Part IX-A Summary of Direct Charitable Activities

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

	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	0

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:		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	127,694
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	127,694
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	127,694
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	1,915
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	125,779
6	Minimum investment return. Enter 5% of line 5.	6	6,289

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.)

1	Minimum investment return from Part X, line 6.	1	6,289
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	6,289
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	6,289
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	6,289

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	1,193,575
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,193,575
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,193,575

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
1 Distributable amount for 2019 from Part XI, line 7				6,289
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			0	
b Total for prior years: 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2019:				
a From 2014.				
b From 2015.				
c From 2016.				
d From 2017.				
e From 2018.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ <u>1,193,575</u>				
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			
d Applied to 2019 distributable amount.				6,289
e Remaining amount distributed out of corpus	1,187,286			
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	1,187,286			
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 instructions.			0	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must 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).	1,193,575			
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:				
a Excess from 2015.				
b Excess from 2016.				
c Excess from 2017.				
d Excess from 2018.				
e Excess from 2019.				

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

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

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

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

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

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

1 Information Regarding Foundation Managers:

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

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

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

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

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

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

c Any submission deadlines:

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

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	1,147,304
b <i>Approved for future payment</i>				
Total			3b	0

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue:						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
2 Membership dues and assessments. . . .						
3 Interest on savings and temporary cash investments						
4 Dividends and interest from securities. . . .						
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.						
8 Gain or (loss) from sales of assets other than inventory						
9 Net income or (loss) from special events:						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue: a _____						
b _____						
c _____						
d _____						
e _____						
12 Subtotal. Add columns (b), (d), and (e). . .			0		0	0
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)				13		0

[illegible]

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

[illegible]

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

b If "Yes," complete the following schedule.

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

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	*****	2020-07-14	*****
	_____ Signature of officer or trustee	_____ Date	_____ Title

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

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	EMINA O CRESSWELL CPA		2020-07-14		P01217304
	Firm's name ▶ MOSS ADAMS LLP				Firm's EIN ▶ 91-0189318
	Firm's address ▶ 999 THIRD AVENUE SUITE 2800 SEATTLE, WA 98104				Phone no. (206) 302-6500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
UNIVERSITY OF WASHINGTON MEDICINE ADVANCEMENT BOX 358045 SEATTLE, WA 98195	NONE	PC	GENERAL SUPPORT	50,546
WILDLIFE CONSERVATION NETWORK 209 MISSISSIPPI ST SAN FRANCISCO, CA 94107	NONE	PC	GENERAL SUPPORT	60,000
GOD'S LOVE WE DELIVER 166 AVENUE OF THE AMERICAS NEW YORK, NY 10013	NONE	PC	GENERAL SUPPORT	61,250
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
SEATTLE CHILDREN'S HOSPITAL FOUNDATION PO BOX 5371 SEATTLE, WA 98145	NONE	PC	GENERAL SUPPORT	55,732
SEATTLE SEAHAWKS WOMEN'S ASSOCIATION 12 SEAHAWKS WAY RENTON, WA 98056	NONE	PC	GENERAL SUPPORT	25,000
SEATTLE CANCER CARE ALLIANCE PO BOX 19023 SEATTLE, WA 98109	NONE	PC	GENERAL SUPPORT	50,725
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FRED HUTCHINSON CANCER RESEARCH CENTER 1100 FAIRVIEW AVENUE N J5-200 SEATTLE, WA 98109	NONE	PC	GENERAL SUPPORT	50,000
MEMORIAL SLOAN-KETTERING CANCER CENTER 633 THIRD AVENUE 28TH FLOOR NEW YORK, NY 10017	NONE	PC	GENERAL SUPPORT	50,000
PHOENIX CHILDRENS HOSPITAL FOUNDATION 1919 E THOMAS RD PHOENIX, AZ 85016	NONE	PC	GENERAL SUPPORT	45,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
UCSF FOUNDATION PO BOX 45339 SAN FRANCISCO, CA 94145	NONE	PC	GENERAL SUPPORT	15,000
AMERICAN CANCER SOCIETY 2120 FIRST AVE N SEATTLE, WA 98109	NONE	PC	GENERAL SUPPORT	40,314
RAINIER VALLEY FOOD BANK 4205 RAINIER AVENUE S SEATTLE, WA 98188	NONE	PC	GENERAL SUPPORT	25,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
92ND STREET YOUNG MENS & YOUNG WOMENS HEBREW ASSOCIATION 1395 LEXINGTON AVE NEW YORK, NY 10128	NONE	PC	GENERAL SUPPORT	25,000
CERES COMMUNITY PROJECT PO BOX 1562 SEBASTOPOL, CA 95473	NONE	PC	GENERAL SUPPORT	25,000
GIRL RISING 114 WEST 26TH ST 7TH FLOOR NEW YORK, NY 10001	NONE	PC	GENERAL SUPPORT	25,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SEATTLE COLLEGES FOUNDATION 1500 HARVARD AVE SEATTLE, WA 98122	NONE	PC	GENERAL SUPPORT	15,000
MEMORIAL SLOAN KETTERING CANCER CENTER 885 2ND AVE 8TH FL NEW YORK, NY 10017	NONE	PC	GENERAL SUPPORT	10,000
MAKE-A-WISH ALASKA WASHINGTON 811 1ST AVE SEATTLE, WA 98104	NONE	PC	GENERAL SUPPORT	10,291
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CENTER FOR URBAN EDUCATION ABOUT SUSTAINABLE AGRICULTURE ONE FERRY BUILDING SAN FRANCISCO, CA 94111	NONE	PC	GENERAL SUPPORT	20,000
POTLUCK IN THE PARKPO BOX 12443 PORTLAND, OR 97212	NONE	PC	GENERAL SUPPORT	20,000
HARLEM MOTHERS SAVEPO BOX 2110 NEW YORK, NY 10027	NONE	PC	GENERAL SUPPORT	17,500
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WOMENS CANCER RESOURCE CENTER 2908 ELLSWORTH ST BERKELEY, CA 94705	NONE	PC	GENERAL SUPPORT	17,198
LUCILE PACKARD FOUNDATION 400 HAMILTON AVE PALO ALTO, CA 94301	NONE	PC	GENERAL SUPPORT	16,000
DANA-FARBER CANCER INSTITUTE 10 BROOKLINE PLACE WEST 6TH FLOOR BROOKLINE, MA 02445	NONE	PC	GENERAL SUPPORT	10,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BRIDGE THE GAP COLLEGE PREP PO BOX 1390 SAUSALITO, CA 94965	NONE	PC	GENERAL SUPPORT	12,500
EVERY MOTHER COUNTS 180 VARICK STREET NEW YORK, NY 10014	NONE	PC	GENERAL SUPPORT	10,000
MAYDAY FOUNDATION 3403 STEAMBOAT ISLAND RD NW OLYMPIA, WA 98502	NONE	PC	GENERAL SUPPORT	10,608
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MAKE-A-WISH FOUNDATION OF ILLINOIS 640 NORTH LASALLE DRIVE NO 280 CHICAGO, IL 60654	NONE	PC	GENERAL SUPPORT	10,291
IMERMAN ANGELS 205 W RANDOLPH ST 19TH FL CHICAGO, IL 60606	NONE	PC	GENERAL SUPPORT	10,048
CANDLELIGHTERS FOR CHILDREN WITH CANCER 6600 SW 92ND AVE PORTLAND, OR 97223	NONE	PC	GENERAL SUPPORT	10,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DOERNBECHER CHILDRENS HOSPITAL FOUNDATION 1121 SW SALMON ST STE 201 PORTLAND, OR 97205	NONE	PC	GENERAL SUPPORT	10,000
LOVE YOUR BRAINPO BOX 4409 WHITE RIV JCT, VT 05001	NONE	PC	GENERAL SUPPORT	10,000
MD ANDERSON CANCER CENTER PO BOX 4486 HOUSTON, TX 77210	NONE	GOV	GENERAL SUPPORT	10,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
MOTHERS GRACE 11440 N SAINT ANDREWS WAY SCOTTSDALE, AZ 85254	NONE	PC	GENERAL SUPPORT	10,000
TONY LA RUSSA'S ANIMAL RESCUE FOUNDATION (ARF) 2890 MITCHELL DRIVE WALNUT CREEK, CA 94598	NONE	PC	GENERAL SUPPORT	5,000
VIRGINIA THURSTON HEALING GARDEN 145 BOLTON RD HARVARD, MA 01451	NONE	PC	GENERAL SUPPORT	5,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GLEASON INITIATIVE FOUNDATION PO BOX 24493 NEW ORLEANS, LA 70184	NONE	PC	GENERAL SUPPORT	3,246
CHARLOTTE MAXWELL CLINIC 411 30TH STREET SUITE 508 OAKLAND, CA 94609	NONE	PC	GENERAL SUPPORT	3,000
LEUKEMIA & LYMPHOMA SOCIETY 5601 6TH AVE S 182 SEATTLE, WA 98108	NONE	PC	GENERAL SUPPORT	5,755
Total ▶ 3a				1,147,304

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NORTHWEST STRAITS FOUNDATION 1155 N STATE STREET BELLINGHAM, WA 98225	NONE	PC	GENERAL SUPPORT	7,000
ROSE HAVEN CICPO BOX 10405 PORTLAND, OR 97296	NONE	PC	GENERAL SUPPORT	2,000
PANDAS INTERNATIONAL PO BOX 620335 LITTLETON, CO 80162	NONE	PC	GENERAL SUPPORT	6,745
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WHATCOM HOSPICE FOUNDATION 2901 SQUALICUM PARKWAY BELLINGHAM, WA 98225	NONE	PC	GENERAL SUPPORT	796
GLOBAL SURGICAL OUTREACH 600 BROADWAY STE 280 SEATTLE, WA 98122	NONE	PC	GENERAL SUPPORT	3,000
DOUGY CENTER INCPO BOX 86852 PORTLAND, OR 97286	NONE	PC	GENERAL SUPPORT	5,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MUTTVILLEPO BOX 410207 SAN FRANCISCO, CA 94141	NONE	PC	GENERAL SUPPORT	5,240
CANINE THERAPY CORPS 3918 W FULLERTON AVE CHICAGO, IL 60647	NONE	PC	GENERAL SUPPORT	5,147
ATHLETES FOR KIDS 3020 ISSAQUAH PINE LAKE ROAD SAMMAMISH, WA 98075	NONE	PC	GENERAL SUPPORT	5,128
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
OREGON DOG RESCUE 6700 SW NYBERG ST TUALATIN, OR 97062	NONE	PC	GENERAL SUPPORT	5,075
JERUSALEM PEACEBUILDERS 3300 CHIMNEY ROCK RD STE 301 HOUSTON, TX 77056	NONE	PC	GENERAL SUPPORT	5,000
BAY AREA HOSPITAL 1775 THOMPSON RD COOS BAY, OR 97420	NONE	PC	GENERAL SUPPORT	5,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CULINARY CARE 2023 W ST PAUL AVE APT 3 CHICAGO, IL 60647	NONE	PC	GENERAL SUPPORT	5,000
DONEY MEMORIAL PET CLINIC 2212 QUEEN ANNE AVE N 702 SEATTLE, WA 98109	NONE	PC	GENERAL SUPPORT	5,000
FOUNDATION FOR SPECIAL SURGERY 10221 RIVER ROAD UNIT 60702 POTOMAC, MD 20854	NONE	PC	GENERAL SUPPORT	5,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MICHELLES LOVEPO BOX 544 SCAPPOOSE, OR 97056	NONE	PC	GENERAL SUPPORT	5,000
THE UILANI FUND1510 KING ST SANTA CRUZ, CA 95060	NONE	PC	GENERAL SUPPORT	5,000
UPOWERPO BOX 21866 SEATTLE, WA 98111	NONE	PC	GENERAL SUPPORT	5,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ALS THERAPY DEVELOPMENT FOUNDATION 300 TECHNOLOGY SQUARE CAMBRIDGE, MA 02139	NONE	PC	GENERAL SUPPORT	4,989
SEATTLE ANIMAL SHELTER FOUNDATION PO BOX 99006 SEATTLE, WA 98139	NONE	PC	GENERAL SUPPORT	4,797
NORTHWESTS CHILD1823 N 85TH ST SEATTLE, WA 98103	NONE	PC	GENERAL SUPPORT	3,809
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SKAGIT VALLEY HOSPITAL FOUNDATION PO BOX 1376 MOUNT VERNON, WA 98273	NONE	PC	GENERAL SUPPORT	3,359
PALO ALTO HIGH SCHOOL FIERY ARTS BOOSTER CLUB 50 EMBARCADERO RD PALO ALTO, CA 94301	NONE	PC	GENERAL SUPPORT	4,000
CENTER FOR CHRONIC ILLNESS PO BOX 31193 SEATTLE, WA 98103	NONE	PC	GENERAL SUPPORT	3,197
Total ▶ 3a				1,147,304

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LITTLE PEOPLE OF AMERICA INC PO BOX 2612 WOODINVILLE, WA 98072	NONE	PC	GENERAL SUPPORT	3,219
HALLIESTRONG FOUNDATION 1804 71ST STREET DOWNERS GROVE, IL 60516	NONE	PC	GENERAL SUPPORT	3,195
THE TRAIL YOUTHPO BOX 1196 SNOQUALMIE, WA 98045	NONE	PC	GENERAL SUPPORT	3,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BIG LOVE CANCER CARE SERVICES PO BOX 90818 AUSTIN, TX 78709	NONE	PC	GENERAL SUPPORT	3,120
MEDIC ONE FOUNDATION 11747 NE 1ST ST 310 BELLEVUE, WA 98005	NONE	PC	GENERAL SUPPORT	3,000
BIRTHDAY DREAMSPO BOX 2722 RENTON, WA 98056	NONE	PC	GENERAL SUPPORT	3,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CANCER NAVIGATORS 3 CENTRAL PLAZA 415 ROME, GA 30161	NONE	PC	GENERAL SUPPORT	3,000
COURAGEOUS PARENTS NETWORK 21 ROCHESTER RD NEWTON, MA 02458	NONE	PC	GENERAL SUPPORT	3,000
CRAFT EMERGENCY RELIEF FUND 535 STONE CUTTERS WAY STE 202 MONTPELIER, VT 05602	NONE	PC	GENERAL SUPPORT	3,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NORTHWEST WINE BENEFIT FOUNDATION 1201 WESTERN AVENUE SEATTLE, WA 98101	NONE	PC	GENERAL SUPPORT	3,000
SAN MATEO COUNTY BLUE STAR MOMS PO BOX 100 SAN CARLOS, CA 94070	NONE	PC	GENERAL SUPPORT	3,000
UC BERKELEY PUBLIC SERVICE CENTER 2465 BANCROFT WAY BERKELEY, CA 94720	NONE	PC	GENERAL SUPPORT	3,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SEND ITPO BOX 1841 TRUCKEE, CA 96161	NONE	PC	GENERAL SUPPORT	2,539
UCSF FOUNDATIONPO BOX 45339 SAN FRANCISCO, CA 94145	NONE	PC	GENERAL SUPPORT	2,500
LAKE WASHINGTON UNITED METHODIST CHURCH 7525 132 AVE NE KIRKLAND, WA 98033	NONE	PC	GENERAL SUPPORT	495
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
4 PAWS FOR ABILITY207 DAYTON AVE XENIA, OH 45385	NONE	PC	GENERAL SUPPORT	2,000
AUSTEN EVERETT FOUNDATION 500 YALE AVE NORTH SEATTLE, WA 98109	NONE	PC	GENERAL SUPPORT	2,000
DOWN SYNDROME NETWORK OF OREGON PO BOX 1379 LAKE OSWEGO, OR 97035	NONE	PC	GENERAL SUPPORT	2,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
DRAVET SYNDROME FOUNDATION PO BOX 3026 CHERRY HILL, NJ 08034	NONE	PC	GENERAL SUPPORT	2,000
MIAMI UNIVERSITY FOUNDATION 725 E CHESTNUT STREET OXFORD, OH 45056	NONE	PC	GENERAL SUPPORT	2,000
MORRISSEY-COMPTON EDUCATIONAL CENTER 595 PRICE AVE REDWOOD CITY, CA 94063	NONE	PC	GENERAL SUPPORT	2,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ORPHAN KITTEN CLUBPO BOX 633 SPRING VALLEY, CA 91976	NONE	PC	GENERAL SUPPORT	2,000
RESCUE 4 ALLPO BOX 10379 SPOKANE, WA 99209	NONE	PC	GENERAL SUPPORT	2,000
SEACHANGE AGENCY2333 CLARK AVE VENICE, CA 90291	NONE	PC	GENERAL SUPPORT	2,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
STARWORKS CENTER FOR CREATIVE ENTERPRISE PO BOX 159 STAR, NC 27356	NONE	PC	GENERAL SUPPORT	2,000
LYNDEN CHRISTIAN SCHOOL 417 LYNCS DR LYNDEN, WA 98264	NONE	PC	GENERAL SUPPORT	1,952
WASHINGTON KIDS IN TRANSITION 3204 NE 198TH PL LAKE FOREST PARK, WA 98155	NONE	PC	GENERAL SUPPORT	1,935
Total ▶ 3a				1,147,304

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
EVERGREENHEALTH FOUNDATION 12040 NE 128TH STREET KIRKLAND, WA 98034	NONE	PC	GENERAL SUPPORT	1,272
ADAS CAFE3700 MIDDLEFIELD RD PALO ALTO, CA 94303	NONE	PC	GENERAL SUPPORT	1,500
SUNNY SKYS ANIMAL RESCUE 1102 E MAIN PUYALLUP, WA 98372	NONE	PC	GENERAL SUPPORT	1,500
Total ▶ 3a				1,147,304

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MARY'S PLACE SEATTLEPO BOX 1711 SEATTLE, WA 98111	NONE	PC	GENERAL SUPPORT	1,683
BONNIE J ADDARIO LUNG CANCER FOUNDATION 1100 INDUSTRIAL ROAD SAN CARLOS, CA 94070	NONE	PC	GENERAL SUPPORT	1,689
THE BLOOM PROJECT 100 SW MILLER ROAD PORTLAND, OR 97225	NONE	PC	GENERAL SUPPORT	1,500
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PROGRESSIVE ANIMAL WELFARE SOCIETY 15305 44TH AVE W LYNNWOOD, WA 98087	NONE	PC	GENERAL SUPPORT	1,500
THE FOUNDATION FOR LIVING BEAUTY 234 N EL MOLINO AVE SUITE 202 PASADENA, CA 91101	NONE	PC	GENERAL SUPPORT	1,575
SEATTLE ANGELS4616 25TH AVE NE SEATTLE, WA 98105	NONE	PC	GENERAL SUPPORT	1,500
Total ▶ 3a				1,147,304

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MY JEWELS OF HOPEPO BOX 2818 POULSBO, WA 98370	NONE	PC	GENERAL SUPPORT	1,512
AFTER SCHOOL MATTERS INC 66 E RANDOLPH ST CHICAGO, IL 60601	NONE	PC	GENERAL SUPPORT	1,500
BARNACLES AND BEES 865 6TH ST SUITE 370 BREMERTON, WA 98337	NONE	PC	GENERAL SUPPORT	1,500
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BEAT NB CANCER FOUNDATION INC 13014 N DALE MABRY HWY SUITE 256 TAMPA, FL 33618	NONE	PC	GENERAL SUPPORT	1,500
CRAYON INITIATIVE 540 GLASGOW CIRCLE DANVILLE, CA 94526	NONE	PC	GENERAL SUPPORT	1,500
CYSTIC FIBROSIS FOUNDATION 6931 ARLINGTON ROAD BETHESDA, MD 20814	NONE	PC	GENERAL SUPPORT	1,500
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
DUWARA CONSCIOUSNESS FOUNDATION 603 SEAGAZE DR 197 OCEANSIDE, CA 92054	NONE	PC	GENERAL SUPPORT	1,500
EASTSIDE BABY CORNERPO BOX 712 ISSAQUAH, WA 98027	NONE	PC	GENERAL SUPPORT	1,500
FAMILY HOUSE INC 540 MISSION BAY BLVD N SAN FRANCISCO, CA 94158	NONE	PC	GENERAL SUPPORT	1,500
Total ▶ 3a				1,147,304

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FOOTPRINTS OF FIGHT 16915 SE 272ND ST SUITE 100-68 COVINGTON, WA 98042	NONE	PC	GENERAL SUPPORT	1,500
HUNGER INTERVENTION PROGRAM 3841 NE 123RD ST SEATTLE, WA 98125	NONE	PC	GENERAL SUPPORT	1,500
LA GUINEA PIG RESCUE 10856 FARRALONE AVE CHATSWORTH, CA 91311	NONE	PC	GENERAL SUPPORT	1,500
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LAMPLIGHTER MINISTRIES INTERNATIONAL 23 STATE ST MOUNT MORRIS, NY 14510	NONE	PC	GENERAL SUPPORT	1,500
MY GOOD DEED 5151 CALIFORNIA AVE STE 100 IRVINE, CA 92617	NONE	PC	GENERAL SUPPORT	1,500
NETWORK FOR TEACHING ENTREPRENEURSHIP 120 WALL STREET 18TH FL NEW YORK, NY 10005	NONE	PC	GENERAL SUPPORT	1,500
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SEATTLE CENTRAL AREA FOOD PROGRAMS PO BOX 81 MEDINA, WA 98039	NONE	PC	GENERAL SUPPORT	1,500
SHRINERS HOSPITALS FOR CHILDREN - PORTLAND 3101 SW SAM JACKSON PARK RD PORTLAND, OR 97239	NONE	PC	GENERAL SUPPORT	1,500
SIMPLE & JUST 2213 QUEEN ANNE AVE N SEATTLE, WA 98109	NONE	PC	GENERAL SUPPORT	1,500
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
STOLENYOUTHPO BOX 296 SEATTLE, WA 98111	NONE	PC	GENERAL SUPPORT	1,500
ALL STARS HELPING KIDS 4675 STEVENS CREEK BLVD 125 SANTA CLARA, CA 95051	NONE	PC	GENERAL SUPPORT	1,329
EASTSIDE ACADEMY 1717 BELLEVUE WAY NE BELLEVUE, WA 98004	NONE	PC	GENERAL SUPPORT	1,326
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BAINBRIDGE SCHOOLS FOUNDATION 8489 MADISON AVENUE NE BAINBRIDGE ISLAND, WA 98110	NONE	PC	GENERAL SUPPORT	1,263
ISSAQUAH SCHOOLS FOUNDATION PO BOX 835 ISSAQUAH, WA 98027	NONE	PC	GENERAL SUPPORT	1,182
BLANCHET HOUSE OF HOSPITALITY 310 NW GLISAN ST PORTLAND, OR 97209	NONE	PC	GENERAL SUPPORT	1,174
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ISLAND HOSPITAL HEALTH FOUNDATION 1211 24TH STREET ANACORTES, WA 98221	NONE	PC	GENERAL SUPPORT	986
GOOD SAMARITAN HOSPITAL 737 FAWCETT AVE TACOMA, WA 98402	NONE	PC	GENERAL SUPPORT	970
COLLEGE SUCCESS FOUNDATION 1200 12TH AVENUE S SUITE 830 SEATTLE, WA 98144	NONE	PC	GENERAL SUPPORT	1,068
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ASSISTANCE LEAGUE OF THE EASTSIDE 7345 164TH AVE NE REDMOND, WA 98052	NONE	PC	GENERAL SUPPORT	841
HARBOR ASSOCIATION OF VOLUNTEERS FOR ANIMALS PO BOX 243 RAYMOND, WA 98577	NONE	PC	GENERAL SUPPORT	1,057
PROVIDENCE ST MARY FOUNDATION 401 W POPLAR WALLA WALLA, WA 99362	NONE	PC	GENERAL SUPPORT	875
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BELLEVUE BOTANICAL GARDEN SOCIETY PO BOX 40536 BELLEVUE, WA 98015	NONE	PC	GENERAL SUPPORT	1,005
COLON CLUB749 PERRY HIGHWAY PITTSBURGH, PA 15229	NONE	PC	GENERAL SUPPORT	1,000
EVERYONE FOR VETERANSPO BOX 1081 ISSAQUAH, WA 98027	NONE	PC	GENERAL SUPPORT	1,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FRED FINCH YOUTH CENTER 3800 COOLIDGE AVE OAKLAND, CA 94602	NONE	PC	GENERAL SUPPORT	1,000
GLOBAL COMMUNITY INSTITUTE 1701 ELLIS ST STE 215 BELLINGHAM, WA 98225	NONE	PC	GENERAL SUPPORT	1,000
HILLTOP ARTISTS IN RESIDENCE PROGRAM PO BOX 6829 TACOMA, WA 98417	NONE	PC	GENERAL SUPPORT	1,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LOVING ANGEL SERVICE DOGS INC 3734 SUGAR LEO RD SAINT GEORGE, UT 84790	NONE	PC	GENERAL SUPPORT	1,000
PORTUGUESE WATER DOG FOUNDATION INC PO BOX 203 PARKER FORD, PA 19457	NONE	PC	GENERAL SUPPORT	1,000
SECOND CITY CANINE RESCUE PO BOX 721094 ROSELLE, IL 60172	NONE	PC	GENERAL SUPPORT	1,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE BIG FIX 8927 SHERMAN VALLEY RD SW OLYMPIA, WA 98512	NONE	PC	GENERAL SUPPORT	1,000
WORLDWIDE ORPHANS FOUNDATION 515 VALLEY STREET MAPLEWOOD, NJ 07040	NONE	PC	GENERAL SUPPORT	1,000
YOUNG SURVIVAL COALITION INC 75 BROAD ST SUITE 409 NEW YORK, NY 10004	NONE	PC	GENERAL SUPPORT	1,000
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ST JUDE CHILDRENS RESEARCH HOSPITAL INC 4738 11TH AVE NE SUITE 102 SEATTLE, WA 98105	NONE	PC	GENERAL SUPPORT	936
BABIES OF HOMELESSNESSPO BOX 147 BOTHELL, WA 98041	NONE	PC	GENERAL SUPPORT	951
ST FRANCIS SHELTER 1820 BERRY STREET SE SALEM, OR 97302	NONE	PC	GENERAL SUPPORT	912
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICAN LUNG ASSOCIATION 5601 6TH AVE S SEATTLE, WA 98108	NONE	PC	GENERAL SUPPORT	903
SIGN FRACTURE CARE INTERNATIONAL 451 HILLS ST STE B RICHLAND, WA 99354	NONE	PC	GENERAL SUPPORT	856
SEATTLE CHILDREN'S HOSPITAL PO BOX 5371 SEATTLE, WA 98145	NONE	PC	GENERAL SUPPORT	369
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GAIAS TEMPLE 6869 WOODLAWN AVE NE SEATTLE, WA 98115	NONE	PC	GENERAL SUPPORT	748
KENNEDY CATHOLIC HIGH SCHOOL 140 S 140TH ST BURIEN, WA 98168	NONE	PC	GENERAL SUPPORT	503
HOMEWARD PET ADOPTION CENTERS 13132 NE 177TH PL WOODINVILLE, WA 98072	NONE	PC	GENERAL SUPPORT	528
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
YOUNG WOMENS CHRISTIAN ASSOCIATION 818 W YAKIMA AVE YAKIMA, WA 98902	NONE	PC	GENERAL SUPPORT	712
BOYS AND GIRLS CLUBS OF KING COUNTY 4120 86TH AVE SE MERCER ISLAND, WA 98040	NONE	PC	GENERAL SUPPORT	696
6DOGREES RESCUEPO BOX 16186 SEATTLE, WA 98116	NONE	PC	GENERAL SUPPORT	675
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DIEPCPO BOX 585 DUVALL, WA 98109	NONE	PC	GENERAL SUPPORT	663
SEABROOK COMMUNITY FOUNDATION PO BOX 423 PACIFIC BEACH, WA 98571	NONE	PC	GENERAL SUPPORT	633
COURT ADVOCATES FOR CHILDREN FOR KITTITAS CO 421 N PEARL ST STE 208 ELLENSBURG, WA 98926	NONE	PC	GENERAL SUPPORT	644
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ALIFEYOUNITED1223 W BRUNEAU AVE KENNEWICK, WA 99336	NONE	PC	GENERAL SUPPORT	625
ANIMAL HOSPICE END OF LIFE AND PALLIATIVE CARE PROJECT 2826 108TH AVE SE BELLEVUE, WA 98004	NONE	PC	GENERAL SUPPORT	625
METRO PORTLAND NEW CAR DEALERS CHARITABLE FOUNDATION 777 NE 7TH AVE PORTLAND, OR 97232	NONE	PF	SUPPORT LOCAL OREGON NON PROFIT GRANT MAKING REFLECTING OUR MISSION OF HOPE AND HEALING FOR PEOPLE, ANIMALS, AND THE PLANET.	621
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MICHAEL J FOX FOUNDATION FOR PARKINSONS RESEARCH PO BOX 4777 NEW YORK, NY 10163	NONE	PC	GENERAL SUPPORT	594
OUR LADY OF FATIMA PARISH 3307 W DRAVUS ST SEATTLE, WA 98199	NONE	PC	GENERAL SUPPORT	550
MID-COLUMBIA REGIONAL BALLET PO BOX 326 RICHLAND, WA 99352	NONE	PC	GENERAL SUPPORT	543
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LIFEWIREPO BOX 6398 BELLEVUE, WA 98008	NONE	PC	GENERAL SUPPORT	501
PROVIDENCE HEALTH & SERVICES WASHINGTON 4831 35TH AVE SW SEATTLE, WA 98126	NONE	PC	GENERAL SUPPORT	483
JESUIT HIGH SCHOOL 9000 SW BEAVHILLS HWY PORTLAND, OR 97225	NONE	PC	GENERAL SUPPORT	477
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JORDAN ROBERT MANN FOUNDATION INC 4824 W 90TH ST PRAIRIE VLG, KS 66207	NONE	PC	GENERAL SUPPORT	477
JUBILEE REACH14200 SE 13TH PL BELLEVUE, WA 98007	NONE	PC	GENERAL SUPPORT	450
JUNIOR LEAGUE OF YAKIMA PO BOX 2087 YAKIMA, WA 98907	NONE	PC	GENERAL SUPPORT	442
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SEATTLE HUMANE SOCIETY 13212 SE EASTGATE WAY BELLEVUE, WA 98005	NONE	PC	GENERAL SUPPORT	54
CAROL MILGARD BREAST CENTER 4525 S 19TH ST TACOMA, WA 98405	NONE	PC	GENERAL SUPPORT	431
LAKE CHELAN ROTARY COMMUNITY & INTERNATIONAL FUND PO BOX 601 CHELAN, WA 98816	NONE	PC	GENERAL SUPPORT	196
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TINY TREES220 2ND AVE S SEATTLE, WA 98104	NONE	PC	GENERAL SUPPORT	414
TOYS FOR TOTS38 HAWLEY STREET BINGHAMTON, NY 13901	NONE	PC	GENERAL SUPPORT	262
SEATTLE CHILDRENS HOSPITAL GUILD ASSOCIATION BOX 15971 SEATTLE, WA 98115	NONE	PC	GENERAL SUPPORT	396
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ANGEL WINGS FOUNDATION PO BOX 7350 BONNEY LAKE, WA 98391	NONE	PC	GENERAL SUPPORT	258
TREEHOUSE2100 24TH AVE S SEATTLE, WA 98144	NONE	PC	GENERAL SUPPORT	356
MEADOWDALE SPORTS BOOSTER CLUB 17716 66TH PL W LYNNWOOD, WA 98037	NONE	PC	GENERAL SUPPORT	375
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HOPELINKPO BOX 3577 REDMOND, WA 98073	NONE	PC	GENERAL SUPPORT	371
PAWS OF BAINBRIDGE ISLAND AND NORTH KITSAP PO BOX 10811 BAINBRIDGE ISLAND, WA 98110	NONE	PC	GENERAL SUPPORT	57
MENDED HEARTS OF SPOKANE 932 W 32ND AVENUE SPOKANE, WA 99203	NONE	PC	GENERAL SUPPORT	369
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PARENT PROJECT MUSCULAR DYSTROPHY PPMD 401 HACKENSACK AVE HACKENSACK, NJ 07601	NONE	PC	GENERAL SUPPORT	364
WELLNESS HOUSE 210 SOUTH 11TH AVENUE YAKIMA, WA 98902	NONE	PC	GENERAL SUPPORT	357
JDRF NW1700 7TH AVE SUITE 1600 SEATTLE, WA 98101	NONE	PC	GENERAL SUPPORT	336
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICAN RED CROSSPO BOX 3097 SEATTLE, WA 98144	NONE	PC	GENERAL SUPPORT	218
CARSON KOLZIG FOUNDATION RESPONDING TO AUTISM CENTER 4206 W 24TH AVE SUITE 101 KENNEWICK, WA 99338	NONE	PC	GENERAL SUPPORT	317
JEWISH GENETIC DISEASES CENTER OF GREATER PHOENIX 12701 N SCOTTSDALE RD STE 201 SCOTTSDALE, AZ 85254	NONE	PC	GENERAL SUPPORT	317
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SECOND HARVEST FOOD BANK OF SANTA CLARA AND SAN MATEO COUNTIES 750 CURTNER AVENUE SAN JOSE, CA 95125	NONE	PC	GENERAL SUPPORT	311
SERVICES FOR THE UNDERSERVED 305 7TH AVENUE NEW YORK, NY 10001	NONE	PC	GENERAL SUPPORT	297
HILLSBOROUGH AUXILIARY TO PENINSULA FAMILY SERVICE 24 SECOND AVE SAN MATEO, CA 94401	NONE	PC	GENERAL SUPPORT	294
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ROTARY CLUB OF BELLINGHAM FOUNDATION 2200 VINING ST BELLINGHAM, WA 98229	NONE	PC	GENERAL SUPPORT	285
MARIN GENERAL HOSPITAL FOUNDATION 44 VIA SAN FERNANDO TIBURON, CA 94920	NONE	PC	GENERAL SUPPORT	284
FOX ISLAND CHAPEL PRESERVATION SOCIETY PO BOX 545 FOX ISLAND, WA 98333	NONE	PC	GENERAL SUPPORT	282
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BEYOND TYPE1 1001 LAUREL STREET SUITE B SAN CARLOS, CA 94070	NONE	PC	GENERAL SUPPORT	273
LA SALLE HIGH SCHOOL YAKIMA 3000 LIGHTNING WAY UNION GAP, WA 98903	NONE	PC	GENERAL SUPPORT	273
VASHON COMMUNITY CARE FOUNDATION PO BOX 2114 VASHON, WA 98070	NONE	PC	GENERAL SUPPORT	271
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NEUROTHERAPEUTIC PEDIATRICTHERAPIES 610 HIGH ST OREGON CITY, OR 97045	NONE	PC	GENERAL SUPPORT	270
PANCREATIC CANCER ACTION NETWORK 1500 ROSECRANS AVE SUITE 200 MANHATTAN BEACH, CA 90266	NONE	PC	GENERAL SUPPORT	264
THE CANBY CENTER681 SW 2ND AVE CANBY, OR 97013	NONE	PC	GENERAL SUPPORT	264
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BERKELEY HUMANE2700 9TH ST BERKELEY, CA 94710	NONE	PC	GENERAL SUPPORT	261
JEM FAMILY GUILD 9337 AVON ALLEN RD BOW, WA 98232	NONE	PC	GENERAL SUPPORT	258
CHELAN VALLEY HOPEPO BOX 635 CHELAN, WA 98816	NONE	PC	GENERAL SUPPORT	252
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
RECOVERY CAFE2022 BOREN AVENUE SEATTLE, WA 98121	NONE	PC	GENERAL SUPPORT	245
NORTHWEST HARVESTPO BOX 12272 SEATTLE, WA 98102	NONE	PC	GENERAL SUPPORT	196
SUMNER COMMUNITY FOOD BANK PO BOX 475 SUMNER, WA 98390	NONE	PC	GENERAL SUPPORT	242
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HIGHLINE SCHOOLS FOUNDATION 15675 AMBAUM BLVD SW BURIEN, WA 98166	NONE	PC	GENERAL SUPPORT	231
YWCA WALLA WALLA213 S 1ST AVE WALLA WALLA, WA 99362	NONE	PC	GENERAL SUPPORT	154
LAKESIDE BOOSTER CLUBPO BOX 253 NINE MILE FLS, WA 99026	NONE	PC	GENERAL SUPPORT	156
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FRIENDS OF NORMANDY PARK FOUNDATION PO BOX 48183 BURIEN, WA 98166	NONE	PC	GENERAL SUPPORT	214
SNOHOMISH EDUCATION FOUNDATION PO BOX 1312 SNOHOMISH, WA 98291	NONE	PC	GENERAL SUPPORT	219
FOUNDATION FOR THE BALTIMORE LEADERSHIP SCHOOL FOR YOUNG WOMEN 128 W FRANKLIN ST BALTIMORE, MD 21201	NONE	PC	GENERAL SUPPORT	216
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FAMILY HOPE1224 PEQUENA LANE LA CANADA, CA 91011	NONE	PC	GENERAL SUPPORT	210
CENTER FOR DOMESTIC PEACE734 A ST SAN RAFAEL, CA 94901	NONE	PC	GENERAL SUPPORT	204
HUMANE SOCIETY FOR TACOMA & PIERCE COUNTY 2608 CENTER ST TACOMA, WA 98409	NONE	PC	GENERAL SUPPORT	204
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TOGETHER WE RISE 580 W LAMBERT RD STE A BREA, CA 92821	NONE	PC	GENERAL SUPPORT	204
SPIRIT THERAPEUTIC RIDING CENTER 1051 SORENSON RD ELLENSBURG, WA 98926	NONE	PC	GENERAL SUPPORT	202
JORDAN BINION PROJECT 27701 152ND AVE E GRAHAM, WA 98338	NONE	PC	GENERAL SUPPORT	201
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ANIMAL AID INC 5335 SW 42ND AVENUE PORTLAND, OR 97221	NONE	PC	GENERAL SUPPORT	198
LAKEWOOD EDUCATIONAL FOUNDATION A CHARITABLE FOUNDATION PO BOX 55 N LAKEWOOD, WA 98259	NONE	PC	GENERAL SUPPORT	191
MUSTANGS FOR MUSTANGS 1203 PROSSER AVE PROSSER, WA 99350	NONE	PC	GENERAL SUPPORT	189
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CANINE COMPANIONS FOR INDEPENDENCE PO BOX 446 SANTA ROSA, CA 95402	NONE	PC	GENERAL SUPPORT	183
CHURCH HEALTH CENTER OF MEMPHIS INC 1350 CONCOURSE AVE STE 142 MEMPHIS, TN 38104	NONE	PC	GENERAL SUPPORT	183
ST ALPHONSUS PARISH SCHOOL 5816 15TH AVENUE NW SEATTLE, WA 98107	NONE	PC	GENERAL SUPPORT	182
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WINDERMERE FOUNDATION 1151 FAIRVIEW AVE N STE 105 SEATTLE, WA 98109	NONE	PC	GENERAL SUPPORT	179
BLUE SKIES FOR CHILDREN 2505 CEDARWOOD SUITE 5 BELLINGHAM, WA 98225	NONE	PC	GENERAL SUPPORT	177
YES FOUNDATIONPO BOX 2 SAN ANSELMO, CA 94979	NONE	PC	GENERAL SUPPORT	177
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ENCOMPASS NORTHWEST 1407 BOALCH AVE NW NORTH BEND, WA 98045	NONE	PC	GENERAL SUPPORT	30
SUSAN G KOMEN BREAST CANCER FOUNDATION OREGON AND SW WASHINGTON 1500 SW FIRST AVENUE PORTLAND, OR 97201	NONE	PC	GENERAL SUPPORT	174
MOTLEY ZOO ANIMAL RESCUE 23316 NE REDMOND FALL CITY RD REDMOND, WA 98053	NONE	PC	GENERAL SUPPORT	173
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JOHN L SCOTT FOUNDATION 1700 NW GILMAN BLVD SUITE 300 ISSAQUAH, WA 98027	NONE	PC	GENERAL SUPPORT	168
ST JOSEPH SCHOOL - ISSAQUAH 220 MT PARK BLVD SW ISSAQUAH, WA 98027	NONE	PC	GENERAL SUPPORT	168
KING'S SCHOOLS 19303 FREMONT AVE N SEATTLE, WA 98133	NONE	PC	GENERAL SUPPORT	165
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SPECIAL K RANCH INCPO BOX 479 COLUMBUS, MT 59019	NONE	PC	GENERAL SUPPORT	160
BOYS AND GIRLS CLUBS OF SNOHOMISH COUNTY 8223 BROADWAY SUITE 100 EVERETT, WA 98203	NONE	PC	GENERAL SUPPORT	159
ST MARY'S CATHEDRAL OF THE IMMACULATE CONCEPTION 1716 NW DAVIS STREET PORTLAND, OR 97209	NONE	PC	GENERAL SUPPORT	159
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WENATCHEE VALLEY HUMANE SOCIETY 1474 S WENATCHEE AVE WENATCHEE, WA 98801	NONE	PC	GENERAL SUPPORT	156
NORTHWEST ORGANIZATION FOR ANIMAL HELP PO BOX 1603 STANWOOD, WA 98292	NONE	PC	GENERAL SUPPORT	54
OAK HARBOR MUSIC FESTIVAL PO BOX 987 OAK HARBOR, WA 98277	NONE	PC	GENERAL SUPPORT	153
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ARTS FOUNDATION OF LAKE OSWEGO PO BOX 369 LAKE OSWEGO, OR 97034	NONE	PC	GENERAL SUPPORT	150
BELLEVUE LIFESPRINGPO BOX 53203 BELLEVUE, WA 98015	NONE	PC	GENERAL SUPPORT	150
FABULOUS WOMEN OF SONOMA COUNTY 18 IVERSON WAY PETALUMA, CA 94952	NONE	PC	GENERAL SUPPORT	150
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
OPEN ARMS PERINATAL SERVICES 2524 16TH AVE S RM 207A SEATTLE, WA 98144	NONE	PC	GENERAL SUPPORT	150
KIWANIS CLUB OF ANACORTES WA FOUNDATION 6436 DOW LANE ANACORTES, WA 98221	NONE	PC	GENERAL SUPPORT	148
THE BIG TABLEPO BOX 372 SPOKANE, WA 99210	NONE	PC	GENERAL SUPPORT	143
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ALTRUSA INTERNATIONAL FOUNDATION OF LAKE WASHINGTON EAST 12819 SE 38TH ST PMB 579 BELLEVUE, WA 98006	NONE	PC	GENERAL SUPPORT	142
COMMUNITY CANCER FUND 510 W RIVERSIDE AVE SUITE 207 SPOKANE, WA 99201	NONE	PC	GENERAL SUPPORT	141
MILLIONAIR CLUB SEATTLE 2515 WESTERN AVENUE SEATTLE, WA 98121	NONE	PC	GENERAL SUPPORT	141
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
VANESSA BEHAN CRISIS NURSERY 1004 E 8TH AVE SPOKANE, WA 99202	NONE	PC	GENERAL SUPPORT	141
MCMINNVILLE SCHOOL DISTRICT 40 EDUCATION FOUNDATION 1500 BAKER ST MCMINNVILLE, OR 97128	NONE	PC	GENERAL SUPPORT	136
HOSPICE AUSTIN 4107 SPICEWOOD SPRINGS RD STE 100 AUSTIN, TX 78759	NONE	PC	GENERAL SUPPORT	135
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PUYALLUP MAIN STREET ASSOCIATION 319 S MERIDIAN PUYALLUP, WA 98371	NONE	PC	GENERAL SUPPORT	135
ROOM CIRCUS MEDICAL CLOWNING PO BOX 15434 SEATTLE, WA 98115	NONE	PC	GENERAL SUPPORT	131
CANDLELIGHTERS CHILDHOOD CANCER FOUNDATION OF WESTERN WASHINGTON PO BOX 3966 BELLEVUE, WA 98009	NONE	PC	GENERAL SUPPORT	126
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
IDAHO YOUTH RANCH 5465 W IRVING ST BOISE, ID 83706	NONE	PC	GENERAL SUPPORT	126
RESCUE FREEDOM INTERNATIONAL PO BOX 77 KIRKLAND, WA 98083	NONE	PC	GENERAL SUPPORT	126
WIGS FOR KIDS 24231 CENTER RIDGE RD WESTLAKE, OH 44145	NONE	PC	GENERAL SUPPORT	126
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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PACIFIC BALLROOM DANCE 1604 15TH ST SW AUBURN, WA 98001	NONE	PC	GENERAL SUPPORT	125
VIRGINIA MASON FOUNDATION 1218 TERRY AVENUE SEATTLE, WA 98101	NONE	PC	GENERAL SUPPORT	123
DRESS FOR SUCCESS SEATTLE 1118 5TH AVE SEATTLE, WA 98101	NONE	PC	GENERAL SUPPORT	120
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
YOUNGLIVESPO BOX 1375 LAKE STEVENS, WA 98258	NONE	PC	GENERAL SUPPORT	120
SEATTLE CHILDRENS HOSPITAL PO BOX 5371 SEATTLE, WA 98145	NONE	PC	GENERAL SUPPORT	117
LAKEWOOD THEATRE COMPANY 368 S STATE ST LAKE OSWEGO, OR 97034	NONE	PC	GENERAL SUPPORT	114
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TILLAMOOK COUNTY WOMENS RESOURCE CENTER 1902 2ND ST TILLAMOOK, OR 97141	NONE	PC	GENERAL SUPPORT	114
DOMESTIC VIOLENCE SERVICES OF SNOHOMISH COUNTY PO BOX 7 EVERETT, WA 98206	NONE	PC	GENERAL SUPPORT	108
ALEX LEMONADE STAND FOUNDATION 111 PRESIDENTIAL BOULEVARD SUITE 203 BALA CYNWYD, PA 19096	NONE	PC	GENERAL SUPPORT	105
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BREAST CANCER RESEARCH FOUNDATION 28 W 44TH ST SUITE 609 NEW YORK, NY 10036	NONE	PC	GENERAL SUPPORT	102
FOX VALLEY FOOD FOR HEALTH PO BOX 532 GENEVA, IL 60134	NONE	PC	GENERAL SUPPORT	102
STANFORD UNIVERSITY 3172 PORTER DRIVE PALO ALTO, CA 94304	NONE	PC	GENERAL SUPPORT	100
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ADOPT A DOG3910 HERON DR HOOD RIVER, OR 97031	NONE	PC	GENERAL SUPPORT	96
CAMP BRIAN PARKINSONS ASSOCIATION 5002 NARBECK AVE EVERETT, WA 98203	NONE	PC	GENERAL SUPPORT	93
CANINE HEALTH EDUCATION & WELFARE 9912 58TH ST NW GIG HARBOR, WA 98335	NONE	PC	GENERAL SUPPORT	93
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHILDAHVEN316 BROADWAY SEATTLE, WA 98122	NONE	PC	GENERAL SUPPORT	93
LAKESIDE SCHOOL 14050 1ST AVENUE NE SEATTLE, WA 98125	NONE	PC	GENERAL SUPPORT	93
OREGON HUMANE SOCIETY 1067 NE COLUMBIA BLVD PORTLAND, OR 97211	NONE	PC	GENERAL SUPPORT	93
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PINK LEMONADE PROJECT 7720 NE HWY 99 SUITE D 314 VANCOUVER, WA 98665	NONE	PC	GENERAL SUPPORT	93
BELLEVUE BOYS AND GIRLS CLUB 209 100TH AVE NE BELLEVUE, WA 98004	NONE	PC	GENERAL SUPPORT	90
CASCADE MEDICAL CENTER FOUNDATION 817 COMMERCIAL STREET LEAVENWORTH, WA 98826	NONE	PC	GENERAL SUPPORT	90
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NORTH URBAN HUMAN SERVICES ALLIANCE PO BOX 60215 SEATTLE, WA 98160	NONE	PC	GENERAL SUPPORT	90
THE COFFEE OASIS837 4TH ST BREMERTON, WA 98337	NONE	PC	GENERAL SUPPORT	90
MARSHA RIVKIN CENTER FOR OVARIAN CANCER 801 BROADWAY SEATTLE, WA 98122	NONE	PC	GENERAL SUPPORT	87
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PACIFIC NORTHWEST BALLET ASSOCIATION 301 MERCER STREET SEATTLE, WA 98109	NONE	PC	GENERAL SUPPORT	87
CATHOLIC COMMUNITY SERVICES OF WESTERN WASHINGTON 100 23RD AVE S SEATTLE, WA 98144	NONE	PC	GENERAL SUPPORT	84
FORGOTTEN DOGS RESCUE 1009 WINSLOW AVE RICHLAND, WA 99354	NONE	PC	GENERAL SUPPORT	84
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MARCH OF DIMES 1275 MAMARONECK AVENUE WHITE PLAINS, NY 10605	NONE	PC	GENERAL SUPPORT	84
BLOSSOM BIRTH SERVICES 290 S CALIFORNIA ST SUITE A PALO ALTO, CA 94306	NONE	PC	GENERAL SUPPORT	81
LADEW TOPIARY GARDENS 3535 JARRETTSVL PIKE MONKTON, MD 21111	NONE	PC	GENERAL SUPPORT	81
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PANORAMA GLOBAL 2101 4TH AVE STE 2100 SEATTLE, WA 98121	NONE	PC	GENERAL SUPPORT	81
PENCILS OF PROMISE INCORPORATED 37 WEST 28TH STREET 3RD FLOOR NEW YORK, NY 10001	NONE	PC	GENERAL SUPPORT	81
FRESH START WOMEN'S FOUNDATION 1130 E MCDOWELL ROAD PHOENIX, AZ 85006	NONE	PC	GENERAL SUPPORT	78
Total ▶ 3a				1,147,304

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Name and address (home or business)				
a <i>Paid during the year</i>				
SOUND DISCIPLINE 3250 AIRPORT WAY S STE 224 SEATTLE, WA 98134	NONE	PC	GENERAL SUPPORT	78
CLACKAMAS WOMENS SERVICES 256 WARNER MILNE ROAD OREGON CITY, OR 97045	NONE	PC	GENERAL SUPPORT	75
EMERALD CITY PET RESCUE 2962 1ST AVENUE SOUTH STE B SEATTLE, WA 98134	NONE	PF	SUPPORT FOR ANIMAL SUPPLIES TO SUSTAIN AND HELP RESCUE ANIMALS REFLECTING OUR MISSION OF HOPE AND HEALING FOR ANIMALS	75
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LAKE CHELAN FOOD BANKPO BOX 2684 CHELAN, WA 98816	NONE	PC	GENERAL SUPPORT	72
ORCAS CENTERPO BOX 567 EASTSOUND, WA 98245	NONE	PC	GENERAL SUPPORT	72
HALO HOUSE FOUNDATION 2940 CORDER STREET HOUSTON, TX 77054	NONE	PC	GENERAL SUPPORT	69
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NORTH BEND DOWNTOWN FOUNDATION PO BOX 896 NORTH BEND, WA 98045	NONE	PC	GENERAL SUPPORT	66
THRIVE CHELAN VALLEYPO BOX 3051 CHELAN, WA 98816	NONE	PC	GENERAL SUPPORT	66
HEARTS FOR HADLEY3010 N ALAMO RD BOISE, ID 83704	NONE	PC	GENERAL SUPPORT	63
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
IMMANUEL COMMUNITY SERVICES 1215 THOMAS ST SEATTLE, WA 98109	NONE	PC	GENERAL SUPPORT	63
MERCER ISLAND YOUTH AND FAMILY SERVICES FOUNDATION 2040 84TH AVE SE MERCER ISLAND, WA 98040	NONE	PC	GENERAL SUPPORT	63
TWO FEET PROJECT 14346 113TH AVE NE KIRKLAND, WA 98034	NONE	PC	GENERAL SUPPORT	63
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HIGHER GROUND SUN VALLEY INC PO BOX 6791 KETCHUM, ID 83340	NONE	PC	GENERAL SUPPORT	57
MUSEUM OF GLASS1801 DOCK ST TACOMA, WA 98402	NONE	PC	GENERAL SUPPORT	54
AUBURN RIVERSIDE HIGH SCHOOL BOOSTER CLUB 1402 LAKE TAPPS PKWY SE STE F104 35 AUBURN, WA 98092	NONE	PC	GENERAL SUPPORT	52
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NORTH COUNTY COMMUNITY FOOD BANK PO BOX 2106 BATTLE GROUND, WA 98604	NONE	PC	GENERAL SUPPORT	51
TRI-CITIES CANCER CENTER FOUNDATION 7350 W DESCHUTES AVE STE A KENNEWICK, WA 99336	NONE	PC	GENERAL SUPPORT	51
NATIONAL MULTIPLE SCLEROSIS SOCIETY 192 NICKERSON STREET SUITE 100 SEATTLE, WA 98109	NONE	PC	GENERAL SUPPORT	48
Total ▶ 3a				1,147,304

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE SOPHIA WAY11061 NE 2ND ST BELLEVUE, WA 98004	NONE	PC	GENERAL SUPPORT	48
OUR LADY OF THE LAKE SCHOOL 3517 NE 89TH ST SEATTLE, WA 98115	NONE	PC	GENERAL SUPPORT	45
LADYBUG HOUSE1215 4TH AVE SEATTLE, WA 98161	NONE	PC	GENERAL SUPPORT	42
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AURORA HEALTH CAREPO BOX 343910 MILWAUKEE, WI 53234	NONE	PC	GENERAL SUPPORT	39
SPOKANE HUMANE SOCIETY PO BOX 6247 SPOKANE, WA 99217	NONE	PC	GENERAL SUPPORT	39
THE FRIENDSHIP CIRCLE OF WASHINGTON 2737 77TH AVE SE MERCER ISLAND, WA 98040	NONE	PC	GENERAL SUPPORT	39
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TOASTING TO TEALPO BOX 9791 SAN JOSE, CA 95157	NONE	PC	GENERAL SUPPORT	39
INTERNATIONAL RESCUE COMMITTEE 122 E 42ND ST NEW YORK, NY 10168	NONE	PC	GENERAL SUPPORT	36
AMERICAN SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS 424 E 92ND ST NEW YORK, NY 10128	NONE	PC	GENERAL SUPPORT	33
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LONGMIRE RANCH1234 BARNEY RD TOUCHET, WA 99360	NONE	PC	GENERAL SUPPORT	33
PLYMOUTH HOUSING GROUP 2113 3RD AVE SEATTLE, WA 98121	NONE	PC	GENERAL SUPPORT	33
BEN FRANKLIN PTA 1304 FAWCETT AVE STE 300 TACOMA, WA 98402	NONE	PC	GENERAL SUPPORT	30
Total ▶ 3a				1,147,304

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BRAVE WARRIOR PROJECT 18 N MISSION WENATCHEE, WA 98801	NONE	PC	GENERAL SUPPORT	30
PEOPLE UNITED FOR PETS (PUP) PO BOX 1691 ISSAQUAH, WA 98027	NONE	PC	GENERAL SUPPORT	30
HOLIDAY HOPEPO BOX 66583 PORTLAND, OR 97290	NONE	PC	GENERAL SUPPORT	27
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ONE TAIL AT A TIME2144 N WOOD ST CHICAGO, IL 60614	NONE	PC	GENERAL SUPPORT	27
KINDNESS 911804 NW 151ST ST VANCOUVER, WA 98685	NONE	PC	GENERAL SUPPORT	24
LIFECENTER NORTHWEST 3650 131ST AVE SE STE 200 BELLEVUE, WA 98006	NONE	PC	GENERAL SUPPORT	19
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WHATCOM HUMANE SOCIETY 2172 DIVISION ST BELLINGHAM, WA 98226	NONE	PC	GENERAL SUPPORT	18
HABITAT FOR HUMANITY SEATTLE-KING COUNTY 560 NACHES AVENUE SW RENTON, WA 98057	NONE	PC	GENERAL SUPPORT	15
HEADLANDS CENTER FOR THE ARTS 944 FORT BARRY SAUSALITO, CA 94965	NONE	PC	GENERAL SUPPORT	15
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NEW HORIZONS MINISTRIES 2709 3RD AVE SEATTLE, WA 98121	NONE	PC	GENERAL SUPPORT	15
SKYLINE HIGH SCHOOL BOOSTER CLUB 3020 ISSAQUAH-PINE LK RD SE PMB573 SAMMAMISH, WA 98075	NONE	PC	GENERAL SUPPORT	15
MERCY HOME FOR BOYS & GIRLS 1140 W JACKSON BLVD CHICAGO, IL 60607	NONE	PC	GENERAL SUPPORT	12
Total ▶ 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WSU FOUNDATIONPO BOX 641927 PULLMAN, WA 99164	NONE	PC	GENERAL SUPPORT	12
ECYL16030 SE 48TH DRIVE BELLEVUE, WA 98006	NONE	PC	GENERAL SUPPORT	10
ARTSFUND FOUNDATIONPO BOX 19780 SEATTLE, WA 98109	NONE	SOI	GENERAL SUPPORT	9
Total ► 3a				1,147,304

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SHUNPIKE815 SEATTLE BLVD S 215 SEATTLE, WA 98134	NONE	PC	GENERAL SUPPORT	9
COURAGE INITIATIVE253 N 116TH ST WAUWATOSA, WI 53226	NONE	PC	GENERAL SUPPORT	6
Total ▶ 3a				1,147,304

TY 2019 Accounting Fees Schedule**Name:** GLASSYBABY WHITE LIGHT FUND**EIN:** 47-2335650

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	6,100	0		6,100

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

TY 2019 Expenditure Responsibility Statement

Name: GLASSYBABY WHITE LIGHT FUND

EIN: 47-2335650

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
METRO PORTLAND NEW CAR DEALERS CHARITABLE FOUNDATION	777 NE 7TH AVE PORTLAND, OR 97232	2019-11-22	621	SUPPORT LOCAL OREGON NON PROFIT GRANT MAKING REFLECTING OUR MISSION OF HOPE AND HEALING FOR PEOPLE, ANIMALS, AND THE PLANET.	621	THE GRANTOR IS NOT AWARE OF ANY DIVERSION OF FUNDS	JULY 10, 2020	2020-07-10	THE GRANTEE IS A CALENDAR YEAR TAXPAYER THAT RECEIVED FUNDS IN 2019. AS SUCH, THE REPORT FOR THE 2019 DISBURSEMENT WAS DUE IN A REASONABLE TIME FOLLOWING THE END OF THE 2019 TAX YEAR. GRANTEE PROVIDED A REPORT IN JULY 2019, AND ALL FUNDS HAD BEEN EXPENDED FOR THEIR INTENDED PURPOSE. THE GRANTOR HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE REPORT FROM THE GRANTEE; THEREFORE, NO INDEPENDENT VERIFICATION OF THE REPORT WAS MADE.
EMERALD CITY PET RESCUE	2962 1ST AVENUE SOUTH STE B SEATTLE, WA 98134	2019-11-09	75	PPROVIDED SUPPORT FOR ANIMAL SUPPLIES TO SUSTAIN AND HELP RESCUE ANIMALS REFLECTING OUR MISSION OF HOPE AND HEALING FOR ANIMALS.	75	THE GRANTOR IS NOT AWARE OF ANY DIVERSION OF FUNDS	JULY 13, 2020	2020-07-13	THE GRANTEE IS A CALENDAR YEAR TAXPAYER THAT RECEIVED FUNDS IN 2019. AS SUCH, THE REPORT FOR THE 2019 DISBURSEMENT WAS DUE IN A REASONABLE TIME FOLLOWING THE END OF THE 2019 TAX YEAR. GRANTEE PROVIDED A REPORT IN JULY 2019, AND ALL FUNDS HAD BEEN EXPENDED FOR THEIR INTENDED PURPOSE. THE GRANTOR HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE REPORT FROM THE GRANTEE; THEREFORE, NO INDEPENDENT VERIFICATION OF THE REPORT WAS MADE.

TY 2019 Explanation of Non-Filing with Attorney General Statement

Name: GLASSYBABY WHITE LIGHT FUND

EIN: 47-2335650

Statement:

THE FOUNDATION DOES NOT FILE AS A CHARITABLE TRUST AS NO INCOME-PRODUCING ASSETS ARE OWNED. CHARITABLE SOLICITATION REGISTRATIONS ARE COMPLETED, BUT THE FEDERAL RETURN IS NOT REQUIRED TO BE PROVIDED TO REGISTER.

TY 2019 General Explanation Attachment**Name:** GLASSYBABY WHITE LIGHT FUND**EIN:** 47-2335650**General Explanation Attachment**

Identifier	Return Reference	Explanation	
1		CONDUIT ELECTION STATEMENT	AS OF MARCH 15, 2020, GLASSYBABY WHITE LIGHT FUND HAS MADE THE REQUIRED QUALIFYING DISTRIBUTIONS TO BE TREATED AS A CONDUIT PRIVATE FOUNDATION AS DESCRIBED IN IRC 170(B)(1)(F)(II).

TY 2019 Legal Fees Schedule**Name:** GLASSYBABY WHITE LIGHT FUND**EIN:** 47-2335650

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	632	0		632

TY 2019 Other Expenses Schedule**Name:** GLASSYBABY WHITE LIGHT FUND**EIN:** 47-2335650**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE EXPENSES	397	0		397
WEBSITE MAINTENANCE	3,055	0		3,055
MISCELLANEOUS EXPENSES	2,029	0		2,029

Schedule B (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information.	OMB No. 1545-0047
		2019
Name of the organization GLASSYBABY WHITE LIGHT FUND		Employer identification number 47-2335650

Organization type (check one):

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

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

General Rule

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

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

Name of organization
GLASSYBABY WHITE LIGHT FUND

Employer identification number
47-2335650

Part I

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

Contributors

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GLASSYBABY LLC 624 S LANDER STREET SEATTLE, WA 98134	\$ 1,490,645	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization GLASSYBABY WHITE LIGHT FUND	Employer identification number 47-2335650
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given <small>(see instructions). Use duplicate copies of Part II if additional space is needed.</small>	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	

47-2335650

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 information once. See instructions.)* ▶ \$ _____
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 Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	
	_____	_____	
	_____	_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	
	_____	_____	
	_____	_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	
	_____	_____	
	_____	_____	