

**Mighty Oaks Foundation
GIFT to Benefic Foundation,
Seattle WA**

**\$1,980,000 NON-CASH
(2014)**

**Compiled by Vivian Krause
November 1, 2020
@FairQuestions**

APPENDIX IX

\$4.5 Million

Gifts to Bromley Charities:

- **QUC Residents Housing Foundation:
\$2.5 Million (2012)**
- **Benefic Foundation, Seattle
\$2 Million (2014)**

Compiled by Vivian Krause

October 15, 2020

@FairQuestions



Qualified Donees Worksheet / Amounts Pro



Registered charities may make gifts to qualified donees. Provide the required information for each gift. See the reverse for explanations of the terms used.

22 2012-11-30 874459423 RR 0001 3008978

Total number of Qualified Donees/Other Organizations:

Name of organization: Almoner Foundation	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/registration number: 85472 8300 RR 0001	City and Prov/Terr: Vancouver BC
Amount of gifts-in-kind: \$ 0	Total amount of gifts: \$ 13,950,000
Name of organization: QUC Residents Housing Foundation	Associated charity <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
BN/registration number: 83244 7254 RR 0001	City and Prov/Terr: Vancouver BC
Amount of gifts-in-kind: \$ 0	Total amount of gifts: \$ 2,500,000
Name of organization: Quest University Canada	Associated charity <input type="checkbox"/> Yes <input type="checkbox"/> No
BN/registration number: 86407 0859 RR 0001	City and Prov/Terr: Squamish BC
Amount of gifts-in-kind: \$ 0	Total amount of gifts: \$ 450,000
Name of organization: University of British Columbia	Associated charity <input type="checkbox"/> Yes <input type="checkbox"/> No
BN/registration number: 10816 1779 RR 0001	City and Prov/Terr: Vancouver BC
Amount of gifts-in-kind: \$ 0	Total amount of gifts: \$ 50,000
Name of organization: Humane Society of Canada Foundation	Associated charity <input type="checkbox"/> Yes <input type="checkbox"/> No
BN/registration number: 81196 4493 RR 0001	City and Prov/Terr: Vancouver BC
Amount of gifts-in-kind: \$ 0	Total amount of gifts: \$ 100,000
Name of organization: Vancouver Aquarium Marine Science Centre	Associated charity <input type="checkbox"/> Yes <input type="checkbox"/> No
BN/registration number: 11928 2119 RR 0001	City and Prov/Terr: Vancouver BC
Amount of gifts-in-kind: \$ 0	Total amount of gifts: \$ 150,000
Name of organization: 4 What Matters Foundation	Associated charity <input type="checkbox"/> Yes <input type="checkbox"/> No
BN/registration number: 81787 9141 RR 0001	City and Prov/Terr: Vancouver BC
Amount of gifts-in-kind: \$ 0	Total amount of gifts: \$ 80,000
Name of organization: Hope for the Nations	Associated charity <input type="checkbox"/> Yes <input type="checkbox"/> No
BN/registration number: 89875 9931 RR 0001	City and Prov/Terr: Vancouver BC
Amount of gifts-in-kind: \$ 0	Total amount of gifts: \$ 125,000

**Gift to
Benefic Foundation,
Seattle, WA:
\$2 Million
(2014)**



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→ [T3010 Registered Charity Information Return](#)

T3010 Registered Charity Information Return

Form T1236 - Qualified donees worksheet / Amounts provided to other organizations

Name: **MIGHTY OAKS FOUNDATION**
BN/Registration number: **867567315 RR 0001**
Fiscal period: **December 01, 2013 to November 30, 2014**

Qualified donees reported: **3**

Qualified donees displayed: **3**

Registered charities that notice problems with their online information should go to [How to amend the return](#).

Qualified donee # 1

Name of organization: **Tyndale University**
Associated charity: **No**
Business number/Registration number: **107796880RR0001**
City: **North York**
Province/Territory: **ON**
Amounts of non-cash gifts: **CAN\$ 250.00**
Total amount of gifts: **CAN\$ 250.00**
Was any part of the gift intended for political activities? **No**

Qualified donee # 2

Name of organization: **CHIMP (Charitable Impact) Foundation**
Associated charity: **No**
Business number/Registration number: **845528827RR0001**
City: **Vancouver**
Province/Territory: **BC**
Amounts of non-cash gifts: **CAN\$ 7,000.00**
Total amount of gifts: **CAN\$ 7,000.00**
Was any part of the gift intended for political activities? **No**

Qualified donee # 3

Name of organization: **Benefic Foundation**
Associated charity:
Business number/Registration number:
City: **Seattle**
Province/Territory: **WA**
Amounts of non-cash gifts: **CAN\$ 1,980.00**
Total amount of gifts: **CAN\$ 1,980.00**
Was any part of the gift intended for political activities?

Showing 1 to 3 of 3 entries on this page

Form **990-EZ**

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

OMB No 1545 1150

2007

Department of the Treasury
Internal Revenue Service

▶ Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year may use this form.
▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

A For the 2007 calendar year, or tax year beginning 10/01, 2007, and ending 9/30, 2008

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input checked="" type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Please use IRS label or print or type. See Specific Instructions. BENEFIC FOUNDATION 93 SOUTH JACKSON STREET #11580 SEATTLE, WA 98104-2818	D Employer identification number 30-0450815
		E Telephone number (604) 683-7006
		F Group Exemption Number

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method. Cash Accrual
Other (specify) ▶

I Website: ▶ N/A

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

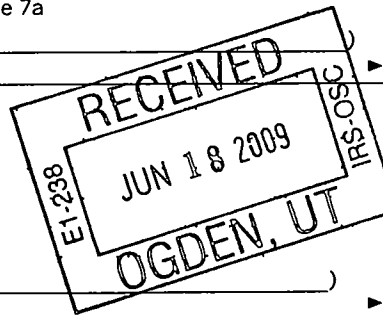
J Organization type (check only one) — 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$100,000 or more, file Form 990 instead of Form 990-EZ ▶ \$

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

1	Contributions, gifts, grants, and similar amounts received		1
2	Program service revenue including government fees and contracts		2
3	Membership dues and assessments		3
4	Investment income		4
5a	Gross amount from sale of assets other than inventory	5a	5c
5b	Less. cost or other basis and sales expenses	5b	
5c	Gain or (loss) from sale of assets other than inventory. Subtract line 5b from line 5a (attach sched)		
6	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>		6c
6a	Gross revenue (not including \$ of contributions reported on line 1)	6a	
6b	Less. direct expenses other than fundraising expenses	6b	
6c	Net income or (loss) from special events and activities. Subtract line 6b from line 6a		
7a	Gross sales of inventory, less returns and allowances	7a	7c
7b	Less. cost of goods sold	7b	
7c	Gross profit or (loss) from sales of inventory. Subtract line 7b from line 7a		
8	Other revenue (describe ▶)		8
9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)		9 0.
10	Grants and similar amounts paid (attach schedule)		10
11	Benefits paid to or for members		11
12	Salaries, other compensation, and employee benefits		12
13	Professional fees and other payments to independent contractors		13
14	Occupancy, rent, utilities, and maintenance		14
15	Printing, publications, postage, and shipping		15
16	Other expenses (describe ▶)		16
17	Total expenses (add lines 10 through 16)		17 0.
18	Excess or (deficit) for the year. Subtract line 17 from line 9		18 0.
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)		19 0.
20	Other changes in net assets or fund balances (attach explanation)		20
21	Net assets or fund balances at end of year. Combine lines 18 through 20		21 0.



Part II Balance Sheets — If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ.

(See Instructions)

	(A) Beginning of year	(B) End of year
22		22
23		23
24		24
25	0.	0.
26	0.	0.
27	0.	0.

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

TEEA0803L 08/06/07

Form 990-EZ (2007)

13

Part III	Statement of Program Service Accomplishments (See the instructions.)	N/A	Expenses
What is the organization's primary exempt purpose? Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.			(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)
28	----- ----- ----- (Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	▶ <input type="checkbox"/>	28 a
29	----- ----- ----- (Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	▶ <input type="checkbox"/>	29 a
30	----- ----- ----- (Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	▶ <input type="checkbox"/>	30 a
31	Other program services (attach schedule) (Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	▶ <input type="checkbox"/>	31 a
32	Total program service expenses. Add lines 28a through 31a	▶ <input type="checkbox"/>	32

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See Instructions.)				
(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
JOHN BROMLEY 2791 WATERLOO STREET VANCOUVER, B.C. V6R 3J1 CANADA	OFFICER 0	0.	0.	0.
WILL LAVERY 512 ROOSEVELT WAY SAN FRANCISCO, CA 94114	DIRECTOR 0	0.	0.	0.
JOHN GLAZEMA 3281 ATKINSON LANE ABBOTSFORD, B.C. V3G 2G5 CANADA	DIRECTOR 0	0.	0.	0.
RICHARD OKELLO 896 MANOR WAY LOS ALTOS, CA 94024	DIRECTOR 0	0.	0.	0.

Part V Other Information (Note the statement requirement in the instructions.)	SEE STATEMENT 1	Yes	No
33 Did the organization make a change in its activities or methods of conducting activities? If 'Yes,' attach a detailed statement of each change	33		X
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes	34		X
35 If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.			
a Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35 a		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	35 b		N/A
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement	36		X
37 a Enter amount of political expenditures, direct or indirect, as described in the instructions <input type="checkbox"/> 37 a 0.			
b Did the organization file Form 1120-POL for this year?	37 b		X
38 a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38 a		X
b If 'Yes,' attach the schedule specified in the line 38 instructions and enter the amount involved	38 b		N/A
39 501(c)(7) organizations. Enter.			
a Initiation fees and capital contributions included on line 9	39 a		N/A
b Gross receipts, included on line 9, for public use of club facilities	39 b		N/A

Part V Other Information (Note the statement requirement in the instructions.) (Continued)

40a 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under.
 section 4911 ▶ 0., section 4912 ▶ 0., section 4955 ▶ 0.

b 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach an explanation

	Yes	No
40b		X
40c		
40d		
40e		X

c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0.

d Enter amount of tax on line 40c reimbursed by the organization ▶ 0.

e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?

41 List the states with which a copy of this return is filed ▶ NONE

42a The books are in care of ▶ JOHN BROMLEY Telephone no. ▶ (604) 633-9653
 Located at ▶ 1500 WEST GEORGIA STREET, SUITE 1555 B.C. CA ZIP + 4 ▶ V6G 2Z6

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

	Yes	No
42b		X
42c	X	

See the instructions for exceptions and filing requirements for **Form TD F 90-22.1**.

c At any time during the calendar year, did the organization maintain an office outside of the U.S.?

If 'Yes,' enter the name of the foreign country: ▶ CANADA

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** - Check here N/A
 and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43 N/A

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Please Sign Here

Signature of officer: [Signature] Date: June 8, 2009
 Type or print name and title: JOHN BROMLEY

Paid Preparer's Use Only

Preparer's signature ▶ JOHN S. FRIEND Date ▶ 5/22/09 Check if self employed Preparer's SSN or PTIN (See General Instruction X) ▶ N/A
 Firm's name (or yours if self employed), address, and ZIP + 4 ▶ LEMASTER & DANIELS, PLLC
1350 S. PIONEER WAY EIN ▶ N/A
MOSES LAKE, WA 98837-2410 Phone no ▶ (509) 765-1281

**STATEMENT 1
FORM 990-EZ, PART V
REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS**

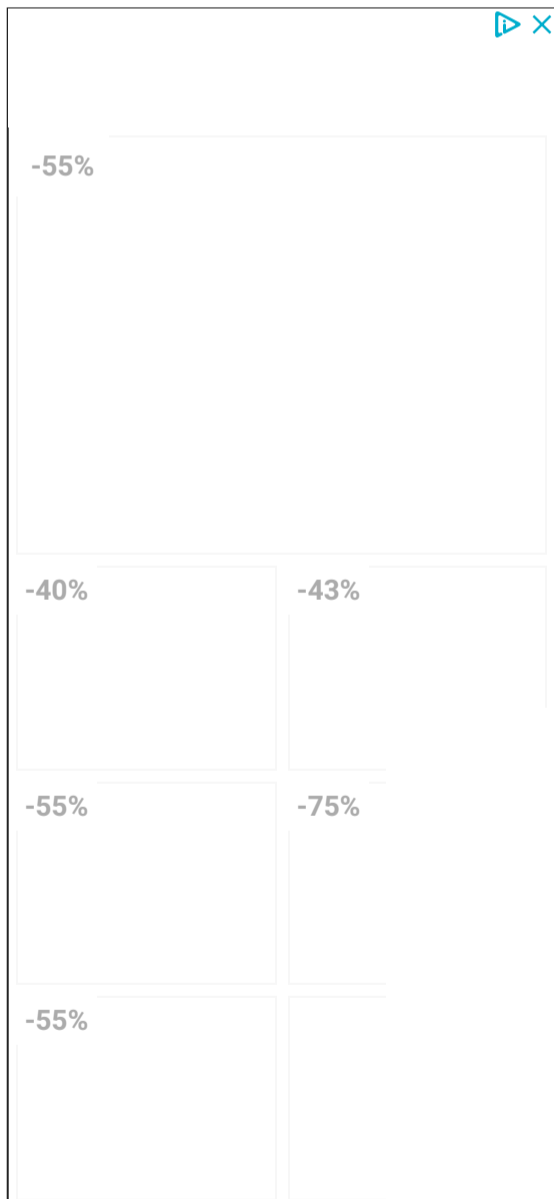
- (A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT? NO
- (B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? NO

[Charitopedia.com](https://charitopedia.com)

Search...

Benefic Foundation in Seattle, Washington (WA)

Employer Identification Number (EIN)	30-0450815
Name of Organization	Benefic Foundation
In Care of Name	John Bromley
Address	93 South Jackson Street 11580, Seattle, WA 98104-2818
Subsection(s) / Classification	Charitable Organization
Affiliation	Independent
Ruling Date	06/2009
Deductibility	Contributions are deductible
Foundation	Organization which receives a substantial part of its support from a governmental unit or the general public
Organization	Corporation
Exempt Organization Status	Unconditional Exemption
Tax Period	09/2019
Asset	\$0
Income	\$0
Filing Requirement	990 - Required to file Form 990-N - Income less than \$25,000 per year
Accounting Period	September (09)
Asset Amount	\$0
Income Amount	\$0
Form 990 Revenue Amount	\$0
National Taxonomy of Exempt Entities (NTEE)	Philanthropy, Voluntarism and Grantmaking Foundations: Public Foundations





Data from form 990N

EIN	30-0450815
Name	Benefic Foundation
Tax period	2018 (10/01/2018 - 09/30/2019)
Mailing Address	93 SOUTH JACKSON STREET 11580 SEATTLE, WA 981042818 United States
Principal Officer's Name and Address	JOHN BROMLEY 93 SOUTH JACKSON STREET 11580 SEATTLE, WA 981042818 United States
Organization has terminated	No

Organizations performing similar types of work

Moses Lake Medical Team, Lateef Olaniyan	Moses Lake	WA
Somali Bantu Community Service Of Washington	Seattle	WA
Baby Steps Foundation	Puyallup	WA
4 Foundation	Prt Jefferson	NY
Washington Township Education Foundation Inc	Sewell	NJ
Helping Hands At Cochise Terrace	Benson	AZ
Friends Of The Chillicothe-ross County Public Library	Chillicothe	OH
Team Tiara	Allen	TX
Bradley Foundation	Philadelphia	PA
Friends Of Sampson State Park	Romulus	NY

Organizations performing similar types of work - median values

Income amount

Similar organizations: \$575

This organization: \$0

Asset amount

Similar organizations: \$1,135

This organization: \$0

Benefic Foundation



Benefic Foundation is a charitable organization in Seattle, Washington. Its tax id (EIN) is 30-0450815. It was granted tax-exempt status by IRS in June, 2009. For detailed information such as income and other financial data of **Benefic Foundation**, refer to the following table.

<input type="text" value="Enter name and/or address..."/>	<input type="button" value="Search!"/>
---	--

Profile of Benefic Foundation


Organization Name	Benefic Foundation
Tax Id (EIN)	30-0450815
Address	93 South Jackson Street 11580, Seattle, WA 98104-2818
In Care of Name	John Bromley
All tax-exempt organizations in zip code 98104 (/zip/98104)	

Tax Period	Asset	Income	Revenue
September, 2013	\$0	\$0	\$0
September, 2015	\$0	\$0	\$0
September, 2016	\$0	\$0	\$0
September, 2017	\$0	\$0	\$0
September, 2018	\$0	\$0	\$0
September, 2019	\$0	\$0	\$0

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IRS Exempt Status Ruling Date	June, 2009
Exempt Status	Unconditional Exemption
Deductibility	Contributions are deductible
Tax Exempt Classification	Philanthropy, Voluntarism and Grantmaking Foundations (/wa/seattle/T?t=ntee1)
Tax Exempt Activity	Public Foundations (/wa/seattle/T30?t=ntee3)
NTEE Code	T30
Foundation Type	Organization which receives a substantial part of its support from a governmental unit or the general public 170(b)(1)(A)(vi)
Organization Type	Corporation
Organization Classification	Charitable Organization (/wa/seattle/031)
Affiliation	Independent - This organization is an independent organization or an independent auxiliary (i.e., not affiliated with a National, Regional, or Geographic grouping of organizations).
Primary Return(s) Required to File	990 - Required to file Form 990-N - Income less than \$25,000 per year
Private Foundation Filing Requirement	No need to 990-PF return