EXTENDED TO MAY 16, 2016

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at <u>www.irs.gov/form990.</u>

Inspection

Α	ror u	ne 2014 calendar year, or tax year beginning 000 1, 2014 and e	enaing U	<u>UN 30, ∠UIS</u>				
В	Check is applicat	C Name of organization		D Employer identif	ication number			
	Addr		ON					
	Nam chan	ge Doing business as		23-7	017467			
	Initia retur	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	er			
	Final	400 E UNIVERSITY WAY BARGE 401		509-963-2760				
	term ated			G Gross receipts \$ 19,746,851.				
	retur			H(a) Is this a group r				
	Appl tion	F Name and address of principal officer: SCOTT WADE		for subordinate	s? Yes X No			
	pend	SAME AS C ABOVE		H(b) Are all subordinates i	ncluded? Yes No			
<u>1</u>	Tax-e	xempt status: \mathbf{X} 501(c)(3) $\mathbf{\Box}$ 501(c)() $\mathbf{\triangleleft}$ (insert no.) $\mathbf{\Box}$ 4947(a)(1) or	527	If "No," attach a	a list. (see instructions)			
J	Webs	ite: ► WWW.CWU.EDU		H(c) Group exemption	on number			
K	Form o	of organization: X Corporation Trust Association Other >	L Year	of formation: 1968	M State of legal domicile: WA			
	art I	Summary						
	1	Briefly describe the organization's mission or most significant activities: SEE P	AGE 2	, LINE 1.				
Activities & Governance		· · · · · · · · · · · · · · · · · · ·						
rna	2	Check this box if the organization discontinued its operations or dispose	ed of more	than 25% of its net as	sets.			
Ş.	3	Number of voting members of the governing body (Part VI, line 1a)		3				
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	16			
ο O	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)			0			
iŧie	6	Total number of volunteers (estimate if necessary)			18			
çi	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.			
Ă	il b	Net unrelated business taxable income from Form 990-T, line 34						
		,		Prior Year	Current Year			
-	8	Contributions and grants (Part VIII, line 1h)		2,251,371.	2,446,058.			
nue	9	Program service revenue (Part VIII, line 2g)		0.				
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,788,384.	3,261,586.			
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		234,059.				
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,273,814.	5,997,407.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,257,576.	949,442.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.				
	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		203,786.				
ses	16:	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
Expenses	.oc	• Total fundraising expenses (Part IX, column (D), line 25) • 151,18	8.	,				
X	17			901,532.	1,146,226.			
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,362,894.				
	19	Revenue less expenses. Subtract line 18 from line 12		1,910,920.	3,685,995.			
7.5		Tieveride 1633 experises. Gubitaet inte 16 from inte 12		ginning of Current Year	End of Year			
Net Assets or	20	Total assets (Part X, line 16)	- 50	24,296,738.	25,016,338.			
Asse	21	Total liabilities (Part X, line 16)		383,373.	415,238.			
let/	22	Net assets or fund balances. Subtract line 21 from line 20		23,913,365.	24,601,100.			
P	art II			20,722,000.	21/001/1001			
		nalties of perjury, I declare that I have examined this return, including accompanying schedules a	and stateme	nts, and to the hest of m	v knowledge and helief it is			
		ect, and complete. Declaration of preparer (other than officer) is based on all information of which		•	y knowledge and belief, it is			
truc	, 00110	so, and complete. Declaration of proparer (other than officer) is based on an information of which	στι ρι οραι σι	nas any knowledge.				
Sig	n	Signature of officer		I Date				
Hei		SCOTT WADE, EXECUTIVE DIRECTOR						
He	E	Type or print name and title						
			T	Date Check	PTIN			
Pai	d	Print/Type preparer's name CATHY STERBENZ Preparer's signature CATHY STERBENZ		5/12/16 self-emplo				
	u parer	Firm's name MOSS ADAMS LLP	<u> </u>	Firm's EIN	91-0189318			
	Only	Firm's address P.O. BOX 22650	FIIIII S EIN	<u> </u>				
036	Unity	YAKIMA, WA 98907-2650		Dhone no 50	9-248-7750			
N46	v +b =	•		Pilotte IIo. 3 C				
ivia	y ine	IRS discuss this return with the preparer shown above? (see instructions)			X Yes No			

Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	\Box
1	Briefly describe the organization's mission:	
	THE CENTRAL WASHINGTON UNIVERSITY FOUNDATION IS A PARTNERSHIP OF	
	COMMITTED VOLUNTEERS WORKING IN CONCERT WITH DONORS, ALUMNI, FRIENDS,	
	AND THE UNIVERSITY COMMUNITIES TO RAISE PRIVATE FUNDS THAT SUPPORT THE	
	STUDENTS, FACULTY AND PROGRAMS AT CENTRAL WASHINGTON UNIVERSITY.	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	lo
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X N	lo
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 949,442 • including grants of \$ 949,442 •) (Revenue \$	_)
	SCHOLARSHIPS FOR STUDENTS: MAJORITY IS ALLOCATED TO CWU TO ASSIST	
	INDIVIDUALS.	_
		_
		_
		_
		_
		_
		_
		_
		_
		_
		_
4b	(Code:) (Expenses \$1,021,219 •including grants of \$0 • (Revenue \$)	
	PROGRAM SUPPORT FOR ACADEMIC PROGRAMS: SEMINARS, COLLOQUIMS, TRAVEL,	- 1
	WORKSHOPS, FELLOWSHIPS, HONORARIUMS, PUBLICATIONS AND CONFERENCES.	_
		_
		_
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		_
		_
		_
		_
		_
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
		- 1
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		_
		_
		_
4d	Other program services (Describe in Schedule O.)	_
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses \(\) 1,970,661.	_
	Form 990 (20:	14)

Form 990 (2014) CENTRAL WASHINGTON UNIVERSITY FOUNDATION Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes." <i>complete</i>			
•	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for	<u> </u>		
•	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		9		х
10	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	Ť		
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	-10		
••	as applicable.			
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а		11a		х
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	IIa		
b		11b		х
С	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
·		11c		х
a	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	110		
u		444		х
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	446	х	
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Λ	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-	х	
	Schedule D, Parts XI and XII	12a		
р	Was the organization included in consolidated, independent audited financial statements for the tax year?	40.		v
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			37
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			₹7
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		_X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			,,
	Schedule K. If "No", go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
_	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			₹.
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	0.51		Х
00	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes"			
	, , , , , , , , , , , , , , , , , , , ,	26		х
27	complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		-25
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
		27		х
28	of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	21		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
Ŭ	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
-	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form 990 (2014) CENTRAL WASHINGTON UNIVERSITY FOUNDATION 23-7017467 Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	4			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	(<u> </u>		
	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portab	le gaming			
	(gambling) winnings to prize winners?			1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	()		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authori	ty over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	accoun	t)?	4a		X
b	If "Yes," enter the name of the foreign country:					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccount	s (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction.	ction?		5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	_				x
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions.			6a		
b	ware mat have deal vetible 0	0115 01	giits	6b		
7	Organizations that may receive deductible contributions under section 170(c).			OD		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices n	rovided to the payor?	7a	Х	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	vioco p	ovided to the payor.	7b	Х	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as requ	iired			
	to file Form 8282?	· 		7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontract	?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control	act?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 88	99 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the	9			
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.			0-		
	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9a 9b		
10	Section 501(c)(7) organizations. Enter:			90		
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	10411)	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	-			13a		
L	Note. See the instructions for additional information the organization must report on Schedule O.					
D	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
_	Enter the amount of reserves on hand	13c		1		
	Did the execute time vessive and resource for indeed to make a visit of division the territory.			14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule			14b		
	, , , , , , , , , , , , , , , , , , ,				990	(2014)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 16 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 16 **b** Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? Х 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c in Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Х 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright WA$, ORSection 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Another's website X Upon request ___ Other (explain in Schedule O) Own website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: JULIANA LOWE - (509) 963-2760 400 E. UNIVERSITY WAY, BARGE 401, ELLENSBURG. WA

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average hours per	(do not che box, unless		(C) Position heck more than one ss person is both an d a director/trustee)			one n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) BRAD FITTERER	1.00	l							•	
CHAIR UNTIL MAY 2015	1 00	Х		Х				0.	0.	0.
(2) KEVIN MALONE	1.00								•	•
MEMBER UNTIL MAY 2015	1 00	Х				_		0.	0.	0.
(3) ROBERT NELLAMS	1.00	~		v				0.	0.	0
CHAIR STARTING MAY 2015	1.00	Х		Х				0.	0.	0.
(4) PATRICIA NOTTER MEMBER	1.00	Х						0.	0.	0.
(5) GREG LECLAIR	1.00	Λ						0.	0.	0.
MEMBER	1.00	Х						0.	0.	0.
(6) BEA KOEMPEL-THOMAS	1.00							•		
MEMBER		х						0.	0.	0.
(7) RALPH CONNER	1.00									
MEMBER		Х						0.	0.	0.
(8) GARY WOLF	1.00									
MEMBER		Х						0.	0.	0.
(9) ARNE HAYNES	1.00									
MEMBER		Х						0.	0.	0.
(10) BRADEN DRAGGOO	1.00									
MEMBER		Х						0.	0.	0.
(11) KELLY BENGSTON	1.00									
MEMBER		Х						0.	0.	0.
(12) JOE ADAMS	1.00									_
MEMBER	1	Х						0.	0.	0.
(13) JOHN DELANEY	1.00								•	
MEMBER	1 00	Х				_		0.	0.	0.
(14) AARON CHRISTOPHERSEN	1.00								0	•
MEMBER	1 00	Х						0.	0.	0.
(15) JEFF HENSLER	1.00	v		v					0	0
VICE CHAIR (16) JAMES GAUDINO	1 00	Х		Х				0.	0.	0.
PRESIDENT	1.00	Х		х				0.	0.	0.
(17) ANGY MEROLA	1.00	^		Δ.		\vdash		1	0.	U •
SECRETARY	1.00	Х		х				0.	0.	0.
	1	-22		-22	<u> </u>				J •	Form 990 (2014)

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Section A. Officers, Directors, Trus		ploy	ees,			ghes	t C	ompensated Employee	s (continued)			
(A)	(B)			_ (0				(D)	(E)		(F)	
Name and title	Average	(do	Position (do not check more than one				nne	Reportable	Reportable		Estima	ıted
	hours per	box	, unles	ss per	son is	s both	n an	compensation	compensation	·	amour	t of
	week	offic	cer an	id a di	recto	r/trus	tee)	from	from related		othe	: r
	(list any	etor						the	organizations		compen	sation
	hours for	r dir				ted		organization	(W-2/1099-MIS	C)	from	:he
	related	stee c	ruste			eusa		(W-2/1099-MISC)			organiz	
	organizations	altrus	nal t		loyee	comp					and rel	
	below	Individual trustee or director	Institutional trustee	Officer	key employee	Highest compensated employee	Former				organiza	itions
	line)	pul	l s	JJ0	Key	를 를 등	휸			-		
(18) PATRICIA GALLOWAY	1.00	ļ										
TREASURER		Х		Х				0.		0.		0.
(19) SCOTT WADE	1.00											
EXECUTIVE DIRECTOR				Х				0.		0.		0.
										-		
										\dashv		
										$\overline{}$		
1b Sub-total								0.		0.		0.
c Total from continuation sheets to Part VI	, Section A							0.		0.		0.
d Total (add lines 1b and 1c)							<u> </u>	0.		0.		0.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable			
compensation from the organization												0
											Yes	s No
3 Did the organization list any former officer,	director, or tru	ıste	e, ke	y en	nplo	yee,	or l	highest compensated en	nployee on	[
line 1a? If "Yes," complete Schedule J for si	ıch individual			•							3	х
4 For any individual listed on line 1a, is the su										···		
and related organizations greater than \$150	•							•	•	I	4	Х
5 Did any person listed on line 1a receive or a										····	•	
rendered to the organization? If "Yes," com					•			•			5	х
Section B. Independent Contractors	<u>Diete Scriedule</u>	; J /(JI SU	ICII Ļ	Jers	011 -				1	<u> </u>	
Complete this table for your five highest contains the second secon	mponeated ind	lono	ndor	at co	ntro	actor	rc th	nat received more than \$	100 000 of comp	ncat	ion from	
the organization. Report compensation for t										Jiisai	.1011 110111	
	ne calendar ye	ai e	iluli	ig w	itii C)I VVI	1 1111		cai.		(C)	
(A) Name and business	address	NΙC	ONE	7				(B) Description of s	ervices	C	(C) ompensat	ion
Trains and pasiness	444,000	11/)INI				\dashv	Boothpater of a	51 11000		- Inponda	
-							\dashv					
							_					
							_					
							J					
2 Total number of independent contractors (in	ncluding but no	ot lin	nited	to t	thos	e lis	ted	above) who received mo	ore than			
\$100,000 of compensation from the organiz	ation >				C)					000	

Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (**D)** Revenue excluded from tax under (B) (C) Unrelated Total revenue Related or exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns **b** Membership dues 43,908. c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 2,402,150. 418,192, g Noncash contributions included in lines 1a-1f: \$ 2,446,058 h Total. Add lines 1a-1f **Business Code** 2 a Program Service f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 514,084. other similar amounts) 514,084 4 Income from investment of tax-exempt bond proceeds 5 (i) Real (ii) Personal 6 a Gross rents **b** Less: rental expenses c Rental income or (loss) **d** Net rental income or (loss) (ii) Other 7 a Gross amount from sales of (i) Securities 16,436,855. assets other than inventory b Less: cost or other basis 13,689,353. and sales expenses 2,747,502. c Gain or (loss) 2,747,502. 2,747,502. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue 43,908. of including \$ contributions reported on line 1c). See Part IV, line 18 a 53,625. 60,091. **b** Less: direct expenses -6,466 -6,466. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a **b** Less: direct expenses **c** Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a INVESTMENT ADMIN FEE 900099 296,229. 296,229 b d All other revenue 296,229

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3,551,349.

5,997,407.

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e Total. Add lines 11a-11d

Total revenue. See instructions.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising expenses (C) Management and general expenses Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations 949,442. 949,442. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 174,422. 87,147. 87,275. Other salaries and wages 7 Pension plan accruals and contributions (include 11,395. 3,355. 8,040. section 401(k) and 403(b) employer contributions) 11,570. 15,929. 4,359. Other employee benefits 9 13,998. 7,064. 6,934. 10 Payroll taxes 11 Fees for services (non-employees): Management Legal 42,434. 42,434. Accounting Lobbying Professional fundraising services. See Part IV, line 17 5,208. 5,208. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 50,596. 50,596. column (A) amount, list line 11g expenses on Sch O.) 18,031.300. 19,560. 1,229. Advertising and promotion 12 129,015. 115,240. 12,477. 1,298 Office expenses 13 63,230. 62,865. 365. Information technology 14 15 Royalties 16 Occupancy 168,879. 152,624. 494. 15,761. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 38,986. 34,990. 1,525. 2,471 Conferences, conventions, and meetings 19 20 Payments to affiliates 21 Depreciation, depletion, and amortization 22 7,956. 7,956. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 314,227. 314,227. PROGRAM SUPPORT - ACADE $\overline{177}, 439.$ 126,298. PROGRAM SUPPORT -51,141. EVENT 87,200. 87,200. GIFT IN KIND EXPENSE 32,134. 32,134. PROGRAM SUPPORT 9,362. 246. 4,985. 4,131. e All other expenses 2,311,412. 1,970,661. 189,563. 151,188. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Form **990** (2014)

if following SOP 98-2 (ASC 958-720)

Form 990 (2014) Part X Balance Sheet

Pal	πх	balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments		2	578,594.
	3	Pledges and grants receivable, net		3	1,108,829.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined und			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contribu	ting		
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ţ		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
⋖	8	Inventories for sale or use		8	45.050
	9	Prepaid expenses and deferred charges	2,003.	9	17,350.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	22 252 242
	11	Investments - publicly traded securities		11	23,252,243.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11	l l	13	
	14	Intangible assets		14	F0 200
	15	Other assets. See Part IV, line 11		15	59,322.
	16	Total assets. Add lines 1 through 15 (must equal line 34)		16	25,016,338.
	17	Accounts payable and accrued expenses	l l	17	313,919.
	18	Grants payable	10010	18	101 210
	19	Deferred revenue		19	101,319.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to current and former officers, directors, trustees			
Ħ		key employees, highest compensated employees, and disqualified persons			
Liabilities		Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of		۰.	
	00	Schedule D	383,373.	25	415,238.
	26	Total liabilities. Add lines 17 through 25		26	413,230
		Organizations that follow SFAS 117 (ASC 958), check here X a	illu		
Ses	07	complete lines 27 through 29, and lines 33 and 34.	1,941,606.	27	1,975,370.
auc	27	Unrestricted net assets		28	9,314,759.
Bal	28	Temporarily restricted net assets	12 402 200	29	13,310,971.
Net Assets or Fund Balances	29	Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here		29	13,310,771
Ţ					
S OI	20	and complete lines 30 through 34.		20	
set	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net	32	Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances		32	24,601,100.
	33	TOTAL HET ASSETS OF TUHU DAIMHUES	20,710,000	33	7-1001,T00•

Form **990** (2014)

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public

Name of the organization

CENTRAL WASHINGTON UNIVERSITY FOUNDATION

Inspection Employer identification number

		CENT	\mathtt{RAL}	WASHING	GTON UNIVERS	ITY FO	PADMUC	ION	2	3-7017467
Part	I	Reason for Public C	Charity	y Status 🕢	All organizations must c	omplete th	is part.) Se	e instructions		
he org	janiz	zation is not a private found	ation be	ecause it is: (F	For lines 1 through 11, o	heck only	one box.)			
1		A church, convention of chu	urches,	or associatio	n of churches described	d in sectio	on 170(b)(1)(A)(i).		
2		A school described in secti	ion 170	(b)(1)(A)(ii). (Attach Schedule E.)					
з 🗌		A hospital or a cooperative	hospita	l service orga	anization described in s	ection 170)(b)(1)(A)(ii	i).		
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,									
	city, and state:									
5 X	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
		section 170(b)(1)(A)(iv). (C	Complet	e Part II.)						
6		A federal, state, or local gov	vernmer	nt or governm	nental unit described in	section 17	70(b)(1)(A)((v).		
7	_	An organization that normal		_				-	e general r	oublic described in
		section 170(b)(1)(A)(vi). (C	•			· ·				
8	_	A community trust describe	-	*	(1)(A)(vi). (Complete Pa	t II.)				
9	_	An organization that normal					contribution	ns, membersh	ip fees, an	d gross receipts from
		activities related to its exem	npt func	tions - subjec	ct to certain exceptions,	and (2) no	more than	33 1/3% of it	s support f	from gross investment
		income and unrelated busin	ness tax	able income	(less section 511 tax) fr	om busines	sses acquir	red by the org	anization a	after June 30, 1975.
		See section 509(a)(2). (Cor	mplete F	Part III.)			•			
10 🗌		An organization organized a	and ope	rated exclusi	vely to test for public sa	fety. See	section 50	9(a)(4).		
11 🗌	_	An organization organized a							ry out the	purposes of one or
		more publicly supported org	ganizati	ons describe	d in section 509(a)(1)	or section	509(a)(2).	See section 5	509(a)(3). (Check the box in
		lines 11a through 11d that of	describe	es the type of	f supporting organizatio	n and com	plete lines	11e, 11f, and	11g.	
а		Type I. A supporting orga	anizatior	n operated, si	upervised, or controlled	by its supp	ported orga	anization(s), ty	pically by	giving
		the supported organization	on(s) the	e power to reg	gularly appoint or elect a	a majority o	of the direc	tors or trustee	es of the su	upporting
		organization. You must c	omplet	te Part IV, Se	ections A and B.					
b [Type II. A supporting orga	anizatio	n supervised	or controlled in connec	tion with it	s supporte	d organizatior	n(s), by hav	ving
		control or management of	f the su	pporting orga	anization vested in the s	ame perso	ns that cor	ntrol or manag	ge the supp	oorted
		organization(s). You mus	t comp	lete Part IV,	Sections A and C.					
c		Type III functionally inte	grated.	A supporting	g organization operated	in connect	tion with, a	nd functional	y integrate	ed with,
		its supported organization	n(s) (see	e instructions)). You must complete	Part IV, Se	ections A,	D, and E.		
d		Type III non-functionally	/ integra	ated. A supp	orting organization ope	rated in co	nnection w	ith its suppor	ted organiz	zation(s)
		that is not functionally into	egrated	I. The organiz	ation generally must sa	tisfy a distr	ibution req	uirement and	an attentiv	/eness
		requirement (see instructi	ions). Y	ou must con	nplete Part IV, Section	s A and D,	and Part	٧.		
е		Check this box if the orga	anizatior	n received a v	written determination fro	m the IRS	that it is a	Type I, Type I	I, Type III	
		functionally integrated, or	Type II	I non-function	nally integrated support	ing organiz	ation.			
f E	nter	the number of supported o	organiza	itions						
g P		de the following information		the supporte	d organization(s).	(iv) lo the o	rachization	(-) A		(vi) Amazumt at
	(1)	Name of supported organization	'	(ii) EIN	(iii) Type of organization (described on lines 1-9	listed	in your	(v) Amount of support		(vi) Amount of other support (see
		organization.			above or IRC section	-	document?	Instructi	•	Instructions)
					(see instructions))	Yes	No			·
						1				
						1				
										i

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 432021 09-17-14

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014 CENTRAL WASHINGTON UNIVERSITY FOUNDATION 23-7017467 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	2003495.	1800515.	1916891.	2251371.	2446058.	10418330.	
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	2003495.	1800515.	1916891.	2251371.	2446058.	10418330.	
5	The portion of total contributions							
	by each person (other than a							
	governmental unit or publicly							
	supported organization) included							
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)						186,657.	
6	Public support. Subtract line 5 from line 4.						10231673.	
Sec	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
7	Amounts from line 4	2003495.	1800515.	1916891.	2251371.	2446058.	10418330.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar sources	409,705.	414,691.	444,744.	418,600.	514,084.	2201824.	
9	Net income from unrelated business							
	activities, whether or not the							
	business is regularly carried on							
10	Other income. Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part VI.)							
11	Total support. Add lines 7 through 10						12620154.	
12	Gross receipts from related activities,	•	,			12	265,814.	
13	First five years. If the Form 990 is for	~			-			
800	organization, check this box and stop						>	
	etion C. Computation of Publi						01 07	
	Public support percentage for 2014 (li					14	81.07 %	
15	Public support percentage from 2013					15	74.77 %	
16a	33 1/3% support test - 2014. If the contain have The approximation available at						. 37	
	stop here. The organization qualifies		•		line 15 in 22 1/20/			
D	33 1/3% support test - 2013. If the c							
17-	and stop here. The organization qual							
17 a	10% -facts-and-circumstances test	-						
	and if the organization meets the "fac					~		
h	meets the "facts-and-circumstances" 10% -facts-and-circumstances test							
Ü		_						
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization							
1Ω	Private foundation. If the organization			•	,			
18	i invate iounidation. Il the organizatio	in did fiot Crieck a	DON OIT HITE TO, TO	i, iou, ira, ui 170	, oriect trils but al	ia see iristructions	,	

Schedule A (Form 990 or 990-EZ) 2014

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sed	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7 <i>a</i>	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
Sec	ction B. Total Support		1	Γ	T	T	ı
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b				1		
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	•	•	•	•		
0-	check this box and stop here						>
	ction C. Computation of Publi					T T	
	Public support percentage for 2014 (li					15	%
	Public support percentage from 2013					16	%
	ction D. Computation of Inves			no 10 column (6)		17	0.4
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	7 is not
198	33 1/3% support tests - 2014. If the						
	more than 33 1/3%, check this box an						
	33 1/3% support tests - 2013. If the						
20	line 18 is not more than 33 1/3%, chec						

Part IV | Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "Yes," *provide detail in Part VI.*
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in Part VI.*
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
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10b		

	dule A (Form 990 or 990-EZ) 2014 CENTRAL WASHINGTON UNIVERSITY FOUNDATION 23-70	1746	7 Pa	age 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		_
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. tion B. Type I Supporting Organizations	11c		
366	tion B. Type i Supporting Organizations		Vaa	Na
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		Yes	No
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
_	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	3		
Sec	supported organizations played in this regard. tion E. Type III Functionally-Integrated Supporting Organizations			
1				
' a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions) The organization satisfied the Activities Test. Complete line 2 below.	-		
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions)		
2	Activities Test. Answer (a) and (b) below.	, 401,01,07.	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes." describe in Part VI, the role played by the organization in this regard	3b	1	I

Schedule A (Form 990 or 990-EZ) 2014 CENTRAL WASHINGTON UNIVERSITY FOUNDATION 23-7017467 Page 6

other Type III non-functionally integrated supporting organizations must complete Sections A through E. ction A - Adjusted Net Income (A) Prior Year (B) Current Year (potional) I Net short-term capital gain Recoveries of prior-year distributions 2 2 3 3 3 4 4 5 Depreciation come (see instructions) 3 3 Add lines 1 through 3 5 Portion of operating expenses paid or incurred for production or collection of gross income for management, conservation, or maintenance of property held for production of income (see instructions) 6 Other expenses (see instructions) 7 Other expenses (see instructions) 7 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities b Average monthly value of securities 1 A varyage monthly value of securities 1 A coll add lines 1a, 1b, and 1c) Poliscount claimed for blockage or other factors (explain in detail in Part VI): A caguistion indebtedness applicable to non-exempt-use assets 2 Discount claimed for blockage or other factors (explain in detail in Part VI): A caguistion indebtedness applicable to non-exempt-use assets 2 Discount claimed for blockage or other factors (explain in detail in Part VI): A caguistion indebtedness applicable to non-exempt-use assets 2 Discount claimed for blockage or other factors (explain in detail in Part VI): A couglistion indebtedness applicable to non-exempt-use assets 5 Distributable Amount Current Year Adjusted net income for prior year (from Section B, line 8, Column A) 1 Enter greater of line 2 or line 3 Infinity and a prior year Infinity and a	Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi	zations			
ction A - Adjusted Net Income (A) Prior Year (B) Current Year (optional) Net short-term capital gain 1 1 2. Recoveries of prior-year distributions 2 2 3. Other gross income (see instructions) 3. Add lines 1 through 3 4. Add lines 1 through 3 5. Depreciation and depletion 5. Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6. Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6. Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8. Cition B - Minimum Asset Amount (A) Prior Year (B) Current Year (optional) 1. Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a. Average monthly value of securities 1. Average monthly value of securities 1. Average monthly value of securities 1. Average monthly cash balances 1. Decount claimed for blockage or other factors (explain in detail in Part VI): 2. Acquisition indebtedness applicable to non-exempt-use assets 2. Subtract line 2 from line 1d 3. Average monthly cash part of blockage or other factors (explain in detail in Part VI): 4. Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 5. Multiply line 5 by .035 6. Recoveries of prior-year distributions 7. Adjusted net income for prior year (from Section A, line 8, Column A) 6. Recoveries of prior-year (from Section B, line 8, Column A) 7. Adjusted net income for prior year (from Section B, line 8, Column A) 7. Enter greater of line 2 or line 3 8. Income tax imposed in prior year 8. Income tax imposed in prior year 8. Income tax imposed in prior year 9. Income							
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collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 7	5	Depreciation and depletion	5				
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instructions for short tax year or assets held for part of year): a Average monthly value of securities b Average monthly cash balances c Fair market value of other non-exempt-use assets c Fair market value of other non-exempt-use assets c Todal (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets c Acquisition indebtedness applicable and a quisition indebted				(A) Prior Year	(B) Current Year (optional)		
a Average monthly value of securities b Average monthly cash balances c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by .035 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6) Multiply line 5 by .035 Minimum Asset Amount (and line 7 to line 8, Column A) Current Year Adjusted net income for prior year (from Section A, line 8, Column A) Enter greater of line 2 or line 3 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) By Average monthly cash blances 1	1	Aggregate fair market value of all non-exempt-use assets (see					
b Average monthly cash balances c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). Nutliply line 5 by .035 Multiply line 5 by .035 Minimum Asset Amount (add line 7 to line 6) Minimum Asset Amount (add line 7 to line 6) Adjusted net income for prior year (from Section A, line 8, Column A) Enter greater of line 2 or line 3 Income tax imposed in prior year Distributable Amount. Subtract line 4, unless subject to emergency temporary reduction (see instructions) Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)		instructions for short tax year or assets held for part of year):					
c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 4 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by .035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 Inction C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 Enter 85% of line 1 2 Income tax imposed in prior year 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6 Income temporary reduction (see instructions) 6 Income temporary reduction (see instructions)	а	Average monthly value of securities	1a				
d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 4 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by .035 6 Multiply line 5 by .035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 Cotton C - Distributable Amount 1 Adjusted net income for prior year (from Section A, line 8, Column A) 1 Enter 85% of line 1 2 Enter 85% of line 2 or line 3 4 Income tax imposed in prior year 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6	b	Average monthly cash balances	1b				
e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 1·1/2% of line 3 (for greater amount, see instructions). 4 Cash deemed held for exempt use. Enter 1·1/2% of line 3 (for greater amount, see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by .035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 Cotion C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 5 Enter 85% of line 1 2 Enter 85% of line 1 2 Income tax imposed in prior year 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6	С	Fair market value of other non-exempt-use assets	1c				
factors (explain in detail in Part VI): 2	d	Total (add lines 1a, 1b, and 1c)	1d				
Acquisition indebtedness applicable to non-exempt-use assets Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by .035 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6) Current Year Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	е	Discount claimed for blockage or other					
Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by .035 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6) Current Year Adjusted net income for prior year (from Section A, line 8, Column A) Center 85% of line 1 Center 85% of line 1 Center 85% of line 2 Center 85% of line 2 Center 85% of line 2 Center 85% of line 3 Center 85% of line 4 Center 85% of line 5 Center 85% of line 5 Center 95% of line 6 Center 95% of line 1 Center		factors (explain in detail in Part VI):					
Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by .035 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6) Current Year Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6	2	Acquisition indebtedness applicable to non-exempt-use assets	2				
see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by .035 6 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 Current Year 1 Adjusted net income for prior year (from Section A, line 8, Column A) 2 Enter 85% of line 1 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 4 Enter greater of line 2 or line 3 5 Income tax imposed in prior year 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6	3	Subtract line 2 from line 1d	3				
see instructions). Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by .035 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6) Current Year Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6	4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,					
Multiply line 5 by .035 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6) Current Year Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)		see instructions).	4				
Multiply line 5 by .035 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6) Minimum Asset Amount (add line 7 to line 6) Current Year Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
Minimum Asset Amount (add line 7 to line 6) Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	Multiply line 5 by .035	6				
Current Year Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) Current Year Current Year	7	Recoveries of prior-year distributions	7				
Current Year Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) Current Year Current Year	8	Minimum Asset Amount (add line 7 to line 6)	8				
2 Enter 85% of line 1 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Enter greater of line 2 or line 3 4 Income tax imposed in prior year 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6	ecti	on C - Distributable Amount			Current Year		
2 Enter 85% of line 1 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Enter greater of line 2 or line 3 4 Income tax imposed in prior year 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6	1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6			2				
Enter greater of line 2 or line 3 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 4 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6			3				
5 Income tax imposed in prior year 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6			4				
Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6			5				
emergency temporary reduction (see instructions) 6		• • •					
		· · · · · · · · · · · · · · · · · · ·	6				
	7		Illy-integrated	d Type III supporting orga	nization (see		

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014 CENTRAL WASHINGTON UNIVERSITY FOUNDATION 23-7017467 Page 7

Par	t V Type III Non-Functionally Integrated 50	9(a)(3) Supporting Orga	nizations (continued)	
Secti	on D - Distributions	Current Year		
1	Amounts paid to supported organizations to accomplish ex			
2	Amounts paid to perform activity that directly furthers exer			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organizations	3	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
а				
b				
С				
d				
	From 2013			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
<u> </u>	Carryover from 2009 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
<u>a</u>				
<u>b</u>				
	Evenes from 2012			
a	Excess from 2013			

Schedule A (Form 990 or 990-EZ) 2014

e Excess from 2014

Part VI	(Form 990 or 990-EZ) 2014 CENTRAL WASHINGTON UNIVERSITY FOUNDATION 23-7017467 Page Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.
	Also complete this part for any additional information. (See instructions).

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

CENTRAL WASHINGTON UNIVERSITY FOUNDATION

Employer identification number 23-7017467

Par	t I Organizations Maintaining Donor Advised	Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in wi	riting that the assets held in donor advised t	funds
	are the organization's property, subject to the organization's ex	-	
6	Did the organization inform all grantees, donors, and donor ad		
	for charitable purposes and not for the benefit of the donor or		
Par			
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or ed	ucation) Preservation of a historic	cally important land area
	Protection of natural habitat	Preservation of a certifie	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form of a	a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic struc	cture included in (a)	2c
d	Number of conservation easements included in (c) acquired aff	ter 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release		
	year ▶		
4	Number of states where property subject to conservation ease	ement is located >	
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it $\ensuremath{^{\text{h}}}$	nolds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, a	nd enforcing conservation easements during	g the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and er	nforcing conservation easements during the	year ▶ \$
8	Does each conservation easement reported on line $2(d)$ above	satisfy the requirements of section 170(h)(4	k)(B)(i)
9	In Part XIII, describe how the organization reports conservation	•	· · · · · · · · · · · · · · · · · · ·
	include, if applicable, the text of the footnote to the organization	on's financial statements that describes the	organization's accounting for
Da	conservation easements.	Aut Historiaal Trassures or Otho	v Civellay Accets
Par	t III Organizations Maintaining Collections of		r Similar Assets.
	Complete if the organization answered "Yes" to Form 9		
1a	If the organization elected, as permitted under SFAS 116 (ASC	•	·
	historical treasures, or other similar assets held for public exhibitions and the same and the same assets held for public exhibitions.		of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describe		
b	If the organization elected, as permitted under SFAS 116 (ASC		
	treasures, or other similar assets held for public exhibition, edu	ication, or research in furtherance of public	service, provide the following amounts
	relating to these items:		
	(i) Revenue included in Form 990, Part VIII, line 1		
_			
2	If the organization received or held works of art, historical treas	,	in, provide
	the following amounts required to be reported under SFAS 116	· ·	
a	Revenue included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		• \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2014

Part VII Investments - Other Securities. Complete if the organization answered "Yes" to		ine 11h See Form 900 Part Y line	
(a) Description of security or category (including name of security)	(b) Book value		Cost or end-of-year market value
(1) Financial derivatives			•
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Part VIII Investments - Program Related.		•	
Complete if the organization answered "Yes" t	to Form 990, Part IV, I	ine 11c. See Form 990, Part X, line	13.
(a) Description of investment	(b) Book value	(c) Method of valuation: 0	Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX Other Assets.			
Complete if the organization answered "Yes" t	to Form 990, Part IV, I	ne 11d. See Form 990, Part X, line	15.
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes" t	to Form 990, Part IV, I		X, line 25.
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total (Calumn (b) must a gual Form 000 Part V and (P) line	05)		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2014

	edule D (Form 990) 2014 CENTRAL WASHINGTON UNIVER				7017467 Page 4
Par	rt XI Reconciliation of Revenue per Audited Financial Statem		h Revenue per Re	turn.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12	2a.			4 450 005
1				1	4,472,835.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	0 000 060		
а	,		-2,998,260.		
b	Donated services and use of facilities		1,413,597.		
С	Recoveries of prior year grants		60 001		
d	/	2d	60,091.		1 504 550
е	•			2e	-1,524,572.
3	Subtract line 2e from line 1			3	5,997,407.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 . 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIII.)	4b			•
С				4c	U.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		th Fynance new F	5	5,997,407.
Pal	rt XII Reconciliation of Expenses per Audited Financial State		ith Expenses per H	tetur	n.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12	2a.			2 505 100
1				1	3,785,100.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	1 110 505		
а	Donated services and use of facilities	2a	1,413,597.		
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	60,091.		
е	Add lines 2a through 2d			2e	1,473,688.
3	Subtract line 2e from line 1			3	2,311,412.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
5	The same of the sa			5	2,311,412.
Pa	rt XIII Supplemental Information.				
lines	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any acceptable and 4b.			; Part :	X, line 2; Part XI,
PAI	RT V, LINE 4:				
ENI	DOWMENTS PROVIDE A LONG-TERM STREAM OF INC	COME F	OR MEETING U	NIV:	ERSITY
NEI	EDS. ENDOWMENTS MAY BE DESIGNATED FOR SCI	HOLARS	HIPS, ACADEM	IC :	PROGRAM
SUI	PPORT, GRADUATE FELLOWSHIPS, ENDOWED CHAIL	RS OR	OTHER SPECIF	IC	AREAS.
PAI	RT X, LINE 2:				
THE	E FOUNDATION IS EXEMPT FROM FEDERAL INCOM	E TAXE	S UNDER SECT	ION	501(C)(3)
OF	THE INTERNAL REVENUE CODE. INCOME FROM CI	ERTAIN	ACTIVITIES :	NOT	DIRECTLY
REI	LATED TO THE FOUNDATION'S TAX-EXEMPT PURPO	OSE WO	ULD BE SUBJE	CT '	TO
TΑΣ	KATION AS UNRELATED BUSINESS INCOME. THE 1	FOUNDA	TION DID NOT	EN	GAGE IN AN
AC'	TIVITY UNRELATED TO ITS TAX-EXEMPT PURPOSI	E; ACC	ORDINGLY, NO	PR	OVISION
FOF 432054 10-01-		PANYIN			TEMENTS . dule D (Form 990) 2014

SCHEDULE G

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form 990.

OMB No. 1545-0047

Open to Public Inspection

name of the organization CENTRAL	WASHINGTON UNIVERS	SITY	r FC	OUNDATION		=mployer ide 23-7017	ntification number	
Part I Fundraising Activities. required to complete this part	Complete if the organization answe	red "Y	es" to	Form 990, Part IV, li	ine 17.	Form 990-EZ	filers are not	
Indicate whether the organization rais	ed funds through any of the following e Solicitat f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with prividuals or entities (fundraisers) pursu	ion of ion of fundra (includ	non-governising of onal fundamental	overnment grants nment grants events ficers, directors, trus undraising services?	stees or	Yes		
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have con or con contribu	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	tò (or fu	mount paid retained by) indraiser id in col. (i)	(vi) Amount paid to (or retained by) organization	
		Yes	No					
otal			<u> </u>					
List all states in which the organizatio or licensing.	n is registered or licensed to solicit c	ontrib	utions	or has been notified	l it is ex	empt from req	gistration	

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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2014

2000 ct 000 EZ 2014 CENTRAL WASHINGTON INTUERSITY FOUNDATION 23-7017467 Dogg

	rt I	Fundraising Events. Complete if the of fundraising event contributions and gr	ne organization answered	d "Yes" to Form 990, Part	IV, line 18, or reported r	more than \$15,000		
		or iditidialsing event contributions and gr	(a) Event #1 KITNA GOLF	(b) Event #2 HALL OF FAME BANQUET	(c) Other events	(d) Total events (add col. (a) through		
Ф			(event type)	(event type)	(total number)	col. (c))		
Revenue	1	Gross receipts	64,740.	24,678.	8,115.	97,533.		
	2	Less: Contributions	20,790.	18,408.	4,710.	43,908.		
	3	Gross income (line 1 minus line 2)	43,950.	6,270.	3,405.	53,625.		
	4	Cash prizes						
	5	Noncash prizes	1,693.	576.		2,269.		
benses	6	Rent/facility costs	34,683.	527.	9,947.	45,157.		
Direct Expenses	7	Food and beverages	38.	6,080.		6,118.		
ä	8	Entertainment	950.			950.		
	9	Other direct expenses	3,178.	2,419.		5,597.		
	10	Direct expense summary. Add lines 4 through	n 9 in column (d)		>	60,091.		
	11	Net income summary. Subtract line 10 from I	ine 3, column (d)		>	-6,466.		
Pa	rt I	Gaming. Complete if the organization	answered "Yes" to Form	990, Part IV, line 19, or r	eported more than			
		\$15,000 on Form 990-EZ, line 6a.				-		
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))		
Rev	1	Gross revenue						
es	2	Cash prizes						
rect Expenses	3	Noncash prizes						
Direct E	4	Rent/facility costs						
_	5	Other direct expenses						
	6	Volunteer labor	Yes % No	Yes % No	Yes % No			
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		>			
	8	Net gaming income summary. Subtract line 7	' from line 1, column (d)		>			
9		ter the state(s) in which the organization condu	-					
а	a Is the organization licensed to conduct gaming activities in each of these states?							
b	If "	No," explain:						
		ere any of the organization's gaming licenses re	evoked, suspended or te	rminated during the tax y	ear?	Yes No		
b	" TI " —	Yes," explain:						

Schedule G (Form 990 or 990-EZ) 2014

432082 08-28-14

Sch	nedule G (Form 990 or 990-EZ) 2014 CENTRAL WASHINGTON UNIVERSITY FOUNDATION 23-	7017467	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	No
13	Indicate the percentage of gaming activity conducted in:		
	a The organization's facility	13a	%
	o An outside facility	13b	——————————————————————————————————————
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	136	
14	Efficient the frame and address of the person who prepares the organization's gaming/special events books and records.		
	Name		
	Address		
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
k	of "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party \$\bigs\\$		
,	c If "Yes," enter name and address of the third party:		
•	on res, enter hame and address of the time party.		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation > \$		
	Description of continuous annual deal N		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
٠		Yes	□ No
ı	retain the state gaming license? Discrete the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		110
	·		
Da	organization's own exempt activities during the tax year \$\infty\$ \$\text{Supplemental Information.} Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, line 2b, columns (iii) and (v),	0.01.40	451
Fa		nes 9, 9b, 10b	o, 15b,
	15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).		
_			

Schedule G	(Form 990 or 990-EZ) Supplemental Infor	CENTRAL	WASHINGTON	UNIVERSITY	FOUNDATION 2	23-7017467	Page 4
Part IV	Supplemental Infor	mation _{(contin}	ued)				
-							

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

➤ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 **2014**

Open to Public Inspection

Employer identification number

CENTRAL W	<u>ASHINGT</u> ON	UNIVERSITY	FOUNDATIO	N			23-7017467
Part I General Information on Grants a	nd Assistance						
Does the organization maintain records to							
criteria used to award the grants or assis	stance?						X Yes No
2 Describe in Part IV the organization's pro	ocedures for monit	oring the use of grant	funds in the United	States.			
Part II Grants and Other Assistance to	_				anization answered "\	es" to Form 990, Part	IV, line 21, for any
recipient that received more than S					(f) Method of	T	Т
Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTRAL WASHINGTON UNIVERSITY							
400 E UNIVERSITY WAY BARGE 402							
ELLENSBURG, WA 98926	91-1980504	115	949,442.	0.			EDUCATIONAL SCHOLARSHIPS
2 Enter total number of section 501(c)(3) a	-		e line 1 table				•1.
3 Enter total number of other organizations							Oahadula I (Farm 000) (0044)
LHA For Paperwork Reduction Act Notice	, see the Instructi	ons tor Form 990.					Schedule I (Form 990) (2014)

PART I, LINE 2: QUARTERLY DISBURSEMENTS OF SCHOLARSHIPS ARE REPORTED AND REVIEWED FOR ACCURACY BY CWU FOUNDATION STAFF AND THE CWU SCHOLARSHIP OFFICE. REPORTS CONSIST OF STUDENT ID NUMBERS, NAME OF THE SCHOLARSHIP, AMOUNT OFFERED AND AMOUNT DISBURSED SO THAT THIS CAN BE TRACED TO THE STUDENT FINANCIAL REPORT TO SHOW THE STUDENT RECEIVING THIS AWARD. MONITORING BY THE SYSTEM AND INDIVIDUALS HELP INSURE THAT THE CRITERIA OF THE SCHOLARSHIP GIVEN IS BEING	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
PART I, LINE 2: QUARTERLY DISBURSEMENTS OF SCHOLARSHIPS ARE REPORTED AND REVIEWED FOR ACCURACY BY CWU FOUNDATION STAFF AND THE CWU SCHOLARSHIP OFFICE. REPORTS CONSIST OF STUDENT ID NUMBERS, NAME OF THE SCHOLARSHIP, AMOUNT OFFERED AND AMOUNT DISBURSED SO THAT THIS CAN BE TRACED TO THE STUDENT FINANCIAL REPORT TO SHOW THE STUDENT RECEIVING THIS AWARD. MONITORING BY THE SYSTEM AND INDIVIDUALS HELP INSURE THAT THE CRITERIA OF THE SCHOLARSHIP GIVEN IS BEING						
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ACCURACY BY CWU FOUNDATION STAFF AND THE CWU SCHOLARSHIP OFFICE. REPORTS CONSIST OF STUDENT ID NUMBERS, NAME OF THE SCHOLARSHIP, AMOUNT OFFERED AND AMOUNT DISBURSED SO THAT THIS CAN BE TRACED TO THE STUDENT FINANCIAL REPORT TO SHOW THE STUDENT RECEIVING THIS AWARD. MONITORING BY THE SYSTEM AND INDIVIDUALS HELP INSURE THAT THE CRITERIA OF THE SCHOLARSHIP GIVEN IS BEING	PART I, LINE 2:					
CONSIST OF STUDENT ID NUMBERS, NAME OF THE SCHOLARSHIP, AMOUNT OFFERED AND AMOUNT DISBURSED SO THAT THIS CAN BE TRACED TO THE STUDENT FINANCIAL REPORT TO SHOW THE STUDENT RECEIVING THIS AWARD. MONITORING BY THE SYSTEM AND INDIVIDUALS HELP INSURE THAT THE CRITERIA OF THE SCHOLARSHIP GIVEN IS BEING	QUARTERLY DISBURSEMENTS OF SCHOLAR	SHIPS ARE	REPORTED	AND REVIEW	ED FOR	
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TO SHOW THE STUDENT RECEIVING THIS AWARD. MONITORING BY THE SYSTEM AND INDIVIDUALS HELP INSURE THAT THE CRITERIA OF THE SCHOLARSHIP GIVEN IS BEING	CONSIST OF STUDENT ID NUMBERS, NAM	E OF THE	SCHOLARSH:	IP, AMOUNT	OFFERED AND	
INDIVIDUALS HELP INSURE THAT THE CRITERIA OF THE SCHOLARSHIP GIVEN IS BEING	AMOUNT DISBURSED SO THAT THIS CAN	BE TRACED	TO THE ST	TUDENT FINA	NCIAL REPORT	
INDIVIDUALS HELP INSURE THAT THE CRITERIA OF THE SCHOLARSHIP GIVEN IS BEING	TO SHOW THE STUDENT RECEIVING THIS	AWARD.	MONITORING	G BY THE SY	STEM AND	
	INDIVIDUALS HELP INSURE THAT THE C	RITERIA C	F THE SCHO	OLARSHIP GI	VEN IS BEING	
HONORED.	HONORED.					

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service

Name of the organization

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Inspection Employer identification number

		INGTON	UNIVERSI	TY FOUNDATION	23-7	0174	467	
Pai	rt I Types of Property							
		(a) Check if applicable		(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu		_	s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	2	332,016.				
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles	X	1	50,000.				
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (VARIOUS REFUR)	X	1	29,700.				
26	Other ▶ (SOLID SILVER)	X	1	7,500.				
27	Other							
28	Other (
29	Number of Forms 8283 received by the organization	zation during	the tax year for co	ontributions				
	for which the organization completed Form 82	83, Part IV, [Donee Acknowledg	gement 29			1	
							Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 through	n 28, that it			
	must hold for at least three years from the date	of the initia	l contribution, and	which is not required to be u	sed for			
	exempt purposes for the entire holding period?	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	oolicy that re	quires the review	of any non-standard contribut	ions?	31	X	
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncash				
	contributions?					32a		X
b	If "Yes," describe in Part II.							
33	If the organization did not report an amount in	column (c) fo	or a type of proper	ty for which column (a) is che	cked,			
	describe in Part II.							

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2014)

Schedule M	(Form 990) (2014) CENTRAL WASHINGTON UNIVERSITY FOUNDATION 23-7017467 Page 2 Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization
Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
	is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
	this part for any additional information.

432142 08-12-14

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ)
Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

2014 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

CENTRAL WASHINGTON UNIVERSITY FOUNDATION

Employer identification number 23-7017467

FORM 990, PART VI, SECTION B, LINE 11:

THE 990 IS REVIEWED BY THE FINANCE AND AUDIT COMMITTEE BEFORE FILING AND A FINAL 990 IS GIVEN TO THE BOARD OF DIRECTORS AT THE FEBRUARY MEETING.

FORM 990, PART VI, SECTION B, LINE 12C:

CONFLICT OF INTEREST GENERAL POLICY STATEMENTS ARE GIVEN TO THE BOARD MEMBERS ANNUALLY. THE STATEMENT REVIEWS OUR POLICY THAT FOR BUSINESS TRANSACTIONS INVOLVING THE FOUNDATION AND THE PERSONAL OR BUSINESS AFFAIRS OF A DIRECTOR, OFFICER, OR STAFF MEMBER SHALL BE APPROVED IN ADVANCE BY THE BOARD OF DIRECTORS. FURTHER INFORMATION ABOUT SPECIFIC APPLICATION OF FINANCIAL INTERESTS AND RELATIONSHIPS, SPECIAL PRIVILEGES, FAVORS AND USE OF UNIVERSITY PROPERTY IS CONTAINED IN THE POLICY FOR REVIEW. EACH BOARD MEMBER REVIEWS THE POLICY, FILLS OUT THE QUESTIONNAIRE AND SIGNS THAT THEY AGREE TO INFORM THE BOARD CHAIR, EXECUTIVE DIRECTOR AND FELLOW DIRECTORS OF ANY CONFLICT THAT MAY BE DEVELOPING AND IN ALL SUCH CASES THEY WILL ABSTAIN FROM DISCUSSION AND VOTING AND THEIR DISCLOSURE AND ABSTENTION WILL BE A MATTER OF RECORD. THE SIGNED FORM IS RETAINED IN THE CWU FOUNDATION RECORDS.

FORM 990, PART VI, SECTION C, LINE 19:

GOVERNING/ORGANIZING DOCUMENTS ARE AVAILABLE ON THE CWU FOUNDATION WEBSITE HTTP://www.CWU.EDU/FOUNDATION.

FORM 990, PART IX, LINE 7

CENTRAL WASHINGTON UNIVERSITY PROVIDED THE FOUNDATION EMPLOYEES TO

ADMINISTER DAILY OPERATIONS. THE SALARIES AND BENEFITS OF THESE

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2014)

432211 08-27-14