

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491315014649

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

2018

Open to Public Inspection

For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018

Name of foundation
GARY E MILGARD FAMILY FOUNDATION-CARI

A Employer identification number
81-1292744

Number and street (or P O box number if mail is not delivered to street address)
1701 COMMERCE STREET

Room/suite

City or town, state or province, country, and ZIP or foreign postal code
TACOMA, WA 98402

C If exemption application is pending, check here

G Check all that apply

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

D 1. Foreign organizations, check here

D 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

H Check type of organization

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

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

☐ Other taxable private foundation

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

I Fair market value of all assets at end of year (from Part II, col (c), line 16)

J Accounting method

\$ 92,166,396

☐ Cash

☐ Accrual

☒ Other (specify) MODIFIED CASH

(Part I, column (d) must be on cash basis)

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)	6,472		
	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	2,142,669	2,257,139	
	5a Gross rents			
	b Net rental income or (loss)			
	6a Net gain or (loss) from sale of assets not on line 10	1,027,619		
	b Gross sales price for all assets on line 6a			
	7 Capital gain net income (from Part IV, line 2)		653,701	
	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)	0	-11,744		
12 Total. Add lines 1 through 11	3,176,760	2,899,096		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	240,974	0	240,974
	14 Other employee salaries and wages	94,092	0	94,092
	15 Pension plans, employee benefits	130,690	0	129,067
	16a Legal fees (attach schedule)	9,351	0	9,351
	b Accounting fees (attach schedule)	15,292	0	15,292
	c Other professional fees (attach schedule)	217,571	217,571	0
	17 Interest			
	18 Taxes (attach schedule) (see instructions)	63,386	31,898	2,170
	19 Depreciation (attach schedule) and depletion			
	20 Occupancy	4,739	0	4,739
	21 Travel, conferences, and meetings	3,140	0	3,140
	22 Printing and publications	360	0	360
	23 Other expenses (attach schedule)	24,063	46,042	24,063
	24 Total operating and administrative expenses. Add lines 13 through 23	803,658	295,511	523,248
	25 Contributions, gifts, grants paid	4,583,004		4,583,004
	26 Total expenses and disbursements. Add lines 24 and 25	5,386,662	295,511	5,106,252
	27 Subtract line 26 from line 12			
	a Excess of revenue over expenses and disbursements	-2,209,902		
	b Net investment income (if negative, enter -0-)		2,603,585	
	c Adjusted net income (if negative, enter -0-)			

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form 990-PF (2018)

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	73,689	87,438	87,438		
	2	Savings and temporary cash investments	1,797,569	1,113,848	1,113,848		
	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)	828,571	835,481	835,481		
	b	Investments—corporate stock (attach schedule)	86,375,829	79,574,744	79,574,744		
	c	Investments—corporate bonds (attach schedule)	3,472,809	1,478,220	1,478,220		
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)	9,488,343	9,076,665	9,076,665		
	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)	102,036,810	92,166,396	92,166,396			
Liabilities	17	Accounts payable and accrued expenses	1,973	3,596			
	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)	1,973	3,596			
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.						
	24	Unrestricted	102,034,837	92,162,800			
	25	Temporarily restricted					
	26	Permanently restricted					
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.						
	27	Capital stock, trust principal, or current funds					
	28	Paid-in or capital surplus, or land, bldg , and equipment fund					
	29	Retained earnings, accumulated income, endowment, or other funds					
	30	Total net assets or fund balances (see instructions)	102,034,837	92,162,800			
31	Total liabilities and net assets/fund balances (see instructions) .	102,036,810	92,166,396				

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 30 (must agree with end-of-year figure reported on prior year's return)	1	102,034,837
2	Enter amount from Part I, line 27a	2	-2,209,902
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	99,824,935
5	Decreases not included in line 2 (itemize) ▶ _____	5	7,662,135
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	92,162,800

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 See Additional Data Table			
b			
c			
d			
e			

(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 See Additional Data Table			
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 See Additional Data Table			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	653,701
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))
2017	4,777,229	96,856,158	0 049323
2016	2,865,021	91,197,337	0 031416
2015	4,692,940	94,012,343	0 049918
2014	5,739,870	93,631,014	0 061303
2013	4,084,275	89,609,905	0 045578

2 Total of line 1, column (d)	2	0 237538
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	0 047508
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	99,456,971
5 Multiply line 4 by line 3	5	4,725,002
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	26,036
7 Add lines 5 and 6	7	4,751,038
8 Enter qualifying distributions from Part XII, line 4	8	5,106,252

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 checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	26,036
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	26,036
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	26,036
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	15,979
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	15,000
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	30,979
8	Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	325
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	4,618
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ 4,618 Refunded ▶	11	0

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 ▶ \$ 0 (2) On foundation managers ▶ \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ 0		
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) ▶ 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	Yes
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 2018 or the taxable year beginning in 2018? 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 ► <u>WWW.GARYMILGARDFAMILYFOUNDATION.ORG</u>	13	Yes	
14	The books are in care of ► <u>TREV COOKSON</u> Telephone no ► <u>(253) 274-0121</u>			

Located at ► 1701 COMMERCE STREET TACOMA WA ZIP+4 ► 98402

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 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►			

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(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 checked="" type="checkbox"/> Yes <input 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.	1b		No
	Organizations relying on a current notice regarding disaster assistance check here. ► <input type="checkbox"/>			
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 2018?	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 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? <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 2018 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 2018).	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 2018?	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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	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	
	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 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
CHRISTINE ZEMANEK 1701 COMMERCE STREET TACOMA, WA 98402	PRESIDENT & CEO 13 90	90,973	18,038	0
CARI MILGARD 1701 COMMERCE STREET TACOMA, WA 98402	SECRETARY/TREASURER 20 00	0	26,924	0
KASEY MILGARD 1701 COMMERCE STREET TACOMA, WA 98402	VICE PRESIDENT 40 00	75,000	6,417	0
KIRBY MILGARD 1701 COMMERCE STREET TACOMA, WA 98402	VICE PRESIDENT 40 00	75,000	6,149	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
MORGAN STANLEY SMITH BARNEY HOLDINGS LLC 1 NEW YORK PLAZA 12TH FL NEW YORK, NY 10004	INVESTMENT MGMT	217,571
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	89,700,431
b	Average of monthly cash balances.	1b	1,712,274
c	Fair market value of all other assets (see instructions).	1c	9,558,839
d	Total (add lines 1a, b, and c).	1d	100,971,544
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	100,971,544
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	1,514,573
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	99,456,971
6	Minimum investment return. Enter 5% of line 5.	6	4,972,849

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	4,972,849
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	26,036
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	26,036
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	4,946,813
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	4,946,813
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	4,946,813

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	5,106,252
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	5,106,252
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	26,036
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	5,080,216

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 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				4,946,813
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.			4,002,542	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2018				
a From 2013.				
b From 2014.				
c From 2015.				
d From 2016.				
e From 2017.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ <u>5,106,252</u>				
a Applied to 2017, but not more than line 2a			4,002,542	
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 2018 distributable amount.				1,103,710
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2018 (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	0			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019				3,843,103
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9				
a Excess from 2014.				
b Excess from 2015.				
c Excess from 2016.				
d Excess from 2017.				
e Excess from 2018.				

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 2018, enter the date of the ruling. ▶					
b Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 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) 2018	(b) 2017	(c) 2016	(d) 2015	
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 <input type="checkbox"/> 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 e-mail address of the person to whom applications should be addressed EXCLUSIVELY ACCEPTED ONLINE VIA WWW 1701 COMMERCE STREET TACOMA, WA 98402 (253) 274-0121
b The form in which applications should be submitted and information and materials they should include A LETTER OF INQUIRY IS THE FIRST STEP IN THE GRANT APPLICATION PROCESS. THE LETTER OF INQUIRY IS REVIEWED, AND IF APPROVED, THE APPLICANT WILL BE REQUESTED TO PROVIDE A FULL APPLICATION.
c Any submission deadlines THERE IS NO DEADLINE FOR SUBMITTING A LETTER OF INQUIRY
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors ALL APPLICANT ORGANIZATIONS MUST QUALIFY AS TAX-EXEMPT ORGANIZATIONS UNDER THE INTERNAL REVENUE CODE. CERTAIN PROPOSALS ARE INELIGIBLE FOR FUNDING, SUCH AS ANNUAL FUNDS, GALAS, OR OTHER SPECIAL EVENT FUNDRAISING ACTIVITIES, SECTARIAN RELIGIOUS ACTIVITIES, DEBT REDUCTION, POLITICAL LOBBYING, OR LEGISLATIVE ACTIVITIES, AND ORGANIZATIONS THAT DISCRIMINATE ON THE BASIS OF AGE, RACE, NATIONAL ORIGIN, ETHNICITY, GENDER, POLITICAL AFFILIATION OR RELIGIOUS BELIEF.

Part XV **Supplementary Information** (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a <i>Paid during the year</i> See Additional Data Table				
Total 3a				
b <i>Approved for future payment</i> UNIVERSITY OF WASHINGTON FOUNDATION 4333 BROOKLYN AVE NE SEATTLE, WA 981959504		PC 509(A)(1) OR (A)	TACOMA- NEW INNOVATION BLDG	500,000
Total 3b				

Enter gross amounts unless otherwise indicated

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

Form **990-PF** (2018)

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

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

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

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

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.

Sign Here	*****	2019-10-26	*****	May the IRS discuss this return with the preparer shown below? (see instr)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer or trustee	Date	Title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	JANE M SEARING		2019-10-21		P00000565
	Firm's name ▶ CLARK NUBER PS				Firm's EIN ▶ 91-1194016
Firm's address ▶ 10900 NE 4TH STREET SUITE 1400 BELLEVUE, WA 98004					Phone no (425) 454-4919

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

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1	PUBLICLY TRADED SECURITIES		2017-01-01	2018-12-31
1	POWERSHARES DB GOLD FUND		2017-01-01	2018-12-31
	AURORA OFFSHORE FUND II		2017-01-01	2018-12-31
	SELECTINVEST		2017-01-01	2018-12-31
	HEDGEPREMIER/RIDA FUND LP	P	2018-08-01	2018-12-31
	CAPITAL GAINS DIVIDENDS	P		

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

(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)
22,130,518		21,453,528	676,990
		2,299	-2,299
		18,970	-18,970
2,955			2,955
		346,952	-346,952
341,977			341,977

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			676,990
			-2,299
			-18,970
			2,955
			-346,952
			341,977

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>				
AMARA 5907 MARTIN LUTHER KING JR WAY SEATTLE, WA 98118		PC 509(A) (1) OR (A)	PIERCE COUNTY PROGRAMS	200,000
ASSOCIATED MINISTRIES OF TACOMA- PIERCE CO 1224 SOUTH I STREET TACOMA, WA 98405		PC 509(A) (1) OR (A)	PROJECT HOMELESS CONNECT	56,840
BEACON COMMUNITIES 6120 STONERIDGE MALL RD STE 100 PLEASANTON, CA 94588		PC 509(A) (1) OR (A)	HARBOR VIEW MANOR HEALTHY LIVING PROGRAM	42,724
Total ► 3a				4,583,004

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>				
BOYS & GIRLS CLUB OF SOUTH PUGET SOUND 3875 S 66TH STREET SUITE 101 TACOMA, WA 98409		PC 509(A) (1) OR (A)	GENERAL OPERATIONS - LAKEWOOD	250,000
CALVARY COMMUNITY CHURCH 15116 GARY STREET SUMNER, WA 98390		PC 509(A) (1) OR (A)	CALVARY'S CLOTHING CLOSET	2,500
CARING FOR KIDS237 ELDORADO AVE FIRCREST, WA 98466		PC 509(A) (1) OR (A)	READY TO LEARN/HOLIDAY FAIRS	75,000
Total ▶ 3a				4,583,004

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>				
CHILD CARE RESOURCES 1222 S WELLER STE 300 SEATTLE, WA 98144		PC 509(A) (1) OR (A)	HOMELESS CHILD CARE PROGRAM PIERCE CO	50,000
CHILDREN'S HOME SOCIETY OF WASHINGTON PO BOX 123 VAUGHN, WA 98394		PC 509(A) (1) OR (A)	WENDY'S WONDERFUL KIDS PIERCE CO	50,000
CHILDREN'S MUSEUM OF TACOMA 1501 PACIFIC AVE SUITE 202 TACOMA, WA 98402		PC 509(A) (1) OR (A)	JBLM CHILDREN'S MUSEUM SATELLITE	500,000
Total ▶ 3a				4,583,004

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>				
COURAGE CLASSICPO BOX 5296 TACOMA, WA 984150296		PC 509(A) (1) OR (A)	GENERAL OPERATING FUND	1,000
ELEMENTS OF EDUCATION PARTNERS PO BOX 111055 TACOMA, WA 98411		PC 509(A) (1) OR (A)	SOTA ADJUNCT ARTISTS 2018-2019	2,500
EMERGENCY FOOD NETWORK 3318 92ND STREET SOUTH TACOMA, WA 98499		PC 509(A) (1) OR (A)	CO-OP FOOD PURCHASING PROGRAM	100,000
Total ► 3a				4,583,004

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>				
GIG HARBOR KIWANIS FOUNDATION PO BOX 1491 HARBOR, WA 98335		PC 509(A) (1) OR (A)	KIWANIS CARES FOR KIDS PROGRAM	60,000
GOOD SAMARITAN FOUNDATION 402 15TH AVE SE STE 101 PUYALLUP, WA 98372		PC 509(A) (1) OR (A)	CORKS & CRUSH	10,000
HOPE FOR HEROES HORSEMANSHIP CENTER 14528 AVIS LANE SE YELM, WA 98597		PC 509(A) (1) OR (A)	GENERAL OPERATING FUNDS	5,000
Total ▶ 3a				4,583,004

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>				
HOPE IN CHRIST MINISTRIES 837 4TH STREET BREMERTON, WA 98337		PC 509(A) (1) OR (A)	THE COFFEE OASIS TACOMA YOUTH SHELTER	150,000
KITSAP HUMANE SOCIETY 9167 DICKEY ROAD NW SILVERDALE, WA 98383		PC 509(A) (1) OR (A)	TRANSFORMING ANIMAL WELFARE PROGRAM	50,000
LINDQUIST DENTAL CLINIC FOR CHILDREN 130 131ST STREET SOUTH TACOMA, WA 98444		PC 509(A) (1) OR (A)	DENTAL CARE FOR CHILDREN IN NEED	100,000
Total ► 3a				4,583,004

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>				
LUTHERAN COMMUNITY SERVICES NW 223 NORTH YAKIMA AVE TACOMA, WA 98403		PC 509(A) (1) OR (A)	SENIOR SUPPORT SERVICES AS OUTLINED IN GRANT LETTER	100,000
MAKING A DIFFERENCE FOUNDATION 4218 S STEELE ST 215 TACOMA, WA 98409		PC 509(A) (1) OR (A)	ELOISE'S COOKING POT FOOD BANK	50,000
NEIGHBORHOOD CLINIC 1323 SOUTH YAKIMA AVE TACOMA, WA 98405		PC 509(A) (1) OR (A)	HEALTHCARE FOR THE UNDERSERVED	15,000
Total ▶ 3a				4,583,004

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 PHOEBE HOUSE ASSOCIATION PO BOX 5245 TACOMA, WA 98415		PC 509(A) (1) OR (A)	RECOVERY/REUNIFICATION/RESILIENCY	150,000
OLIVE CREST 2500 116TH AVE NE SUITE 1 BELLEVUE, WA 98004		PC 509(A) (1) OR (A)	FOSTER CARE EXPANSION/IMPROVE	125,000
PAGE AHEAD CHILDREN'S LITERACY PROGRAM 1130 NW 85 SEATTLE, WA 98117		PC 509(A) (1) OR (A)	BOOK UP SUMMER	50,000
Total ► 3a				4,583,004

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>				
PEACE COMMUNITY CENTER 2106 S CUSHMAN AVE TACOMA, WA 98405		PC 509(A) (1) OR (A)	MCCARVER AND HILLTOP SCHOLARS PROGRAM	65,000
PEOPLE FOR ANIMAL CARE AND KINDNESS 3411 6TH AVENUE SUITE B TACOMA, WA 98406		PC 509(A) (1) OR (A)	HOLIDAY PET BASKET BRIGADE	100,000
PUGET SOUND CHRISTIAN CHURCH 4020 S 56TH ST SUITE 200 TACOMA, WA 98409		PC 509(A) (1) OR (A)	BACK TO SCHOOL JAM	55,000
Total ► 3a				4,583,004

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>				
SOUTH SOUND CARE FOUNDATION PO BOX 1314 TACOMA, WA 98401		PC 509(A) (1) OR (A)	BEER & BITES EVENT	10,000
SOUTH SOUND OUTREACH SERVICES 1106 MARTIN LUTHER KING JR WAY TACOMA, WA 98405		PC 509(A) (1) OR (A)	CREDIT UP FINANCIAL COUNSELOR PROGRAM	85,000
SOUTH SOUND OUTREACH SERVICES 1106 MARTIN LUTHER KING JR WAY TACOMA, WA 98405		PC 509(A) (1) OR (A)	INTEGRATED SERVICES MODEL	35,000
Total ► 3a				4,583,004

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 VINCENT DE PAUL OF TACOMAPIERCE CO 4009 SOUTH 56TH ST TACOMA, WA 98409		PC 509(A) (1) OR (A)	SVDP EMERGENCY ASSISTANCE PROGRAM	75,000
TACOMA COMMUNITY HOUSE 1314 SOUTH L STREET TACOMA, WA 98405		PC 509(A) (1) OR (A)	IMMIGRANTS AND REFUGEES IN 2019	75,000
TACOMA LUTHERAN RETIREMENT COMM FDN 1301 N HIGHLANDS PKWY TACOMA, WA 98406		PC 509(A) (1) OR (A)	2018 TV SENIOR PROGRAM	42,440
Total ▶ 3a				4,583,004

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>				
TACOMA YOUTH FOR CHRIST PO BOX 834 TACOMA, WA 98401		PC 509(A) (1) OR (A)	CITY LIFE PROGRAM	50,000
THE CHILDRENS'S FUND6028 S 298 AUBURN, WA 98001		PC 509(A) (1) OR (A)	THE CHILDREN'S FUND	150,000
THE RESCUE MISSIONP O BOX 1912 TACOMA, WA 984011912		PC 509(A) (1) OR (A)	CLIENT ASSISTANCE FUND	70,000
Total ▶ 3a				4,583,004

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>				
TOY RESCUE MISSION 607 SO WINNIFRED ST TACOMA, WA 98464		PC 509(A) (1) OR (A)	GENERAL OPERATING FUND	5,000
TOY RESCUE MISSION 607 SOUTH WINNIFRED ST TACOMA, WA 98464		PC 509(A) (1) OR (A)	GENERAL OPERATING FUND	45,000
UNITED WAY OF PIERCE COUNTY 1501 PACIFIC AVENUE 4TH FLR TACOMA, WA 98401		PC 509(A) (1) OR (A)	CENTER FOR STRONG FAMILIES	75,000
Total ► 3a				4,583,004

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				
UNIVERSITY OF WASHINGTON FOUNDATION 4333 BROOKLYN AVE NE SEATTLE, WA 981959504		PC 509(A) (1) OR (A)	TACOMA- NEW INNOVATION BLDG	500,000
USO2111 WILSON BLVD SUITE 1200 ARLINGTON, VA 22201		PC 509(A) (1) OR (A)	PATHFINDER PROGRAM	250,000
WASHINGTON STATE FAIR FOUNDATION 110 9TH AVE SW PUYALLUP, WA 98371		PC 509(A) (1) OR (A)	THE FARM AT SILLYVILLE	500,000
Total ▶ 3a				4,583,004

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>				
WORLD VISIONP O BOX 9716 FEDERAL WAY, WA 980639716		PC 509(A) (1) OR (A)	VITAL RESOURCES PIERCE COUNTY	100,000
YWCA PIERCE COUNTY405 BROADWAY TACOMA, WA 98402		PC 509(A) (1) OR (A)	LEGAL SERVICES AND CHILDREN'S PROGRAMS	100,000
Total ▶ 3a				4,583,004

TY 2018 Accounting Fees Schedule**Name:** GARY E MILGARD FAMILY FOUNDATION-CARI**EIN:** 81-1292744

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	15,292	0		15,292

TY 2018 Investments Corporate Bonds Schedule

Name: GARY E MILGARD FAMILY FOUNDATION-CARI

EIN: 81-1292744

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
18,000.000 SHS T-MOBILE USA INC	540	540
20,000.000 SHS T-MOBILE USA INC	229	229
28,000.000 SHS ENSCO PLC	16,051	16,051
12,000.000 SHS FNMA POOL MA3494	11,883	11,883
12,000.000 SHS FNMA POOL MA3331	11,358	11,358
26,000.000 SHS FNMA POOL MA3305	24,796	24,796
10,000.000 SHS FNMA POOL MA3358	9,649	9,649
11,000.000 SHS FNMA POOL MA3306	10,501	10,501
65,000.000 SHS PC GOLD POOL G07961	39,206	39,206
31,000.000 SHS PC GOLD POOL G08624	13,324	13,324
16,000.000 SHS FNMA POOL AX7732	8,260	8,260
1,000.000 SHS FNMA POOL	655	655
224,000.000 SHS FHLMC 30G A89385	24,063	24,063
69,000.000 SHS FHLMC 30 YR GOLD G08659	40,549	40,549
23,000.000 SHS FNMA POOL AS4168	11,063	11,063
74,000.000 SHS FHLMC 30 YR GOLD V81760	36,358	36,358
44,000.000 SHS FHLMC PC GOLD POOL C09071	16,528	16,528
5,000.000 SHS FNMA POOL AW8992	2,537	2,537
29,000.000 SHS FNMA POOL	9,740	9,740
34,000.000 SHS PC GOLD POOL G08623	17,306	17,306

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
6,000.000 SHS FNMA POOL AX4887	2,695	2,695
27,000.000 SHS FNMA POOL AS0907	8,902	8,902
7,000.000 SHS FNMA POOL AL6715	2,995	2,995
22,000.000 SHS FNMA POOL 310151	8,629	8,629
16,000.000 SHS FNMA POOL AV6368	4,185	4,185
6,000.000 SHS FHLMC 30 YR GOLD G60201	2,609	2,609
124,000.000 SHS FHLMC 30 YR GOLD A86314	5,460	5,460
69,000.000 SHS FNMA POOL BC2849	58,033	58,033
10,000.000 SHS FNMA POOL AS6520	7,108	7,108
8,000.000 SHS FNMA POOL AZ7916	3,063	3,063
10,000.000 SHS FHLMC 30 YR GOLD G08682	5,464	5,464
250,000.000 SHS FED NATL MTG ASSN	233,876	233,876
10,000.000 SHS FNMA POOL AS6408	6,837	6,837
6,000.000 SHS FHLMC 30 YR GOLD G08700	2,917	2,917
12,000.000 SHS FNMA POOL BA2889	4,413	4,413
39,000.000 SHS FNMA POOL MA2920	33,679	33,679
100,000.000 SHS FNMA POOL MA2671	71,196	71,196
208,000.000 SHS FNMA POOL 995628	7,952	7,952
59,000.000 SHS FHLMC 30 YR GOLD G08747	50,483	50,483
75,000.000 SHS FHLMC 30 YR GOLD G08600	22,655	22,655

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
21,000.000 SHS FNMA POOL AL8238	11,615	11,615
101,000.000 SHS FNMA POOL AS6675	61,583	61,583
69,000.000 SHS FNMA POOL MA3026	60,378	60,378
24,000.000 SHS FNMA POOL BM1066	17,545	17,545
9,000.000 SHS FNMA POOL MA3087	8,184	8,184
62,000.000 SHS FEDL NATL MORTGAGE ASSOCIATION	80,002	80,002
11,000.000 SHS FNMA POOL BD2440	9,322	9,322
10,000.000 SHS FNMA POOL AS8700	6,759	6,759
10,000.000 SHS FNMA POOL MA3143	9,183	9,183
12,000.000 SHS FNMA POOL MA3149	10,684	10,684
48,000.000 SHS FNMA POOL AH0969	6,380	6,380
108,000.000 SHS FNMA POOL MA3148	98,792	98,792
38,000.000 SHS FNMA POOL AS9994	29,991	29,991
38,000.000 SHS FEDL NATL MTG ASSOC 10 YR MA1732	10,350	10,350
89,000.000 SHS FNMA POOL MA2960	71,504	71,504
54,000.000 SHS FNMA POOL MA3082	49,360	49,360
15,000.000 SHS FNMA POOL MA3211	13,881	13,881
17,000.000 SHS FNMA POOL BJ4916	16,205	16,205
13,000.000 SHS FNMA POOL MA3443	12,954	12,954
10,000.000 SHS FNMA POOL MA3467	10,031	10,031

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
12,000.000 SHS FHLMC 15 YR GOLD G18710	11,788	11,788
12,000.000 SHS FHLMC 30 YR GOLD G08847	12,180	12,180
12,000.000 SHS FHLMC 30 YR GOLD Q57426	11,802	11,802

TY 2018 Investments Corporate Stock Schedule

Name: GARY E MILGARD FAMILY FOUNDATION-CARI

EIN: 81-1292744

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
20,743.000 SHS VANGUARD SMALL-CAP VIPERS	2,737,867	2,737,867
20,591.000 SHS VANGUARD MID-CAP VIPERS	2,845,264	2,845,264
78,577.000 SHS VANGUARD FTSE DEVELOPED MKTS E	2,915,207	2,915,207
114,250.666 SHS FRANKLIN FLOAT RATE DLY A-AD	961,991	961,991
109,709.150 SHS EATON VANCE FLOATINGRATE INST	953,373	953,373
105,299.000 SHS ISHARES TRUST CURRENCY HEDGED MSCI EAFE ETF	2,748,410	2,748,410
52,843.000 SHS ISHARES MSCI EMERGING MARKETS	2,064,048	2,064,048
144,067.728 SHS VOYA GLOBAL REAL ESTATE I	1,956,440	1,956,440
43,284.000 SHS VANGUARD HIGH DIV YIELD ETF	3,375,719	3,375,719
97,482.000 SHS SPDR S&P 500 ETF TRUST	24,502,630	24,502,630
50,861.000 SHS VANGUARD DIVIDEND APPREC ETF	4,981,835	4,981,835
54,228.227 SHS OPPENHEIMER DEVELOP MKTS Y	2,038,439	2,038,439
1,242.000 SHS INVESCO DB GOLD FUND	49,109	49,109
25,173.000 SHS SPROTT PHYSICAL GOLD TRUST	259,534	259,534
47,328.000 SHS ISHARES GOLDTRUST ETF	581,661	581,661
5,945.000 SHS SPDR GOLD TR GOLD SHS	720,831	720,831
730,269.501 SHS DOUBLELINE TOTAL RET BD I	7,609,408	7,609,408
105,601.623 SHS MATTHEWS ASIA DIVIDEND INV	1,694,906	1,694,906
112,930.000 SHS FIXED INCOME SHARES C MF	1,122,524	1,122,524
111,680.000 SHS FIXED INCOME SHARES M MF	1,132,435	1,132,435
442,504.463 SHS METROPOLITAN WEST TOT RET BD FD	4,597,621	4,597,621
195,843.449 SHS BLACKSTONE ALTERNATIVE MULTI	2,030,897	2,030,897
534,191.549 SHS PUTNAM SHORT DURATION INCOME Y	5,357,943	5,357,943
56,169.518 SHS CLEARBRIDGE INTL GROWTH I	2,336,652	2,336,652

TY 2018 Investments Government Obligations Schedule**Name:** GARY E MILGARD FAMILY FOUNDATION-CARI**EIN:** 81-1292744**US Government Securities - End
of Year Book Value:**

835,481

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

835,481

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

0

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

0

TY 2018 Investments - Other Schedule**Name:** GARY E MILGARD FAMILY FOUNDATION-CARI**EIN:** 81-1292744**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
HEDGEPREMIER/RIDA LP	FMV	3,947,611	3,947,611
AURORA OFFSHORE FUND LTD. II	FMV	3,761	3,761
PINEHURST INSTITUTIONAL, LTD	FMV	5,086,196	5,086,196
MERIDIAN PERF PTRS LTD CL A	FMV	410	410
RIVERVIEW GLOBAL MACRO FUND (CAYMAN) LP PLACEMENT	FMV	38,687	38,687

TY 2018 Legal Fees Schedule**Name:** GARY E MILGARD FAMILY FOUNDATION-CARI**EIN:** 81-1292744

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	9,351	0		9,351

TY 2018 Other Decreases Schedule

Name: GARY E MILGARD FAMILY FOUNDATION-CARI
EIN: 81-1292744

Description	Amount
UNREALIZED LOSSES	7,662,135

TY 2018 Other Expenses Schedule**Name:** GARY E MILGARD FAMILY FOUNDATION-CARI**EIN:** 81-1292744**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INSURANCE	7,957	0		7,957
COMPUTER EXPENSE	3,917	0		3,917
OFFICE EXPENSE	3,944	0		3,944
REPAIRS & MAINTENANCE	6,374	0		6,374
EQUIPMENT RENTAL	1,598	0		1,598
DUES AND MEMBERSHIPS	273	0		273
DEDUCTIONS FROM PARTNERSHIP INVESTMENTS	0	46,042		0

TY 2018 Other Income Schedule**Name:** GARY E MILGARD FAMILY FOUNDATION-CARI**EIN:** 81-1292744**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
OTHER INCOME		414	
INCOME FROM PARTNERSHIP INVESTMENTS		-12,158	

TY 2018 Other Professional Fees Schedule**Name:** GARY E MILGARD FAMILY FOUNDATION-CARI**EIN:** 81-1292744

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT FEES	217,571	217,571		0

TY 2018 Taxes Schedule**Name:** GARY E MILGARD FAMILY FOUNDATION-CARI**EIN:** 81-1292744

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAXES	30,000	0		0
FOREIGN TAXES	31,216	31,898		0
STATE TAXES	2,170	0		2,170

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 <u>www.irs.gov/Form990</u> for the latest information	OMB No 1545-0047
		2018
Name of the organization GARY E MILGARD FAMILY FOUNDATION-CARI		Employer identification number 81-1292744

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 GARY E MILGARD FAMILY FOUNDATION-CARI	Employer identification number 81-1292744
--	---

Part I Contributors (See instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GARY E MILGARD FAMILY FOUNDATION - MARK 1701 COMMERCE STREET TACOMA, WA 98402	\$ 6,472	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Employer identification number

81-1292744

Part II	Noncash Property
----------------	-------------------------

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

Name of organization

GARY E MILGARD FAMILY FOUNDATION-CARI

Employer identification number

81-1292744

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		
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4 Relationship of transferor to transferee		
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4 Relationship of transferor to transferee		
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4 Relationship of transferor to transferee		
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4 Relationship of transferor to transferee		