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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.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. For calendar year 2013 or tax year beginning . and ending Name of foundation A Employer identification number BOOGIE'S DINER FOUNDATION, INC 52-1307628 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (970)925-3771 P.O. BOX 11509 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ASPEN, CO 81612 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Section 501(c)(3) exempt private foundation Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust X Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Cash Accruat If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 285, 101. (Part I, column (d) must be on cash basis) ▶\$ Part I | Analysis of Revenue and Expenses (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income income 55,984 N/A Contributions, gifts, grants, etc., received 2 Check I if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments Dividends and interest from securities 10,000. 10,000. STATEMENT 5a Gross rents b Net rental income or (loss) <12,869.> STATEMENT 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 0. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 65,984. 10,000. 12 Total, Add lines 1 through 11 0. 0. 0. Compensation of officers, directors, trustees, etc. 14 Other employee saleries end wages STMT-Expenses 175. 0. 0. 16a Legal fees 卿 2,445 0. **b** Accounting fees 0. 111 c Other professiona fees-ക്ര and Administrative 17 Interest RRJ 18 Taxes MAR 14,955 14,955. Depreciation and depletip 19 00 20 Occupancy 21 Travel, conferences, and me 758 22 Printing and publications 8,004 7,914. 0. 23 Other expenses Total operating and administrative 25,579 22,869 expenses. Add lines 13 through 23 55,825 55,825. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 55,825. 81,404 22,869 Add lines 24 and 25 27 Subtract line 26 from line 12: <15,420. 8 Excess of revenue over expenses and disbursements 0. b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-)

N/A

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of			
드	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing			<u></u>		
	2	Savings and temporary cash investments	521.	56.	56.		
	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					
		Less; allowance for doubtful accounts ▶					
ţ	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
Ä	10a	Investments - U.S. and state government obligations					
	b	Investments - corporate stock					
	C	Investments - corporate bonds					
	11	Investments - land, buildings, and equipment basis 456,275.					
		Less accumulated depreciation STMT 6 ► 177,591.	293,639.	278,684.	285,045.		
	12	Investments - mortgage loans					
	13	Investments - other			<u> </u>		
	14	Land, buildings, and equipment: basis ▶					
		Less accumulated depreciation					
	15	Other assets (describe ►)					
	16	Total assets (to be completed by all filers - see the					
		instructions. Also, see page 1, item 1)	294,160.	278,740.	<u>285,101.</u>		
	17	Accounts payable and accrued expenses					
	18	Grants payable					
ģ	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
abi	21	Mortgages and other notes payable					
ت	22	Other liabilities (describe >					
	23	Total liabilities (add lines 17 through 22)	0.	0.			
		Foundations that follow SFAS 117, check here					
	Ì	and complete lines 24 through 26 and lines 30 and 31.					
Ses	24	Unrestricted					
Net Assets or Fund Balances	25	Temporarily restricted					
Bal	26	Permanently restricted					
פ		Foundations that do not follow SFAS 117, check here					
Ţ		and complete lines 27 through 31.					
õ	27	Capital stock, trust principal, or current funds	0.	0.			
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.			
As	29	Retained earnings, accumulated income, endowment, or other funds	294,160.	278,740.			
Vet	30	Total net assets or fund balances	294,160.	278,740.			
_							
	31	Total liabilities and net assets/fund balances	294,160.	278,740.			
P	art	III Analysis of Changes in Net Assets or Fund Ba	lances				
_		I net assets or fund balances at beginning of year - Part II, column (a), line 3		T			
•		st agree with end-of-year figure reported on prior year's return)		1	294,160.		
2	•	r amount from Part I, line 27a		2	<15,420.		
_		r increases not included in line 2 (itemize)		3	0.		
		lines 1, 2, and 3		4	278,740.		
		reases not included in line 2 (itemize)		5	0.		
-		I net assets or fund halances at end of year (line 4 minus line 5) - Part II col	umn (h) line 30	6	278.740.		

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BOOGIE'S DINER FOUNDATION, INC

Part IV Capital Gains and Losses for Tax on Investment Income (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.) (b) How acquired P - Purchase D - Donation				hase	(c) Date a	cquired y, yr.)	(d) Date sold (mo., day, yr.)			
1a										
b NO	NE				 					
<u>c</u>		-			-					
<u>d</u>		•			┼					
е	10.5		4 3 0		1			45 C-	()>	
(e) Gross sales price		ciation allowed illowable)		t or other basis xpense of sale					in or (loss) (f) minus (
<u>a</u>					-					
_ b		·								
<u>c</u>									-	
_d										
Complete only for assets shown	on dain in colum	in (h) and owned by	the foundation	on 12/31/69			//) Gains (Co	ıl (h) naın	minue
Complete only for assets shown	T			cess of col. (1)				(k), but no	ot less thar	1-0-) or
(i) F.M.V. as of 12/31/69		usted basis 12/31/69	. ,	col. (¡), if any				Losses (from col. (h)) ´
<u>a</u> b										
C										· -
d										
e										
		C If goin, also enter	un Dart I. lina	7	7					
2 Capital gain net income or (net ca	apital loss)	If gain, also enter of the lift (loss), enter of the lift (loss).	- in Part I, line	, 7	 	2				
3 Net short-term capital gain or (lo		•			7					<u></u>
If gain, also enter in Part I, line 8,		1 Sections 1222(3) at	iu (0 <i>)</i> .]					
If (loss), enter -0- in Part I, line 8						3				
Part V Qualification U	Inder Secti	on 4940(e) for	Reduced	Tax on Net	t Inv	estn	nent Inc	ome		
If section 4940(d)(2) applies, leave to Was the foundation liable for the sectif "Yes," the foundation does not quate the appropriate amount in	ction 4942 tax or lify under sectio	n 4940(e). Do not co	mplete this pa	rt.						Yes X No
(a)		(b)			(c)				Dictrib	(d) ution ratio
Base period years Calendar year (or tax year beginn	ing in) Ac	ljusted qualifying dis	tributions	Net value of no	onchar	ıtable-	use assets	(col. (b) div	ided by col. (c))
2012		4	6,210.			29	7,191			.155489
2011			5,625.				6,877			.140157
2010		7	9,250.			41	0,034		_	.193277
2009		23	5,608.			5	6,743			4.152195
2008		34	5,261.			43	<u>6,491</u>			.790992
2 Total of line 1, column (d)								2		5.432110
3 Average distribution ratio for the	5-vear base ner	od - divide the total i	on line 2 by 5	or by the number	r of ve	are		- -		3113211
the foundation has been in existe			on line 2 by 3,	or by the number	i Oi yo	ars		3		1.086422
4 Enter the net value of noncharitable-use assets for 2013 from Part X, line 5				4		282,098.				
								_		206 477
5 Multiply line 4 by line 3								5		306,477.
6 Enter 1% of net investment incom	me (1% of Part I	, line 27b)						6		0.
7 Add lines 5 and 6								7		306,477.
8 Enter qualifying distributions from								8		55,825.
If line 8 is equal to or greater tha See the Part VI instructions.	n line 7, check ti	ne box in Part VI, line	1b, and comp	lete that part usir	ng a 19	% tax r	rate.			

			<u>130 /</u>			<u> age 4</u>
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49-	18 -	see ii	nstru	ctior	<u>15)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	l				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					_
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1				<u>0.</u>
	of Part I, line 27b	- 1				
C	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-)	2				0.
3	Add lines 1 and 2	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				0.
6	Credits/Payments:					
a	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 6a	1				
b	Exempt foreign organizations - tax withheld at source 6b					
	Tax paid with application for extension of time to file (Form 8868)					
	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 attached	8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				0.
		10				
	1	11				
	rt VII-A Statements Regarding Activities	•••				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in				Yes	No
14	any political campaign?			1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?			1b		X
U	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published			"		
		Oi				
	distributed by the foundation in connection with the activities			1c		X
	Did the foundation file Form 1120-POL for this year?			16		
a	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.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$0.					37
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	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 of incorporation, or					47
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	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	/A	4b		77
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					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state la	iW				
	remain in the governing instrument?			6	<u>X</u>	
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 XV			7	X	
				·		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	MD					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		_			
	of each state as required by General Instruction G? If "No," attach explanation SEE STATEME		7	8b		<u> X</u>
9		lar				
	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses ST	MT	<u>8</u>	10	X	
			Forr	ո 990	-PF (2013)

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Part VII-B Statements Regarding Activities for Which I	Form 4/20 May Be I	requirea (contin	ued)	1			
5a During the year did the foundation pay or incur any amount to:							
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No				
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire		()				
any voter registration drive?			es X No		1		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No				
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section]		
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No		1		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t			İ			
the prevention of cruelty to children or animals?							
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	der the exceptions described i	in Regulations	_				
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b			
Organizations relying on a current notice regarding disaster assistance check h	nere						
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	rom the tax because it mainta	ıned					
expenditure responsibility for the grant?	N	I/A	es L No				
If "Yes," attach the statement required by Regulations section 53 494	5-5(d).						
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on						
a personal benefit contract?		Ye	es 🗶 No				
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	X		
If "Yes" to 6b, file Form 8870.							
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Ye	es 🗶 No 📙				
b. If "Yes," did the foundation receive any proceeds or have any net income attribu	utable to the transaction?		N/A	7b			
Part VIII Information About Officers, Directors, Trust		nagers, Highly	y				
Paid Employees, and Contractors							
1 List all officers, directors, trustees, foundation managers and their	compensation.		T 2 a				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deterred compensation	acco	Expense unt, other wances		
LEONARD WEINGLASS	PRESIDENT	cinci o j	Compositation				
P. O. BOX 11509			1				
ASPEN, CO 81612	1.00	0.	ο.	. 0.			
	VICE PRESIDEN	· · · · · · · · · · · · · · · · · · ·	- 0.				
P. O. BOX 11509	VICE INDEDEN	-					
ASPEN, CO 81612	0.00	0.	0.		0.		
ASPEN, CO 61012	0.00	<u> </u>	0.		<u></u>		
	}						
		1					
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "					
2 Compensation of the highest-paid employees (other than those inc	(b) Title, and average	enter NONE.	(d) Contributions to	(e)	Expense		
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	ačcoi	unt, other		
NONE	devoted to position		compensation	ано	wances		
NONE							
	-	1					
		-					
		1					
	L	<u></u>					
Total number of other employees paid over \$50,000			<u></u>		0		
			Form	990-F	PF (2013)		

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NC	NE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced.	etc.	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments 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		
Total. Add lines 1 through 3	>	0.

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, se	e 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	1a	0.
b	Average of monthly cash balances	1b	1,349.
C	Fair market value of all other assets	1c	285,045.
d	Total (add lines 1a, b, and c)	1d	286,394.
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	286,394.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,296.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	282,098.
6	Minimum investment return Enter 5% of line 5	6	14,105.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations at foreign organizations check here in and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	14,105.
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.)	<u> </u>	
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	14,105.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	14,105.
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	14,105.
P	Qualifying Distributions (see instructions)	, ,	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	55,825
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 charitable, 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	55,825
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	55,82 <u>5</u> .
	Note The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation	qualifies for th	ie section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
Distributable amount for 2013 from Part XI, line 7				14,105.
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only			0.	
b Total for prior years:				
g rotal for prior yours.		0.		
3 Excess distributions carryover, if any, to 2013:				
a From 2008 323, 436.				
b From 2009 232,771.				
c From 2010 58,748.			}	
d From 2011 35, 781.				
e From 2012 31,350.				
f Total of lines 3a through e	682,086.			
4 Qualifying distributions for 2013 from				
Part XII, line 4: ►\$ 55,825.				
a Applied to 2012, but not more than line 2a			0.	
b Applied to undistributed income of prior			· · · · · · · · · · · · · · · · · · ·	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2013 distributable amount				14,105.
e Remaining amount distributed out of corpus	41,720.			•
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a)) 6 Enter the net total of each column as				
indicated below:	723,806.			
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	123,000.			
b Prior years' undistributed income. Subtract		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2012. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
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)	0.			
8 Excess distributions carryover from 2008				
not applied on line 5 or line 7	323,436.			
9 Excess distributions carryover to 2014.				
Subtract lines 7 and 8 from line 6a	400,370.			
10 Analysis of line 9:				
a Excess from 2009 232,771.				
b Excess from 2010 58,748.				
c Excess from 2011 35,781.		•		
d Excess from 2012 31,350.				
e Excess from 2013 41,720.				<u> </u>
				- 000 DE (00.40)

	S DINER FOU				07628 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	t it is a private operating			
foundation, and the ruling is effective fo	or 2013, enter the date of	the ruling	▶ L		
b Check box to indicate whether the found	dation is a private operatii	ng foundation described i	n section	4942(j)(3) or 49)42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed	1				
d Amounts included in line 2c not					
used directly for active conduct of	i				
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c		•			
3 Complete 3a, b, or c for the			<u> </u>		
alternative test relied upon:					
a "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				<u> </u>	
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 XV Supplementary Info	rmation (Comple	to this part only	if the foundation	had \$5 000 or me	ore in assets
at any time during t	the vear-see insti	rictions)	ii the foundation	1 11au \$5,000 01 11h	ore in assets
		140110113.			.
1 Information Regarding Foundation	_			de la lata de la decembra de	
a List any managers of the foundation wh year (but only if they have contributed r			ributions received by the	toundation before the clo	se of any tax
, ,	nore man wo,000). (See s	(u)(2).)			
LEONARD WEINGLASS					
 b List any managers of the foundation who other entity) of which the foundation ha 			or an equally large portion	on of the ownership of a p	artnersnip or
• ,	Sa 10 % Of greater interes	5 1.			
NONE					
2 Information Regarding Contribut			=		
				not accept unsolicited requ	
the foundation makes gifts, grants, etc.	(see instructions) to indiv	/iduals or organizations u	nder other conditions, co	omplete items 2a, b, c, and	d d.
a The name, address, and telephone num	iber or e-mail address of t	the person to whom appli	cations should be addre	ssed:	
SEE STATEMENT 9					
b The form in which applications should be	oe submitted and informa	tion and materials they sh	nould include:		
c Any submission deadlines:					
	a auch as his as a series	oloropo chambable falle	lando of mobilities	other feeters	
d Any restrictions or limitations on award	s, such as by geographic	ai areas, charitable fields,	KINGS OF INSTITUTIONS, OF	omer factors;	

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient a Paid during the year AMANDA BOXTEL NONE N/A MEDICAL HARDSHIP ASSISTANCE PO BOX 3767 BASALT, CO 81621 2,800. NONE FINANCIAL, MEDICAL MADISON SMITH N/A HARDSHIP 200 WEST CHASE STREET APT 102B 7,200, PENSACOLA FL 32502 FINANCIAL HARDSHIP NONE N/A MALLORY PISANO PO BOX 112 16,225, WOODY CREEK, CO 81656 NONE PHYLIS & HARRY DAMARECK N/A FINANCIAL HARDSHIP 6 ENSENADA COURT 29,600. RANDALLSTOWN, MD 21133 ▶ 3a 55,825. **b** Approved for future payment NONE **▶** 3b Total

Unrelated business income

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

Enter gross amounts unless otherwise indicated.	Unrelated business income			uded by section 512, 513, or 514	(e)	
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income	
-	0000					
8			┢			
b			 			
<u> </u>			 	i i		
d			\vdash			
e			┝			
		<u></u>	 			
g Fees and contracts from government agencies			 			
2 Membership dues and assessments			-			
3 Interest on savings and temporary cash			1 1 1			
investments			14			
4 Dividends and interest from securities			·			
5 Net rental income or (loss) from real estate:						
a Debt-financed property			1.0	12 000		
b Not debt-financed property			16	<12,869.	}	
6 Net rental income or (loss) from personal						
property			ļ			
7 Other investment income			ļ			
8 Gain or (loss) from sales of assets other						
than inventory						
9 Net income or (loss) from special events			ļ			
10 Gross profit or (loss) from sales of inventory			<u> </u>			
11 Other revenue:						
a						
b			ļ			
c			ļ <u> </u>			
d				,		
e			<u> </u>			
12 Subtotal. Add columns (b), (d), and (e)		0.		<12,869.	<u> </u>	
13 Total. Add line 12, columns (b), (d), and (e)				13	<12,869.	
(See worksheet in line 13 instructions to verify calculations.)						
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	ot Purposes		
Explain below how each activity for which income the foundation's exempt purposes (other than be			contri	buted importantly to the accor	nplishment of	
5B RENTAL OF CONDO TO HAND	TCAPPE	D INDIAIDOUT				
						
					 	
				·	· · · · · · · · · · · · · · · · · · ·	
		· · · · · · · · · · · · · · · · · · ·				
		· · · · · · · · · · · · · · · · · · ·				
			·			
323821 10-10-13						

Par	t XVII	Exempt Organ		sters 10 a	and Transactions a	and Relations	nips with None	cnaritable	€	
1	Old the or			of the following	ng with any other organization	on described in sect	ion 501(c) of		Yes	No
		-			27, relating to political organ					
		from the reporting founds								
	1) Cash				•			1a(1)		X
	 (2) Other							1a(2)		X
b (Other tran	isactions:								
(1) Sales	of assets to a noncharital	ble exempt organizati	ion				1b(1)		<u> </u>
((2) Purci	hases of assets from a nor	ncharitable exempt o	rganization				1b(2)		<u> </u>
((3) Renta	al of facilities, equipment,	or other assets					1b(3)		<u>X</u>
(4) Reim	bursement arrangements						1b(4)		<u>X</u>
(5) Loan	s or loan guarantees						1b(5)		X
((6) Perfo	rmance of services or me	mbership or fundrais	sing solicitation	ons			1b(6)		<u>X</u>
	•	f facilities, equipment, ma	•		· ·			1c	<u> </u>	<u>X</u>
		•			edule. Column (b) should al				sets,	
					red less than fair market valu	ie in any transaction	or sharing arrangem	ent, snow in		
(a) Lin	`	the value of the goods, Amount involved	· · · · · · · · · · · · · · · · · · ·		e exempt organization	(d) December				
(a) Lin	e no	(b) Amount involved	(c) Name of	N/A	e exempt organization	(u) Description	n of transfers, transactions	, and snaring an	rangeme	nts
				IV/A	······································					
		····								
			<u> </u>							
	_									
								•		
					· · · · · · · · · · · · · · · · · · ·					
	ŀ									
	_									
2a i	s the fou	ndation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exempt organi	zations described				_
ı	n section	501(c) of the Code (other	r than section 501(c)	(3)) or in sect	tion 527?			Yes	X	No
bΙ	f "Yes," co	omplete the following sche			T**					
		(a) Name of org	anization		(b) Type of organization		(c) Description of rela	tionship		
		N/A								
		· · · · · · · · · · · · · · · · · · ·								
	111.4	Number of the state of the stat	AL - A I b				hast of my lynavilades			
c:-					ng accompanying schedules and in taxpayer) is based on all inforn			May the IRS or		
Sig: Her		8 W	2 in on by	$\Lambda\Lambda$	1 0 11 11	PPEGT		shown below	(see ins	tr)?
710.		nature of officer or trustee	DWY VY W	<i>V2</i>	<u> </u>	PRESII	DEN'T	LX Yes		JNo
	Sigi	Print/Type preparer's na		Preparer's s	Date Denature	Title Date	Check If P	TIN		
		Time Type preparer 5 Ha		- Topara 33		5410	self- employed	• ***		
Pai	d	MARK S KAV	מפטש משא		Mas	2-19-14	, ,	P00107	511	
	parer	Firm's name REE			ANY, INC.		Firm's EIN ▶ 84			
	Only	THE REE	OF HERIT	a COMP	1141, TIAC.		I IIII 3 LIN P 04	00037	<i>2</i> /	
		Firm's address ▶ 40	O EAST MA	TN STR	EET, SUITE 2					
			PEN, CO 8		CLI, DULLE &		Phone no. (97	0) 925	-37	71
	···	ı	<u>147 CO O</u>	<u> </u>			, nono no. (<i>)</i> 1	Form 994		

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

В	OOGIE'S DINER FOUNDATION, INC	52-1307628
Organization type (check	one):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	X 501(c)(3) taxable private foundation	
Note. Only a section 501(c	is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special F	ule See instructions
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in r plete Parts I and II	noney 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 re 0(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 contribution	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one conts of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or excruelty to children or animals. Complete Parts I, II, and III	
contributions for If this box is chec purpose. Do not	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contuse exclusively for religious, charitable, etc., purposes, but these contributions did not tocked, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the General Rule applies to this organization because one, etc., contributions of \$5,000 or more during the year	otal to more than \$1,000 <i>rely</i> religious, charitable, etc ,
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule in Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its let 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)

Employer identification number

BOOGIE'S DINER FOUNDATION, INC

52-1307628

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LEONARD WEINGLASS PO BOX 11509 ASPEN, CO 81611	\$ 55,984.	Person X Payroll
(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 of organization

Employer identification number

BOOGIE'S DINER FOUNDATION, INC

52-1307628

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

Employer identification number

	'S DINER FOUNDATION, II	VC	52-1307628							
Part III	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if additional	e following line entry. For organization, contributions of \$1,000 or less for)(7), (8), or (10) organizations that total more than \$1,000 for the ons completing Part III, enter the year. (Enter this information once)							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held							
		(e) Transfer of gif	t							
	Transferee's name, address, an	od ZIP + 4	Relationship of transferor to transferee							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held							
		(e) Transfer of gif	fer of gift							
	Transferee's name, address, an	nd ZIP + 4	Relationship of transferor to transferee							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held							
	(e) Transfer of gift									
	Transferee's name, address, an	nd ZIP + 4	Relationship of transferor to transferee							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held							
	(e) Transfer of gift									
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee							

FORM 990-PF	RENTAL I	NCOME		STATEMENT 1			
KIND AND LOCATION OF PROPERT	Y		ACTIVITY NUMBER	GROSS RENTAL INCOME			
RENTAL CONDO	_		1	10,000			
TOTAL TO FORM 990-PF, PART I	, LINE 5A			10,000.			
FORM 990-PF	RENTAL EX	(PENSES		STATEMENT 2			
DESCRIPTION		ACTIVITY NUMBER	AMOUNT	TOTAL			
DEPRECIATION ASSESSMENTS - RENTAL CONDO PROPERTY TAX PROPERTY INSURANCE			14,955. 5,141. 1,700. 1,073.				
	SUBTOTAL -	1	,	22,869.			
TOTAL RENTAL EXPENSES				22,869			
NET RENTAL INCOME TO FORM 99	0-PF, PART	I, LINE 5B		<12,869			
FORM 990-PF	LEGA	L FEES		STATEMENT			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME					
_							
LEGAL	175	5. O).	0 .			

			STATEMENT 4				
				(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS	ABLE	
2,44	45.		0.			0.	
2,44	2,445. 0.					0.	
ОТНЕ	R EX	(PENSES			STATEMENT	5	
					(D) CHARITABLI PURPOSES		
5,14 1,70	41. 00.	5,141. 1,700.			0000		
8,00	8,004.		7,914.			0.	
OF ASSETS	HEL	D FOR INV	ESTM	IENT	STATEMENT	6	
ľO					BOOK VAI	LUE	
	411,275. 45,000.		177,591.		233,684 45,000		
LN 11		456,275.		177,591.	278,6	584.	
	OTHER (A) EXPENSES PER BOOM (A) EXPENSES PER BOOM 5,14 1,70 1,00 8,00 OF ASSETS	EXPENSES PER BOOKS 2,445. 3 2,445. OTHER EX (A) EXPENSES PER BOOKS 90. 5,141. 1,700. 1,073. 8,004. OF ASSETS HEI COS OTHER	EXPENSES NET INVES PER BOOKS MENT INCO 2,445. OTHER EXPENSES (A) (B) EXPENSES NET INVES PER BOOKS MENT INCO 90. 5,141. 5,1 1,700. 1,7 1,073. 1,0 1,073. 1,0 8,004. 7,9 OF ASSETS HELD FOR INV COST OR OTHER BASIS 411,275. 45,000.	EXPENSES NET INVEST- PER BOOKS MENT INCOME 2,445. 0. 3 2,445. 0. OTHER EXPENSES (A) (B) EXPENSES NET INVEST- PER BOOKS MENT INCOME 90. 0. 5,141. 5,141. 1,700. 1,700. 1,073. 1,073. 8,004. 7,914. COST OR ACCOTHER BASIS DEF 411,275. 45,000.	EXPENSES NET INVEST- PER BOOKS MENT INCOME 2,445. 0. OTHER EXPENSES (A) (B) (C) EXPENSES NET INVEST- PER BOOKS MENT INCOME 90. 5,141. 1,700. 1,700. 1,073. 1,073. 8,004. OF ASSETS HELD FOR INVESTMENT COST OR ACCUMULATED DEPRECIATION 411,275. 45,000. 0. 177,591. 45,000. 0.	EXPENSES NET INVEST- ADJUSTED PURPOSE 2,445. 0. OTHER EXPENSES STATEMENT (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITY PER BOOKS MENT INCOME NET INCOME PURPOSE 90. 0. 5,141. 5,141. 1,700. 1,700. 1,073. 1,073. 8,004. 7,914. OF ASSETS HELD FOR INVESTMENT STATEMENT COST OR ACCUMULATED OTHER BASIS DEPRECIATION BOOK VAIR 411,275. 45,000. 0. 45,000.	

EXPLANATION

THE PRIVATE FOUNDATION HAS ONE CONTRIBUTOR AND DOES NOT SOLICIT CONTRIBUTIONS FROM THE PUBLIC.

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	8
NAME OF CONTRIBUTOR	ADDRESS		
LEONARD WEINGLASS	P. O. BOX 11509 ASPEN, CO 81612		

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

9

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

LEONARD WEINGLASS PO BOX 11509 ASPEN, CO 81612

TELEPHONE NUMBER

970-925-3771

FORM AND CONTENT OF APPLICATIONS

THE APPLICATION SHOULD BE WRITTEN AND SHOULD INCLUDE THE REASON FOR THE GRANT REQUEST

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Depreciation and Amortization RENT (Including Information on Listed Property)

▶ See separate instructions. ► Attach to your tax return.

1

Business or activity to which this form relates

Attachment Sequence No 179

Identifying number

OMB No 1545-0172

BOOGIE'S DINER FOUNDAT	ION, INC		REN	TAL CON	IDO		52-1307628
Part I Election To Expense Certain Property	Under Section 1	79 Note: If you	ı have any lıs	ed property,	complete Part	V before yo	u complete Part I
1 Maximum amount (see instructions)						1	500,000.
2 Total cost of section 179 property place	d in service (see	instructions)				2	
3 Threshold cost of section 179 property b	efore reduction	in limitation				3	2,000,000.
4 Reduction in limitation Subtract line 3 fr	om line 2 If zero	or less, ente	r -0-			4	
5 Dollar limitation for tax year Subtract line 4 from line 1	If zero or less, enter	-0- If married filin	g separately, see	instructions	· · · · · · · · · · · · · · · · · · ·	5	
6 (a) Description of prop	erty		1 cost				
			_				
7 Listed property Enter the amount from I	ne 29			7			
8 Total elected cost of section 179 proper	ty. Add amounts	s in column (c), lines 6 and	7		8	
9 Tentative deduction Enter the smaller of	of line 5 or line 8					9	
10 Carryover of disallowed deduction from	ine 13 of your 2	012 Form 456	52			10	
11 Business income limitation. Enter the sm	aller of business	s income (not	less than zer	o) or line 5		11	
12 Section 179 expense deduction. Add lin	es 9 and 10, but	do not enter	more than lin	ie 11		12	
13 Carryover of disallowed deduction to 20	14. Add lines 9 a	and 10, less li	ne 12	▶ 13			
Note: Do not use Part II or Part III below for	listed property l	nstead, use F	Part V				
Part II Special Depreciation Allowan	ce and Other D	epreciation (Do not∕inclu	de listed prop	erty)		
14 Special depreciation allowance for qualif	ied property (oth	ner than listed	property) pla	aced in service	e during		
the tax year						14	
15 Property subject to section 168(f)(1) elec	tion					15	
16 Other depreciation (including ACRS)						16	
Part III MACRS Depreciation (Do not	ınclude listed pi	roperty) (See	instructions.				
· · · · · · · · · · · · · · · · · · ·		Se	ction A				
17 MACRS deductions for assets placed in	service in tax ye	ears beginning	before 2013	3		17	14,955.
18 If you are electing to group any assets placed in service	e during the tax year	into one or more	general asset acco	ounts, check here	▶ □		
Section B - Assets F						tion Syste	em
(a) Classification of property	(b) Month and year placed in service	(business/in	depreciation vestment use nstructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property	<u> </u>						
b 5-year property							
c 7-year property							
d 10-year property			_				
e 15-year property							
f 20-year property							
g 25-year property				25 yrs		S/L	
	/			27.5 yrs	MM	S/L	
h Residential rental property	1			27 5 yrs.	MM	S/L	
	1			39 yrs	MM	S/L	
 Nonresidential real property 	/				ММ	S/L	
Section C - Assets PI	aced in Service	During 2013	Tax Year Us	ing the Alte	native Depre	iation Sys	tem
20a Class life						S/L	
b 12-year				12 yrs		S/L	
c 40-year	/			40 yrs.	ММ	S/L	
Part IV Summary (See instructions)					-		
21 Listed property. Enter amount from line	28				· 	21	
22 Total. Add amounts from line 12, lines 1		nes 19 and 20	ın column (a), and line 21			
Enter here and on the appropriate lines	of your return. P	artnerships ai	nd S corporat		tr	22	14,955.
23 For assets shown above and placed in s		e current yea	, enter the	23			

(FC	art V Listed Proper amusement) Note: For any through (c) of S	vehicle for w	hich you are	using the	standar	d mileag	ie rate oi								
		- Depreciati						nstruc	tions for li	mıts for	passeng	er autor	nobiles)	
	Do you have evidence to s					$\overline{}$	es	_	24b lf "Y					Yes [No
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Busines investme use percen	s/ nt	(d) Cost or ther basis	Bas	(e) sis for depre siness/inve	eciation estment	(f) Recovery period	Me	(g) ethod/ vention	Depre	(h) eciation uction	Elé secti	(i) ected on 179 eost
25	Special depreciation alle	1			y placed	ın servi	ce during	the ta	ax year an	d					001
	used more than 50% in										25				
26	Property used more tha	ın 50% ın a c	qualified bus	iness use											
				%			•								
				%								ļ			
		<u> </u>	L ,	%		j				<u></u>		<u> </u>			
27	Property used 50% or le	ess in a qual	ified busines	s use						,					
	<u></u>			%						S/L·				_	
		<u> </u>		%						S/L ·		<u> </u>			
		<u> </u>		%		<u> </u>				S/L·				1	
28	Add amounts in column	ı (h), lınes 25	through 27	Enter her	re and or	n line 21	, page 1				28				
<u>29</u>	Add amounts in column	(ı), lıne 26. E	Enter here ar	nd on line	7, page	1							29	<u></u>	
	nplete this section for ve our employees, first ans		-		artner, c	or other	"more th	an 5%	owner," o)S
			[((a)	(b)		(c)	((d)	(e)	(f)		
30	O Total business/investment miles driven during the		luring the	Ve	hicle	Vel	hicle	V	ehicle/	Ve	hicle	Vei	hicle	Ve	hicle
	year (do not include commuting miles)					ļ						ļ		ļ	
31	1 Total commuting miles driven during the year					ļ								ļ	
	Total other personal (no driven	ncommuting	g) miles												
33	Total miles driven during	g the year.		-											
	Add lines 30 through 32	2									,	ļ	,	ļ	
34	Was the vehicle availab	le for person	nal use	Yes	No	Yes	No	Yes	No.	Yes	No	Yes	No	Yes	No
	during off-duty hours?					ļ .	1				ļ	ļ			ļ
	Was the vehicle used p		more				1								
	than 5% owner or relate	•				ļ	-			-	-	 	<u> </u>		
36	Is another vehicle availa	ble for perso	onal												
	use?				<u> </u>		<u> </u>						<u> </u>		<u></u>
	wer these questions to deers or related persons		- Question: you meet an	•	-					=			re not m	nore tha	n 5%
	Do you maintain a writte	en policy stat	tement that	prohibits	all perso	nal use	of vehicle	es, ınc	luding cor	nmuting	, by you	r		Yes	No
	employees?				,					_					
38	Do you maintain a writte	en policy stat	tement that	prohibits	personal	use of v	vehicles,	excep	t commut	ing, by	your				
	employees? See the ins	structions for	vehicles us	ed by cor	porate o	fficers, c	lirectors	, or 1%	or more	owners					
39	Do you treat all use of v	ehicles by er	mployees as	personal	use?										
40	Do you provide more th	an five vehic	les to your e	mployees	s, obtain	ınformat	tion from	your (employee	s about					
	the use of the vehicles,	and retain th	ne informatio	n receive	d?										<u> </u>
	Do you meet the require													<u> </u>	<u> </u>
-	Note: If your answer to	37, 38, 39, <u>4</u>	0, or 41 is "	<u>(es," do n</u>	ot comp	lete Sec	tion B fo	r the c	covered ve	hicles.					
Pa	art VI Amortization				1										
	(a) Description o	f costs	0	(b) ate amortization begins	1	(C) Amortizal amoun	ble t		(d) Code section		(e) Amortiza penod or per		A fo	(f) mortization or this year)
42	Amortization of costs th	at begins du	ırıng your 20	13 tax ye	ar·										
	Amortization of costs th											43		 ,	
44	Total. Add amounts in o	column (f) Se	ee the instru	ctions for	where to	o report						44			