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Form **990-PF**

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No. 1545-0052

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-PF and its separate instructions is at www.irs.gov/form990pf.

2013
Open to Public Inspection

Fo	r caler	ndar year 2013 or tax year beginning	, 2013	3, and e	ending		, 20
Nε	me of fo	undation				er identification numbe	er
VA	IL SNO	OW SPORTS FOUNDATION				20-5261191	
Nu	ımber an	d street (or P.O box number if mail is not delivered to street address)	Room	/suite	B Telephor	ne number (see instruction	ons)
13	97 VAIL	. VALLEY DRIVE		1		(561)331-1890)
		n, state or province, country, and ZIP or foreign postal code	· · ·	1	C If exemp	tion application is pend	
VA	IL, CO	81657		ļ			3 ,
			n of a former public	charity	D 1. Foreig	n organizations, check l	here ►
		☐ Final return ☐ Amended		1			
		Address change Name cha	nge			n organizations meeting here and attach compu	
H	Check	type of organization: Section 501(c)(3) exempt p	private foundation		E If private	foundation status was	terminated under
		on 4947(a)(1) nonexempt charitable trust		lation	section 5	607(b)(1)(A), check here	▶□
ī		narket value of all assets at J Accounting method			E 16 Ab - 6		
		f year (from Part II, col. (c), Other (specify)			under se	ndation is in a 60-montl ction 507(b)(1)(B), check	n termination chere . ► 🗍
	line 16		on cash basis.)				_
Р	art I		1				(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment come	(c) Adjusted net income	for chantable purposes
		the amounts in column (a) (see instructions).)	books	411	COME	iii Come	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	15,000.				
	2	Check ▶ ☐ if the foundation is not required to attach Sch. B	13,030				
	3	Interest on savings and temporary cash investments	6.		6.	STATEMENT 1	
	4	Dividends and interest from securities					
	5a	Gross rents					
	b	Net rental income or (loss)					
<u>o</u>	6a	Net gain or (loss) from sale of assets not on line 10					
Ĭ	b	Gross sales price for all assets on line 6a					
Revenue	7	Capital gain net income (from Part IV, line 2) .			0.		
ď	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	111	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	15,006.		6.		
S	13	Compensation of officers, directors, trustees, etc.	0.		0.		0.
Š	14	Other employee salaries and wages					
ē	15	Pension plans, employee benefits					
Expenses	16a	Legal fees (attach schedule)					
	D	Accounting fees (attach schedule)					
鬟	17 C	Other professional fees (attach schedule)	<u> </u>	EC	EIVE		
ij	17	Interest	<u> </u>		FIVE	D_{c}	
<u>:</u>	18 19	Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion	 	Alic e	7 000	၂ ၀	
Ξ	20	·	- IT	ied 1	~ Z014		
A	21	Occupancy	7	CIRE			
ם	22	Printing and publications			N, UT		
ā	23	Other expenses (attach schedule)			-		
. <u>≘</u>	24	Total operating and administrative expenses.				-5	
<u>ra</u>	- •	Add lines 13 through 23	_ [اء	_	_
Operating and Administrative	25	Contributions, gifts, grants paid	0.		0.	0.	<u> </u>
Ō	26	Total expenses and disbursements. Add lines 24 and 25	27,250.				27,250.
	27	Subtract line 26 from line 12:	27,250.				27,250.
	a	Excess of revenue over expenses and disbursements	12.24				
	Ь	Net investment income (if negative, enter -0-)	-12,244.				
		Adjusted not income (if possible optor 0.)			6.		

Ps	Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		Beginning of year	Ena o	t year
		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	69,288.	57,044.	57,044.
	2	Savings and temporary cash investments			
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	-	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶	İ	İ	
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)			
-	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			-
	• •	Less: accumulated depreciation (attach schedule)	-	İ	
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14				
	1.4	Land, buildings, and equipment: basis ►			-
	15	Less: accumulated depreciation (attach schedule) ▶ Other assets (describe ▶			· · · · · · · · · · · · · · · · · · ·
	16	Total assets (to be completed by all filers—see the			
	10	instructions. Also, see page 1, item I)			
	47		69,288.	57,044.	57,044.
	17	Accounts payable and accrued expenses			
S	18	Grants payable			
Liabilities	19	Deferred revenue			
ig	20	Loans from officers, directors, trustees, and other disqualified persons			
Ľ.	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
တ္ထ		Foundations that follow SFAS 117, check here ▶ □ and complete lines 24 through 26 and lines 30 and 31.			
Balances	04	•			
<u>a</u>	24	Unrestricted			
Ba	25	Temporarily restricted			
ַק	26	Permanently restricted			
Net Assets or Fun		Foundations that do not follow SFAS 117, check here ► ✓			
<u> </u>	~~	and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds	0.	<u>0.</u>	
ğ	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	<u> </u>	
ŝ	29	Retained earnings, accumulated income, endowment, or other funds	69,288.	57,044.	
=	30	Total net assets or fund balances (see instructions)	69,288.	57,044.	
ž	31	Total liabilities and net assets/fund balances (see			
		instructions)	69,288.	57,044.	
	rt III	Analysis of Changes in Net Assets or Fund Balances			
7	lota	al net assets or fund balances at beginning of year-Part II, colur	nn (a), line 30 (must	agree with	
		-of-year figure reported on prior year's return)			69,288.
2		er amount from Part I, line 27a		2	-12,244.
3		er increases not included in line 2 (itemize)		3	0.
4		lines 1, 2, and 3		4	57,044.
5	Deci	reases not included in line 2 (itemize) ▶		5	0
6	Tota	al net assets or fund balances at end of year (line 4 minus line 5)—F	Part II, column (b), line	30 6	57,044.

Part	V Capital Gains an	d Losses for Tax on Investm	ent Income		·	
		the kind(s) of property sold (e.g., real estate, use, or common stock, 200 shs MLC Co.)	,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a						
b						
c						
<u>d</u>				<u> </u>		
е						L
	(e) Gross sales pnce	(f) Depreciation allowed (or allowable)		r other basis ense of sale		in or (loss) (f) minus (g)
a						
<u>b</u>						
<u>c</u>						
<u>d</u>			<u> </u>			
ее	Complete only for assets sh	owing gain in column (h) and owned b	v the foundation	on 12/31/69	₩ 0 / 0-	1.40
	(i) F.M.V as of 12/31/69	(i) Adjusted basis as of 12/31/69	(k) Exces	ss of col. (i) I. (j), rf any	col. (k), but no	I. (h) gain minus t less than -0-) or from col (h))
а						
<u> </u>						
<u>c</u>					 	
d						
<u> </u>		(If gain a	ilso enter in Pa	ort Lline 7		
2	Capital gain net income of	nringt canital ingel (-	enter -0- ın Pa		2	
3	If gain, also enter in Part	nin or (loss) as defined in sections t I, line 8, column (c) (see instruct	tions). If (loss)), enter -0~ in)		
Part		der Section 4940(e) for Reduc		-	Jncome	
If sect	tion 4940(d)(2) applies, leav he foundation liable for the	rivate foundations subject to the s ve this part blank. e section 4942 tax on the distribute t qualify under section 4940(e). Do	able amount o	f any year in the b	·	☐ Yes ☐ No
1		ount in each column for each year		and the second s	aking any entnes.	
	(a)	(b)	<u> </u>	(c)		(d)
Cale	Base penod years endar year (or tax year beginning in	A alternative of an included the control of the con	Net value o	of nonchantable-use as		tribution ratio divided by col. (c))
	2012	43	,111	29	9,550	1.458917
	2011			- · · · · · · · · · · · · · · · · · · ·		
	2010					····
	2009					
	2008		L			
2	Total of line 1, column (d				. 2	1.458917
3		for the 5-year base period—divided the following the follo				1.458917
4	Enter the net value of nor	ncharitable-use assets for 2013 fro	om Part X, line	5	. 4	49,250
5	Multiply line 4 by line 3				. 5	71,852
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)			. 6	0
7	Add lines 5 and 6				. 7	71,852
8		ons from Part XII, line 4			. 8	27,250 % tax rate. See the
	Part VI instructions.	ייים אויים	11, 1110 10	, and complete t	part dolling a 1	, tun rate. Occ the

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—	see in	istru	ICTIO	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)				
b					
	here ▶ ☐ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.	
3	Add lines 1 and 2			0.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			0.	
6	Credits/Payments:				
a	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 6a				
b	Exempt foreign organizations—tax withheld at source 6b				ì
C	Tax paid with application for extension of time to file (Form 8868) . 6c 6c				
d	Backup withholding erroneously withheld				
7	Total credits and payments. Add lines 6a through 6d			0.	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9			0.	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10				
11	Enter the amount of line 10 to be: Credited to 2014 estimated tax ▶ Refunded ▶ 11				L
	VII-A Statements Regarding Activities			<u> </u>	
ıa	During the tax year, did the foundation attempt to influence any national, state, or local legislation or departicipate or intervene in any political campaign?			Yes	No
		<u>t</u>	1a	 	1
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?				1
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mater	rals			
	published or distributed by the foundation in connection with the activities.				
C	c Did the foundation file Form 1120-POL for this year?				✓
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. ► \$ 0 (2) On foundation managers. ► \$	0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	. [2		1
_	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	s of	3		1
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	/A	4a		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?	A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	·	5	-	✓
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			i	
U	By language in the governing instrument, or				
	 By state legislation that effectively amends the governing instrument so that no mandatory directions t 	hat			•
	and the state of t				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part	V	6 7	√	-
8а	Enter the states to which the foundation reports or with which it is registered (see instructions)	^^ }	'	_	
	CO			, 1	
b					
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation				
9					
•	4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If " Ye				
	complete Part XIV				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the	_{heir}	9		
	names and addresses		10		1

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Part	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		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		/
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	
14	Website address ► N/A The books are in care of ► DANIEL LEEVER Telephone no. ► (56)	1)-331	-1890	
	Located at ► 1397 VAIL VALLEY DRIVE VAIL, CO ZIP+4 ►	8165	7	
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 15		•	► □ N/A
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		✓
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	L		·
	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? Yes Vo Sorrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	-	ال
	Organizations relying on a current notice regarding disaster assistance check here			<u> </u>
, 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 2013?	1c		. <u> </u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013?			
h	If "Yes," list the years ▶ 20 , 20 , 20 , 20 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.)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20 , 20 , 20 , 20	20		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
h	If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or			
J	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
4 -	foundation had excess business holdings in 2013.)	3b		
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a		-
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b		1

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Part	VII-B Statements Regarding Activities			4720	May Be R	equire	d (contii	nued)			
5a	During the year did the foundation pay or incur a							_			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? . ☐ Yes ☑ No										
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,										
	directly or indirectly, any voter registration dri						∐ Yes	☑ No	1 .		
	(3) Provide a grant to an individual for travel, stur	•		•			 ✓ Yes	∐No			
	(4) Provide a grant to an organization other than section 509(a)(1), (2), or (3), or section 4940(d			_	ation desci		□ v				
	(5) Provide for any purpose other than religious,			-			Yes	✓ No		1	
	purposes, or for the prevention of cruelty to o						∏Yes	√ No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the						_		1 1		
	Regulations section 53.4945 or in a current notice								5b		1
	Organizations relying on a current notice regarding	ng disa	ster assistan	ce che	ck here .			▶□			
C	If the answer is "Yes" to question 5a(4), does to	he four	ndation claim	exem	ption from	the tax					
	because it maintained expenditure responsibility	for the	grant?			N/A	☐ Yes	☐ No			
	If "Yes," attach the statement required by Regula					•			i l		
6a	Did the foundation, during the year, receive any		-	-		emiums	_	_			
	on a personal benefit contract?						∐ Yes	_ ✓ No	1		
Ь	Did the foundation, during the year, pay premium	ns, dire	ctly or indire	ctly, on	a personal	benefit	contract	? .	6b		<u> </u>
72	If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundation a	narty i	to a prohibitor	l tay ch	oltor transac	tion?	☐ Yes	√ No			
	If "Yes," did the foundation receive any proceeds								7b		
	VIII Information About Officers, Direct									ees.	
	and Contractors	•	•							,	
1	List all officers, directors, trustees, foundation	n mana	gers and th	eir con	npensation	(see ir	structio	ns).			
	(a) Name and address		e, and average rs per week		mpensation not paid,		contribution: yee benefit		(e) Expe		
			ed to position		ter -0-)		rred compe		othera	llowan	ces ———
	L LEEVER	CHAIR	MAN					ŀ			
	DIAN ROAD PALM BEACH, FL 33480-3024 OFER OCHS	0.5			-0-			-0-	····		-0-
		TREAS	URER		-0-			-0-			^
	D I FEVER II				-0-			-0-	• • • • • • • • • • • • • • • • • • • •		<u>-0-</u>
·		SECRE 0.5	TARY		-0-			-0-			-0-
2	Compensation of five highest-paid employee	s (oth	er than thos	se incl	uded on li	ne 1—s	ee instr	uctions	s). If no	one, e	enter
	"NONE."		 								
	(a) Name and address of each employee paid more than \$50,00	n	(b) Title, and a		(c) Comper	1	(d) Contributemployee	benefit	(e) Expe	nse acc	ount,
,	ay name and address of each employee paid more than \$50,00	U	hours per v devoted to p	osition	(c) Comper	Sauon	plans and compens		other a	illowan	ces
NONE			f		. ,		<u> </u>				
					· · · · · · · · · · · · · · · · · · ·						
				·							
			· · · · · · · · · · · · · · · · · · ·								
								-			
								1			
Total	otal number of other employees paid over \$50,000										
		· ·	<u> </u>	•	<u> </u>	<u> </u>	· · · ·		orm 99 (0-PF	(2013)
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Sirve highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."	Par	it VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Em and Contractors (continued)	ployees,
Total number of others receiving over \$50,000 for professional services	3		17
Total number of others receiving over \$50,000 for professional services		(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct chanitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convenid, research papers produced, etc. 1 PAYMENT OF EQUIPMENT, FACILITIES, TRAVEL, COMPETITION EXPENSES FOR SEAN MCCORMICK, INDIVIDUAL 2 3 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 N/A Amount All other program-related investments. See instructions. 3 All other program-related investments. See instructions.	NON	Ε	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct chanitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convenid, research papers produced, etc. 1 PAYMENT OF EQUIPMENT, FACILITIES, TRAVEL, COMPETITION EXPENSES FOR SEAN MCCORMICK, INDIVIDUAL 2 3 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 N/A Amount All other program-related investments. See instructions. 3 All other program-related investments. See instructions.			
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List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 PAYMENT OF EQUIPMENT, FACILITIES, TRAVEL, COMPETITION EXPENSES FOR SEAN MCCORMICK, INDIVIDUAL 2 \$2,500. 2 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 N/A All other program-related investments. See instructions. 3 All other program-related investments. See instructions.	Day		
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments. See instructions. All other program-related investments. See instructions.	Par	Summary of Direct Charitable Activities	
1 PAYMENT OF EQUIPMENT, FACILITIES, TRAVEL, COMPETITION EXPENSES FOR SEAN MCCORMICK, INDIVIDUAL \$2,500. 2			Expenses
\$2,500. 2 3 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 N/A 2 All other program-related investments. See instructions. 3			
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1 N/A 2			Amount
All other program-related investments. See instructions. 3			
All other program-related investments. See instructions. 3	•		
All other program-related investments. See instructions. 3			
All other program-related investments. See instructions. 3	2		
3	_		
3			
3	AJI	other program-related investments. See instructions.	
Total. Add lines 1 through 3	-	•••••••••••••••••••••••••••••••••••••••	
Total. Add lines 1 through 3		***************************************	
	Tota	I. Add lines 1 through 3	

Part		ign found	ations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	18	0.
ь	Average of monthly cash balances	1b	50,000.
C	Fair market value of all other assets (see instructions)	1c	
đ	Total (add lines 1a, b, and c)	1d	50,000.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	1	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	50,000.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	750.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	49,250.
6	Minimum investment return. Enter 5% of line 5	6	2,462.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations check here ► ☐ and do not complete this part.)	oundation	าร
1	Minimum investment return from Part X, line 6	1	2,462.
2a	Tax on investment income for 2013 from Part VI, line 5		
b	Income tax for 2013. (This does not include the tax from Part VI.) 2b	1	
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,462.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2,462.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	2,462.
Part	XII Qualifying Distributions (see instructions)	<u> </u>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	,	
-	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	4_	
a b	Program-related investments—total from Part IX-B	1a 1b	27,250.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	ID	0.
_	purposes		
3		2	
_	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4 5	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	27,250.
9	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	_	
•	Enter 1% of Part I, line 27b (see instructions)	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	27,250.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculatin qualifies for the section 4940(e) reduction of tax in those years.	g whether	the foundation

Part	Undistributed income (see instruction	ns)			
1	Distributable amount for 2013 from Part XI, line 7	(a) Corpus	(b) Years pnor to 2012	(c) 2012	(d) 2013
_			· · · · · · · · · · · · · · · · ·		2,462.
2	Undistributed income, if any, as of the end of 2013:				
а	Enter amount for 2012 only			O.	
b	Total for prior years: 20,20,20		0.		
3	Excess distributions carryover, if any, to 2013:		İ		
а	From 2008				
b	From 2009		1		
C	From 2010				
d	From 2011				
е	From 2012 41,633.				
f	Total of lines 3a through e	41,633.			
4	Qualifying distributions for 2013 from Part XII,				
	line 4: ▶ \$ 27,250.				
а	Applied to 2012, but not more than line 2a .			0.	
b	Applied to undistributed income of prior years				
	(Election required—see instructions)		0.		
С	Treated as distributions out of corpus (Election				
	required—see instructions)	о.]	4	
d	Applied to 2013 distributable amount				2,462.
е	Remaining amount distributed out of corpus	24,788.			
5	Excess distributions carryover applied to 2013	0.			0.
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	66,421.			
b	Prior years' undistributed income. Subtract line 4b from line 2b	00,421.	0.		
С	Enter the amount of prior years' undistributed				11 - 1.11
	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.		
е	Undistributed income for 2012. Subtract line				
	4a from line 2a. Taxable amount-see		į		
	instructions		}	0.1	
f	Undistributed income for 2013. Subtract lines				
	4d and 5 from line 1. This amount must be			,	
	distributed in 2014				0.
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions) .	0.			
8	Excess distributions carryover from 2008 not				
	applied on line 5 or line 7 (see instructions) .	0.			
9	Excess distributions carryover to 2014.				
	Subtract lines 7 and 8 from line 6a	66,421.			
10	Analysis of line 9:				
а	Excess from 2009				
b	Excess from 2010	ļ			
c	Excess from 2011		l		
ď	Excess from 2012 41,633.				
e					

Form 99 Part	0-PF (2013) XIV Private Operating Founda	tions (see inst	ructions and Par	t VII-A guestion 9	<u> </u>	Page 10
1a	If the foundation has received a ruling	or determination	on letter that it is	a private operating	,	
	foundation, and the ruling is effective fo		_		5 4040	(a) = 10.10m/s
b	Check box to indicate whether the four		ite operating found		ection 4942(j))(3) or 4942(j)(5
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year (a) 2013	(b) 2012	Pnor 3 years (c) 2011	(d) 2010	(e) Total
	investment return from Part X for each year listed	(4) 2013	(6) 2012	(6) 2011	(4) 2010	
b	85% of line 2a			· · · · · · · · · · · · · · · · · · ·		
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly	!				
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities.					
_	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:	1				
а	"Assets" alternative test—enter:					
_	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter ² / ₃ of minimum investment return shown in Part X, line 6 for each year listed					
C	"Support" alternative test—enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part	• • • • • • • • • • • • • • • • • • • •			the foundation h	ad \$5,000 or m	ore in assets a
	any time during the year-	_, _, _	ons.)			
1 a	Information Regarding Foundation List any managers of the foundation		huted more than 2	0% of the total contr	ibutions received	by the foundation
•	before the close of any tax year (but of					by the loundation
DANIE	L LEEVER					
b	List any managers of the foundation	who own 10%	or more of the ste	ock of a corporation	(or an equally la	arge portion of the
	ownership of a partnership or other el	ntity) of which th	e foundation has a	a 10% or greater inte	erest.	
NONE					NA	
2	Information Regarding Contribution Check here ▶ ☐ if the foundation unsolicited requests for funds. If the foundations, complete items 2a,	only makes cor oundation make	ntributions to pres	selected charitable		
а	The name, address, and telephone nu	mber or e-mail	address of the per	son to whom applica	ations should be	addressed:
	FATEMENT 2					

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

c Any submission deadlines:

factors:

Part XV Supplementary Information (conti	inued)			
3 Grants and Contributions Paid During t		ed for Fu	ture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	, anount
a Paid during the year				
SKI & SNOWBOARD CLUB VAIL 598 VAIL VALLEY DRIVE VAIL, CO 81657	NONE	501(c)3	SEE SUPPLEMENTARY INFO	\$24,750
SEAN MCCORMICK	NONE		SEE SUPLEMENTARY INFO	\$2,500
PO BOX 506 Avon, CO 81620				
Total			▶ 3a	\$27,250
b Approved for future payment	<u> </u>			\$27,250
NONE				
Total	<u> </u>	<u> </u>	<u> </u>	ļ
1949			▶ 3b	i n

Anabala of Income Deaducing Activities

	aross	s amounts unless otherwise indicated.		siness income	Excluded by secti	on 512, 513, or 514	
	•		(a) Business code	(b) Amount	(c) Exclusion code		(e) Related or exempt function income (See instructions.)
1	_	am service revenue:			-		
	a _	<u> </u>					
	p		<u></u>		-		
	<u> </u>				ļ		
	d _			·		_	
	е —						
	τ_						
	g Fe	ees and contracts from government agencies					
2	Memi	bership dues and assessments			<u> </u>		
3	Intere	st on savings and temporary cash investments			14	6.	
4	Divide	ends and interest from securities					
5	Net re	ental income or (loss) from real estate:					
	a D	ebt-financed property					
	b N	ot debt-financed property					
6	Net re	ental income or (loss) from personal property					
7	Other	r investment income					
8	Gain o	or (loss) from sales of assets other than inventory					
9		ncome or (loss) from special events					
10		s profit or (loss) from sales of inventory .				· · · ·	
		r revenue: a			<u> </u>		
• •	b				1		
	- c						
	ď –				 		
	е е			· · · · · · · · · · · · · · · · · · ·			
12		atal Add columns (b) (d) and (a)					
	Subto	otal. Add columns (b), (d), and (e)				6.	· · · · · · · · · · · · · · · · · · ·
13	Subto	. Add line 12, columns (b), (d), and (e)					· · · · · · · · · · · · · · · · · · ·
13 (See	Subto Total works	l. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation					· · · · · · · · · · · · · · · · · · ·
13 (See Par	Subto Total works t XV	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes	13	6
13 (See Par Line	Subto Total works	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes	13	6
13 (See Par Line	Subto Total works t XVI	l. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation		ent of Exemp	ot Purposes	13	6
13 (See Par Line	Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur		ent of Exemp	ot Purposes	13	6
13 (See Par Line	Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A		ent of Exemp	ot Purposes	13	6
13 (See Par Line	Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur		ent of Exemp	ot Purposes	13	6
13 (See Par Line	Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur		ent of Exemp	ot Purposes	13	6
13 (See Par Line	Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur		ent of Exemp	ot Purposes	13	6
13 (See Par Line	Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur		ent of Exemp	ot Purposes	13	6
13 (See Par Line	Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur		ent of Exemp	ot Purposes	13	6
13 (See Par Line	Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur		ent of Exemp	ot Purposes	13	6
13 (See Par Line	Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur		ent of Exemp	ot Purposes	13	6
13 (See Par Line	Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur		ent of Exemp	ot Purposes	13	6
13 (See Par Line	Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur		ent of Exemp	ot Purposes	13	6
13 (See Par Line	Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur		ent of Exemp	ot Purposes	13	6
13 (See Par Line	Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur		ent of Exemp	ot Purposes	13	6
13 (See Par Line	Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur		ent of Exemp	ot Purposes	13	6
13 (See Par Line	Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur		ent of Exemp	ot Purposes	13	6
13 (See Par Line	Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur		ent of Exemp	ot Purposes	13	6
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13 (See Par Line	Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur		ent of Exemp	ot Purposes	13	6
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13 (See Par Line	Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur		ent of Exemp	ot Purposes	13	6
13 (See Par Line	Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur		ent of Exemp	ot Purposes	13	mportantly to the
13 (See Par Line	Subto Total works t XVI	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur		ent of Exemp	ot Purposes	13	6

	XVII		n Regarding Tran	sfers To and Transaction	ons and I	Relationships V	Vith N	onchai	ritabl		90 10
			ganizations						····		NI -
1	in sec			engage in any of the followir section 501(c)(3) organization						Yes	No
а	-		porting foundation to	a noncharitable exempt or	ganızatıon	of:					
		•	-		_				1a(1)		✓
	(2) O	ther assets .							1a(2)		✓
b	Other	r transactions:									
				mpt organization					1b(1)		✓
				ble exempt organization .					1b(2)	_	✓
			· • • ·	rassets					1b(3)		✓
			_						1b(4)		✓
		_							1b(5)	_	✓
				ip or fundraising solicitation					1b(6)		√
C		-		ts, other assets, or paid em					1c	لــــــا	√
d				s," complete the following s ces given by the reporting f							
				es given by the reporting rement, show in column (d) t							
(a) Line		b) Amount involved		antable exempt organization		ription of transfers, trai					
<u>(a)</u>	61.0.	b) Allodil illvolved	-	and the control of th	(a) Desc	ription of dansiers, na		s, and sna	my ar	angenne	
			N/A		·	<u></u>					
			<u> </u>								
	-+				†			-			
	$-\dagger$				1	 					
				·	†						
					-						
					 						
					1						
						······					
					1						
			· · ·								
2a b	desc	ribed in section (ectly or indirectly affi 501(c) of the Code (o e following schedule.	iliated with, or related to, of ther than section 501(c)(3))	one or mo or in secti	re tax-exempt orgon 527?	ganizat 	tions · · □] Yes		No
		(a) Name of organ		(b) Type of organization		(c) De	scription	of relation	ship		
N/A											
<u> </u>	•	or penalties of perjury, I	I declare that I have examined	d this return, including accompanying in taxpayer) is based on all information	schedules and	d statements, and to the	best of n	ny knowled	ge and	belief, it	ıs true
Sign	Lone	ci, and complete. Deci	J	1-1-1-1		•		May the IR			
Here		18506	12-		REASURE	R		with the pi (see instruc			
	Sign	atur 6 of officer or tru		Date / Title	• ————		<u>L</u>				
Paid		Print/Type preparer	r's name	Preparer's signature		Date	Check		TIN		
Prep	arer	<u> </u>		<u> </u>		<u> </u>	self-en	nployed			
Use		Firm's name ▶	····			Firm's	s EIN 🕨				
		Firm's address ▶				Phon	e no.				

Schedule B

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

Schedule of Contributors

OMB No 1545-0047

2013

Department of the Treasury Internal Revenue Service ► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

Name of the organization Employer identification number
VAIL SNOW SPORTS FOUNDATION 20-5261191

Organization type (check one):						
Filers o	f:	Section:				
Form 99	90 or 990-EZ	501(c)() (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 99	90-PF	√ 501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
Genera	ions.), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See				
Ø		filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or 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 33½ % 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.					
	during the year, total	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, I contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, oses, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.				
	during the year, con- not total to more tha year for an exclusive applies to this organ	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, tributions for use exclusively for religious, charitable, etc., purposes, but these contributions did an \$1,000. If this box is checked, enter here the total contributions that were received during the ely religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule nization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or				

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

Schedule B	(Form 990,	990-EZ.	or 990-PF)	(2013)

Page 2

Name of c	organization		Employer identification number
VAIL SNO	W SPORTS FOUNDATION		20-5261191
Part I	Contributors (see instructions). Use duplicate copies of	f Part I if additional space	e is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Frank J Monteiro 854 Countrybriar Lane, Littleton, CO 80129-1810	\$2,50	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	MacDermid Incorporated 245 Freight Street, Waterbury, CT 06702	\$12,50	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

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				
		s					
(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				
		- - - \$					

Schedule B	(Form 990,	990-EZ,	or 990-PF)	(2013

Name of or	ganization				Employer identification number			
	V SPORTS FOUNDATION				20-5261191			
Part III	Exclusively religious, charitable, e that total more than \$1,000 for the For organizations completing Part III contributions of \$1,000 or less for the second secon	year. Complete colu, enter the total of exc	mns (a) through (e clusively religious,	e) and the charitable	following line entry.			
	_Use duplicate copies of Part III if add	ditional space is need	ed.					
(a) No. from Part I	(b) Purpose of gift	(c) Use o		(d) Des	scription of how gift is held			
		(e) Transfe	er of gift					
	Transferee's name, address, a	nd ZIP + 4	Relations	ship of trai	nsferor to transferee			
					••••••			
(a) No. from Part I	(b) Purpose of gift	(c) Use o	f gift	(d) Des	cription of how gift is held			
	(e) Transfer of gift							
	Transferee's name, address, a	.bi44	andaman da duamadama a					
-	ridiisieree s lidille, address, al	110 ZIP + 4	Relations	snip of trai	nsferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of	f gift	(d) Des	cription of how gift is held			
	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of	f gift	(d) Des	cription of how gift is held			
] .								
	(e) Transfer of gift							
_	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee					
,					***************************************			
-					~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
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Part XV - Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - SKI & SNOWBOARD CLUB VAIL SUPPORT INDIVIDUAL SKI RACING ATHLETE EXPENSE INCLUDING EQUIPMENT, FACILITIES, RACE, TRAVEL AND TRAINING FEES.

NAME OF RECIPIENT - SEAN MCCORMICK (INDIVIDUAL) - SUPPORT INDIVIDUAL SKI RACING ATHLETE EXPENSE INCLUDING EQUIPMENT, FACILITIES, RACE, TRAVEL AND TRAINING FEES.

VAIL SNOW SPORTS FOUNDATION 20-5261191

STATEMENT 1 FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS

SOURC	E									AMOUNT
BANK	INT	EREST								6.
TOTAL	TO	FORM	990-PF,	PART	I,	LINE	3,	COLUMN	Α	6.

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

DANIEL LEEVER 1397 VAIL VALLEY DRIVE VAIL, CO 81657

FORM AND CONTENT OF APPLICATIONS

SUBMIT IN WRITING WITH DETAILED INFORMATION ON SKI RACING QUALIFICATIONS AND FINANCIAL NEEDS.

ANY SUBMISSION DEADLINES

N/A

RESTRICTIONS AND LIMITATIONS ON AWARDS

N/A

Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► File a separate application for each return.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

-		filing for an Automatic 3-Month Extension, c filing for an Additional (Not Automatic) 3-Mo		·=				▶ ☑			
Do no	t com	plete Part II unless you have already been g	ranted an	automatic 3-month	extension on a previou	usly fi	led For	m 8868.			
a corpo 8868 to Return	oratio o req for	filing (e-file). You can electronically file Form on required to file Form 990-T), or an additiona- uest an extension of time to file any of the f Transfers Associated With Certain Personal on For more details on the electronic filing of the	al (not auto forms listed Benefit C	omatic) 3-month extended in Part I or Part II Contracts, which me	ension of time. You ca with the exception of ust be sent to the IF	an ele f Fori RS in	ectronic n 8870 paper	cally file Form), Information r format (see			
	orati	Automatic 3-Month Extension of Time on required to file Form 990-T and reques	sting an a	utomatic 6-month	extension-check this						
		porations (including 1120-6 illers), partiers in le tax returns.	ips, nuiviic	os, and trusts must t	ase Form 7004 to requ	Desi i	III GAIG	nsion or time			
					Enter filer's identifying	g nun	ıber. se	e instructions			
Type		Name of exempt organization or other filer, see in	structions.		Employer identification number (EIN) or						
Type of print	Ж	VAIL SNOW SPORTS FOUNDATION			20-5	D-5261191					
File by th		Number, street, and room or suite no. If a P.O. bo	Social secunty number								
due date		1397 VAIL VALLEY DRIVE									
filing you return. S		City, town or post office, state, and ZIP code. For a foreign address, see instructions.									
instruction		VAIL, CO 81657									
Enter t	he Re	eturn code for the return that this application i	s for (file a	separate application	n for each return) .			. 04			
Appli Is Fo		n 	Return Code	Application Is For	- •			Return Code			
Form	990 d	or Form 990-EZ	01	Form 990-T (corporation)				07			
Form			02	Form 1041-A				08			
$\overline{}$		(individual)	03	Form 4720 (other t	han individual)			09			
Form			04	Form 5227				10			
		Г (sec. 401(a) or 408(a) trust)	05	Form 6069				11			
Form	990-	Γ (trust other than above)	06	Form 8870				12			
Telep • If the • If this	ohone orga s is fo	s are in the care of ► KRISTOFER OCHS No. ► 303-214-8208 nization does not have an office or place of but a Group Return, enter the organization's four e group, check this box ► □ . If	usiness in t ır digit Gro	up Exemption Numb	heck this box per (GEN)		If t	▶□ this is attach			
a list w	ith th	e names and EINs of all members the extensi	on is for.								
1	until for th	ne organization's return for: calendar year 20 13 or	npt organiz	zation return for the	organization named al	bove.					
	► tax year beginning, 20, and ending, 20										
2		e tax year entered in line 1 is for less than 12 n	nonths, ch	eck reason: 🔲 Initia	l return	'n					
		nange in accounting period				,	,				
3a	3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less nonrefundable credits. See instructions.										
h			indohlo anadisa aa i	3a	\$						
	b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits an estimated tax payments made. Include any prior year overpayment allowed as a credit.					3b	\$	0.			
C		nce due. Subtract line 3b from line 3a. Includ	if required, by using								
		PS (Electronic Federal Tax Payment System).					\$	0.			
Caution instruct	n. If yo ions.	ou are going to make an electronic funds withdrawa	II (direct deb	t) with this Form 8868	, see Form 8453-EO and	Form	8879-E	O for payment			

Form 88	68 (Rev `1-2014)					Page 2			
• If you	are filing for an Additional (Not Automatic) 3-M	lonth Exter	sion, complete only	Part II and check th	is box	▶ 🗆			
	Only complete Part II if you have already been grause filing for an Automatic 3-Month Extension,				/ filed Form 8	868.			
Part	Additional (Not Automatic) 3-Month E	Extension	of Time. Only file t	he original (no copi	es needed).	•			
				Enter filer's identifying					
Type o					ion number (EIN) or				
File by th		oox, see instr	uctions.	Social security number	(SSN)				
filing you return S instruction	City, town or post office, state, and ZIP code. For a foreign address, see instructions.								
Enter t	he Return code for the return that this application	is for (file a	separate application	for each return) .					
Applie	cation	Return Code	Application Is For			Return Code			
Form	990 or Form 990-EZ	01		-					
	990-BL	02	Form 1041-A			08			
Form	4720 (individual)	03	Form 4720 (other th	nan individual)		09			
	990-PF	04	Form 5227			10			
	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	-		11			
Form	990-T (trust other than above)	06	Form 8870			12			
	Do not complete Part II if you were not already groups are up the core of			-	-	8868.			
Tolor	oooks are in the care of ▶	Foy I	 No. ▶						
	onone No. organization does not have an office or place of t	' ' ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	10			▶□			
• If this	s is for a Group Return, enter the organization's fo	ur digit Gro	up Exemption Number	er (GEN)		···			
for the	whole group, check this box ▶ □ . If	t is for par	t of the group, check	this box	▶ □ and a	ttach a			
	h the names and EINs of all members the extension					ttaorr a			
			······································						
4	I request an additional 3-month extension of time For calendar year , or other tax year beginn	until		, 20	•				
5	For calendar year, or other tax year beginn	ing	, 20	, and ending		, 20 .			
О	if the tax year entered in line 5 is for less than 12	months, ch	eck reason: 🔲 Initial	return Final return	'n				
	Change in accounting period								
7	State in detail why you need the extension								
				·					
		·			•••••				
8a	If this application is for Forms 900 BL 900 BE 9	00 T 4720	or 6060 ontor the te	manalisma amus lanna amus l	С				
	If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less an nonrefundable credits. See instructions.					<u> </u>			
Ь	If this application is for Forms 990-PF, 990-T,	4720, or 6	6069, enter any refu	ndable credits and					
	estimated tax payments made. Include any price	or year ove	erpayment allowed a	s a credit and any	8b \$				
amount paid previously with Form 8868.									
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.									
	Signature and Verifica	ation mus	t be completed for	r Part II only.					
Under p	penalties of perjury, I declare that I have examined the dige and belief, it is true, correct, and complete, and that	nis form, incl I am authoriz	luding accompanying s zed to prepare this form	chedules and statemer	nts, and to the	e best of my			
Signature	∍▶	Title ▶		Da	nte ▶				
					- 006	0 -			