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DLN: 93491131019345

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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 instructions is at <u>www.irs.gov/form990pf</u>.

Open to Public

For	cale	ndar year 2014, or tax year beginning 01-	01-2014	, a	nd ending 1	2-31-2014	
		Indation			A Employer id	entification numb	er
		RA RIDGE FOUNDATION			20-1674794		
Num 15	ber and 24 WES	. WEINBERG I street (or P O box number if mail is not delivered to street address T LAKESHORE DRIVE	s) Room/suite		B Telephone nu	mber (see instructio	ns)
	ıte						
		i, state or province, country, and ZIP or foreign postal code MT 59937			C If exemption	application is pendin	g, check here 🕨 🦵
G CI	neck a	Il that apply Initial return Initial return of a	former public charity	,	D 1 . Foreign or	ganizations, check h	ere 🕨 🗀
		Final return Amended return	,		-	ganizations meeting	·
		Address change Name change			test, chec	k here and attach co	mputation
		/pe of organization Section 501(c)(3) exempt priva				ındatıon status was i n 507(b)(1)(A), ched	
		xet value of all assets at end J Accounting method					
		ket value of all assets at end from Part II, col. (c), T O ther (specify)	I Cash I Acci	uaı		ation is in a 60-mont n 507(b)(1)(B), cheo	_
		\$ 6,903,618 (Part I, column (d) must	be on cash basis.)				
Part I		Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) N	let investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach					
		schedule)	0				
	2	Check ► ☐ If the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments	27,951		27,951		
	4	Dividends and interest from securities	107,622		107,622		
	5a	Gross rents					
	ь	Net rental income or (loss)					
<u>Φ</u>	6a	Net gain or (loss) from sale of assets not on line 10	293,498				
Revenue	b	Gross sales price for all assets on line 6a					
	7	Capital gain net income (from Part IV, line 2)			293,498		
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and					
	ь	allowances Less Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	429,071		429,071		
	13	Compensation of officers, directors, trustees, etc					
	14	Other employee salaries and wages					
φ̈́	15	Pension plans, employee benefits					
Expense	16a	Legal fees (attach schedule)					
Ä.	ь	Accounting fees (attach schedule)					
	С	,	47,083		32,533		14,550
) tiv	17	Interest					
Admını strative	18	(1,793		1,793		
	19	Depreciation (attach schedule) and depletion					
Ė	20	Occupancy					
ΔD	21	Travel, conferences, and meetings					
and	22	Printing and publications	95. 1,000				
Į;	23	Total operating and administrative expenses.	1,000				
Operating	24	Add lines 13 through 23	49,876		34,326		14,550
8	25	Contributions, gifts, grants paid	369,641		51,520		369,641
U	26	Total expenses and disbursements. Add lines 24 and	303,011				303,011
		25	419,517		34,326		384,191
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursements	9,554				
	b	Net investment income (If negative, enter -0-)			394,745		
	c	Adjusted net income (If negative, enter -0-)					

Da	rt II	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
I GI		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	179,098	142,840	142,840
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less allowance for doubtful accounts 🕨			
	4	Pledges receivable 🟲			
		Less allowance for doubtful accounts 🕨			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) 🕨			
		Less allowance for doubtful accounts 🕨			
2	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges			
45	10a	$Investments-U\ S\ and\ state\ government\ obligations\ (attach\ schedule)$	141,621	654,204	682,179
	b	Investments—corporate stock (attach schedule)	3,779,173	3,818,408	5,794,037
	C	Investments—corporate bonds (attach schedule)	782,207	262,474	269,273
	11	Investments—land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) 🕨			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe 🟲)	1,562	15,289	15,289
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	4,883,661	4,893,215	6,903,618
1	17	Accounts payable and accrued expenses			
	18	Grants payable	0		
abilities	19	Deferred revenue			
불	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>6</u>	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe •)			
	23	Total liabilities (add lines 17 through 22)	0	0	
,		Foundations that follow SFAS 117, check here 🕨 🦵			
ŝ		and complete lines 24 through 26 and lines 30 and 31.			
Balance	24	Unrestricted			
Ba	25	Temporarily restricted			
덛	26	Permanently restricted			
Fund		Foundations that do not follow SFAS 117, check here 🕨 🔽			
5		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	2,904,477	2,904,477	
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	1,979,184	1,988,738	
Net	30	Total net assets or fund balances (see instructions)	4,883,661	4,893,215	
_	31	Total liabilities and net assets/fund balances (see instructions)	4,883,661	4,893,215	
Pa	rt II	Analysis of Changes in Net Assets or Fund Balances			
1		Total net assets or fund balances at beginning of year—Part II, column	ı (a), lıne 30 (must a	gree	
		with end-of-year figure reported on prior year's return)		1	4,883,661
2		Enter amount from Part I, line 27a		2	9,554
3		Other increases not included in line 2 (itemize)		3	
4		Add lines 1, 2, and 3		4	4,893,215
5		Decreases not included in line 2 (itemize) ▶		5	
6		Total net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), l	ine 30 . 6	4,893,215

	(2014)			_		Page 3
	Capital Gains and L	osses for Tax on Inve	stment Incom			
		nd(s) of property sold (e g , re or common stock, 200 shs M		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a SEE	STATEMENT ATTACH	ED				2014-12-31
b SEE	STATEMENT ATTACH	ED				2014-12-31
c SEE	STATEMENT ATTACH	ED				2014-12-31
	PITAL GAIN DIVIDEND)S	P			
<u>-</u>						
	s sales price	(f) Depreciation allowe (or allowable)		st or other basis expense of sale		or (loss)) minus (g)
a	42,857	· · · · · ·	, , , , , , , , , , , , , , , , , , ,	42,87		-19
	304,321			209,52		94,800
	639,588			460,65		178,929
d	007/000					19,788
<u>е</u>					+	15,700
	only for accets chowin		d by the foundation	on 12/21/60	(I) Caina (Cal	(h) ==========
		(j) Adjusted basis		cess of col (i)	(I) Gains (Col col (k), but not l	(n) gain minus less than -0-) or
(i) F M ∨	as of 12/31/69	as of 12/31/69		col (j), if any	Losses (fro	
a						-19
b						94,800
С						178,929
d						
e						
		,	If gaın, also entei	rın Part Iline 7 Ì		
3 Net		or (loss) as defined in sectio		5)	2	293,498
	art I, line 8	line 8, column (c) (see instru	• • • • •	enter-u-	3	
Part V (Qualification Under	Section 4940(e) for R	educed Tax o	n Net Investme	nt Income	
For optional u	ise by domestic private	foundations subject to the se				
footion 101	0(4)(2) ===		ection 4940(a) tax	on net investment	income)	
i section 494	o(d)(2) applies, leave t	hıs part blank	ection 4940(a) tax	on net investment	income)	
Vas the found	ation liable for the secti	his part blank on 4942 tax on the distributa ify under section 4940(e) Di	able amount of any	/ year in the base pe		┌ Yes ┌ No
Vas the found f "Yes," the fo	ation liable for the secti oundation does not qual	on 4942 tax on the distributa	able amount of any o not complete the	/ year in the base pe s part	eriod?	┌ Yes ┌ No
Vas the found f "Yes," the fo 1 Enter the	ation liable for the section does not qual appropriate amount in (a)	on 4942 tax on the distributa Ify under section 4940(e) Do each column for each year, so	able amount of any o not complete thi ee instructions be	/ year in the base pos s part fore making any ent	eriod? ries (d)	
Vas the found f "Yes," the fo 1 Enter the Base penod	ation liable for the section does not qual appropriate amount in (a) (a) (years Calendar	on 4942 tax on the distributa Ify under section 4940(e) Do	able amount of any o not complete the	y year in the base pess part fore making any ent	eriod? ries (d) Distribution	n ratio
Vas the found f "Yes," the fo 1 Enter the Base penod year (or tax ye	ation liable for the section does not qual appropriate amount in (a) years Calendar ear beginning in)	on 4942 tax on the distribution of the distrib	able amount of any o not complete thi ee instructions be (c	y year in the base possible years y year in the base possible part fore making any ent antable-use assets	eriod? ries (d)	n ratio by col (c))
Vas the found f "Yes," the fo 1 Enter the Base penod year (or tax year	ation liable for the section does not qual appropriate amount in a section of the section does not qual appropriate amount in a section of the section does not qual appropriate amount in a section does not appropriate amount in a section does n	on 4942 tax on the distribution under section 4940(e) Do each column for each year, so (b) susted qualifying distributions	able amount of any o not complete thi ee instructions be (c	y year in the base possible part fore making any ent antable-use assets 6,181,896	eriod? ries (d) Distribution	n ratio by col (c)) 0 066455
Vas the found f "Yes," the fo 1 Enter the Base penod year (or tax ye 20	ation liable for the section does not qual appropriate amount in (a) years Calendar ear beginning in)	on 4942 tax on the distribut: Ify under section 4940(e) December of the column for each year, so (b) Susted qualifying distributions 410,818 240,432	able amount of any o not complete thi ee instructions be (c	y year in the base person of the	eriod? ries (d) Distribution	n ratio by col (c)) 0 066455 0 038734
Vas the found f "Yes," the fo 1 Enter the Base period year (or tax ye 20 20	ation liable for the section does not qual appropriate amount in (a) (a) (years Calendar ear beginning in) (13 (12	on 4942 tax on the distribution under section 4940(e) Do each column for each year, so (b) susted qualifying distributions	able amount of any o not complete thi ee instructions be (c	y year in the base possible part fore making any ent antable-use assets 6,181,896	eriod? ries (d) Distribution	n ratio by col (c)) 0 066455
Vas the found f "Yes," the fo 1 Enter the Base pendd year (or tax ye 20 20 20	ation liable for the section does not qual appropriate amount in a section of the	on 4942 tax on the distributation on 4940 (e) Do each column for each year, so (b) susted qualifying distributions 410,818 240,432 286,946	able amount of any o not complete thi ee instructions be (c	year in the base pass part fore making any ent anitable-use assets 6,181,896 6,207,306 5,563,945	eriod? ries (d) Distribution	n ratio by col (c)) 0 066455 0 038734 0 051572
Vas the found f "Yes," the form of the following of the following for the following the following for	ation liable for the section dual appropriate amount in a section of the section dual appropriate amount in a section of the section dual appropriate amount in a section of the section dual appropriate amount in a section of the section dual appropriate amount in a section of the section dual appropriate amount in a section dual appropriate a	on 4942 tax on the distributation on 4940 (e) Do each column for each year, so (b) susted qualifying distributions 410,818 240,432 286,946	able amount of any o not complete thi ee instructions be (c Net value of nonch	y year in the base person of the	eriod? ries (d) Distribution	0 066455 0 038734 0 051572 0 056272
Vas the found f "Yes," the form of the following of the following for the following form of the following fore	ation liable for the section description does not qual appropriate amount in a section of the section description of the section described appropriate amount in a section described appropriate amount in a section description described appropriate amount in a section description des	on 4942 tax on the distribution under section 4940(e) Do each column for each year, so (b) susted qualifying distributions 410,818 240,432 286,946 268,781	able amount of any o not complete this ee instructions be (constructions be not with the construction of nonching the construction of nonching the construction of the	y year in the base person of the	eriod? ries (d) Distributior (col (b) divided	n ratio by col (c)) 0 066455 0 038734 0 051572 0 056272
Vas the found f "Yes," the form of the following of the following for the following	ation liable for the section description does not qual appropriate amount in a (a) years Calendar ear beginning in) 213 212 211 210 209 31 of line 1, column (d). rage distribution ratio for number of years the four	on 4942 tax on the distribution on 4940 (e) Do the cach column for each year, so the column for each year base period—diversity of the column for each year base period—diversity of the column for each year, so the column for each year.	able amount of any o not complete this ee instructions be (c) Net value of nonchar vide the total on line if less than 5 year	y year in the base person of the second of t	criod? (d) Distribution (col (b) divided	0 066455 0 038734 0 051572 0 056272 0 213033
Vas the found f "Yes," the form of the following of the following for the following	ation liable for the section described and the section does not qual appropriate amount in a section of the section described and the section does not be section does not does no	on 4942 tax on the distribution on 4940 (e) Do the control of the	able amount of any o not complete this ee instructions be Net value of nonchard the value of nonchard the total on line if less than 5 years from Part X, line	y year in the base person of the	eriod? (d) Distributior (col (b) divided	0 066455 0 038734 0 051572 0 056272 0 213033 0 053258 6,611,408
Vas the found f "Yes," the form of the following of the following for the following	ation liable for the section description does not qual appropriate amount in a graph of the section of the sear beginning in) 213 212 211 2010 2009 21 of line 1, column (d). 21 rage distribution ratio for number of years the four er the net value of noncharm of the series of	ton 4942 tax on the distribution on 4940 (e) Do the each column for each year, so the distributions (b) tusted qualifying distributions 410,818 240,432 286,946 268,781 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	able amount of any o not complete this ee instructions be (continued to the continued of t	y year in the base person of the	criod? (d) Distribution (col (b) divided	0 053258 6,611,408
Vas the found f "Yes," the form of the following of the following for the following	ation liable for the section description does not qual appropriate amount in a graph of the section description of the section does not qual appropriate amount in a graph of line and the section description does not be set the net value of nonchapter 1% of net investment appropriate amount in appropriate and the section does not be set 1% of net investment appropriate amount in appropriate amo	(b) susted qualifying distributions 410,818 240,432 286,946 268,781 or the 5-year base period—dividation has been in existence paritable-use assets for 2014	able amount of any o not complete this ee instructions be (c) Net value of nonchar vide the total on line if less than 5 years from Part X, line	7 year in the base person of spart fore making any ent 2) antable-use assets 6,181,896 6,207,306 5,563,945 4,776,450	criod? (d) Distribution (col (b) divided)	0 066455 0 038734 0 051572 0 056272 0 213033 0 053258 6,611,408 352,110
Vas the found f "Yes," the form of the following of the following for the following	ation liable for the section duration does not qual appropriate amount in a graph of the section of the sear beginning in). O13 O12 O11 O10 O09 If of line 1, column (d). Trage distribution ratio for number of years the four erthe net value of noncharply line 4 by line 3 er 1% of net investment lines 5 and 6	on 4942 tax on the distributions (b) susted qualifying distributions 410,818 240,432 286,946 268,781	able amount of any o not complete this ee instructions be (continued to the continued of t	y year in the base person of the second of t	Priod? (d) Distribution (col (b) divided	0 053258 6,611,408

	990-PF (2014) **I VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst			age 4
1a		ructio	ns)	
14	on line 1			
	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			3,947
	here Fand enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
3	Add lines 1 and 2			3,947
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			3,947
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 1,936			
b	Exempt foreign organizations—tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		;	1,936
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			2,011
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid \rightarrow 10			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded 11			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
	it participate or intervene in any political campaign? 🕏 💮	. 1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions			
	for definition)?	1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials			
_	published or distributed by the foundation in connection with the activities.			NI-
	Did the foundation file Form 1120-POL for this year?	1c		No
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$\begin{align*} \pm \pm \\ \pm \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
-	on foundation managers * \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?] 2		No
_	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 bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	. з		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5		No
	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 	ļ		
	that conflict with the state law remain in the governing instrument?	. 6	Yes	
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	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	MT			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney		V	
^	General (or designate) of each state as required by General Instruction G? If "No," attach explanation.	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)?			
	If "Yes," complete Part XIV	 ₉		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names	\vdash		
	and addresses.	10		No

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ▶			
14	The books are in care of ▶DANIEL WEINBERG Telephone no ▶(406)	862-	9131	
	Located at ►1524 WEST LAKESHORE DRIVE WHITEFISH MT ZIP+4 ►59937			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			─
13	and enter the amount of tax-exempt interest received or accrued during the year			- 1
	- · · · · · · · · · · · · · · · · · · ·		1	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over	مدا	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		 ₁	.
_	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		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(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 Vo			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No	1		
	(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)?	1		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	1		
	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)	1		
ь	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations	1		
U	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	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,	1		
	that were not corrected before the first day of the tax year beginning in 2014?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	<u> </u>		110
_	operating foundation defined in section 4942(1)(3) or 4942(1)(5))	1		
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d	1		
_	and 6e, Part XIII) for tax year(s) beginning before 2014? Yes ▽ No	1		
	If "Yes," list the years > 20	1		
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	l		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see instructions)	2b		No
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20	1		
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at	l		
	any time during the year?	l		
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation	İ		
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved	l		
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)	l		
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine	İ		
	ıf the foundation had excess business holdings in 2014.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	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 2014?	4b		No

Pa	rt VII-B	Statements Rega	rdir	ng Activities for	Wŀ	nich Form 4720	May	y Be Required <i>(cont</i>	inue	d)	
5a	During th	e year dıd the foundatıo	n pay	or incur any amoun	t to						
	(1) Carry	on propaganda, or othe	rwise	attempt to influenc	e leg	ııslatıon (section 494	45 (e	e))?	No		
	(2) Influe	nce the outcome of any	spec	ific public election (see	section 4955), or to	car	ry			
	on, dı	rectly or indirectly, any	vote	registration drive?.				Yes	- No		
		de a grant to an individu						☐ Yes ☑			
		de a grant to an organiza					scrib	bed			
						· -		┌ Yes ┌	- No		
		de for any purpose othe									
									- No		
ь								e exceptions described in			
	•			-		•		instructions)?		. 5b	
	_			_	_						
С											
_	c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?										
		attach the statement requ					•	, .cs ,	110		
6a		oundation, during the yea		-			nrai	milime on			
ou		al benefit contract?							- No		
Ь	•							benefit contract?		6b	l l No
U			11, Pa	y premiums, unecci	, 01 1	manectly, on a perso	illai	benefit contract.	•	OB	140
7-	If "Yes" to 6b, file Form 8870.										
7a 	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes Volume No If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 7b No										
					_					7b	No
Pa	rt VIII	and Contractors	t Or	ncers, Directors	5, II	rustees, Founda	τιο	n Managers, Highly	Paid	ı Emp	loyees,
1	List all off	icers, directors, trustee	s. foi	ındation managers a	nd t	heir compensation (s	see i	instructions).			
		,,	1	Title, and average		c) Compensation		(d) Contributions to	, ,	_	
	(a) Nai	me and address		hours per week	٠ ،	If not paid, enter		mployee benefit plans			se account, owances
			1	evoted to position		-0-)	and	d deferred compensation		ciici aii	
	EL C WEINBER		-	SIDENT AND		0					
	4 WEST LA TEFISH, M	KESHORE DRIVE	0	DIRECTOR 0							
	IARY WEINBER		CEC	SECRETARY AND		0					
	SHEFFIEL		DIRECTOR			O					
	MEDA, CA		0								
MOLL	Y JARMUSZ		TRE	ASURER	0						
555	CHERRY S	STREET	0								
WIN	NETKA,IL	60093									
ABIG	AIL WEINBERG	3	DIR	ECTOR		0					
		KESHORE DRIVE	0								
	TEFISH, M										
_2	Compensat	tion of five highest-paid	l emp	oloyees (other than	thos	e included on line 1— T	see	instructions). If none, er	iter"	NONE.	•
(a	Name and	l address of each emplo	V 0 0	(b) Title, and aver				(d) Contributions to employee benefit	(e)	Evnens	se account
(4		more than \$50,000	,	hours per week		(c) Compensatio	n	plans and deferred			owances
				devoted to positi	on			compensation			
				1							
				1							
									-		
				<u> </u>							
Tota	I number of	f other employees paid (ver:	\$50,000				🟲	l		

Form 990-PF (2014)		Page 7
Part VIII Information About Officers, and Contractors (continued)	Directors, Trustees, Foundation Manage	rs, Highly Paid Employees,
	rofessional services (see instructions). If none, ente	er "NONE".
(a) Name and address of each person paid more t	nan \$50,000 (b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for pr	ofessional services	<u>▶ </u>
Part IX-A Summary of Direct Charitable	e Activities	
List the foundation's four largest direct charitable activities during		e number of Expenses
organizations and other beneficiaries served, conferences conver	ned, research papers produced, etc	Expenses
1 NONE		
2		
4		
	d Investments (see instructions)	
Describe the two largest program-related investments made		A mount
1 NONE		
2		
All other program-related investments See instru	ctions	
3		
Total. Add lines 1 through 3		🟲

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. 1 purposes 1a 6.477.511 1h 234.578 1c 1d 6.712.089 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 6.712.089 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 100.681 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 6.611.408 5 330.570 **Distributable Amount** (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and Part XT certain foreign organizations check here $\blacktriangleright \Gamma$ and do not complete this part.) 330.570 1 Tax on investment income for 2014 from Part VI, line 5. 3.947 2a Income tax for 2014 (This does not include the tax from Part VI). . . 2c 3.947 3 3 326.623 4 4 5 5 326.623 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 326.623 Part XIII Oualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. 1a 384.191 1b 0 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. 2 2 Ω 3 Amounts set aside for specific charitable projects that satisfy the O За O 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 384,191 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 3,947 380,244 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

the section 4940(e) reduction of tax in those years

	alt XIII Olluisti ibuteu II	iconie (see instruct	uons)			
			(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1	Distributable amount for 2014 fro	om Part VI line 7	Сограз	rears prior to 2015	2013	326,623
		· · · · · · · · · · · · · · · · · · ·				320,023
	Undistributed income, if any, as of Enter amount for 2013 only				0	
				0	0	
		2011 , 2010		Ŭ		
	Excess distributions carryover, if	rany, to 2014				
	From 2009	24,136				
	From 2011	11,970				
	From 2012	11,570				
	From 2013	105,591				
	Total of lines 3a through e		141,697			
	Qualifying distributions for 2014					
4	XII, line 4 🕨 \$					
	Applied to 2013, but not more tha				0	
	Applied to undistributed income of					
U	(Election required—see instruction					
c	Treated as distributions out of co	· ·				
_	required—see instructions)					
d	Applied to 2014 distributable am					326,623
е	Remaining amount distributed out	t of corpus	57,568			
5	Excess distributions carryover a	pplied to 2014				
	(If an amount appears in column (c	d), the				
	same amount must be shown in co.					
6	Enter the net total of each colum	nn as				
	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e	Subtract line 5	199,265			
b	Prior years' undistributed income			0		
	line 4b from line 2b			0		
С	Enter the amount of prior years' un income for which a notice of defici					
	been issued, or on which the sect					
	tax has been previously assessed					
d	Subtract line 6c from line 6b Tax					
	—see instructions			0		
е	Undistributed income for 2013 S					
	4a from line 2a Taxable amount-				0	
£	Undistributed income for 2014 S					
•	lines 4d and 5 from line 1 This ar					
	be distributed in 2015					0
7	Amounts treated as distributions	out of				
	corpus to satisfy requirements im					
	section 170(b)(1)(F) or 4942(g)(
	be required - see instructions). Excess distributions carryover from					
8	applied on line 5 or line 7 (see ins					
9	Excess distributions carryover to					
9	Subtract lines 7 and 8 from line 6		199,265			
10	Analysis of line 9					
	Excess from 2010	24,136				
	Excess from 2011	11,970				
c	Excess from 2012					
d	Excess from 2013	105,591				
е	Excess from 2014	57,568				

Check here F if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

- a The name, address, and telephone number or email address of the person to whom applications should be addressed
- b The form in which applications should be submitted and information and materials they should include
- 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 Inform	nation (continued)			Page 1
3 Grants and Contributions Paid		proved for F	uture Payment	T
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year See Additional Data Table				
Total				369,64
b Approved for future payment	<u> </u>	<u></u>		1 309,04
			Br. 3h	
T-4-1			h. at	i e

Form 990-	PF (2014) I-A Analysis of Income-Produci	na Activitie				Page 12
	s amounts unless otherwise indicated		usiness income	Excluded by section	n 512, 513, or 514	(e)
-	n service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See instructions)
						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
с						
	and contracts from government agencies					
2 Membe 3 Interes	ership dues and assessments st on savings and temporary cash ments			14	27,951	
	nds and interest from securities			14	107,622	
a Debt-	ntal income or (loss) from real estate -financed property.					
6 Net rer	ebt-financed property					
7 Other	nvestment income					
invent	r (loss) from sales of assets other than ory			18	293,498	
10 Gross	ome or (loss) from special events profit or (loss) from sales of inventory					
	revenue a _					
с						
е						
	al Add columns (b), (d), and (e)		<u> </u>		429,071 L3	429,071
(See w	vorksheet in line 13 instructions to verify care. -B Relationship of Activities to	alculations)				<u> </u>
Line No.	Explain below how each activity for whice the accomplishment of the foundation's instructions)	h income is re	ported ın column ((e) of Part XVI-A c	ontributed importa	

****** Signature of officer or trustee Date Date Title Print/Type preparer's name STEVE CIOLINO ****** Date Date Title Check if self- employed ▶ ✓ PO0119215	Form 990-PI	F (2014)										Рa	ge 1 :
section 501(c) of the Code (other than section 501(c)3) organizations or in section 527, relating to political organizations or organizations at a consideration of the code (other than section 501(c) Cash. a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash. (2) Other assets. (3) Cash of the Code (other than section 501(c) Cash organization. (4) Sales of assets to a noncharitable exempt organization. (5) Sales of assets to a noncharitable exempt organization. (6) Other transfers, the content of the code (other than section 501(c) Cash or of the code (other than section 501(c) Cash organization. (6) Identification, explained, making lists, there assets, or passets. (7) Loans or loan guarantees. (8) Loans or loan guarantees. (9) Loans or loan guarantees. (10) Sales of assets or loan guarantees. (10) Sales of assets or loan guarantees. (10) Sales of assets or loan guarantees. (10) Sales of loans or loans organization. (10) Sales of loans organization. (10) Sales of loans organization. (11) Sales of loans organization. (11) Sales of loans organization. (12) Performance of sarvives or membership or fundrians and selections. (13) Sales of loans organization. (14) Remainder organization. (15) Sales of loans organization. (16) Sales of loans organization. (17) Sales of loans organization. (18) Sales of loans organization. (18) Sales of loans organization. (18) Sales of loans organization. (19) Sales of loans organization. (19) Sales of loans organization. (19) Sales of loans organization. (10) Sales of loans organization. (11) Sales of loans organization. (11) Sales of loans organization. (11) Sales of loan	Part XVI						sactio	ns and I	Relationships	With			
a Transfers from the reporting foundation to a noncharitable exempt organization of (3) Cash. (3) Cash. (4) Cash. (5) Losder sessets. (14) Sales of assets to a noncharitable exempt organization. (2) Purchases of assets from a noncharitable exempt organization. (3) Serial of facilities, exemptions, or other assets. (4) Serial officialities, exemptions, or other assets. (5) Losins or loan guaranties. (5) Losins or loan guaranties. (6) Performance of services or membership or fundraising solicitations. (7) Serial officialities, exemptions, mailing lists, other assets, or paid employees. (8) Inter assets, or services given by the reporting foundation if the fundation received less than fair market value of the goods, other assets, or services given by the reporting foundation if the fundation received less than fair market value of the goods, other assets, or services given by the reporting foundation if the fundation received less than fair market value of the goods, other assets, or services given by the reporting foundation if the fundation received less than fair market value of the goods, other assets, or services given by the reporting foundation if the fundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)3)) or in section 5272. (a) Item foo (b) Amine of organization (c) Description of transfers, transactions, and sharing arrangement, show of the code (other than section 501(c)3)) or in section 5272. (a) When of organization or sharing arrangement, show of the code (other than section 501(c)3)) or in section 5272. (b) If Yes Find the following schedule (a) When of organization (b) Type of organization of transfers, transactions, and sharing arrangement of the properties of equity in the properties of equity in the code of the code of the code of the code of the code of the code of the code of the code of the code of the code of the code of the code of the code of the code of the												Yes	No
(1) Sales of assets to a noncharitable exempt organization. (2) Purchases of assets from a noncharitable exempt organization. (3) Restal of facilities, equipment, or other assets. (4) Residuarement arrangements. (5) Losins or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (7) Interest or any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value in any transaction or sharing arrangement, shown column (d) the value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, shown column (d) the value of the goods, other assets, or services received (a) the life of the goods, other assets, or services received (b) the life of the goods, other assets, or services received (b) the life of the goods, other assets, or services received (c) the life of the goods, other assets, or services received (b) the life of the goods, other assets, or services received (c) the life of the goods, other assets, or services received (c) the life of the goods, other assets, or services received (c) the life of the goods, other assets, or services received (c) the life of the goods, other assets, or services received (c) the life of the goods, other assets, or services received (c) the life of the goods, other assets, or services received (c) the life of the goods, other assets, or services received (c) the life of the goods, other assets, or services received (c) the life of the goods, other assets, or services received (c) the life of the goods, other assets, or services received (c) the life of the goods, other assets, or services received (c) the life of the goods, other assets, or services received (c) the life of the goods of the goods of the life of the goods of the life of the good	- · · J - · · · · · · ·												
(2) Other assets. b Other transactions (1) Sales of assets to a nonchantable exempt organization. (2) Purchases of assets from a nonchantable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Rental or facilities, equipment, or other assets. (5) Lonian or ion guarantees. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (7) Lonian or to any or the above is "Ves," complete the following schedule Column (b) should always show the far market value of the goods, other assets, or services given by the reporting foundation if the foundation directly or indirectly alliantee of the goods, other assets, or services given by the reporting foundation if the foundation directly or indirectly alliantee with a property of the column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation directly or indirectly alliantees of the goods, other assets, or services given by the reporting foundation if the foundation directly or indirectly all alliantees of the goods, other assets, or services received (c) the column (b) should always show the fair market value of the goods, other assets, or services received used on the goods, other assets, or services received (c) under the goods, other assets, or services received under the goods, other assets, or services received under the goods, other assets, or services given by the reporting foundation in the foundation directly or indirectly all all all all all all all all all a													١
(1) Sales of assets to a noncharitable exempt organization. (2) Purchases of assets from a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Rental parameter arrangements. (5) Leans or loan guarantees. (6) Performance of services or membership or fundrishing solicitations. (7) Estimate of facilities, equipment, making lists, other assets, or paid employees. (8) It is the answer to any of the above is Yes," complete the following schedule. Column (b) should allows show the fair market value of the goods, other assets, or services given by the reporting foundation in free disease than fair market value in any transaction or sharing arrangement, show in column (c) the value of the goods, other assets, or services received (c) Line No. (6) Unite No. (7) Amount involved. (8) It is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than taxpayer) is based on all interests of maximum of the preparer has any knowledge of the section of the code of the section of the	• •										—		
(3) Sales of assets to a noncharitable exempt organization. (2) Purchases of assets from a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Rembursement arrangements. (5) Leans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (7) Leans or loan guarantees. (8) Performance of services or membership or fundraising solicitations. (8) Performance of services or membership or fundraising solicitations. (9) Performance of services or membership or fundraising solicitations. (10) Intervention and principle of the following solicitations. (10) Intervention and principle of the following solicitations. (11) Intervention and the following solicitations. (12) Intervention or fairing arrangement, show in column (4) the value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (4) the value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (4) the value of the goods, other assets, or services given by the reporting foundation if the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? 1) Yes No little (4) Description of transfers, transactions, and sharing attragements and statements and statements are sections of the section of prepared or prepared to the section of prepared or prepared to the section of prepared or prepared to the section of prepared or prepared to the section of which prepared has any knowledge Under penalties of penjury, I declare that I have exemined this return, including accompanying schedules and statements, and to the best of my knowledge and bellef, it is true, correct, and complete Declaration of prepar											1a(2)		No
(2) Purchases of assets from a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Rembursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (7) Endominate of services or membership or fundraising solicitations. (8) It is not described in section of facilities, equipment, mailing lists, other assets, or paid employees. (8) It is not described in section of sharing arrangements, show in column (4) the value of the goods, other assets, or services given by the reporting foundation if the foundation retrieved less than fair market value in any transaction or sharing arrangement, show in column (4) the value of the goods, other assets, or services received (6) Lie No (7) Amount involved (8) It is foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations, and sharing arrangements described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (8) It is foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (9) English of organization of the sharing arrangements of the section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (9) English of Organization of relationship or the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge 1) Firm's name by Firm's EIN properer's name properer's name properer's signature 2015-05-05 2015-05-05 2015-05-05 2016-05-05 2016-05-05 2017-05-05 2017-05-05 2018-07-07-07-07-07-07-07-07-07-07-07-07-07-			ritable ev	omnt o	raanizatio	n .					16/1)		No
(a) Rental of facilities, equipment, or other assets. (b) Coals or loan guarantees. (c) So Loans or loan guarantees. (d) Performance of services or membership or fundreship or fundreship or fundreship solicitations. (e) Performance of services or membership or fundreship solicitations. 2 Sharing of facilities, equipment, mailing lists, other assets, or paid employees. 2 If the answer to any of the above is "Yes," complete the following a chedule: Column (b) should always show the first market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received use in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Une No (b) Amount involved (c) frame of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements are considered in section 501 (c) of the Code (other than section 501 (c)) or in section 501 (c) Description of seistonships (b) Type of organization (c) Description of seistonships Under penalties of pergury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete to Declaration of preparer (other than texpayer) is based on all information of which preparer has any knowledge Under penalties of pergury, I declare that I have examined this return, including accompanying schedules and statements, and to be some the penalties of the control of preparer (other than texpayer) is based on all information of which											-		
(4) Reimbursement arrangements													_
(S) Loans or loan guarantees. (B) (B) Performance of services or membership or fundraising solicitations. (B) (B) (B) (B) (B) (B) (B) (B) (B) (B)													
(6) Performance of services or membership or fundraising solicitations. c Shaning of facilities, equipment, mailing lists, other assets, or paid employees. d If the answer to any of the above is "Yes," complete the following schedule of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market value in any transaction or shaning arrangement, show in column (d) the value of the goods, other assets, or services eviewed (a) Line No (b) Amount involved (c) Name of ronchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements seekers of services eviewed (a) Line No (b) Amount involved (c) Name of ronchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b) If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationships Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of													\vdash
c Sharing of facilities, equipment, mailing lists, other assets, or pard employees													No
All fithe answer to any of the above is. "Yes," complete the following schedule of the goods, other assets, or services upon by the reporting foundation. If the foundation received less than rarriest value of the goods, other assets, or services upon the proporting foundation. If the foundation received less than rarriest value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of nonchantable exempt organization of transfers, transactions, and sharing arrangements. (a) Line No (b) Amount involved (c) Name of nonchantable exempt organization of transfers, transactions, and sharing arrangements of the proposed in the proposed in the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											<u> </u>		No
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section \$01(c) of the Code (other than section \$01(c)(3)) or in section \$27?	of the go in any tra	ods, other assets, or se ansaction or sharing arr	rvices giv angement	en by t , show	the report in columr	ing foundation o (d) the value o	If the fou of the go	undation r ods, other	eceived less thar assets, or servic	n fair marke ces receive	et value ed	•	nts
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	(a) Ellic No	(b) Amount involved	(c) Name	OT HOTICI	nantable ex	cmpt organization	(u)	Description	or transfers, transact	10113, dild 3110	ining arra	ngemer	
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?													
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?													
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?													
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?													
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?							1						
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?							 						
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?							+						
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?													
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?													
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?													
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?							-						
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?							+						
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge ****** Signature of officer or trustee Date Title	describe	d in section 501(c) of the complete the following	he Code (d schedule		nan sectio	on 501(c)(3)) o	rın secti	-				es F	
the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge ****** Signature of officer or trustee Date Title		(a) Name of organizatio	<u>n</u>		(b) Type of organiz	ation		(c) Descrip	otion of relati	onsnip		
the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge ****** Signature of officer or trustee Date Title													
the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge ****** Signature of officer or trustee Date Title													
the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge ****** Signature of officer or trustee Date Title													
the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge ****** Signature of officer or trustee Date Title													
Here Signature of officer or trustee Date Title	the	best of my knowledge a ormation of which prepa	and belief,	ıt ıs tr	ue, correc	t, and complete	Declar			in taxpaye	r) is ba:	sed on	all
Print/Type preparer's name STEVE CIOLINO Preparer Use Only Signature of officer or trustee Date Title Check if self-employed ► ✓ PTIN P00119215 Print/Type preparer's name Preparer's Signature STEVE CIOLINO Preparer Firm's name ► STEVE CIOLINO CPA JD Firm's address ► Prim's address ► Prim's address ► Prim's address ► Phone no (847) 441-0036	Here	*****				2015-05-05	\	*****		return			
Print/l ype preparer's name STEVE CIOLINO Paid Preparer's Signature employed Firm's name Firm's EIN Firm's EIN Firm's address Firm's address Firm's address Firm's address Firm's BELL ROAD SUITE 13 PHOENIX, AZ Phone no (847) 441-0036		Signature of officer or t	rustee			Date	_ ,	Title		below	•		
Preparer Use Only Firm's address 1107 E BELL ROAD SUITE 13 PHOENIX, AZ Phone no (847) 441-0036		1	name	Prepa	arer's Sıgı	nature	Date		· —		00119	_ 215	
Only Firm's address 1107 E BELL ROAD SUITE 13 PHOENIX, AZ Phone no (847) 441-0036	-	STEVE CIOLINO CP	A JD	l			ı		Firm's EIN ►	1			
1107 E BELL ROAD SUITE 13 PHOENIX, AZ Phone np (847) 441-0036													
	,	1	SUITE 13	PHOI	ENIX, AZ				Phone no (847	()441-003	36		

			ne rear or Approved for i	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
WILDERNESS WORKSHOP PO BOX 1442 CARBONDALE,CO 81627	N/A	PC	OPERATING FUNDS	500
MONTANA JUSTICE FOUNDATION 111 N HIGGINS 516 MISSOULA,MO 59802	N/A	PC	OPERATING FUNDS	500
ALPINE THEATER PROJECT PO BOX 1959 WHITEFISH,MT 59937	N/A	PC	OPERATING FUNDS	1,500
MT ENVIRONMENTAL INFO CENTER 107 LAWRENCE N-6 HELENA,MT 59601	N/A	PC	OPERATING FUNDS	200
ACLU OF MT FOUNDATION PO BOX 1317 HELENA,MT 59624	N/A	PC	OPERATING FUNDS	100,000
WHITEFISH LAKE INSTITUTE 635 DENVER STREET WHITEFISH,MT 59937	N/A	PC	OPERATING FUNDS	560
WHITEFISH THEATER INSTITUTE 1 CENTRAL AVENUE WHITEFISH,MT 59937	N/A	PC	OPERATING FUNDS	1,000
FLATHEAD LAND TRUST PO BOX 1913 KALISPELL,MT 59903	N/A	PC	OPERATING FUNDS	50
MONTANA INNOCENCE PROJECT PO BOX7607 MISSOULA,MT 59807	N/A	PC	OPERATING FUNDS	150,000
GLACIER SYMPHONY PO BOX 2491 KALISPELL,MT 59903	N/A	PC	OPERATING FUNDS	1,500
CITIZENS FOR A BETTER FLATHEAD 35 4TH ST WEST KALISPELL,MT 59903	N/A	PC	OPERATING FUNDS	3,000
MT HUMAN RIGHTS NETWORK PO BOX 1509 HELENA,MT 59624	N/A	PC	OPERATING FUNDS	5,000
DYSTONIA MEDICAL RESEARCH FOUNDATION ONE E WACKER DR SUITE 2430 CHICAGO,IL 60601	N/A	PC	OPERATING FUNDS	1,500
SKOKIE NORTHSHORE SCULPTURE PARK 9351 KEELER AVE SKOKIE,IL 60076	N/A	PC	OPERATING FUNDS	1,667
BAY AREA WILDERNESS TRAINING 1050 E 8TH STREET OAKLAND,CA 94606	N/A	PC	OPERATING FUNDS	250
Total				369,641

			are rear or Approved for t	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
WHITEFISH FIGURE SKATING CLUB PO BOX 4593 WHITEFISH,MT 59937	N/A	PC	OPERATING FUNDS	250
FLATHEAD LAKERS PO BOX 70 POLSON,MT 59860	N/A	PC	OPERATING FUNDS	50
WATSON CHILDREN'S SHELTER 4978 BUCKHOUSE LANE MISSOULA,MT 59804	N/A	PC	OPERATING FUNDS	500
LEAGUE TO SAVE LAKE TAHOE 2608 LAKE TAHOE BLVD SOUTH LAKE TAHOE,CA 96150	N/A	PC	OPERATING FUNDS	2,000
ILLINOIS NETWORK OF CHARTER SCHOOLS 150 N MICHIGAN AVE 430 CHICAGO,MT 59717	N/A	PC	OPERATING FUNDS	1,500
CENTER FOR MUSIC BY PEOPLE WITH DISABILITIES 415 W CENTRAL MISSOULA,MT 59801	N/A	PC	OPERATING FUNDS	500
ARLEE COMMUNITY DEVELOPMENT CORP PO BOX 452 ARLEE,MT 59821	N/A	PC	OPERATING FUNDS	20,000
CENTURION MINISTRIES 221 WITHERSPOON PRINCETON,NJ 08542	N/A	PC	OPERATING FUNDS	20,000
KIDS FOR THE BAY 1711 ALCATRAZ AVE BERKELEY,CA 94703	N/A	PC	OPERATING FUNDS	3,000
NORTH VALLEY FOOD BANK 251 FLATHEAD AVENUE WHITEFISH,MT 59937	N/A	PC	OPERATING FUNDS	10,000
WORC-WESTERN ORG OF RESOURCE COUNCIL 220 S 27TH STREET BILLINGS,MT 59101	N/A	PC	OPERATING FUNDS	500
MT BUDGET & POLICY CENTER 910 E LYNDALE SUITE A HELENA, MT 59101	N/A	PC	OPERATING FUNDS	500
GLACIER TWINS PO BOX 2007 WHITEFISH,MT 59937	N/A	PC	OPERATING FUNDS	2,264
FORWARD MONTANA FOUNDATION 136 E BROADWAY SUITE 1 MISSOULA,MT 59715	N/A	PC	OPERATING FUNDS	1,000
ACLU OF NORTH CALIFORNIA 39 DRUMM STREET SAN FRANCISCO,CA 94111	N/A	PC	OPERATING FUNDS	10,000
Total				369,641

Name and address (home or business) a Paid during the year MARINE MAMMAL FOUNDATION 2240 SHELTER ISLAND DRIVE 200 SAN DIEGO, CA 92106 TRANSCENDENCE THEATRE COMPANY 2400 LONDON RANCH ROAD GLEN ELLEN, CA 95442 VALLEY OF THE MOON NATURAL HISTORY ASSOCIATION 2400 LONDON RANCH ROAD GLEN ELLEN, CA 95442 MONTANA LAND RELIANCE PO BOX 355 HELENA, MT 59624 WHITEFISH LEGACY PARTNERS PO BOX 1895 WHITEFISH, MT 59937 CASA OF MISSOULA 412 WALDEN STREET MISSOULA, MT 59802 FRIENDS OF THE URBAN FOREST 1007 GENERAL KENNEDY AVENUE SAN FRANCISCO, CA 94129	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	A mount
a Paid during the year MARINE MAMMAL FOUNDATION 2240 SHELTER ISLAND DRIVE 200 SAN DIEGO, CA 92106 TRANSCENDENCE THEATRE COMPANY 2400 LONDON RANCH ROAD GLEN ELLEN, CA 95442 VALLEY OF THE MOON NATURAL HISTORY ASSOCIATION 2400 LONDON RANCH ROAD GLEN ELLEN, CA 95442 MONTANA LAND RELIANCE PO BOX 355 HELENA, MT 59624 WHITEFISH LEGACY PARTNERS PO BOX 1895 WHITEFISH, MT 59937 CASA OF MISSOULA 412 WALDEN STREET MISSOULA, MT 59802 FRIENDS OF THE URBAN FOREST 1007 GENERAL KENNEDY AVENUE SAN FRANCISCO, CA 94129		status of	contribution	
MARINE MAMMAL FOUNDATION 2240 SHELTER ISLAND DRIVE 200 SAN DIEGO, CA 92106 TRANSCENDENCE THEATRE COMPANY 2400 LONDON RANCH ROAD GLEN ELLEN, CA 95442 VALLEY OF THE MOON NATURAL HISTORY ASSOCIATION 2400 LONDON RANCH ROAD GLEN ELLEN, CA 95442 MONTANA LAND RELIANCE PO BOX 355 HELENA, MT 59624 WHITEFISH LEGACY PARTNERS PO BOX 1895 WHITEFISH, MT 59937 CASA OF MISSOULA 412 WALDEN STREET MISSOULA, MT 59802 FRIENDS OF THE URBAN FOREST 1007 GENERAL KENNEDY AVENUE SAN FRANCISCO, CA 94129	any foundation manager or substantial contributor	recipient		
2240 SHELTER ISLAND DRIVE 200 SAN DIEGO, CA 92106 TRANSCENDENCE THEATRE COMPANY 2400 LONDON RANCH ROAD GLEN ELLEN, CA 95442 VALLEY OF THE MOON NATURAL HISTORY ASSOCIATION 2400 LONDON RANCH ROAD GLEN ELLEN, CA 95442 MONTANA LAND RELIANCE PO BOX 355 HELENA, MT 59624 WHITEFISH LEGACY PARTNERS PO BOX 1895 WHITEFISH, MT 59937 CASA OF MISSOULA 412 WALDEN STREET MISSOULA, MT 59802 FRIENDS OF THE URBAN FOREST 1007 GENERAL KENNEDY AVENUE SAN FRANCISCO, CA 94129				
COMPANY 2400 LONDON RANCH ROAD GLEN ELLEN, CA 95442 VALLEY OF THE MOON NATURAL HISTORY ASSOCIATION 2400 LONDON RANCH ROAD GLEN ELLEN, CA 95442 MONTANA LAND RELIANCE PO BOX 355 HELENA, MT 59624 WHITEFISH LEGACY PARTNERS PO BOX 1895 WHITEFISH, MT 59937 CASA OF MISSOULA 412 WALDEN STREET MISSOULA, MT 59802 FRIENDS OF THE URBAN FOREST 1007 GENERAL KENNEDY AVENUE SAN FRANCISCO, CA 94129	I/A	PC	OPERATING FUNDS	500
HISTORY ASSOCIATION 2400 LONDON RANCH ROAD GLEN ELLEN, CA 95442 MONTANA LAND RELIANCE PO BOX 355 HELENA, MT 59624 WHITEFISH LEGACY PARTNERS PO BOX 1895 WHITEFISH, MT 59937 CASA OF MISSOULA 412 WALDEN STREET MISSOULA, MT 59802 FRIENDS OF THE URBAN FOREST 1007 GENERAL KENNEDY AVENUE SAN FRANCISCO, CA 94129	I/A	PC	OPERATING FUNDS	2,000
BOX 355 HELENA, MT 59624 WHITEFISH LEGACY PARTNERS PO BOX 1895 WHITEFISH, MT 59937 CASA OF MISSOULA 412 WALDEN STREET MISSOULA, MT 59802 FRIENDS OF THE URBAN FOREST 1007 GENERAL KENNEDY AVENUE SAN FRANCISCO, CA 94129	I/A	PC	OPERATING FUNDS	500
BOX 1895 WHITEFISH, MT 59937 CASA OF MISSOULA 412 WALDEN STREET MISSOULA, MT 59802 FRIENDS OF THE URBAN FOREST 1007 GENERAL KENNEDY AVENUE SAN FRANCISCO, CA 94129	I/A	PC	OPERATING FUNDS	200
STREET MISSOULA,MT 59802 FRIENDS OF THE URBAN FOREST 1007 GENERAL KENNEDY AVENUE SAN FRANCISCO,CA 94129	I/A	PC	OPERATING FUNDS	1,000
1007 GENERAL KENNEDY AVENUE SAN FRANCISCO, CA 94129	I/A	PC	OPERATING FUNDS	200
CORAL REFEALLIANCE 37 N	I/A	PC	OPERATING FUNDS	300
PLEASANT STREET CAMBRIDGE, MA 02139	I/A	PC	OPERATING FUNDS	1,000
MONTANA FOOD BANK NETWORK N. 5625 EXPRESSWAY MISSOULA,MT 59808	I/A	PC	OPERATING FUNDS	15,000
MONTANA PUBLIC RADIO 32 N. CAMPUS DRIVE MISSOULA,MT 59812	I/A	PC	OPERATING FUNDS	100
HARTWICK COLLEGE PO BOX 4020 NO NEONTA, NY 13820	I/A	PC	OPERATING FUNDS	50
WHITEFISH COMMUNITY FOUNDATION PO BOX 1060 WHITEFISH, MT 59937	I/A	PC	OPERATING FUNDS	1,000
5 GYRES 550 E RUSTIC ROAD N SANTA MONICA, CA 90402	N/A	PC	OPERATING FUNDS	250
HABITAT FOR HUMANITY 121 HABITAT STREET AMERICUS,GA 31709	I/A	PC	OPERATING FUNDS	100
CITY STAGE 801 E 4TH PLACE NOT NOT NOT NOT NOT NOT NOT NOT NOT NOT	N/A	PC	OPERATING FUNDS	5,000
Total				369,641

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
FVCC FOUNDATION 777 GRANDVIEW DRIVE KALISPELL,MT 59901	N/A	PC	OPERATING FUNDS	3,000	
THE WAVE PO BOX 17201 MISSOULA,MT 59808	N/A	PC	OPERATING FUNDS	150	
Total				369,641	

DLN: 93491131019345

OMB No 1545-0123

Department of the Treasury Internal Revenue Service

Sales and Other Dispositions of Capital Assets

▶ Information about Form 8949 and its separate instructions is at www.irs.gov/form8949. ▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Name(s) shown on return

Social security number or taxpayer identification number

20-1674794

Adjustment if any to gain or loss

Before you check Box A, B, or C below, check whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later).

Part I Short-Term. Transactions involving capital assets you held 1 year or less are short term. For long-term transactions, see page 2.

Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which NO adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

- (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (B) Short-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS
- (C) Short-term transactions not reported to you on Form 1099-B

(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr)	(c) Date sold or disposed (Mo , day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column (e)</i> In the separate Instructions	If you enter a	if any, to gain or loss an amount in column (g), code in column (f) parate instructions (g) Amount of adjustment	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
SEE STATEMEN		12-31-2014	42,857	(42,876)			-19
2 Totals Add the amounts in colun (subtract negative amounts) Ente include on your Schedule D, line 11 checked), line 2 (if Box B above is C above is checked)	r each total her b (ıf Box A abov	e and e ıs ıe 3 (ıf Box	42,857	(42,876)			-19
Note If you checked Box A above			DC was inserrest	antarın salumn	'a) tha hac	us as reported t	o the IDS and

Note. If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on other side THEANGORA RIDGE FOUNDATION

Social security number or taxpayer identification number 20-1674794

Before you check Box D, E, or F below, check whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later).

Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which NO adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr)	(c) Date sold or disposed (Mo, day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column</i> (e) in the separate instructions	If you enter a	arf any, to gain or loss an amount in column (g), code in column (f) aparate instructions (g) Amount of adjustment	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
SEE STATEMEN		12-31-2014	304,321	(209,521)			94,800
1							
2 Totals Add the amounts in colur (subtract negative amounts) Ente include on your Schedule D, line 8 checked), line 9 (if Box E above is Box F above is checked) Note, If you checked Box D above	reach total her (If Box D abov checked), or lin	e and e ıs e 10 (ıf ►	304,321	` ' '			94,800

Part II Long-Term. Transact transactions, see page Note. You may aggree the IRS and for which are not required to re	e 1. egate all long: i NO adjustmo	-term transac ents or codes	ctions reported are required. I	on Form(s) 109 Enter the total o	9-B shov	, wing basis was	reported to
You must check Box D, E, or F below Form 8949, page 2, for each application complete as many forms with the same	able box If you	ı have more loı	ng-term transacti				
(D) Long-term transactions re	ported on Form	(s) 1099-B sh	owing basis was r	eported to the IRS	5 (see No t	te above)	
(E) Long-term transactions re						•	
(F) Long-term transactions no			_	·			
1 (a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired	(c) Date sold or disposed	(d) Proceeds (sales price)	(e) Cost or other basis See the Note below and see <i>Column (e)</i>	If you enter	, if any, to gain or loss an amount in column (g), code in column (f) eparate instructions	(h) Gain or (loss). Subtract column (e) from column (d)
(Example 100 off 7/12 of)	(Mo , day, yr)	(Mo , day, yr)	(see instructions)	ın the separate ınstructions	(f) Code(s) from instructions	(g) Amount of adjustment	and combine the result with column (g)
SEE STATEMEN		12-31-2014	639,588	(460,659)			178,929

2 Totals Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, **line 8b** (if **Box D** above is

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491131019345
TV 2014 All Other Dresses		

TY 2014 All Other Program **Related Investments Schedule**

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Name: THE ANGORA RIDGE FOUNDATION

Category	Amount
NONE	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93491131019345

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2014 Depreciation Schedule

Name: THE ANGORA RIDGE FOUNDATION

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491131019345

TY 2014 Other Assets Schedule

Name: THE ANGORA RIDGE FOUNDATION

Description	Beginning of Year -	End of Year - Book	End of Year - Fair
	Book Value	Value	Market Value
INTEREST/DIVIDEND/SALE REC	1,562	15,289	15,289

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491131019345

TY 2014 Other Expenses Schedule

Name: THE ANGORA RIDGE FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MCV	1,000			

TY 2014 Other Professional Fees Schedule

Name: THE ANGORA RIDGE FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT ADVISORY FEES	30,255	30,255		
THE PRIVATE BANK FEES	1,079	1,079		
ACCOUNTING FEES	1,125	1,125		
GLACIER BANK FEES	74	74		
PHILANTHROPY NORTHWEST DUES	2,050			2,050
THE POLICY INSTITUTE	10,000			10,000
BROWNING SYMPOSIUM	2,500			2,500

TY 2014 Taxes Schedule

Name: THE ANGORA RIDGE FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	903	903		
FEDERAL EXCISE TAX	890	890		

THE PRIVATE BANK AND TRUST COMPANY 120 S LASALLE ST., 7TH FLOOR Payer's Name and Address: CHICAGO, IL 60603

2nd TIN notice 1040007428 36-3722148 20-1674794 Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: Account Number: Corrected State:

ANGORA RIDGE FOUNDATION INC Recipient's Name and Address: WINNETKA, IL 60093 555 CHERRY ST

Page 8 of 32

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums.

Covered (Box 5 is not checked) Description of property

(Box 1a)

State Tax Withheld (Box 16)	00.0	0.00	0.00		0.00	00.0	0.00	0.00
Federal Income Tax Withheld (Box 4)	00'0	00:0	0.00		0.00	0.00	00.0	00.0
Net Gain or Loss	1,272,08	-1,291.22	-19.14		5,419.75	6,242.08	5,625.68	5,205.48
Adjustments (Box 1g)	00'0	00.0	0.00		00.00	0.00	00.0	0.00
Code if any (Box 1f)		***************************************					, a a a a a a a a a a a a a a a a a a a	
Cost or Other Basis (Box 1e)	22,577.98	20,297.80	42,875.78		6,672.99	8,264.60	9,087.00	13,620.30
Proceeds (Box 1d)	23,850.06	19,006.58	42,856.64		12,092.74	14,506.68	14,712.68	18,825.78
Form 8949 Checkbox	A CHINES	A. 19,00			D. 12,09	D 14,50	Q	037833100 05/28/2014 02/25/2013 D 18,82
Date Acquired (Box 1b)	P rious IINESS MA	06/05/2013	on 1099-B th Box A checker	99-B O PARTS INC	10/24/2012 O PARTS INC	08/23/2013 hemicals	04/18/2011 ER INC.	02/25/2013
Date Sold or Disposed (Box 1c)	Short Term Sales Reported on 1099-8 400.0 DEVON ENERGY CORP 25179M103 01/30/2014 Various A. 100.0 INTERNATIONAL BUSINESS MACHINES	459200101 05/07/2014 06/05/2013	Total Short Term Sales Reported on 1099-B Report on Form 8949, Part I, with Box A checked	Long Term Sales Reported on 1099-B 100.0 ADVANCED AUTO PARTS INC	05/28/2014 10/24/2012 ADVANCED AUTO PARTS INC	11/24/2014 08/23/2013 Air Products & Chemicals	12/30/2014 04/18/2011 APPLE COMPUTER INC.	05/28/2014
Cusip Number	Short Term Sal 400.0 25179M103 100.0	459200101	Total Short Ter Report on For	Long Term Sale 100.0	100.0	00751Y106	009158106	037833100



THE PRIVATE BANK AND TRUST COMPANY 120 S LASALLE ST., 7TH FLOOR CHICAGO, IL 60603 Payer's Name and Address:

1040007428 36-3722148 20-1674794 크 Account Number: Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: State:

Recipient's Name and Address: ANGORA RIDGE FOUNDATION INC 555 CHERRY ST WINNETKA, IL 60093

Page 9 of 32

2nd TIN notice Corrected

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums. Covered (Box 5 is not checked)

(Box 1a) Description of property

Cusip Number	Date Sold or Disposed	Date Acquired	Form 8949 Checkbox	Proceeds	Cost or Other Basis	Code if any	Adjustments	Net Gain or Loss	Federal Income Tax Withheld	State Tax Withheld
200.0	(Box 1c) AUTOLIV INC	(Box 1b)		(Box 1d)	(Box 1e)	(Box 1f)	(Box 1g)		(Box 4)	(Box 16)
052800109	05/28/2014 Various		D 21,01	21,019.54	13,836.89		0.00	7,182.66	0.00	0.00
600.0	AUTOLIV INC									
052800109	09/09/2014 Various		a	60,951.69	38,269.79		00.0	22,681.90	00.0	0.00
100.0	BARD C R INC CAP	۵.								
067383109	05/28/2014 04/15/2011	04/15/2011	٥	14,714.68	10,229.97		00.0	4,484.71	00.0	0.00
200.0	BECTON DICKINSON & CO.	ON & CO.								
075887109	11/24/2014 Various		Q	26,183.42	19,460.44		00.0	6,722.98	0.00	0.00
0.5	COMMERCE BANCSHARES, INC.	CSHARES, INC.								
200525103	12/30/2014 06/28/2013	06/28/2013	۵	21.41	19.74	2	0.00	1.67	0.00	0.00
100.0	DEERE & CO.									
244199105	11/24/2014	11/24/2014 06/28/2013 D		8,682.80	8,328.99		0.00	353.81	00.0	0.00
500.0	DENTSPLY INTER	DENTSPLY INTERNATIONAL INC. NEW	IEW							
249030107	09/09/2014	09/09/2014 Various D	- 1	23,617.87	18,731.35		0.00	4,886.52	00.0	0.00
200.0	DONAL DSON INC	,,								
257651109	257651109 09/09/2014 04/15/2013 D 8,34	04/15/2013	D	8,346.71	7,041.98	1	00.0	1,304.73	00.0	00.0

This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. The taxpayer is ultimately responsible for the accuracy of their own tax return.

Payer's Name and Address: THE PRIVATE BANK AND TRUST COMPANY 120 S LASALLE ST., 7TH FLOOR CHICAGO, IL 60603

Account Number: 1040007428
Recipient's Tax ID Number: 20-1674794
Payer's Federal ID Number: 36-3722148
Payer's State ID Number: IL

Recipient's Name and Address: ANGORA RIDGE FOUNDATION INC 555 CHERRY ST WINNETKA, IL 60093

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Corrected 2nd TIN notice

OMB No. 1545-0715

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

Reported to the IRS is proceeds less commissions and option premiums.

Covered (Box 5 is not checked)

Description of property (Box 1a)

Cusip Number	Date Sold or Disposed	Date Acquired	Form 8949 Checkbox	Proceeds	Cost or Other Basis	Code if any	Adjustments	Net Gain or Loss	Federal Income Tax Withheld	State Tax Withheld
300.0	(Box 1c) (Box 1a EMERSON ELECTRIC CO.	(Box 1b) TRIC CO.		(Box 1d)	(Box 1e)	(Box 11)	(Box 1g)		(Box 4)	(Box 16)
291011104	291011104 11/24/2014 Various	Various	D 19,652.59	19,652.59	16,923.00	1	00.00	2,729.59	00.0	0.00
200.0	EMERSON ELECTRIC CO.									
291011104	12/22/2014	291011104 12/22/2014 06/05/2013 D 12,457.04	٥	12,457.04	11,198.00		0.00 1,259.04 0.00	1,259.04		0.00
100.0	SIGMA ALDRICH CORP	CORP								
826552101	826552101 11/24/2014 10/24/2012	10/24/2012	D	13,622.98	7,069.00		00.0	6,553.98	00.00	0.00
100.0	ST JUDE MED INC	ឬ								
790849103	06/04/2014	06/04/2014 04/18/2011 D 6,480.83	۵	6,480.83	5,201.00	# C C C C C C C C C C C C C C C C C C C	0.00	1,279.83	00.0	0.00
200.0	TIME WARNER CABLE INC.	ABLE INC.								
88732J207	88732J207 05/02/2014 05/03/2011	. 05/03/2011	D 28,431.23	28,431.23	15,565.60		0.00	12,865.63	00.0	0.00
Total Long Ten	Total Long Term Sales Reported on 1099-B	on 1099-B		304,320.67	209,520.64		0.00	94,800.04	0.00	0.00

Report on Form 8949, Part II, with Box D checked



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ANGORA RIDGE FOUNDATION INC

555 CHERRY ST WINNETKA, IL 60093

Recipient's Name and Address:

Account Number: 1040007428
Recipient's Tax ID Number: 20-1674794
Payer's Federal ID Number: 36-3722148
Payer's State ID Number: IL

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

2nd TIN notice

Corrected

THE PRIVATE BANK AND TRUST COMPANY 120 S LASALLE ST., 7TH FLOOR

CHICAGO, IL 60603

Payer's Name and Address:

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums.

For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS.

Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated.

Description of property (Box 1a)

CUSIP Number	Date Sold or Disposed	Date Acquired	Form 8949 Checkbox	Proceeds	Cost or Other Basis	Code if any	Adjustments	Net Gain or Loss	Federal Income Tax Withheld	State Tax Withheld
	(Box 1c)	(Box 1b)		(Box 1d)	(Box 1e)	(Box 1f)	(Box 1g)		(Box 4)	(Box 16)
Long Term Sale 0.666	Long Term Sales Reported on 1099-B 0.666 CDK GLOBAL INC	99-B								
12508E101	01 10/08/2014 04/21/2008		ш	18.13	10.84		00.0	7.29	00.0	0.00
200.0	CONOCOPHILLIPS	S								
20825C104	06/04/2014	06/04/2014 09/19/2007 E	E 15,93	15,939.66	13,430.68		00:0	2,508.98	00.0	0.00
100.0	DEERE & CO.									
244199105	12/22/2014	12/22/2014 12/14/2009	E 8,98	8,983.70	5,297.50	1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	00:0	3,686.20	0.00	0.00
700.0	DEVON ENERGY CORP	CORP								
25179M103	01/30/2014 Various	Various	E 41,73	41,737.62	49,288.45		00.0	-7,550.83	00:0	0.00
325.0	DONALDSON INC	O								
257651109	09/09/2014 12/14/2009	12/14/2009	E 13,56	13,563.41	6,960.41		0.00	6,603.00	00:0	0.00
375.0	DONALDSON INC	O								
257651109	09/10/2014	09/10/2014 Various E		15,587.35	6,989.57		00.0	8,597.78	00.0	0.00
50000.0	FEDERAL HOME	FEDERAL HOME LOAN BANK 5.625% 06/11/2021	5% 06/11/2021							
3133XFKF2	06/04/2014	01/13/2010	06/04/2014 01/13/2010 E 60,338.10	60,338.10	53,644.39		0.00	6,693.71	6,693.71 0.00 0.00	0.00
					***************************************		:	*******************	40° **************************	*****************



2nd TIN notice 1040007428 20-1674794 36-3722148 Account Number: Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: Corrected State:

ANGORA RIDGE FOUNDATION INC Recipient's Name and Address: 555 CHERRY ST WINNETKA, IL 60093

Payer's Name and Address: THE PRIVATE BANK AND TRUST COMPANY 120 S LASALLE ST., 7TH FLOOR CHICAGO, IL 60603

For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS, Reported to the IRS is proceeds less commissions and option premiums.

Description of property (Box 1a)

Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated.

CUSIP Number	Date Sold or Disposed	Date Acquired	Form 8949 Checkbox	Proceeds	Cost or Other Basis	Code if any	Adjustments	Net Gain or Loss	Federal Income Tax Withheld	State Tax Withheld
1028.59	(Box 1c) (Box 1b) GNMA POOL# 714555 4.5% 06/15/2039	(Box 1b) 4555 4.5% 06/1!	5/2039	(Box 1d)	(Box 1e)	(Box 1f)	(Box 1g)		(Box 4)	(Box 16)
36297KZU8	01/31/2014 06/13/2011 E	06/13/2011		1,028.59	1,092.88		0.00	-64.29	0.00	0.00
406.36	GNMA POOL# 714555 4.5% 06/15/2039	4555 4.5% 06/1	5/2039							
36297KZU8	03/17/2014 06/13/2011 E	06/13/2011	ш	406.36	431.76	***************************************	00:0	-25.40	0.00	0.00
772.9	GNMA POOL# 714555 4.5% 06/15/2039	4555 4.5% 06/1!	5/2039							
36297KZU8	04/15/2014 06/13/2011 E	06/13/2011	щ	772.90	821.21		0.00	48.31	00.0	0.00
900.77	GNMA POOL# 714555 4.5% 06/15/2039	4555 4.5% 06/1	5/2039							
36297KZU8	05/15/2014	06/13/2011	05/15/2014 06/13/2011 E 90	900.77	957.07		00.0	-56.30	00.0	0.00
802.19	GNMA POOL# 714555 4.5% 06/15/2039	4555 4.5% 06/1	5/2039							
36297KZU8	U8 06/16/2014 06/13/2011 E	06/13/2011	i	802.19	852.33		0.00	-50.14	00.0	0.00
717.38	GNMA POOL# 714555 4.5% 06/15/2039	4555 4.5% 06/1								
36297KZU8	07/15/2014 06/13/2011 E	06/13/2011	ш	717.38	762.22		0.00	44.84	00.0	0.00
671.97	GNMA POOL# 714555 4.5% 06/15/2039	4555 4.5% 06/1	5/2039							
36297KZU8	08/15/2014 06/13/2011 E	06/13/2011		671.97	713.97	***************************************	00.0	-42.00	00.0	0.00
868.98	GNMA POOL# 714555 4.5% 06/15/2039	4555 4.5% 06/1	5/2039							
36297KZU8	09/15/2014 06/13/2011 E	06/13/2011		868.98	923.29	***************************************	0.00	-54.31	00.0	0.00
666.34	GNMA POOL# 714555 4.5% 06/15/2039	4555 4.5% 06/1	5/2039							
36297KZU8	10/15/2014	06/13/2011	36297KZU8 10/15/2014 06/13/2011 E	666.34	707.99	***************************************	0.00	-41.65	00.0	00.0

noncovered securities shown on this statement, cost basis information is not being reported to the Internal Revenue Service. The taxpayer is ultimately This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. For

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ANGORA RIDGE FOUNDATION INC Recipient's Name and Address: 555 CHERRY ST WINNETKA, IL 60093 2nd TIN notice 1040007428 36-3722148 20-1674794 = Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: Account Number: Corrected State:

Reported to the IRS is proceeds less commissions and option premiums.

THE PRIVATE BANK AND TRUST COMPANY

Payer's Name and Address:

120 S LASALLE ST., 7TH FLOOR

CHICAGO, IL 60603

For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS.

Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated.

Description of property (Box 1a)

CUSIP Number	Date Sold or Disposed	Date Acquired	Form 8949 Checkbox	Proceeds	Cost or Other Basis	Code if any	Adjustments	Net Gain or Loss	Federal Income Tax Wittheld	State Tax Withheld
638.25	(Box 1c) (Box 1b) GNMA POOL# 714555 4.5% 06/15/2039	(Box 1b) 4555 4.5% 06/19	5/2039	(Box 1d)	(Box 1e)	(Box 1f)	(Box 1g)		(Box 4)	(Box 16)
36297KZU8	11/17/2014	11/17/2014 06/13/2011 E		638.25	678.14	*****	0.00	-39.89	0.00	0.00
610.59	GNMA POOL# 714555 4.5% 06/15/2039	4555 4.5% 06/1	5/2039							
36297KZU8	12/15/2014 06/13/2011 E	06/13/2011		610.59	648.75		00.00	-38.16	0.00	0.00
576.06	GNMA POOL# 714555 4.5% 06/15/2039	4555 4.5% 06/1!	5/2039							
36297KZU8	12/31/2014 06/13/2011 E	06/13/2011	ш	576.06	612.06	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	0.00	-36.00	00.0	0.00
300.0	ILLINOIS TOOL WORKS, INC.	ORKS, INC.								
452308109	11/24/2014 07/05/2007	07/05/2007	ш	28,751.39	16,660.50	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0.00	12,090.89	00.0	0.00
1900.0	INTEL CORP. CAPITAL STOCK	ITAL STOCK								
458140100	06/06/2014	06/06/2014 Various E		52,933.01	38,290.50		00.0	14,642.51	0.00	0.00
400.0	INTERNATIONAL BUSINESS MACHINES	BUSINESS MACH	HINES							
459200101	07/22/2014 Various	Various		77,586.92	47,834.60		0.00	29,752.32	0.00	0.00
800.0	SIGMA ALDRICH CORP									
826552101	11/24/2014 Various	Various	Ц	108,983.83	38,432.71		0.00	70,551.12	00.0	0.00
800.0	ST JUDE MED INC	0								
790849103	06/04/2014 Various E	Various	E	51,846.61	31,432.88		0.00	20,413.73	00.0	0.00
113380.0	US TREASURY INFL INDEX 1.625% 01/15/201	VFL INDEX 1.625	% 01/15/201							
912828HN3	07/22/2014	Various	07/22/2014 Various E	122,851,58	110,612.37		0.00	12,239.21	0.00	0.00



ANGORA RIDGE FOUNDATION INC Recipient's Name and Address: WINNETKA, IL 60093 555 CHERRY ST 2nd TIN notice 1040007428 20-1674794 36-3722148 Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: Account Number: Corrected State: THE PRIVATE BANK AND TRUST COMPANY 120 S LASALLE ST., 7TH FLOOR Payer's Name and Address: CHICAGO, IL 60603

For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS. Reported to the IRS is proceeds less commissions and option premiums.

Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated.

Description of property (Box 1a)

CUSIP Number	Date Sold Date or Disposed Acquired	Date Acquired	Form 8949 Checkbox	Proceeds	Cost or Other Basis	Code íf any	Adjustments	Net Gain or Loss	Federal Income Tax Withheld	State Tax Withheld
25000.0	(Box 1c) (Box 1b) US TREASURY BONDS 5.25	(Box 1c) (Box 1b) US TREASURY BONDS 5.25% 02/15/2029	15/2029	(Box 1d)	(Box 1e)	(Box 1f)	(Box 1g)		(Box 4)	(Box 16)
912810FG8	06/06/2014	912810FG8 06/06/2014 09/28/2011	ш	31,806.64	32,572.09		00.00	-765.45	0.00 -765.45 0.00	0.00
ng Term	Total Long Term Sales Reported on 1099-8	n 1099-B		639,588.33	460,659.16		0.00	178,929.17	0.00	0.00

Report on Form 8949, Part II, with Box E checked

noncovered securities shown on this statement, cost basis information is not being reported to the internal Revenue Service. The taxpayer is ultimately This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. For