Form **990-PF**

EXTENDED TO NOVEMBER 15, 2018
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.

2017

Department of the Treasury ► Go to www.irs.gov/Form990PF for instructions and the latest information Internal Revenue Service 2017 For calendar year 2017 or tax year beginning NOV 29, 2017 , and ending DEC 31, Name of foundation A Employer identification number 82-3680048 MSIX20 FOUNDATION Room/suite Number and street (or P O box number if mail is not delivered to street address) **B** Telephone number 425-202-8511 8208 161ST AVENUE NE City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here REDMOND , WA 98052 X Initial return Initial return of a former public charity D 1. Foreign organizations, check here G Check all that apply. Amended return Final return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here X Cash I Fair market value of all assets at end of year J Accounting method. If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 697, 473. (Part I, column (d) must be on cash basis) ▶\$ Part I | Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income income 658,229 Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 4 Dividends and interest from securities 2 U 2018 5a Gross rents SCANNED FEB 2 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 0 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less: Cost of goods sold c Gross profit or (loss) 11 Other income 658,229 0 0 Total Add lines 1 through 11 12 0 0 0 13 Compensation of officers, directors, trustees, etc Other employee salaries and wages 14 15 Pension plans, employee benefits 10,000 0 Expenses 10,000. 16a Legal fees STMT 1 **b** Accounting fees c Other professional fees Administrative 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative 0 10,000 10,000. expenses Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements 0 10,000 10,000 Add lines 24 and 25 27 Subtract line 26 from line 12: 648,229 a Excess of revenue over expenses and disbursements 0. b Net investment income (if negative, enter -0-)

0.

c Adjusted net income (if negative, enter -0-)

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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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 O . 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 6 48, 229 .	ž	30	Total net assets of fund dalances	0.	040,223.	
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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 O . 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 6 48, 229 .		21	Total liabilities and net assets/fund halances	0.1	658 229	
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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5 O . 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 6 648, 229 .					030,223.	
(must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 1 0. 6 6 648, 229.	_					
2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5 O. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 2 648, 229. 6 648, 229.				30		^
3 Other increases not included in line 2 (itemize) ► 3 0. 4 Add lines 1, 2, and 3 4 648, 229. 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 30 6 648, 229.		•				
4 Add lines 1, 2, and 3 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 30 6 648, 229.					<u> </u>	
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 30 6 648,229.			· · · · · · · · · · · · · · · · · · ·			
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 6 48, 229.						
	<u>6</u>	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30		

(a) List and describe the 2-story brick ware		rty sold (for exa	mple, real esta		(b)	How ac - Purc - Dona	cquired hase ation	(c) Date a	acquired ay, yr.)	(d) Date sold (mo , day, yr.)
1a										
b NON	IE	· · · <u>- · ·</u>			<u>↓</u>					
С					<u> </u>					
_d					_			 .		
			1		١					
(e) Gross sales price	(f) Depreciation (or allow			st or other basis expense of sale					ain or (loss) (f) minus (
<u>a</u>										
b										
<u>C</u>	 .									
d										
Complete only for assets showing	ann in anluma (h) and owned by	the foundation	n on 19/21/60				(1) Co (C	al /b\ aa-a	
Complete only for assets snowing	_ 	•		•					ol. (h) gain iot less thar	
(i) FMV as of 12/31/69	(j) Adjuster as of 12/3			col (j), if any				Losses	(from col. (h))
a	· - ···· ·									
b										
C										
<u>d</u>										
e			l						•	
2 Capital gain net income or (net cap	rtal loss)	f gain, also entei f (loss), enter -0	r in Part I, line - in Part I, line	7 : 7	}	2		•		
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, c		tions 1222(5) ar	nd (6):		}	2				
Part V Qualification Ur	der Section	4940(e) for	Reduced	Tax on Net	Inv	estn	nent In	come		
If section 4940(d)(2) applies, leave this Was the foundation liable for the section If "Yes," the foundation doesn't qualify Tenter the appropriate amount in each	on 4942 tax on the under section 494	0(e). Do not cor	nplete this par	t		 3.				Yes No
(a) Base period years Calendar year (or tax year beginning	g in) Adjust	(b) ed qualifying dis	tributions	Net value of no	(c) oncha		use asset	s ,	Dıstrıb (col. (b) dıv	(d) ution ratio ided by col. (c))
2016										
2015										
2014										
2013										
2012										
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 numb	er of	years				
the foundation has been in existent	ce if less than 5 yea	ars						3		
4 Enter the net value of noncharitable	e-use assets for 20	17 from Part X,	line 5					4		·
5 Multiply line 4 by line 3								5		
6 Enter 1% of net investment income	e (1% of Part I, line	27b)						6		···
7 Add lines 5 and 6								7		
B Enter qualifying distributions from	Part XII, line 4							8		
If line 8 is equal to or greater than I See the Part VI instructions.	ine 7, check the bo	ox in Part VI, line	1b, and com	olete that part usin	ng a 1	% tax r	ate.			

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Pa	irt VI Excise Tax Based on Investment Income (Section 494	10(a), 4	1940(b), 4940	(e), or 4	948 -	see instru	ıctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and exempt operating foundations described in section 4940(d)(2), check here	enter "N/	A" on line 1.)				
	Date of ruling or determination letter: (attach copy of letter if ne	cessary-	see instructions)					
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	▶	and enter 1%	}	1			0.
	of Part I, line 27b							
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4	% of Par	t I, line 12, col. (b).	. J				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; of	thers, er	iter -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, e	nter -0-)		4			<u> 0 </u>
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-				5			0.
6	Credits/Payments.		1					
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a		0.				
b	Exempt foreign organizations - tax withheld at source	6b		0.				
C	Tax paid with application for extension of time to file (Form 8868)	6c_		0.				
d	Backup withholding erroneously withheld	6d		0.				
	Total credits and payments. Add lines 6a through 6d				7			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ached			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			
	Enter the amount of line 10 to be: Credited to 2018 estimated tax		Ref	unded ►	11			
Pa	rt VII-A Statements Regarding Activities							
1a	During the tax year, did the foundation attempt to influence any national, state, or local legi-	slation o	did it participate o	r intervene	ın		Yes	
	any political campaign?					1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo				ition	1b		X
	If the answer is "Yes" to $1a$ or $1b$, attach a detailed description of the activities and copies	of any m	aterials published	or		i		
	distributed by the foundation in connection with the activities.							
C	Did the foundation file Form 1120-POL for this year?					10		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the							ĺ
	(1) On the foundation. > \$ (2) On foundation manager			0.				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expend	liture tax	imposed on found	ation				
	managers. ► \$ 0 .							
2	Has the foundation engaged in any activities that have not previously been reported to the	IRS?				2		X
	If "Yes," attach a detailed description of the activities.							
3	Has the foundation made any changes, not previously reported to the IRS, in its governing	ınstrume	ent, articles of inco	rporation, o	r			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes					3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year	ar?				4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?				N/			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year	?				5		X
	If "Yes," attach the statement required by General Instruction T							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied 6	either:						
	By language in the governing instrument, or							
	ullet By state legislation that effectively amends the governing instrument so that no mandato	ry directi	ons that conflict w	ith the state	law			
	remain in the governing instrument?					6	X	<u> </u>
7	Did the foundation have at least $$5,000$ in assets at any time during the year? If "Yes," com	plete Par	t II, col (c), and Pa	ırt XV		7	Х	<u> </u>
8a	Enter the states to which the foundation reports or with which it is registered. See instruction	ons.						
	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 design	ate)			,	
	of each state as required by General Instruction G? If "No," attach explanation					8b	X	
	Is the foundation claiming status as a private operating foundation within the meaning of si			(5) for cale	ndar			、つ
	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," cor			~	m) eer	3 9	7.7	_ A_
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a sched	ule listing	their names and addre	esses S	TMT	3 10	X	(0017)
						Form 99 0	<i>-</i> -	(2017)

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Pa	rt VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	Ì	İ	
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	į		
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u> </u>
	Website address ► N/A			
14	The books are in care of ► SWEENEY CONRAD, P.S. Telephone no. ► (425)		<u>-19</u>	<u>90</u>
	Located at ► 2606 116TH AVE NE, SUITE 200, BELLEVUE, WA ZIP+4 ►	<u> 8004</u>	<u> </u>	_
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			•
	and enter the amount of tax-exempt interest received or accrued during the year	N	I/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	_
	securities, or other financial account in a foreign country?	16_		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
_	foreign country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		1	
	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?		ľ	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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)			
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	1 <u>b</u>	ļ .	X
	Organizations relying on a current notice regarding disaster assistance, check here			
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 2017?	1c		X
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)):			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017?			
	If "Yes," list the years \(\bigs_{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tik}\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tetx{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\texi}\text{\text{\text{\text{\texi}\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\te			
D				
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) N/A	25	ļ	
_	•	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
2-	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
3a	during the year? Yes X No	- }		
_	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after	İ		
U	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 2017) N/A	3b		
Aa	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	74		<u> </u>
U	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	46		х
		Form 99 0	0-PF	

		1		
2 Compensation of five highest-paid employees (other than those in	ncluded on line 1). 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				
		-		
		-		
	_			
	4			
Total number of other employees paid over \$50,000	<u> </u>			

Form **990-PF** (2017)

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Part VIII Information About Officers, Directors, Trustees, Fo Paid Employees, and Contractors (continued)	undation Managers, Highly	
3 Five highest-paid independent contractors for professional services. 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 relevan	nt statistical information such as the	
number of organizations and other beneficiaries served, conferences convened, research paper	ers produced, etc	Expenses
1 N/A		
2		
3		
· · · · · · · · · · · · · · · · · · ·		
4		
Part IX-B Summary of Program-Related Investments		Amarint
Describe the two largest program-related investments made by the foundation during the tax y	rear on lines 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		
Total Add lines 1 through 3		0.

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	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	697,473.
b	Average of monthly cash balances	1b	
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	697,473.
е	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	697,473.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	10,462.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	687,011.
6	Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	3,106.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here ▶ □ and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	3,106.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	3,106.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	3,106.
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	3,106.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0.
	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:		
а	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	0.
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	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	0.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years.	qualities for	tne section

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7	Copye			3,106.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only	İ		0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2017:				
a From 2012	1			
b From 2013				
c From 2014				
d From 2015				
e From 2016				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2017 from				
Part XII, line 4: ►\$ 0.				
a Applied to 2016, 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 2017 distributable amount				0.
e Remaining amount distributed out of corpus	. 0.			
5 Excess distributions carryover applied to 2017 (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 2016 Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				3,106.
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 2012	_			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018.	_			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2013	İ			
b Excess from 2014	ļ			
c Excess from 2015	ļ			
d Excess from 2016	}			
e Excess from 2017			<u> </u>	5 000 DE (0047)

	FOUNDATION				80048 Page 10
Part XIV Private Operating F		· · · · · · · · · · · · · · · · · · ·	-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for		=	. ▶ └	1,0,0,0,0	
b Check box to indicate whether the foun		ng foundation described i		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(5) 2016	Prior 3 years	(d) 2014	(a) Faral
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(0) 2014	(e)·Total
investment return from Part X for					
each year listed					/
b 85% of line 2a					/
c Qualifying distributions from Part XII,				1	
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)		<u> </u>		"	
(3) Largest amount of support from					
an exempt organization					<u> </u>
(4) Gross investment income Part XV Supplementary Info	ormation (Comple	te this part only	if the foundation	n had \$5.000 or m	ore in assets
at any time during					
1 Information Regarding Foundation					•
a List any managers of the foundation wh	_	than 2% of the total cont	ributions received by the	e foundation before the clo	se of any tax
year (but only if they have contributed i					,
ELIOT CROWTHER					
b List any managers of the foundation wh	no own 10% or more of th	e stock of a corporation (or an equally large port	ion of the ownership of a p	artnership or
other entity) of which the foundation ha			, , , , , , , , , , , , , , , , , , , ,		
NONE					
2 Information Regarding Contribut	tion, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:	· · · · · · · · · · · · · · · · · · ·	•
Check here 🕨 🗓 if the foundation of				not accept unsolicited req	uests for funds If
the foundation makes gifts, grants, etc.	, to individuals or organiza	ations under other condit	ons, complete items 2a	, b, c, and d.	
a The name, address, and telephone num	iber or email address of th	ne person to whom applic	ations should be addres	ssed:	
b The form in which applications should	be submitted and informa	tion and materials they sh	nould include;		
c Any submission deadlines:					
<u> </u>					
d Any restrictions or limitations on award	s, such as by geographica	al areas, charitable fields,	kınds of ınstitutions, or	other factors:	

MSIX20 FOUNDATION 82-3680048 Form 990-PF (2017) Page 11 Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of Purpose of grant or contribution Amount Name and address (home or business) recipient a Paid during the year NONE ▶ 3a 0. Total b Approved for future payment NONE

▶ 3b

Total

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

nter gross amounts unless otherwise indicated.	Unrelate	ed business income		ided by section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
	Code		10000		
<u> </u>			-		
b			├	· - <u>-</u>	,
C			↓		
d			ļ		
e					
f			1		
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			ļ		
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			 		
O Gross profit or (loss) from sales of inventory			\vdash		
1 Other revenue:					
a					
b				_	
C					
d			ļ		
e					
2 Subtotal Add columns (b), (d), and (e)		0.		0.	
3 Total. Add line 12, columns (b), (d), and (e)				13	0.
See worksheet in line 13 instructions to verify calculations.)					
				A D	
Part XVI-B Relationship of Activities t	o the Acc	omplishment of Ex	temp	t Purposes	
Line No Explain below how each activity for which inco	me is reported	in column (e) of Part XVI-A	contri	buted importantly to the accor	nplishment of
the foundation's exempt purposes (other than				, ,	,
		1			
					
		<u></u>			
					<u> </u>
					
					
				 	
			-		
					

Part XVII	Information Regarding Transfers to Exempt Organizations	and Transactions a	nd Relationships With Nonc	haritable	
1 Did the or	rganization directly or indirectly engage in any of the follo	wing with any other organization	on described in section 501(c)		Yes No
	an section 501(c)(3) organizations) or in section 527, rela		an described in section so i(e)		100 110
· ·	from the reporting foundation to a noncharitable exempt				
(1) Cash		organization of		1a(1)	x
(2) Othe				1a(2)	<u> </u>
b Other trai				1-3-7	
	s of assets to a noncharitable exempt organization			16(1)	x
` '	hases of assets from a noncharitable exempt organization	า		1b(2)	X
` '	al of facilities, equipment, or other assets			1b(3)	X
	bursement arrangements			1b(4)	X
(5) Loan	s or loan guarantees			1b(5)	X
	ormance of services or membership or fundraising solicit	ations		1b(6)	X
, ,	of facilities, equipment, mailing lists, other assets, or paid			1c	X
d If the ans	wer to any of the above is "Yes," complete the following s	chedule. Column (b) should alv	ways show the fair market value of the go	ods, other ass	ets,
	es given by the reporting foundation. If the foundation rec				
column (d) the value of the goods, other assets, or services receiv	ed.			
a) Line no	(b) Amount involved (c) Name of noncharita	able exempt organization	(d) Description of transfers, transactions	s, and sharing arr	angements
	N/A	4			
		<u></u>			

2a Is the fou	ndation directly or indirectly affiliated with, or related to, o	one or more tax-exempt organi	zations described		
in section	501(c) (other than section 501(c)(3)) or in section 527?			Yes	X No
b If "Yes," c	omplete the following schedule.				
•	(a) Name of organization	(b) Type of organization	(c) Description of rela	tionship	
	N/A				
	penalties of perjury, I declare that I have examined this return, incli			May the IRS d	scuss this
Sign L	elief, it is true, correct and complete Declaration of prepare fother	than taxpayer) is based on all inform	eation of which preparer has any knowledge	May the IRS d return with the shown below?	preparer See instr
Here	MARKEN	11/14/68	PRESIDENT	X Yes	☐ No
Sigi	nature of officer or trustee	Date /	Title	<u> </u>	
•	Print/Type preparer's name Preparer	s signature	Date Check If P	PTIN	
	GREGORY N. LACOMBE,		self- employed		
Paid	CPA	~~	1-11/18	P01226	401
Preparer	Firm's name > SWEENEY CONRAD D	S.	Firm's EIN ► 91	-13016	72
Use Only					
	Firm's address ▶ 2606 116TH AVENU	JE NE, SUITE 2	00		
	BELLEVUE, WA 980			5) 629	<u>-199</u> 0
					PF (2017)

Schedule B or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Employer identification number

Name of the organization 82-3680048 MSIX20 FOUNDATION Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% 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

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

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

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

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

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

the prevention of cruelty to children or animals. Complete Parts I, II, and III

religious, charitable, etc., contributions totaling \$5,000 or more during the year

Name of organization

Employer identification number

MSIX20 FOUNDATION

82-3680048

Part i	Contributors (see instructions) Use duplicate copies of Part I if additional	Il space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ELIOT CROWTHER 11807 NE 73RD ST KIRKLAND, WA 98033	\$ 658,229.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

MSIX20 FOUNDATION

82-3680048

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if	encash Property (see instructions) Use duplicate copies of Part II if additional space is needed				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
1	235,000 SHARES OF PUSHPAY HOLDINGS LIMITED STOCK	659 220	10/17/17			
(a) No. from	(b) Description of noncash property given	\$ 658,229. (c) FMV (or estimate)	(d) Date received			
Part I		(See instructions.)				
		\$				
(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			
		\$				
723453 11-01			90. 990-EZ. or 990-PF) (2017)			

Employer identification number Name of organization 82-3680048 MSIX20 FOUNDATION 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 Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (d) Description of how gift is held (c) Use of gift (b) Purpose of gift (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF	LEGAL	FEES		STATEMENT	1
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
	10,000.	10,000.		0.	0.
TO FM 990-PF, PG 1, LN 16A	10,000.	10,000.		0.	0.
FORM 990-PF	CORPORATE STOCK			STATEMENT	2
DESCRIPTION		во	OK VALUE	FAIR MARKE	Т
PUSHPAY STOCK			658,229.	697,4	73.
TOTAL TO FORM 990-PF, PART I	697,473.				
	F SUBSTANTIA PART VII-A,	L CONTRIBUTORS	5	STATEMENT	3
NAME OF CONTRIBUTOR	ADDR	ESS			
ELIOT CROWTHER		 7 NE 73RD ST LAND, WA 9803:			