

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93491318029967		
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. Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.			OMB No 1545-0052  2016  Open to Public Inspection	
For calendar year 2016, or tax year beginning 01-01-2016, and ending 12-31-2016						
Name of foundation BECU Foundation			A Employer identification number 91-1703337			
Number and street (or P O box number if mail is not delivered to street address) 12770 Gateway Dr S Mailstop 1011-1		Room/suite	B Telephone number (see instructions) (206) 439-5700			
City or town, state or province, country, and ZIP or foreign postal code Tukwila, WA 98168			C If exemption application is pending, check here			
G Check all that apply Initial return Final return Address change Initial return of a former public charity Amended return Name change			D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation			
H Check type of organization Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation			E If private foundation status was terminated under section 507(b)(1)(A), check here			
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 3,489,822		J Accounting method Cash Accrual Other (specify) (Part I, column (d) must be on cash basis)		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here		
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )			(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1	Contributions, gifts, grants, etc , received (attach schedule)	458,317			
	2	Check if the foundation is not required to attach Sch B				
	3	Interest on savings and temporary cash investments	129	129		
	4	Dividends and interest from securities	61,035	61,035		
	5a	Gross rents				
	b	Net rental income or (loss)				
	6a	Net gain or (loss) from sale of assets not on line 10	92,643			
	b	Gross sales price for all assets on line 6a	1,023,202			
	7	Capital gain net income (from Part IV, line 2)		92,643		
	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)	2,000	0			
12	Total. Add lines 1 through 11	614,124	153,807			
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc	0	0		0
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
	16a	Legal fees (attach schedule)				
	b	Accounting fees (attach schedule)	10,000	2,000		8,000
	c	Other professional fees (attach schedule)	46,057	46,057		0
	17	Interest				
	18	Taxes (attach schedule) (see instructions)	2,500	0		0
	19	Depreciation (attach schedule) and depletion				
	20	Occupancy				
	21	Travel, conferences, and meetings				
	22	Printing and publications				
	23	Other expenses (attach schedule)	77,248	0		18,000
	24	Total operating and administrative expenses. Add lines 13 through 23	135,805	48,057		26,000
	25	Contributions, gifts, grants paid	243,000			243,000
26	Total expenses and disbursements. Add lines 24 and 25	378,805	48,057		269,000	
	27	Subtract line 26 from line 12				
	a	Excess of revenue over expenses and disbursements	235,319			
	b	Net investment income (if negative, enter -0-)		105,750		
	c	Adjusted net income (if negative, enter -0-)				
For Paperwork Reduction Act Notice, see instructions.			Cat No 11289X		Form 990-PF (2016)	

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 (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing . . . . .	300,784	109,810	109,810
	2	Savings and temporary cash investments . . . . .			
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)	776,401	880,434	880,434
	b	Investments—corporate stock (attach schedule) . . . . .	1,797,550	2,108,497	2,108,497
	c	Investments—corporate bonds (attach schedule) . . . . .	244,101	372,987	372,987
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .			
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)	18,444	18,094	18,094	
16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	3,137,280	3,489,822	3,489,822	
Liabilities	17	Accounts payable and accrued expenses . . . . .	1,300	1,422	
	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	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	1,300	1,422	
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	24	Unrestricted . . . . .	1,115,889	1,402,015	
	25	Temporarily restricted . . . . .	210,091	276,385	
	26	Permanently restricted . . . . .	1,810,000	1,810,000	
	<b>Foundations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 27 through 31.</b>				
	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	<b>Total net assets or fund balances</b> (see instructions) . . . . .	3,135,980	3,488,400	
	31	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	3,137,280	3,489,822	

**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	3,135,980
2	Enter amount from Part I, line 27a . . . . .	2	235,319
3	Other increases not included in line 2 (itemize) ▶ _____	3	117,101
4	Add lines 1, 2, and 3 . . . . .	4	3,488,400
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	3,488,400

**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 )
<b>1 a</b> Publicly traded stock - LT			
<b>b</b> ST Capital Gain Distribution	P		
<b>c</b>			
<b>d</b>			
<b>e</b>			

(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)
<b>a</b> 1,023,017		930,559	92,458
<b>b</b> 185			185
<b>c</b>			
<b>d</b>			
<b>e</b>			

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	
<b>a</b>			92,458
<b>b</b>			185
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> 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 }	<b>2</b>	92,643
<b>3</b> 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		<b>3</b>	

**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))
2015	285,294	3,064,129	0 093108
2014	267,510	2,946,343	0 090794
2013	184,509	2,626,200	0 070257
2012	157,759	2,293,714	0 068779
2011	141,964	2,035,076	0 069759

<b>2</b> Total of line 1, column (d)	<b>2</b>	0 392697
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	0 078539
<b>4</b> Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	<b>4</b>	3,235,517
<b>5</b> Multiply line 4 by line 3	<b>5</b>	254,114
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	1,058
<b>7</b> Add lines 5 and 6	<b>7</b>	255,172
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	269,000

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)**

<b>1a</b>	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>b</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 . . . . .	<b>1</b>	1,058
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	1,058
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	1,058
<b>6</b>	Credits/Payments		
<b>a</b>	2016 estimated tax payments and 2015 overpayment credited to 2016	<b>6a</b>	2,500
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	2,500
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	<b>10</b>	1,442
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2017 estimated tax</b> <input type="checkbox"/> 80 <b>Refunded</b> <input type="checkbox"/>	<b>11</b>	1,362

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> 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? . . . . .	<b>1a</b>	No
<b>b</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>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ 0 (2) On foundation managers <input type="checkbox"/> \$ 0		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0		
<b>2</b> 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>	<b>2</b>	No
<b>3</b> 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> . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<b>5</b>	No
<b>6</b> 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? . . . . .	<b>6</b>	Yes
<b>7</b> 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> . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> WA		
<b>b</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> .	<b>8b</b>	Yes
<b>9</b> 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 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	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).	<b>11</b>		<b>No</b>
<b>12</b>	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)	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>www BECU org</b>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>Rachel Van Noord</b> Telephone no <b>(206) 439-5700</b>			

Located at **12770 Gateway Dr S Tukwila WA** ZIP+4 **98168**

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . <b>15</b>			
<b>16</b>	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country <b>▶</b>	<b>16</b>	<b>Yes</b>	<b>No</b>

**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.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" 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? ( <b>Exception.</b> 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>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> <b>1b</b>			
<b>c</b>	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 2016? <input type="checkbox"/> <b>1c</b>			<b>No</b>
<b>2</b>	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))			
<b>a</b>	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>▶ 20____, 20____, 20____, 20____</b>			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions). <input type="checkbox"/> <b>2b</b>			
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here <b>▶ 20____, 20____, 20____, 20____</b>			
<b>3a</b>	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>b</b>	If "Yes," did it have excess business holdings in 2016 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 2016). <input type="checkbox"/> <b>3b</b>			
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</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 2016?	<b>4b</b>		<b>No</b>

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

<b>5a</b> During the year did the foundation pay or incur any amount to				
(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 checked="" type="checkbox"/> Yes <input 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>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> 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)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>5b</b>		<b>No</b>
Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>c</b> 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
If "Yes," attach the statement required by Regulations section 53.4945–5(d)				
<b>6a</b> 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			
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>6b</b>		<b>No</b>
If "Yes" to 6b, file Form 8870				
<b>7a</b> 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			
<b>b</b> If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>7b</b>		

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

<b>1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).</b>				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
Bruce Florsheim 12770 GATEWAY DR S Tukwila, WA 98168	President 1 00	0	0	0
Andrea Main 12770 GATEWAY DR S Tukwila, WA 98168	Vice President 1 00	0	0	0
Roger Mauldin 12770 GATEWAY DR S Tukwila, WA 98168	Treasurer 1 00	0	0	0
Deborah Wege 12770 GATEWAY DR S Tukwila, WA 98168	Secretary/Executive Director 1 00	0	0	0
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				
<b>Total number of other employees paid over \$50,000.</b>				0

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

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

**Part IX-A Summary of Direct Charitable Activities**

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

	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**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
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . . ►	0

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	3,184,551
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	96,307
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	3,931
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	3,284,789
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	3,284,789
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	49,272
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	3,235,517
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	161,776

**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.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	161,776
<b>2a</b>	Tax on investment income for 2016 from Part VI, line 5.	<b>2a</b>	1,058
<b>b</b>	Income tax for 2016 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	1,058
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	160,718
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	2,000
<b>5</b>	Add lines 3 and 4.	<b>5</b>	162,718
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	162,718

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	269,000
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	269,000
<b>5</b>	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).	<b>5</b>	1,058
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	267,942

**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 2015	(c) 2015	(d) 2016
<b>1</b> Distributable amount for 2016 from Part XI, line 7				162,718
<b>2</b> Undistributed income, if any, as of the end of 2016				
<b>a</b> Enter amount for 2015 only. . . . .			0	
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2016				
<b>a</b> From 2011. . . . .	18,941			
<b>b</b> From 2012. . . . .	157,759			
<b>c</b> From 2013. . . . .	184,509			
<b>d</b> From 2014. . . . .	268,954			
<b>e</b> From 2015. . . . .	286,127			
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	916,290			
<b>4</b> Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 269,000				
<b>a</b> Applied to 2015, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2016 distributable amount. . . . .				162,718
<b>e</b> Remaining amount distributed out of corpus	106,282			
<b>5</b> Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,022,572			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> 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		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 . . . . .				0
<b>7</b> 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			
<b>8</b> Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions). . . . .	18,941			
<b>9</b> <b>Excess distributions carryover to 2017.</b> Subtract lines 7 and 8 from line 6a . . . . .	1,003,631			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2012. . . . .	157,759			
<b>b</b> Excess from 2013. . . . .	184,509			
<b>c</b> Excess from 2014. . . . .	268,954			
<b>d</b> Excess from 2015. . . . .	286,127			
<b>e</b> Excess from 2016. . . . .	106,282			

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

<b>1a</b> If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. . . . . ▶					
<b>b</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)					
<b>2a</b> 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) 2016	(b) 2015	(c) 2014	(d) 2013	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

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

<b>1 Information Regarding Foundation Managers:</b>	
<b>a</b> 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>b</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	
<b>2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:</b>	
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. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.	
<b>a</b> The name, address, and telephone number or e-mail address of the person to whom applications should be addressed Rachel Van Noord 12770 Gateway Dr S TUKWILA, WA 98168 (206) 439-5700	
<b>b</b> The form in which applications should be submitted and information and materials they should include FORM IS AVAILABLE ONLINE JANUARY 1ST AT WWW BECU ORG	
<b>c</b> Any submission deadlines MARCH 31ST	
<b>d</b> Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors NO RESTRICTIONS OR LIMITATIONS	

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			<b>3a</b>	243,000
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			<b>3b</b>	0

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount		
<b>1</b> Program service revenue						
<b>a</b> _____						
<b>b</b> _____						
<b>c</b> _____						
<b>d</b> _____						
<b>e</b> _____						
<b>f</b> _____						
<b>g</b> Fees and contracts from government agencies						
<b>2</b> Membership dues and assessments. . . . .						
<b>3</b> Interest on savings and temporary cash investments . . . . .			14	129		
<b>4</b> Dividends and interest from securities. . . . .			14	61,035		
<b>5</b> Net rental income or (loss) from real estate						
<b>a</b> Debt-financed property. . . . .						
<b>b</b> Not debt-financed property. . . . .						
<b>6</b> Net rental income or (loss) from personal property						
<b>7</b> Other investment income. . . . .						
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .			18	92,643		
<b>9</b> Net income or (loss) from special events						
<b>10</b> Gross profit or (loss) from sales of inventory						
<b>11</b> Other revenue						
<b>a</b> Prior Year Grant _____	900099					2,000
<b>b</b> _____						
<b>c</b> _____						
<b>d</b> _____						
<b>e</b> _____						
<b>12</b> Subtotal. Add columns (b), (d), and (e). . . . .		0		153,807		2,000
<b>13</b> <b>Total.</b> Add line 12, columns (b), (d), and (e). . . . .			<b>13</b>			155,807

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**[illegible]

## Part XVII

	Yes	No
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<b>1a(1)</b>	<b>No</b>
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1a(2)	No
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<b>1b(1)</b>	<b>No</b>
--------------	-----------

1b(2)	No
-------	----

1b(3)	No
-------	----

1b(4)	Yes	
-------	-----	--

1b(5)	No
-------	----

<b>1b(6)</b>	<b>No</b>
--------------	-----------

1c	Yes	
----	-----	--

value  
ue

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations

described in section 501(c) of the Code (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
Boeing Employees' Credit Union	501(c)(14)	Substantial Contributor

<b>Sign</b>	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.
-------------	--

\*\*\*\*\* 2017-11-10 \*\*\*\*\*  
 Signature of officer or trustee Date Title  
 (see instr. 1) ☒ Yes ☐ No

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN  P00448102
	Wendy Campos		2017-11-10		
	Firm's name ▶ Moss Adams LLP				Firm's EIN ▶ 91-0189318
	Firm's address ▶ 601 W Riverside Avenue Ste 1800 Spokane, WA 99201				Phone no (509) 747-2600

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)				
<b>a</b> <i>Paid during the year</i>				
Abigail Snyder 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Akisha Bedgisoff 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Alex Shang 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Alexa Landis 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Amanda Stice 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
<b>Total . . . . . ▶</b> <b>3a</b>				243,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Andrew Vo 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Andrew Wallen 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Anna Lynch 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Ashley Barnett 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Brett Bashaw 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
<b>Total . . . . . ▶</b> <b>3a</b>				243,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Brianna Soulier 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Christian Knutson 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Christina Kobayashi 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Christina Lundy 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Darrell Lee 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
<b>Total . . . . . ▶</b> <b>3a</b>				243,000



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Derek Ramage 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Devin McDonald 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Dominique Tate 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Dylan Milligan 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Eilish McLean 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
<b>Total . . . . . ▶</b> <b>3a</b>				243,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Ellise Ward 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Emily Ness 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Emily Saunders 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Esther Powers 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Gabrielle Carufel 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
<b>Total . . . . . ▶</b> <b>3a</b>				243,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Grace Kariuki 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Hailey Johnston 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Hanna Venera 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Hannah Bolotin 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Hannah Fox 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
<b>Total . . . . . ▶</b> <b>3a</b>				243,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Hannah Vincelette 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Hemlal Acharya 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Janelle Gibson 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Jessi Beyer 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Josef Sollmann 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
<b>Total . . . . . ▶</b> <b>3a</b>				243,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Juliana Lynch 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Kaitlyn Smith 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Katelyn Sherick 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Katrina Lacayo 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Kaylee Hansen 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
<b>Total . . . . . ▶</b> <b>3a</b>				243,000


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Kaylee Hatfield 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Kelcie Urstad 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Kiana Peterson 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Krista Vavrik 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Kristina Alvarez 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
<b>Total . . . . . ▶</b> <b>3a</b>				243,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Kyle Dickson 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Kyleigh Carbon 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Kylie Rademacher 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Landon Berry 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Leah Shin 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
<b>Total . . . . . ▶</b> <b>3a</b>				243,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Leeza Schwartz 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Macey Bishop 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Maggie Ugelstad 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Malgorzata Radka 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Maria Namuddu 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
<b>Total . . . . . ▶</b> <b>3a</b>				243,000




Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Matthew Groome 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Matthew Malueg 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Meaghan Oakes 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Melanie Chen 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Michael Lee 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
<b>Total . . . . . ▶</b> <b>3a</b>				243,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Michael Mason 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Michael Shea 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Milton Baidoum 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Nicholas Braukmann 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Peri Kirkpatrick 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
<b>Total</b> . . . . . 				243,000
<b>3a</b>				

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)				
<b>a</b> <i>Paid during the year</i>				
Rachel Groberman 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Rose Myers 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Sarah Macala 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Sarah Stefanik 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Sean Yu 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
<b>Total . . . . . ▶</b> <b>3a</b>				243,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Shelby Kremenich 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Sierra Tireman 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Sophia Nguyen 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Spencer Broden 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Sydney Walker 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
<b>Total . . . . . ▶</b> <b>3a</b>				243,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Vincy Fok 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
William Miller 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Winter Wilson 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Zachary Hasson 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
Zoey Salsbury 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
<b>Total . . . . . ▶</b> <b>3a</b>				243,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Marlena R Angermann 12770 Gateway Dr S Tukwila, WA 98168	BECU Member	I	Scholarship	3,000
<b>Total</b> . . . . . 				243,000
<b>3a</b>				

**TY 2016 Accounting Fees Schedule****Name:** BECU Foundation**EIN:** 91-1703337

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
Audit Expense	10,000	2,000		8,000

**TY 2016 Investments Corporate Bonds Schedule****Name:** BECU Foundation**EIN:** 91-1703337

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
ISHARES 1-3 YEAR CREDIT BOND ETF	169,688	169,688
SPDR BARCLAYS SHORT TERM CORPORATE	203,299	203,299



**TY 2016 Investments Corporate Stock Schedule****Name:** BECU Foundation**EIN:** 91-1703337

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
DODGE & COX STOCK FUND #145	0	0
ISHARES CORE MSCI EMERGING MKTS	221,589	221,589
ISHARES CORE S&P SMALL-CAP ETF	275,590	275,590
ISHARES TR CORE MSCI EAFE ETF	234,524	234,524
ISHARES S&P MID-CAP 400 VALUE ETF	226,382	226,382
PIMCO ALL ASSET FUND CLASS I #34	70,546	70,546
SPDR S&P 500 ETF TRUST	352,954	352,954
T ROWE PRICE INSTITUTIONAL	43,354	43,354
VANGUARD DIVIDEND GROWTH FUND #57	97,902	97,902
VANGUARD INDEX FDS VANGUARD	135,803	135,803
VANGUARD INTL GROWTH FUND ADM #581	115,576	115,576
VANGUARD MID-CAP GROWTH FUND #301	33,669	33,669
VANGUARD VALUE ETF	300,608	300,608

**TY 2016 Investments Government Obligations Schedule****Name:** BECU Foundation**EIN:** 91-1703337**US Government Securities - End  
of Year Book Value:**

880,434

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

880,434

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

0

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

0

## TY 2016 Other Assets Schedule

**Name:** BECU Foundation

**EIN:** 91-1703337

### Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
Accrued Interest/Contributions	18,444	18,094	18,094

**TY 2016 Other Expenses Schedule****Name:** BECU Foundation**EIN:** 91-1703337**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Golf Tournament Fees	59,248	0		0
Other Operating Expenses	18,000	0		18,000

# TY 2016 Other Income Schedule

**Name:** BECU Foundation

**EIN:** 91-1703337

## Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
Prior Year Grant	2,000		0

**TY 2016 Other Increases Schedule**

**Name:** BECU Foundation

**EIN:** 91-1703337

Description	Amount
Unrealized Gain (loss) on Investments	117,101

**TY 2016 Other Professional Fees Schedule****Name:** BECU Foundation**EIN:** 91-1703337

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
Consulting Fees	29,922	29,922		0
Investment Fees	16,135	16,135		0

**TY 2016 Taxes Schedule****Name:** BECU Foundation**EIN:** 91-1703337

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
Federal Income Tax	2,500	0		0



<b>Schedule B</b> (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	<b>Schedule of Contributors</b>  ▶ <b>Attach to Form 990, 990-EZ, or 990-PF</b> ▶ <b>Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <u>www.irs.gov/form990</u></b>	OMB No 1545-0047  <b>2016</b>
	<b>Name of the organization</b> BECU Foundation	<b>Employer identification number</b> 91-1703337

Organization type (check one)

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> 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 33<sup>1</sup>/<sub>3</sub>% 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. Do not 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 is not covered by the General Rule and/or the Special Rules does not 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 does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

<b>Name of organization</b> BECU Foundation	<b>Employer identification number</b> 91-1703337
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**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
—	See Additional Data Table _____ _____	\$ _____	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
—	_____ _____ _____	\$ _____	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
—	_____ _____ _____	\$ _____	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
—	_____ _____ _____	\$ _____	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
—	_____ _____ _____	\$ _____	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
—	_____ _____ _____	\$ _____	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
—	_____ _____ _____	\$ _____	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )
—	_____ _____ _____	\$ _____	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/>  (Complete Part II for noncash contribution )

<b>Name of organization</b> BECU Foundation	<b>Employer identification number</b> 91-1703337
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<b>Part II</b> <b>Noncash Property</b> (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	Donated Consulting Services	\$ 29,921	2016-06-30
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

<b>Name of organization</b> BECU Foundation	<b>Employer identification number</b> 91-1703337
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<b>Part III</b>	<b>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.) ▶ \$ _____</b> Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	<div></div> <div></div>	<div></div> <div></div>	

Additional Data

Software ID:  
Software Version:  
EIN: 91-1703337  
Name: BECU Foundation

Form 990 Schedule B, 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
<u>1</u>	Boeing Employees' Credit Union	\$ 158,333	Person <input checked="" type="checkbox"/>
	12770 GATEWAY DR S Mailstop 1011-1		Payroll <input type="checkbox"/>
	Tukwila, WA98168		Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contribution )
<u>2</u>	Wild Waves Inc	\$ 7,593	Person <input checked="" type="checkbox"/>
	16201 Enchanted Pkwy		Payroll <input type="checkbox"/>
	Federal Way, WA98003		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )
<u>3</u>	BRIDGEFORCE	\$ 7,500	Person <input checked="" type="checkbox"/>
	101 Ponds Edge Drive Suite 300		Payroll <input type="checkbox"/>
	Chadds Ford, PA19317		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )
<u>4</u>	COLUMBIA PACIFIC WEALTH MANAGEMENT	\$ 7,500	Person <input checked="" type="checkbox"/>
	1910 Fairview Avenue East Ste 200		Payroll <input type="checkbox"/>
	Seattle, WA98102		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )
<u>5</u>	COOP FINANCIAL	\$ 15,000	Person <input checked="" type="checkbox"/>
	9692 Haven Ave		Payroll <input type="checkbox"/>
	Rancho Cucamonga, CA91307		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )
<u>6</u>	DELL EMC	\$ 7,500	Person <input checked="" type="checkbox"/>
	505 1st Ave S 60		Payroll <input type="checkbox"/>
	Seattle, WA98104		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution )

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>7</u>	FISERV	\$ 30,000	<b>Person</b> <input checked="" type="checkbox"/>
	PO Box 979		<b>Payroll</b> <input type="checkbox"/>
	Brookfield, WI53008		<b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
<u>8</u>	Lester and Bernice Smith Foundation	\$ 7,500	<b>Person</b> <input checked="" type="checkbox"/>
	4101 Oakesdale Ave		<b>Payroll</b> <input type="checkbox"/>
	Renton, WA98057		<b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
<u>9</u>	LOOMIS	\$ 7,500	<b>Person</b> <input checked="" type="checkbox"/>
	3716 S G Street		<b>Payroll</b> <input type="checkbox"/>
	Tacoma, WA98444		<b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
<u>10</u>	MASTERCARD	\$ 50,000	<b>Person</b> <input checked="" type="checkbox"/>
	2000 Purchase St		<b>Payroll</b> <input type="checkbox"/>
	Purchase, NY10577		<b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
<u>11</u>	MX	\$ 7,500	<b>Person</b> <input checked="" type="checkbox"/>
	3401 N Thanksgiving Way Suite 500		<b>Payroll</b> <input type="checkbox"/>
	Lehi, UT84043		<b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
<u>12</u>	NCR CORPORATION	\$ 15,000	<b>Person</b> <input checked="" type="checkbox"/>
	2212 Warren Avenue North		<b>Payroll</b> <input type="checkbox"/>
	Seattle, WA98109		<b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>13</u>	POINT B	\$ 7,500	<b>Person</b> <input checked="" type="checkbox"/>
	1420 Fifth Avenue Suite 2200		<b>Payroll</b> <input type="checkbox"/>
	Seattle, WA98101		<b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
<u>14</u>	PSCU	\$ 50,000	<b>Person</b> <input checked="" type="checkbox"/>
	560 Carillon Parkway		<b>Payroll</b> <input type="checkbox"/>
	St Petersburg, FL33716		<b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
<u>15</u>	SWINERTON BROTHERS	\$ 7,500	<b>Person</b> <input checked="" type="checkbox"/>
	260 Townsend St		<b>Payroll</b> <input type="checkbox"/>
	San Francisco, CA94107		<b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
<u>16</u>	TRANSUNION	\$ 7,500	<b>Person</b> <input checked="" type="checkbox"/>
	555 W Adams		<b>Payroll</b> <input type="checkbox"/>
	Chicago, IL60661		<b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
<u>17</u>	USI KIBBLE & PRENTICE	\$ 7,500	<b>Person</b> <input checked="" type="checkbox"/>
	601 Union Street Ste 1000		<b>Payroll</b> <input type="checkbox"/>
	Seattle, WA98101		<b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )
<u>18</u>	WEST MONROE PARTNERS	\$ 7,500	<b>Person</b> <input checked="" type="checkbox"/>
	14826 219TH DR SE		<b>Payroll</b> <input type="checkbox"/>
	MONROE, WA98272		<b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contribution )

Form 990 Schedule B, 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
<div>19</div>	ZAYO	<div>\$ 15,000</div>	<div> <div>Person <input checked="" type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II for noncash contribution )</div> </div>
	20829 72nd Ave S Suite 300		
	Kent, WA 98032		