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Form 990-PF

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

Do not enter Social Security numbers on this form as it may be made public.
Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Department of the Treasury Internal Revenue Service

OMB No 1545-0052

Ford	calendar year 2013 or tax year beginning JUN	25, 2013	, and ending	DEC 31, 201.	3
Nar	ne of foundation			A Employer identificatio	n number
T	A FOUNDATION			46-307279	7
Nun	nber and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	<u></u>
1	397 VAIL VALLEY DRIVE			(720) 479-	-3080
City	or town, state or province, country, and ZIP or foreign po	ostal code	· ,	C If exemption application is	pending, check here
V	AIL, CO 80202				
G C	check all that apply X Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	ns, check here 🕨 🖳
	Final return	Amended return		2	seeking the SER/ toot
	Address change	X Name change		2. Foreign organizations mechack here and attach of	computation
H_C	theck type of organization X Section 501(c)(3) ex			E If private foundation st	
느	<u> </u>	Other taxable private founda		under section 507(b)(1	I)(A), check here
	ur market value of all assets at end of year J Accounting	-	Accrual	F If the foundation is in a	
		her (specify)		under section 507(b)(1	()(B), check here
D	······································				(d) Disbursements
Pa	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	for chantable purposes
	······································	671,463.		N/A	(cash basis only)
	1 Contributions, gifts, grants, etc., received 2 Check I if the foundation is not required to attach Sch. B	0/1/403.		IV/A	
	Check	4.	4 .		STATEMENT 1
	4 Dividends and interest from securities			·	
	5a Gross rents				1
	b Net rental income or (loss)		•		
_	62 Net gain or (loss) from sale of assets not on line 10				
nue	Gross sales price for all		······		
Revenue	7 Capital gain net income (from Part IV, line 2)	**************************************	0 .	1.1	
ď	8 Net short-term capital gain				
	9 Income modifications				
	Gross sales less returns and allowances				
	D Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income				
	12 Total. Add lines 1 through 11	671,467.	4.		4.015
	13 Compensation of officers, directors, trustees, etc	4,917.	0	4	4,917
	14 Other employee salaries and wages	62,117.	0	•	62,117
es	15 Pension plans, employee benefits				
nse	16a Legal fees STMT 2	304.	0		304
xpe	1	30,559.	0		30,559
e	c Other professional fees STMT 3	30,339.	0	•	30,333
ş.	18 Taxes				
and Administrative Expens	19 Depreciation and depletion				
Ë	. 0003 (2)	22,528.	0		22,528
Ā	20 Ocerpancy & Company 21 Fravel, could ences, and meetings	46,465.	0	l .	22,528 46,465
5	22 Realing and publications	,			<u> </u>
		55,676.	0	•	55,676
perating	24 Total operating and administrative				
per	expenses. Add lines 13 through 23	222,566.	0	•	222,566
0	25 Contributions, gifts, grants paid	10,000.			10,000
	26 Total expenses and disbursements.				
	Add lines 24 and 25	232,566.	0	•	232,566
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	438,901.		**************************************	min man talah
3235 10-1	b Net investment income (if negative, enter -0-)		4		
	c Adjusted net income (if negative, enter -0-)	Ł I		N/A	Ŧ

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TA FOUNDATION

m	in and	Balance Sheets Attached schedules and amounts in the description column should be for end-of-war amounts only	Beginning of year	End of	
	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		438,901.	438,901.
	2	Savings and temporary cash investments	7.1		
	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 .			
	7	Other notes and loans receivable			
	ł	Less allowance for doubtful accounts			
şţs	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	8	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other		······	
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	1	Other assets (describe			
	16	Total assets (to be completed by all filers - see the		400 001	420 001
	-	instructions Also, see page 1, item 1)	0.	438,901.	438,901.
	1	Accounts payable and accrued expenses			
	18	Grants payable			
ies	19	Deferred revenue			
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
_	22	Other liabilities (describe			
			0	0	
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
S		and complete lines 24 through 26 and lines 30 and 31.			
ğ	24	Unrestricted			
Sala	25	Temporarily restricted			
Net Assets or Fund Balance	26	Permanently restricted . Foundations that do not follow SFAS 117, check here			
귤		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
9	27	· ·	0.	0.	
ets	27	Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
Ass	29	Retained earnings, accumulated income, endowment, or other funds	0.	438,901.	
et	30	Total net assets or fund balances	0.	438,901.	
Z	30	Total liet assets of faile balances		100/3016	
	31	Total liabilities and net assets/fund balances	0.	438,901.	
			•		
L	art	Analysis of Changes in Net Assets or Fund B	balances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
	(mu	st agree with end-of-year figure reported on prior year's return)		1	0.
2		r amount from Part I, line 27a		2	438,901.
3		r increases not included in line 2 (itemize)		3	0.
4		lines 1, 2, and 3		4	438,901.
5		eases not included in line 2 (itemize)		5	0.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	438,901.

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TA FOUNDATION Form 990-PF (2013) Capital Gains and Losses for Tax on Investment Income Part IV (b) How acquired P - Purchase (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co) D - Donation 1a NONE b d е (f) Depreciation allowed (a) Cost or other basis (e) Gross sales price (or allowable) plus expense of sale а b d е Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Adjusted basis (k) Excess of col (i) (i) F M V as of 12/31/69 as of 12/31/69 over col (j), if any b d e If gain, also enter in Part I, line 7 2 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part Enter the appropriate amount in each column for each year, see the instructions before making any entries (a) Base period years (c) (b) Adjusted qualifying distributions Net value of noncharitable-use assets Calendar year (or tax year beginning in) 2012 2011 2010 2009 2008 2 Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2013 from Part X, line 5 4

Multiply line 4 by line 3

Enter 1% of net investment income (1% of Part I, line 27b)

Add lines 5 and 6

Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate

See the Part VI instructions

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Pa	t VI Excise Tax Based on Investment Income (Section 4940)(a),	49)40(b),	4940(e)	, or 4	948	- see	instru	ction	าร)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and en	ter "N	V/A"	on line 1)						
	Date of ruling or determination letter (attach copy of letter if nece	essar	y-se	ee instru	ctions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	·	_l ar	nd enter	۱%	>	1	ļ,			0.
	of Part I, line 27b										
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%	of Pa	art I,	line 12,	col. (b) ノ						_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Oth	ners e	ente	r -0-)			2				0.
	Add lines 1 and 2						3	<u> </u>			0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Otl	hers	ente	er -0-)			4	ļ			0.
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-						5	ļ			0.
	Credits/Payments	ı	1								
	2013 estimated tax payments and 2012 overpayment credited to 2013	<u>6a</u>	\neg								
	Exempt foreign organizations - tax withheld at source	6b									
	Tax paid with application for extension of time to file (Form 8868)	6c									
	Backup withholding erroneously withheld	6d									^
	Total credits and payments Add lines 6a through 6d			•			7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attac	hed					8	1			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed						9				0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				1		10				
	Enter the amount of line 10 to be Credited to 2014 estimated tax				Refund	ed 🟲	11				
	t VII-A Statements Regarding Activities			1. J .A A		4				Vaa	No
	During the tax year, did the foundation attempt to influence any national, state, or local legisla	ation	or a	lid it part	icipate or in	tervene	ın			Yes	No_X
	any political campaign?	/-				44	٠.		1a	-	X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purpose								1b		
	If the answer is "Yes" to 1aor 1b, attach a detailed description of the activities and	cop	oies	or any i	natenais p	ubiisne	ea or				
	distributed by the foundation in connection with the activities.								1.	1	Х
	Did the foundation file Form 1120-POL for this year? Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the y								10		
	(1) On the foundation \blacktriangleright \$ 0 • (2) On foundation managers.					0.					
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditi			nnacad c	n foundatio						
	managers > \$ 0.	ui e te	a	iiposeu t	ii iouiidalio	11					
	Has the foundation engaged in any activities that have not previously been reported to the IR.	S2							2	1	Х
	If "Yes," attach a detailed description of the activities.								-		
	Has the foundation made any changes, not previously reported to the IRS, in its governing in	strur	meni	t articles	of incornor	ration o	ır				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change.			.,	ооо.ро.	, c	•		3	i	Х
	Did the foundation have unrelated business gross income of \$1,000 or more during the year							•	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?						N	I/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?								5		X
	If "Yes," attach the statement required by General Instruction T.										
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eith	her									
	By language in the governing instrument, or										
	 By state legislation that effectively amends the governing instrument so that no mandatory 	dire	ctior	ns that co	nflict with t	he state	law				
	remain in the governing instrument?								6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," com	plete	e Pa	art II, co	l. (c), and l	Part XV	,		7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ıs) 🕨	- _								
	CO										
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Att	torne	y Ge	eneral (o	designate)						
	of each state as required by General Instruction G? If "No," attach explanation								8b	Х	
	is the foundation claiming status as a private operating foundation within the meaning of sec					for cale	ndar				
	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," co	-				_	-		9	<u>X</u>	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule	e listir	ng th	eir names	and addresse	s S	LMT		10	X	<u> </u>
								Fo	rm 990	-PF(2013)

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Pε	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 privileges?			
	If "Yes," attach statement (see instructions)	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 ► DANIEL H. LEEVER Telephone no ► (720)	479	<u>-30</u>	80
	Located at ► 1397 VAIL VALLEY DRIVE, VAIL, CO ZIP+4 ►81	<u>.657</u>		
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		/A	
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank,		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			
Pe	ert 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?			
	(2) Borrow 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? Yes X No Yes 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)			
ь	termination of government service, if terminating within 90 days) If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
u	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	''		
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
u	before the first day of the tax year beginning in 2013?	10		Х
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?			
	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		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year? Yes X No			
b	If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2013) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b		<u>X</u>

0.

All other program-related investments. See instructions.

Total. Add lines 1 through 3

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P	Minimum Investment Return (All domestic foundations	must complete this part. Foreign	foundations, se	e instructions.)
<u>-</u>	Fair market value of assets not used (or held for use) directly in carrying out charita	ble, etc , purposes:		
а	Average monthly fair market value of securities		1a	0.
b	Average of monthly cash balances		1b	133,979.
C	Fair market value of all other assets		10	
d	Total (add lines 1a, b, and c)		1d	133,979.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	1e	0.	
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	133,979.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount	nt, see instructions)	4	2,010.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and	•	5	131,969.
6_	Minimum Investment return. Enter 5% of line 5 ADJUSTED FOR SE		6	3,435.
P	art XI Distributable Amount (see instructions) (Section 4942(₁)(3) foreign organizations check here ➤ X and do not complete this pai		is and certain	
1	Minimum investment return from Part X, line 6		1	
2a	Tax on investment income for 2013 from Part VI, line 5	2a		
b	Income tax for 2013 (This does not include the tax from Part VI)	2b		
C	Add lines 2a and 2b		2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	
4	Recoveries of amounts treated as qualifying distributions		4	
5	Add lines 3 and 4		5	
6	Deduction from distributable amount (see instructions)		6	
7_	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Pa	rt XIII, line 1	7	
P	Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pu	ırposes		· · · · · · · · · · · · · · · · · · ·
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	232,566.
b	Program-related investments - total from Part IX-B		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charit	able, etc , purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the			
а	Suitability test (prior IRS approval required)		3a	
b	Cash distribution test (attach the required schedule)		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8,	and Part XIII, line 4	4	232,566.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net in	vestment		
	income. Enter 1% of Part I, line 27b		5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	232,566.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years	when calculating whether the foundat	ion qualifies for th	e section

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4940(e) reduction of tax in those years

Part XIII Undistributed Income (oco man donona)	N/A		
	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI,		···	·····	
line 7				
Undistributed income, if any, as of the end of 2013	· · · · · · · · · · · · · · · · · · ·		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	···
a Enter amount for 2012 only				
b Total for prior years	-11		7433	·//• / / / / / / / / / / / / / / / / / /
b rotal for prior years				
Excess distributions carryover, if any, to 2013	· · · · · · · · · · · · · · · · · · ·			- Ha 'rita car' a .
a From 2008				
b From 2009				
c From 2010				
d From 2011				
e From 2012				
f Total of lines 3a through e				
Qualifying distributions for 2013 from				
Part XII, line 4 > \$				
			1	
a Applied to 2012, but not more than line 2a				.t. _{pp}
b Applied to undistributed income of prior				
years (Election required - see instructions)		<u> </u>	,	
c Treated as distributions out of corpus			-	
(Election required - see instructions)				
d Applied to 2013 distributable amount				······································
e Remaining amount distributed out of corpus		·	Into'	
Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount				
must be shown in column (a))				
Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract				
line 4b from line 2b				
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				
d Subtract line 6c from line 6b Taxable				
amount - see instructions				······································
e Undistributed income for 2012 Subtract line				
4a from line 2a Taxable amount - see instr				<u></u>
f Undistributed income for 2013. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2014				
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)				
Excess distributions carryover from 2008				
not applied on line 5 or line 7				
Excess distributions carryover to 2014.				
Subtract lines 7 and 8 from line 6a				
Analysis of line 9				
a Excess from 2009]			
b Excess from 2010]			
c Excess from 2011]			
d Excess from 2012				
e Excess from 2013	1			

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c Any submission deadlines

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

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Purpose of grant or contribution Foundation Amount any foundation manager or substantial contributor status of Name and address (home or business) recipient a Paid during the year MEGAN MCJAMES NONE NC TO COVER COSTS 2758 ESTATES DRIVE ASSOCIATED WITH ALPINE PARK CITY, UT 84060 SKI RACING INCLUDING COACHING, TRAINING, EQUIPMENT, AND TRAVEL 5,000. NONE NC KATIE HARTMAN TO COVER COSTS P.O. BOX 1847 ASSOCIATED WITH ALPINE BRECKENRIDGE, CO 80424 SKI RACING INCLUDING COACHING, TRAINING, EQUIPMENT, AND TRAVEL 5,000. ► 3a 10,000. b Approved for future payment NONE Total

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** SEE PURPOSE OF GRANT CONTINUATIONS

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er gross amounts unless otherwise indicated	Unrelate	ed business income	Exclu	ided by section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
Program service revenue.	Code				
			1		
					15
Fees and contracts from government agencies					
Membership dues and assessments					
nterest on savings and temporary cash					
nvestments .			14	4.	
Dividends and interest from securities					
Net rental income or (loss) from real estate					1
Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal					
property			ļ		
Other investment income					
Gain or (loss) from sales of assets other					
han inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue					
a					
D					
				•	
1					
9					
Subtotal Add columns (b), (d), and (e)		().	4.	
Fotal. Add line 12, columns (b), (d), and (e)				13	
e worksheet in line 13 instructions to verify calculation	ns)			·	
art XVI-B Relationship of Activiti	es to the Acc	omplishment of	Exemp	t Purposes	
Explain below how each activity for which the foundation's exempt purposes (other				buted importantly to the accon	nplishment of
N/A		,			
				·	
					•
			•		

Form **990-PF** (2013)

Part AVII	Information Re Exempt Organ		sters to a	and Transactions	and Relation	ships With Nonch	aritable	9	
1 Did the or			of the followin	ig with any other organizati	ion described in se	ction 501/c) of		Ves	No
				27, relating to political orga		CHOII 30 I(C) 01		163	140
	from the reporting found				ilizations.				
(1) Cash		attori to a monorianta	olo oxompt of	gumzudon or			1a(1)		Х
(2) Other							1a(2)		X
b Other tran							1.0(2)		
-	of assets to a noncharita	ible exempt organizat	ion				15(1)		Х
	hases of assets from a no						15(1)	-	X
	al of facilities, equipment,	· ·	· ga201.01.				1b(3)		X
	bursement arrangements						1b(4)		X
	s or loan guarantees						1b(5)		X
	rmance of services or me	embership or fundrais	sing solicitation	ins			1b(6)		X
	f facilities, equipment, ma						10		X
d If the answ	wer to any of the above is	"Yes," complete the f	ollowing sche	dule Column (b) should al	lways show the fair	market value of the goods	s, other ass	ets,	
				ed less than fair market val					
column (d	I) the value of the goods,	other assets, or serv	ices received						
(a) Line no	(b) Amount involved	(c) Name of		exempt organization	(d) Descripti	on of transfers, transactions, ar	nd sharing an	rangeme	nts
			N/A						
				=					
									
						·			
		<u> </u>							
<u>_</u>									
					-				
						·· · · · · · · · · · · · · · · · · · ·			
		 							
				-					

2a Is the four		the affiliated with or r	alatad ta ana	or more tax-exempt organ	uzatione described		,		
	501(c) of the Code (other			· -	izations described		□ vaa	V] No
	omplete the following sch		(3)) 01 111 3601	1011 J27 *			Yes		טאו נ
D 11 103, 01	(a) Name of org			(b) Type of organization	1	(c) Description of relation	nshin		
	N/A	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(2) () (2)		(e) Decemption of Totalion	- ionip		
	,								
					· ·				
					1				
Under	penalties of perjury, I declare	that I have examined this	return, includir	ig accompanying schedules and	statements, and to the	e best of my knowledge	Any the IDC	diamina i	
Sign	elief, it is true, correct, and con	nplete Declaration of pre	eparer (other tha	n taxpayer) is based on all inform	'	er ilas ally knowledge	May the IRS of return with the shown below	e prepar	er [
Here	MIT DUE			11/14/14	Char	man "	X Yes		Ϊν _ο
Sigr	nature of officer or trustee			Date	Title				
	Print/Type preparer's na	ame	Preparer's s	ignature	Date	Check X If PTII	١		
			<i>\\</i>	. 11.10	11-6-14	self- employed			
Paid	KRISTIN M.		Must	- IVE Kond	11-6-17		01285		
Preparer	Firm's name ► SHE	RMAN & HO	WARD L	.L.C.		Firm's EIN ► 84-	04203	14	
Use Only		0 10							
	Firm's address ► 63			SUITE 3000					
	DE	NVER, CO	80202			Phone no (303	297		
							Form 99 ()-PF	(2013)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ 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

OMB No 1545-0047

2013

Name of the organization

Employer identification number

TA FOUNDATION 46-3072797								
Organization type (check one):								
Filers of:	Section:							
Form 990 or 990-EZ	orm 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	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
•	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special R	ule. See instructions.						
General Rule								
X For an organization contributor. Comp	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in n lete Parts I and II.	ioney or property) from any one						
Special Rules								
509(a)(1) and 170(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the rep b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.							
total contributions	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.							
contributions for u if this box is chect purpose. Do not c	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, charitable, 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 religious, charitable, etc., contributions of \$5,000 or more during the year							
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 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).								

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) (2013)

Name of organization

Employer Identification number

TA FOUNDATION

46-3072797

Part I	Contributors (see instructions). Use duplicate copies of Part I	ıf addıtıonal space ıs needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DANIEL H. LEEVER 1397 VAIL VALLEY DRIVE VAIL, CO 80202	\$\$.	Person X Payroli
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
·		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
	Name, address, and ZIP + 4	Total contributions \$\$	(d) Type of cont Person Payroll Noncash (Complete Part

Employer identification number

TA FOUNDATION

46-3072797

(2)			
(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 orga	nization			Employer identification number			
ra Fou	NDATION			46-3072797			
Part III	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc Use duplicate copies of Part III if additional	e following line entry For organiza , contributions of \$1,000 or less	(c)(7), (8), or (10) organ tions completing Part III, or the year (Enter this informati	izations that total more than \$1,000 for the enter on once } \$\bigsim \\$			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held			
-	Transferee's name, address, an	(e) Transfer of g		of transferor to transferee			
-							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held			
-	Transferee's name, address, ar	(e) Transfer of o		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, ar	IU ZIP + 4	Netationship (of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held			
	Transferee's name, address, a	(e) Transfer of one		of transferor to transferee			

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH II	NVESTMENTS	STATEMENT 1	
SOURCE	REVE	(A) REVENUE NET IN PER BOOKS IN		(C) ADJUSTED NET INCOME	
BANK INTEREST		4.	4.		
TOTAL TO PART I, LINE 3		4.	4.		
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
VAIL TAX ACCOUNTING	304.	0.		304.	
TO FORM 990-PF, PG 1, LN 16B	304.	0.		304.	
FORM 990-PF 0	THER PROFES	SIONAL FEES		STATEMENT 3	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
SSCV PRIVATE COACHING SPORTS PSYCHOLOGIST	11,615. 18,944.			11,615. 18,944.	
TO FORM 990-PF, PG 1, LN 16C	30,559.	0.		30,559.	
FORM 990-PF	OTHER EXPENSES		STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME		
IRS FORM 1023 FILING FEE BANK FEE COMPUTER FEES DUES & SUBSCRIPTIONS OFFICE SUPPLIES PAYROLL FEES	850. 263. 90. 355. 245. 391.	0. 0. 0.		850. 263. 90. 355. 245. 391.	

TA FOUNDATION			46-3072797	
MISCELLANEOUS	316.	0.	316.	
SSCV DUES	4,950.	0.	4,950.	
COACH EXPENSES	3,016.	0.	3,016.	
SPORTS PSYCHOLOGIST EXPENSES	8,680.	0.	8,680.	
EQUIPMENT & CLOTHING	5,667.	0.	5,667.	
GATES/LANE FEES/LIFTS	19,024.	0.	19,024.	
STORAGE FEES	289.	0.	289.	
WAX & TUNING SUPPLIES	5,794.	0.	5,794.	
RACE EXPENSES	5,746.	0.	5,746.	
TO FORM 990-PF, PG 1, LN 23	55,676.	0.	55,676.	
	SUBSTANTIAL CON RT VII-A, LINE		STATEMENT 5	
NAME OF CONTRIBUTOR	ADDRESS			
DANIEL H. LEEVER		1397 VAIL VALLEY DRIVE VAIL, CO 80202		

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

STATEMENT

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

DANIEL H. 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. 1-2014)					Page 2
 If you are filing for an Additional (Not Automatic) 3-Month Ex 					ightharpoonup
Note. Only complete Part II if you have already been granted an			iled Form	1 8868.	
If you are filing for an Automatic 3-Month Extension, complete					
Part II Additional (Not Automatic) 3-Month E	xtensio	on of Time. Only file the origin	nal (no d	copies need	ded).
		Enter filer's	identify	ing number, s	ee instructions
	Name of exempt organization or other filer, see instructions.			Employer identification number (EIN) of	
print				46 3070707	
File by the due date for Number street, and room or suite no. If a R.O. have			46-3072797		12/9/
filing your I number, street, and room or suite no. If a F.O. box, s	I runiber, street, and footh of suite no. If a P.O. box, see instructions.			ecunty numbe	ır (SSN)
return See 1397 VAIL VALLEY DRIVE		,			
City, town of post office, state, and ZIP code. For a fi	oreign add	dress, see instructions.			
VAIL, CO 80202					
Enter the Return code for the return that this application is for (file	e a separa	te application for each return)		-	0 4
Application			· · · · · · · · · · · · · · · · · · ·		D-Aum
is For	Return	Application Is For			Return
Form 990 or Form 990-EZ	01	is Foi			Code
Form 990-BL	02	Form 1041-A		***************************************	08
Form 4720 (individual)	03			• • • • • • • • • • • • • • • • • • • •	09
Form 990-PF	03	Form 4720 (other than individual) Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870			12
STOP! Do not complete Part II if you were not already granted			iously fil	ed Form 8868	
DANIEL H. LEEVI					<u></u>
 The books are in the care of ➤ 1397 VAIL VALL! 		IVE - VAIL, CO 816	57		
Telephone No. ► (720) 479-3080		Fax No. ▶			
If the organization does not have an office or place of business	s in the Ur	nited States, check this box			D
If this is for a Group Return, enter the organization's four digit			f this is fo	or the whole gi	oup, check this
box 🕨 🔲 . If it is for part of the group, check this box 🕨	7	-			
·		BER 17, 2014.			
5 For calendar year, or other tax year beginning	JUN 2	5, 2013 , and ending	DEC	31, 20)13
6 If the tax year entered in line 5 is for less than 12 months, c			Final	return	
Change in accounting period					
7 State in detail why you need the extension					
ADDITIONAL TIME IS NEEDED TO (R THE INFORMATION I	NECES	SARY TO	FILE A
COMPLETE AND ACCURATE TAX RETU	JRN.				
				T	
8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720,	, or 6069,	enter the tentative tax, less any	-		_
nonrefundable credits. See instructions.			8a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	y refundable credits and estimated			
tax payments made. Include any prior year overpayment all	lowed as a	a credit and any amount paid	ļ <u>.</u>	-	
previously with Form 8868.	previously with Form 8868.			\$	0.
Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using					0
EFTPS (Electronic Federal Tax Payment System). See Instru			<u> 8c</u>	\$	0.
		st be completed for Part II o	-		
Jnder penalties of perjury, I declare that I have examined this form, includ t is true, correct, and complete, and that I am authorized to prepare this fo	ing accomp	panying schedules and statements, and to	the best (ot my knowledgi	and belief,
2/1/1/2/2	1 4	200	D. I	1.	st-7,201
Signature ► Kut Mell Title ►		orney	Date	D Avgu	
		1		Form 88	368 (Rev. 1-2014)

Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

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

OMB No. 1545-1709

n you a	re tiling for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box				
If you a	re filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of	this form).	i		
Do not co	omplete Part II unless you have already been granted a	an automa	atic 3-month extension on a previous	sly filed Fo	rm 8868.		
	c filing (e-file). You can electronically file Form 8868 if y					rporation	
	o file Form 990-T), or an additional (not automatic) 3-mo						
	file any of the forms listed in Part I or Part II with the exi						
	Benefit Contracts, which must be sent to the IRS in pap						
	irs.gov/efile and click on e-file for Charities & Nonprofits		(SSS INSTIBUTIONS). FOR THOSE GOLDING	011 1110 0101	stroine timig of the	5 101111,	
Part I	Automatic 3-Month Extension of Time		submit original (no copies ne	eded)			
	tion required to file Form 990-T and requesting an autor						
art I only		natio o me	office extension check this box and	complete			
•	 orporations (including 1120-C filers), partnerships, REM	 IICa and b					
o file inco	me tax returns.	ics, and t	rusts must use Form 7004 to reques				
					er's identifying n		
ype or	Name of exempt organization or other filer, see instru	ctions.		Employer identification number (EIN) o			
rint	MA FOUNDAMION				46-3072797		
ile by the	TA FOUNDATION						
ue date for	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions	Social se	curity number (S	SN)	
ling your eturn See	1397 VAIL VALLEY DRIVE			,			
structions	City, town or post office, state, and ZIP code. For a fo	oreign add	lress, see instructions.				
	VAIL, CO 80202						
nter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4	
			· · · · · · · · · · · · · · · · · · ·				
Application	on	Return	Return Application				
s For	For		Code Is For				
orm 990	or Form 990-EZ	01	Form 990-T (corporation)			07	
orm 990-	BL	02 Form 1041-A			08		
orm 4720) (Individual)	03	Form 4720 (other than individual)			09	
orm 990-	PF	04	Form 5227			10	
orm 990-	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
orm 990-	T (trust other than above)	06	Form 8870			12	
	DANIEL H. LEEVE						
	oks are in the care of ▶ 1397 VAIL VALLE	EY DR	IVE - VAIL, CO 816	57			
Teleph	one No. ► <u>(720) 479–3080</u>		Fax No. ▶				
If the o	rganization does not have an office or place of business	s in the Un	ited States, check this box				
If this is	s for a Group Return, enter the organization's four digit (Group Exe	emption Number (GEN) I	If this is fo	r the whole group	, check this	
ox 🕨 🛚	. If it is for part of the group, check this box						
1 I rec	uest an automatic 3-month (6 months for a corporation						
			tion return for the organization name		The extension		
is fo	r the organization's return for:	_	_				
▶[calendar year or						
▶[X tax year beginning JUN 25, 2013	, an	dending DEC 31, 2013				
2 If the	e tax year entered in line 1 is for less than 12 months, c	heck reas	on: X Initial return	Final retur	n		
	Change in accounting period						
3a If th	s application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069,	enter the tentative tax, less any				
non	nonrefundable credits. See instructions.			0.			
	nated tax payments made. Include any prior year overp			3b	\$	0.	
	by using EFTPS (Electronic Federal Tax Payment System). See instructions.			3с	\$	0.	
	f you are going to make an electronic funds withdrawal			3453-EO ar	nd Form 8879-EO		
nstruction							

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2014)