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Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note The foundation may be able to use a copy of this return to satisfy state reporting requirements.

Department of the Treasury Internal Revenue Service

OMB No 1545-0052

Foi	cale	ndar year 2012 or tax year beginning		, and ending		
Na	ıme o	f foundation			A Employer identification	n number
-		SIDE BY SIDE FOUNDATION			31-164467	7
		and street (or PO box number if mail is not delivered to street 5 E. FT. LOWELL DR., ST	B Telephone number			
		town, state, and ZIP code	E. 115		 - \ 	-2250
	•	SON, AZ 85712			C If exemption application is	pending, check here
G	Chec	k all that apply Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	s, check here
		Final return	Amended return		2 5	
		Address change	Name change		2. Foreign organizations macheck here and attach of	omputation
H_		k type of organization: X Section 501(c)(3) exection 4947(a)(1) nonexempt charitable trust	kempt private foundation Other taxable private founda	ė.	E If private foundation st	
LE		arket value of all assets at end of year J Accounti		Accrual	under section 507(b)(1	•••
			her (specify)	7.007241	F If the foundation is in a under section 507(b)(1	
	> \$	148,184 . (Part I, colu		pasis.)		,,-,,-,,-,,-,-,-,-,-,-,-,-,-,-,-,-,-,-
P	art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	100,000.		N/A	
	2	Check [Interest on savings and temporary] If the foundation is not required to attach Sch. B	192.	192.		
	1 4	cash investments	192.	192.		STATEMENT 1
	5a	Gross rents				
	b	Net rental Income or (loss)				
Revenue	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a				
eve	7	Capital gain net income (from Part IV, line 2)		0.	111111111111111111111111111111111111111	•
<u> </u>	8	Net short-term capital gain	***************************************	······		***************************************
	9	Income modifications		······		
	10a	and allowances Less Cost of goods sold		······································	***************************************	
		Gross profit or (loss)				
	11	Other income				
	12	Total. Add lines 1 through 11	100,192.	192.		
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages			* ************************************	
Ses	I	Legal fees			", "	- 33
Expens	I	Accounting fees STMT 2	1,400.	0.	10V - 517	0.
Ä	C	Other professional fees			4	*(7;
tive	17	Interest				· · · · · · · · · · · · · · · · · · ·
Operating and Administrative	18 19	Taxes			·	1
E.	20	Occupancy				
Ā	21	Travel, conferences, and meetings				
and	22	Printing and publications				
ting	23	Other expenses STMT 3	451.	434.		0.
era	24	Total operating and administrative expenses. Add lines 13 through 23	1,851.	434.		
o	25	Contributions, gifts, grants paid	108,200.	TJT:		108,200.
	ı	Total expenses and disbursements.				
		Add lines 24 and 25	110,051.	434.		108,200.
	1	Subtract line 26 from line 12:	0.050			
		Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	-9,859.	0.	: !!!!!!!!!!!!'' '! !!!!!!!!!!!!!!!!!!	
	1	Adjusted net income (if negative, enter -0-)		0.	N/A	
2235			······	······		<u> </u>

Par	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
2	Savings and temporary cash investments	157,850.	147,991.	147,991.
3	Accounts receivable			
	Less: allowance for doubtful accounts			
4	Pledges receivable ►			
- 1	Less: allowance for doubtful accounts			
5				
1 -	Receivables due from officers, directors, trustees, and other			
"	disqualified persons			
٠,	Other notes and loans receivable			
	Less. allowance for doubtful accounts	1	1	
				
Assets		193.	193.	193.
SS	• • • • • • • • • • • • • • • • • • • •	193.	193.	193•
ייו	a Investments - U.S. and state government obligations	<u> </u>		
	b Investments - corporate stock			
	c Investments - corporate bonds			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
11	Investments - land, buildings, and equipment basis			
]	Less: accumulated depreciation			
12	Investments - mortgage loans			
13	Investments - other			
14	· · · · · · · · · · · · · · · · · · ·			
1	Less: accumulated depreciation	[1	
15	Other assets (describe			
1.0	Take aggrets /te he completed by all filers)	158,043.	148,184.	148,184.
	Total assets (to be completed by all filers)	130,013.	140,104.	110/104.
17	• •			,
18				
<u>s</u> 19	Deferred revenue			
불 20	Loans from officers, directors, trustees, and other disqualified persons			
20 21 21 21 21 21 21 21 21 21 21 21 21 21	• • • • • • • • • • • • • • • • • • • •			
- 22	Other liabilities (describe			
23		0.	0.	
	Foundations that follow SFAS 117, check here	<u> </u>	į.	
	and complete lines 24 through 26 and lines 30 and 31.	!	ł	
8 24			Ŧ	
E 25	Temporarily restricted			
E 26				
힏	Foundations that do not follow SFAS 117, check here			,
윤	and complete lines 27 through 31.]	į.	
ក្ក ₂₇	•	158,043.	148,184.	
sta 127		0.	0.	
Assets or Fund Balance		0.	0.	
₩	• • • • • • • • • • • • • • • • • • • •	158,043.	148,184.	
ž 30	Total net assets or fund balances	130,043.	140,104.	•
31	Total liabilities and net assets/fund balances	158,043.	148,184.	`
Par	Analysis of Changes in Net Assets or Fund B	alances		
1 Tot	al net assets or fund balances at beginning of year - Part II, column (a), line	30		
(m	ust agree with end-of-year figure reported on prior year's return)			158,043.
	er amount from Part I, line 27a			-9,859.
				0.
	d lines 1, 2, and 3		I - I	148,184.
	creases not included in line 2 (itemize)			0.
	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (h) line 30		148,184.
101	at thet appets of futio palatices at the of year time 4 filling line of Frant II, C	orderini (D), iiilo OO	<u>, , </u>	Form 990-PF (2012)

(a) List and describe	i Losses for Tax on In the kind(s) of property sold (e.g., buse; or common stock, 200 shs	, real estate,		` P - Pu	acquired rchase nation		acquired lay, yr.)	(d) Date sold (mo , day, yr)
a				ļ				
b NONE								<u>.</u>
<u> </u>								
<u> </u>				· 				
<u>e </u>				┸-,				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				ain or (loss) s (f) minus (
a								
0								
				 -		_		-
								
Complete only for assets showing ga	in in column (h) and owned by the	he foundation	on 12/21/60			(I) Cara (C)	
Complete only for assets showing ga	(i) Adjusted basis						Col. (h) gain : not less than	
(i) F M.V. as of 12/31/69	as of 12/31/69		cess of col. (1) col. (j), if any		_	Losses	(from col. ()	1))
								·
			 -					
				-				
<u> </u>								
<u> </u>				- 				
Capital gain net income or (net capital	loss) { If gain, also enter If (loss), enter -0-	in Part I, line I in Part I, line	7 7	} 2				
Net short-term capital gain or (loss) as If gain, also enter in Part I, line 8, colu		d (6):		7				
If (loss), enter -0- in Part I, line 8) 3				
Part V Qualification Und	er Section 4940(e) for	Reduced	Tax on Net	Invest	ment In	come		
as the foundation liable for the section Yes," the foundation does not qualify u Enter the appropriate amount in each	nder section 4940(e) Do not cor	mplete this pa	rt					Yes X
(a)	——————————————————————————————————————	31140110113 Del	ore making any e		·			(d)
Base period years Calendar year (or tax year beginning in) Adjusted qualifying distr		Net value of no				Distrib (coi. (b) divi	utión ratio ded by col (c))
2011	10	7,550.			87,43			.5738
2010	114	2,550.			20,50			.9340
2009		4,875. 7,250.			24,08			.8452
2008		1,250.		<u>1</u>	61,77 70,61	3.		.7247
2007		1,900.	·		70,61	9.		3.4110
Total of line 1, column (d)						2		6.4888
Average distribution ratio for the 5-year the foundation has been in existence in				-		3	ļ 	1.2977
Enter the net value of noncharitable-u	se assets for 2012 from Part X, li	ine 5				4		164,07
Multiply line 4 by line 3					· ••	5		212,92
Enter 1% of net investment income (1	% of Part I, line 27b)					6		
								212,92
Add lines 5 and 6							1	214,72
Add lines 5 and 6								
Add lines 5 and 6 Enter qualifying distributions from Pal line 8 is equal to or greater than line See the Part VI instructions.	t XII, line 4	·· ····· ·· · · · · · · · · · · · · ·			. <u>.</u>			108,20

Form 990-PF (2012)

orm	990-PF (2012) THE SIDE BY SIDE FOUNDATION 31	-16446	77		Page 5
Pa	rt VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		_X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privile	ges?			
	If "Yes," attach statement (see instructions)	. L	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	. [13	X	
	Website address ► N/A				
14	The books are in care of ▶ R & A CPAS Telephone no. ▶ (520) 8	81-	-49	00
	Located at ► 4542 E. CAMP LOWELL DRIVE, STE. 100, TUCSON, AZ ZIP	0+4 ► 857	12		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			. ▶	
	and enter the amount of tax-exempt interest received or accrued during the year	j	N,	/A	
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank,	_	1	Yes	No
	securities, or other financial account in a foreign country?	. [16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign	[-
	country				
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly):				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		Ì		
	a disqualified person?	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available				
	for the benefit or use of a disqualified person)? Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"				
	if the foundation agreed to make a grant to or to employ the official for a period after				
	termination of government service, if terminating within 90 days.)	X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fall to qualify under the exceptions described in Regulations				
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b	_	
	Organizations relying on a current notice regarding disaster assistance check here	▶ □ ["			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected				
	before the first day of the tax year beginning in 2012?	[10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation				
	defined in section 4942(J)(3) or 4942(J)(5)).	į			
а	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	ţ			
	before 2012?	X No	[
	If "Yes," list the years 🚩				
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect				
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach				
	statement - see instructions)	N/A	2b		
0	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	ŀ			
	>				
3	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	أ			•
	during the year?	X No	į		ł
Ì	of "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after	ŧ			Ţ
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	se			ŧ
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,				‡
	Form 4720, to determine if the foundation had excess business holdings in 2012.)	N/A	3b		<u> </u>
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
ì	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	it [1
	had not been removed from jeonardy before the first day of the tax year beginning in 20122	1	46		x

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Part VII-B Statements Regarding Activities for Which	n Form 4720 May Be	Required (contin	nued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (sec	tion 4945(e))?	🔲 Y	es X No	
(2) Influence the outcome of any specific public election (see section 4955)), or to carry on, directly or indii	rectly,		
any voter registration drive?		🔲 Y	es X No	
(3) Provide a grant to an individual for travel, study, or other similar purpos			es X No	
(4) Provide a grant to an organization other than a charitable, etc., organiza	tion described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, litera				
the prevention of cruelty to children or animals?			es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify i				
section 53 4945 or in a current notice regarding disaster assistance (see ins	-	•	N/A	5b
Organizations relying on a current notice regarding disaster assistance chec			▶	-
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption				
expenditure responsibility for the grant?			es 🔲 No	
If "Yes," attach the statement required by Regulations section 53.49		., .,	53 NU	
6a Did the foundation, during the year, receive any funds, directly or indirectly,	. ,		[
a personal benefit contract?	to pay premiums on	v	V	
b Did the foundation, during the year, pay premiums, directly or indirectly, on	n narcanal hanafit contract?	11		e. V
If "Yes" to 6b, file Form 8870.	a personal benefit contract?		· · · -	6b X
•		П.,		
7a At any time during the tax year, was the foundation a party to a prohibited ta				
b If 'Yes,' did the foundation receive any proceeds or have any net income attr				7b
Part VIII Information About Officers, Directors, True	stees, Foundation Ma	inagers, Highl	У	
List all officers, directors, trustees, foundation managers and the	ir compensation		· · · · · · · · · · · · · · · · · · ·	
List an emers, an esters, trastees, tourisation managers and the	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Evpagas
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
PAUL D. BANCROFT	to position	enter -0-)	compensation	allowances
3955 E FT LOWELL DR, STE 115	DIRECTOR			
· · · · · · · · · · · · · · · · · · ·				
TUCSON, AZ 85712	2.00	0.	0.	0.
MARY JAN BANCROFT	DIRECTOR		1	
3955 E FT LOWELL DR, STE 115				
TUCSON, AZ 85712	2.00	0.	0.	0.
LAURIE INGRAM	DIRECTOR			
10881 WHISPERING PINES			_	
PARKER, CO 80138	2.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those i		enter "NONE."	1 (.6	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
	hours per week devoted to position	(c) compensation	and deferred compensation	allowances
NONE				
				L_
		L		ı
				ı
				
	\neg			ı
		<u> </u>		
				ı
Total number of other employees paid over \$50,000		<u> </u>	<u> </u>	0
The second secon			·· · · · · · · · · · · · · · · · · · ·	000 PE (0040)

All other program-related investments. See instructions

Total. Add lines 1 through 3

Part X Minimum Investment Return (All domestic foundations must complete the	· · · · · · · · · · · · · · · · · · ·	
Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		0
a Average monthly fair market value of securities	1a	166,571.
b Average of monthly cash balances	1b	100,571.
c Fair market value of all other assets	<u>1c </u>	166,571.
d Total (add lines 1a, b, and c)	11	100,3/1.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	0
Acquisition indebtedness applicable to line 1 assets	2	166 571
Subtract line 2 from line 1d	3	166,571.
Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	····	2,499.
Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	164,072.
Minimum investment return, Enter 5% of line 5		8,204.
Part XI Distributable Amount (see instructions) (Section 4942(I)(3) and (I)(5) private op foreign organizations check here and do not complete this part)	erating foundations and certain	
Minimum investment return from Part X, line 6	1	8,204.
a Tax on investment income for 2012 from Part VI, line 5		· · · · · · · · · · · · · · · · · · ·
b Income tax for 2012 (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2c	0.
Distributable amount before adjustments. Subtract line 2c from line 1		8,204.
Recoveries of amounts treated as qualifying distributions		0.
Add lines 3 and 4		8,204.
Deduction from distributable amount (see instructions)		0.
7 Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	8,204.
Part XII Qualifying Distributions (see instructions)		
Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		100 200
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26		108,200.
b Program-related investments - total from Part IX-B		
? Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
Amounts set aside for specific charitable projects that satisfy the.		
a Suitability test (prior IRS approval required)		
b Cash distribution test (attach the required schedule)		100 000
Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	108,200.
Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
income. Enter 1% of Part I, line 27b	T	0.
Adjusted qualifying distributions. Subtract line 5 from line 4	6	108,200.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating when 1940(c) reduction of the in those years	nether the foundation qualifies for th	e section
4940(e) reduction of tax in those years.		

Form **990-PF** (2012)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,				
line 7		1 1' ' - 1' - 111141-11-11	······································	8,204.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only			0.	······································
b Total for prior years:		^		
3 Excess distributions carryover, if any, to 2012:		0.	. п.п.нинги г. п. п. г. г.	***************************************
a From 2007 573,583.	1			
100 200				
00 672	1			
d From 2010 98,673.			Ī	
e From 2011 98,178.				
A Tabal addison On the south	986,224.			
4 Qualifying distributions for 2012 from	700,224.			······································
Part XII, line 4. > \$ 108, 200.				
a Applied to 2011, but not more than line 2a	 		0.	
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.	······································	······································
c Treated as distributions out of corpus	.			
(Election required - see instructions)	0.			
d Applied to 2012 distributable amount	00 006			8,204.
e Remaining amount distributed out of corpus	99,996.	 	***************************************	
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	1,086,220.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2011. Subtract line				······································
4a from line 2a. Taxable amount - see instr.]	0.	
f Undistributed income for 2012. Subtract				
lines 4d and 5 from line 1. This amount must	1			
be distributed in 2013				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by			1	
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007				······································
not applied on line 5 or line 7	573,583.			
9 Excess distributions carryover to 2013.				***************************************
Subtract lines 7 and 8 from line 6a	512,637.		-	
10 Analysis of line 9:				······································
a Excess from 2008 109, 260.		#	•	
b Excess from 2009 98,673.				
© Excess from 2010 106,530.		']	1	
d Excess from 2011 98, 178.				
e Excess from 2012 99,996.		[.		

3 Grants and Contributions Paid During to		Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ALTRUSA INTERNATIONAL	none	PUBLIC CHARITY	COMMUNITY WELFARE	
332 S. MICHIGAN AVE., STE 1123 CHICAGO, IL 60604		-		10
AMERICAN ANTI-VIVISECTION	none	PUBLIC CHARITY	COMMUNITY WELFARE	
801 OLD YORK ROAD, SUITE 204 JENKINTOWN, PA 19046				1,00
AMERICAN RED CROSS 4601 E. BROADWAY BLVD.	NONE	PUBLIC CHARITY	COMMUNITY WELFARE	
TUCSON, AZ 85711				10,00
ARIZONA PUBLIC MEDIA	NONE	PUBLIC CHARITY	SUPPORT	
PO BOX 210067 TUCSON, AZ 85721				50
ARIZONA THEATRE CO. 40 E. 14TH ST.	NONE	PUBLIC CHARITY	COMMUNITY WELFARE	
TUCSON, AZ 85701				8,00
	CONTINUATION SHEE	ET(S)	> 3a	108,20
b Approved for future payment				
NONE				

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

Enter areas amounts unless athenwas indicated	Unrelated	business income	Exclude	d by section 512, 513, or 514	(0)
Enter gross amounts unless otherwise indicated. 1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
•	Code		- Code		
a b			 		
			+-+		
•					
			 -		
f			+ +		
g Fees and contracts from government agencies					
2 Membership dues and assessments			1 1		
3 Interest on savings and temporary cash			1 1		
investments			14	192.	
4 Dividends and interest from securities	1 1		1 - 1		
5 Net rental income or (loss) from real estate					
a Debt-financed property			1		······································
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			\vdash		
7 Other investment income			 - -		
8 Gain or (loss) from sales of assets other					
than inventory			├		
9 Net income or (loss) from special events			├		
10 Gross profit or (loss) from sales of inventory			╂┼-		
11 Other revenue:					
<u>a</u>	—————	· · · · · · · · · · · · · · · · · · ·	├─ ├		
b		·	} }-		
<u> </u>			┼		
d	 		╁╌┼		
12 Subtotal Add columns (b), (d), and (e)		0.		192.	0.
	<u> </u>			13	
(See worksheet in line 13 instructions to verify calculations.)				· ··· ··· ··· ··· ··· · · · · · · · ·	172.
Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which inco the foundation's exempt purposes (other than	me is reported in	column (e) of Part XVI-A			plishment of
the foundation's exempt purposes (other than	by providing lund	s for such purposes).			
				······	
			· · · · ·		
		 			
					
					· -
	·				
<u> </u>					
					

223621 12-05-12

Form 990	D-PF (2012) THE S	SIDE BY SIDE	FOUNDATION		31-1	644677	Page 13
Part 3		egarding Transfers	To and Transaction	ons and Relatio	onships With None	charitable	:
1 Did	Exempt Organization directly or and		ollowing with any other org	anization described in	section 501/c) of	F	Yes No
	Code (other than section 501(3600011 30 1(0) 01		163 110
	nsfers from the reporting found			ii oigailizatiolis*			.]
	Cash		impt organization of.			. 1a(1)	x
	Other assets				** **** ****	13(2)	X
	er transactions:					. 19(2)	- 1 1
		able average arganization				45/41	x
	Sales of assets to a noncharit				• • • • • • • • • • • • • • • • • • • •	1b(1)	$\frac{X}{X}$
	Purchases of assets from a ne					1b(2)	X
	Rental of facilities, equipment		• • • • • • • • • • • • • • • • • • • •			1b(3)	X
٠,	Reimbursement arrangement					1b(4)	$\frac{\lambda}{X}$
	Loans or loan guarantees					1b(5)	
	Performance of services or m					1b(6)	X
	aring of facilities, equipment, m					. <u>[1c </u>	X
	ne answer to any of the above i		• , .	•	•		ets,
	services given by the reporting			ket value in any transa	ction or sharing arrangeme	ent, show in	
	umn (d) the value of the goods			1 70			
(a) Line n	o (b) Amount involved	1.7	arıtable exempt organizatio	n (0) Descr	iption of transfers, transactions	, and shanng an	angements
		N	/A				
	<u> </u>					·	
					<u> </u>		
						<u>.</u>	
						<u>-</u>	
in s	he foundation directly or indirection 501(c) of the Code (other formula of the complete the following solutions of the complete t	er than section 501(c)(3)) or		•	ed	Yes	X No
	(a) Name of or	ganization	(b) Type of organi	zation	(c) Description of rela	tionship	
	N/A						
	Under penalties of perjury, I declar					May the IRS o	discuss this
Sign Here	and belief, it is true, correct, and co	omplete Declaration of preparer (c	11	_ \	eparer has any knowledge	return with the shown below X Yes	e preparer (see instr)?
	Signature of officer or truste		Date	Title		<u> </u>	
	Print/Type preparer's r	name Prep	rer's signature	Date / /	, —	TIN	
Paid	THOMAS FUI	RRIER	my him	71/4/13	self- employed	P00140	880
Preparent	arer Firm's name ► R		OFES IONAL C	ORPORATION			

(520) 881-4900 Form **990-PF** (2012)

Firm's address ► 4542 E. CAMP LOWELL STE. 100 TUCSON, AZ 85712

Phone no

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

Employer identification number THE SIDE BY SIDE FOUNDATION 31-1644677 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, chantable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF). but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

THE SIDE BY SIDE FOUNDATION

31-1644677

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PAUL D. AND MARY JAN BANCROFT 3955 E FORT LOWELL RD STE 115 TUCSON, AZ 85712	s100,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there Is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

THE SIDE BY SIDE FOUNDATION

31-1644677

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		- - - - - - - - -				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		- - - - \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		- - - - - - - - - - - - - - - - -				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		- - - - - (\$				

Name of organi	zation		Employer identification number				
THE SID Part III	E BY SIDE FOUNDATION Exclusively religious, charitable, etc., indivivers. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc.	i following line entry. For organizatio	31-1644677 (5)(7), (8), or (10) organizations that total more than \$1,000 for the completing Part III, enter or the year. (Enter this information once.)				
(a) No. from	Use duplicate copies of Part III if additiona (b) Purpose of gift		(d) Description of how gift is held				
Part I	(a) r a pool of girt						
		(e) Transfer of gif	ft				
	Transferee's name, address, and	d ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
-	Transferee's name, address, and	U ZIF + 4	Relationship of transferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I							
-		(e) Transfer of git	ft				
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
_							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
=							
	(e) Transfer of gift						
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				
-							

3 Grants and Contributions Paid During the	e Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
BEN'S BELL	NONE	PUBLIC CHARITY	COMMUNITY WELFARE	
PO BOX 41025 TUCSON, AZ 85717		ļ <u>-</u>		100
CARE INTERNATIONAL 151 ELLIS STREET, NE	NONE	PUBLIC CHARITY	COMMUNITY WELFARE	
ATLANTA, GA 30303				10,000
CASA DE LOS NINOS	NONE	PUBLIC CHARITY	COMMUNITY WELFARE	
1101 N. 4TH AVE. TUCSON, AZ 85705				5,000
COMMUNITY FOOD BANK OF SOUTHERN ARIZONA	NONE	PUBLIC CHARITY	COMMUNITY WELFARE	
3003 S COUNTRY CLUB RD, STE 221 TUCSON, AZ 85713				500
DEPENDERS OF WILDLIFE	NONE	PUBLIC CHARITY	COMMUNITY WELFARE	
302 S. CONVENT AVE. TUCSON, AZ 85701				500
EMILY SANDALL FOUNDATION 13000 ROVER AVE NE ALBUQUERQUE, NM 87112	NONE	PUBLIC CHARITY	COMMUNITY WELFARE	500
, M. 4/222				300
GALLAUDET UNIVERSITY 800 FLORIDA AVE NE	NONE	PUBLIC CHARITY	COMMUNITY WELFARE	
WASHINGTON, DC 200023695				18,000
HABITAT FOR HUMANITY	NONE	PUBLIC CHARITY	COMMUNITY WELFARE	
621 W. LESTER ST. TUCSON, AZ 85705				500
WINNER COCKETY OF COMMUNITY AN	NONE			
HUMANE SOCIETY OF SOUTHERN AZ SHELTER 3450 N. KELVIN BLVD TUCSON, AZ 85716	NONE	FOBBIC CHARITI	COMMUNITY WELFARE	500
MAKE WAY FOR BOOKS 3955 E. FT. LOWELL DR.	NONE	PUBLIC CHARITY	PROMOTE READING	
TUCSON, AZ 85712 Total from continuation sheets		1		10,000

Part XV Supplementary Information 3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
PARENTS AS TEACHERS	NONE	PIIRI.IC CHARITY	SUPPORT EDUCATION	
5702 S CAMPBELL AVENUE				
TUCSON, AZ 85706				100
PETA	NONE	PUBLIC CHARITY	COMMUNITY WELFARE	
501 FRONT ST.				
ORFOLK, VA 23510				500
PICOR FOUNDATION	NONE	PUBLIC CHARITY	COMMUNITY WELFARE	
100 N. WILMOT				
TUCSON, AZ 85712				500
PRIMAVERA FOUNDATION	NONE	PUBLIC CHARITY	COMMUNITY WELFARE	
702 S. 6TH AVE.				10.00
TUCSON, AZ 85701				10,000
RONALD MCDONALD HOUSE	NONE	PUBLIC CHARITY	SUPPORT YOUTH	
3838 N CAMPBELL				
TUCSON, AZ 85719				500
SALESMANSHIP CLUB	NONE	PUBLIC CHARITY	SUPPORT YOUTH	
106 E 10TH ST				
DALLAS, TX 75203				1,000
SALVATION ARMY	NONE	PUBLIC CHARITY	COMMUNITY WELFARE	
1001 N. RICHEY BLVD FUCSON AZ 85716				500
				300
ST GREGORY'S KENYA CLUB	NONE	PUBLIC CHARITY	SUPPORT EDUCATION	
3231 N CRAYCROFT RD				F.A.
rucson, Az 85712				500
ST. ALBAN'S EPISCOPAL CHURCH	NONE	RELIGIOUS	GENERAL SUPPORT	
3737 OLD SABINO CANYON RD. TUCSON, AZ 85750		ORGANIZATION		10,10
THE CHILDREN'S HOSPITAL FOUNDATION	NONE	PUBLIC CHARITY	SUPPORT MEDICAL	
13123 E 16TH AVE, BOX 045			RESEARCH	
AURORA, CO 80045 Total from continuation sheets			<u> </u>	50

THE SIDE BY SIDE FOUNDATION

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
THE FAMILY PLACE	NONE	PUBLIC CHARITY	COMMUNITY WELFARE	
PO BOX 7999				
DALLAS, TX 75209	 	 		500
U.S. FUND FOR UNICEF 5342 E. SPEEDWAY BLVD	NONE	PUBLIC CHARITY	INTERNATIONAL COMMUNITY WELFARE	
TUCSON, AZ 85712			COMMONITY WEET AND	15,000
UNITED WAY OF TUCSON AND SO. AZ	NONE	PUBLIC CHARITY	COMMUNITY WELFARE	
330 N. COMMERCE PARK LOOP, #200				
TUCSON, AZ 85745			`	500
UUCT - NO MORE DEATHS	NONE	PUBLIC CHARITY	COMMUNITY WELFARE	
4831 EAST 22ND STREET TUCSON, AZ 85711				1,000
women's poundation of southern az	NONE	PUBLIC CHARITY	GENERAL ACTIVITIES	
3610 N. PRINCE VILLAGE PL				
TUCSON, AZ 85719		 		500
LITERACY CONNECTS	NONE	PUBLIC CHARITY	SUPPORT COMMUNITY	
2850 E. SPEEDWAY BLVD TUCSON, AZ 85716			LITERACY	250
FRIENDS OF AGUA CALIENTE	NONE	PIIRI.IC CHARITY	HELP PRESERVE A	
12325 E. ROGER ROAD			HISTORIC SITE	
TUCSON, AZ 85749				50
ST. JUDE CHILDREN'S RESEARCH HOSPITAL	NONE	PUBLIC CHARITY	MEDICAL RESEARCH FOR	
262 DANNY THOMAS PLACE MEMPHIS TN 38105			CHILDRENS'CANCERS	500
,				
ADVOCATES FOR COMMUNITY	NONE	PUBLIC CHARITY	HELP CREATE SAFER,	
TRANSFORMATION PO BOX 225225			MORE STABLE NEIGHBORHOODS IN	
DALLAS, TX 75222			DALLAS, TX	500
Total from continuation sheets			<u></u>	

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH II	NVESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
MUTUAL OF OMAHA BANK			-	19	92.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A	=	19	92.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME		
LEGAL & ACCOUNTING FEES	1,400.	0.			0.
TO FORM 990-PF, PG 1, LN 16B	1,400.	0.			0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME		
FEES MISCELLANEOUS EXPENSES	434.				0.
TO FORM 990-PF, PG 1, LN 23	451.	434.			0.
FORM 990-PF	PART XV - L	· · · · · · · · · · · · · · · · · · ·		STATEMENT	4

NAME OF MANAGER

PAUL D. BANCROFT MARY JAN BANCROFT

Form 8	368 (Rev. 1-2013)					Page 2		
• If you	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this	box		► X		
Note. C	nly complete Part II if you have already been granted an	automatic	3-month extension on a previously fi	led Form (3868.			
	are filing for an Automatic 3-Month Extension, comple							
Part	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no co	opies ne	eded).		
			Enter filer's	identifyir	g numbe	r, see instructions		
Type of	Name of exempt organization or other filer, see instru	ictions		Employer	Employer Identification number (EIN)			
print	THE SIDE BY SIDE FOUNDATION		31-1644677					
File by the		OI-I	Social security number (SSN)					
filing your return. Se	Number, street, and room or suite no. If a P.O. box, see instructions. 3955 E. FT. LOWELL DR., STE. 115					Social Security number (SSN)		
Instruction	City, town or post office, state, and ZIP code. For a for TUCSON, AZ 85712	oreign add	lress, see Instructions.					
Enter th	e Retum code for the retum that this application is for (file	e a senara	te application for each return)			0 4		
	· · · · · · · · · · · · · · · · · · ·	<u></u>	Y					
Applica	tion	Return	Application			Return		
Is For	90 or Form 990·EZ	Code	Is For (2000)	3.7.7.3	7.75	Code		
Form 9		01	Form 1041-A	ئىسىسىئى <u>ن</u>	<u></u>	08		
	720 (Individual)	03	Form 4720			09		
Form 9		04	Form 5227			10		
	30-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11		
	90-T (trust other than above)	06	Form 8870			12		
	Do not complete Part II if you were not already granted	an autor		iously file	d Form 8			
Tele If the	books are in the care of \blacktriangleright 4542 E. CAMP Lifebooks are in the care of \blacktriangleright 4542 E. CAMP Lifebooks No. \blacktriangleright (520) 881-4900 a organization does not have an office or place of business is for a Group Return, enter the organization's four digit	s in the Ur Group Exc	FAX No. ► (520) 881-1 nited States, check this boxemption Number (GEN)	475 f this is fo	the whol	e group, check this		
box ▶			ach a list with the names and EINs of	all memb	ers the ex	tension is for.		
		MOAFIN	BER 15, 2013.					
	or calendar year 2012 , or other tax year beginning	h ook soon	, and endin	9 Final r		·		
6 1	the tax year entered in line 5 is for less than 12 months, c Change in accounting period	fieck reas	on: L Initial return L	rinai r	etum			
7 5	tate in detail why you need the extension							
		HER F	URTHER INFORMATION	NECE	SSARY	TO		
Ī	REPARE A COMPLETE AND ACCURA	TE TA	X RETURN.					
8a li	this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069 e	inter the tentative tax less any					
	onrefundable credits. See instructions.	0, 0000, 2	into the territories tax, least any	8a	\$	0.		
_	this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated	(\$	 -			
	ax payments made. Include any prior year overpayment al							
	previously with Form 8868.		·	_8b	\$	193.		
c E	Balance due. Subtract line 8b from line 8a. Include your pa	ayment wi	th this form, if required, by using					
E	FTPS (Electronic Federal Tax Payment System). See instr			8c	\$	<u> </u>		
Under p	Signature and Verificat enalties of perfury I declare that I have examined this fo <u>rm, inclue</u> correct, and complete, and that I am authori cal to prepare this fi		st be completed for Part II opporation in the part II opporate the part is a statements, and to the part is a statements.		it my know	ledge and bellef,		
	Malu Nal				6	112/2		
Signatu	te ► // Mus (C Title ►	CPA		Date		19/3		
	<i>y</i>				For	m 8868 (Rev. 1-2013)		