

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



SCANNED MAY 1 5 2015

Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052

Open to Public Inspection

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

FO	r caien	idar year 2014 or tax year beginning			, and	enaing		
	me of fou					A Employer	identification number	or
		CLEOD CHARITABLE FOUNDATION, INC						
		d street (or PO box number if mail is not delivered to street address)		Room	n/suite		20-815306	
		DLER RANCH ROAD	ZIP c			B lelephone	number (see instructi	ons)
	y or town		8052				(070) 219 07	76
		DLLINS CO Intry name Foreign province/state/county		gn post	al code	0 16	(970) 218-97	
10	eigii cou	Total province/state/county	Potel	jii posa	ai wae	C if exempt	ion application is pend	ing, check here
G	Check	call that apply: Initial return Initial return	of a former pu	iblic c	harity	D 1 Foreig	n organizations, check	here 🕨
_		Final return Amended re	•		a lailty	_	_	
		Address change Name chan					n organizations meetin here and attach compi	_
\overline{H}	Check	type of organization: X Section 501(c)(3) exempt p		on			foundation status was	_
ñ		on 4947(a)(1) nonexempt charitable trust			tion	section 50	07(b)(1)(A), check here	▶ _
旱		narket value of all assets at J Accounting method						
•		f year (from Part II, col (c),	i M Casii	ш ^	cciuai		idation is in a 60-mont ition 507(b)(1)(B), chec	
		6) ► \$ 803,381 (Part I, column (d) must	be on cash bas	 is.)		dilaci sco		
P	art l	Analysis of Revenue and Expenses (The total of				L		(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue expenses p			tinvestment	(c) Adjusted net	for charitable
		equal the amounts in column (a) (see instructions))	books		ır	come	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	30	0,000			come of the	
	2	Check ►☐ If the foundation is not required to attach Sch. B	177 1 172 (2 9 7				*	,
	3	Interest on savings and temporary cash investments		3,627		3,627		
	4	Dividends and interest from securities	24	1,239		24,239		*^
	5a	Gross rents						
	b	Net rental income or (loss)	4.20		. ".		, See a	
<u>o</u>	6a	Net gain or (loss) from sale of assets not on line 10		2,729		* :	11.00 × 3	
Ĭ	_ b	·	9		. در ک	bgts?, \$P ?		
Revenue	7	Capital gain net income (from Part IV, line 2)				2,723	**	, ,
ď	8 9	Net short-term capital gain	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	i investo	Ÿ			
	10a	Income modifications		** .		. 16	W.r.	
	b	Less: Cost of goods sold	1 x x x x x x x x x x x x x x x x x x x	•		**************************************	8.7	
	c	Gross profit or (loss) (attach schedule)			% #444.	50 an a		
	11	Other income (attach schedule)						
	12	Total. Add lines 1 through 11	60),595		30.589	EN/ED	3
<u></u>	13	Compensation of officers, directors, trustees, etc				REU	LIVEU	1
seuse	14	Other employee salaries and wages			LC.		os	
e	15	Pension plans, employee benefits			18	MAY	1 1 2015	
	16a	Legal fees (attach schedule)			្រ	1111111	0.00	
e E	b	Accounting fees (attach schedule)		975	-	OGD	ENIT	975
≑	C	Other professional fees (attach schedule)			tanti	<u> </u>	LIV. UI	-
tra	17 18	Interest	ļ	574		574	<u> </u>	
is.	19	Depreciation (attach schedule) and depletion		5/4		574		
를	20	Occupancy			_			
ğ	21	Travel, conferences, and meetings		9,670				9,670
and Administrative Ex	22	Printing and publications	<u> </u>	., 3				0,570
a	23	Other expenses (attach schedule)		245		245		
ng	24	Total operating and administrative expenses.						
äti		Add lines 13 through 23		1,464	P. 1000000000000000000000000000000000000	819		10,645
Operating	25	Contributions, gifts, grants paid	52	2,130			\$ \$ *	52,130
<u>ō</u>	26	Total expenses and disbursements. Add lines 24 and 25	63	3,594		819		62,775
	27	Subtract line 26 from line 12:	. rainintra das unitordizada quadra anno		X 5.			
	а	Excess of revenue over expenses and disbursements		2,999				
	b	Net investment income (if negative, enter -0-)	, , , , , , , , , , , , , , , , , , ,			29,770		_
	С	Adjusted net income (if negative, enter -0-)			122 84		()

D	art_ll	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		End o	f year
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	ŧ	(c) Fair Market Value
	1	Cash—non-interest-bearing	66,364	54,	,966	54,966
	2	Savings and temporary cash investments	220,000	240,	135	240,310
	3	Accounts receivable				
		Less: allowance for doubtful accounts				
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts			i	l
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions).			ļ	
	7	Other notes and loans receivable (attach schedule)		,		
		Less: allowance for doubtful accounts				
ts	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges			一	
As	10a	Investments—U.S. and state government obligations (attach schedule)			一	
•	b	Investments—corporate stock (attach schedule)	403,135	199	879	233,111
	C	Investments—corporate bonds (attach schedule)	100,000	297,	_	274,602
	11	Investment I had believe and applicable back.	Ţ		-	
	'''	Language interest and description (attach askedula)				
	12	Investments—mortgage loans	-		\dashv	
	13	Investments—other (attach schedule)			\neg	
	14	·	7 2 2 2 3 3 4 4 5 4 5 4 5 4 5 5 5 6 5 6 5 6 5 6 5 6	***		
	'-	Land, buildings, and equipment: basis Less: accumulated depreciation (attach schedule)		entidition est de la		. siinniitaaliheeliniiniiniiniiniiniiniiniinii -, -, retereereer eriki
	15	Other assets (describe Accrued interest)	-			392
	16	Total assets (to be completed by all filers—see the			-+	
	10		789,499	702	072	803,381
_	17	Instructions Also, see page 1, item I)	109,499	792,	0/3	003,361
	18	Grants payable			\dashv	•
Liabilities	19					
	20	Loans from officers, directors, trustees, and other disqualified persons	-		\dashv	
abi	21	Mortgages and other notes payable (attach schedule)			\dashv	, * *
Ĩ	22				\dashv	
	23	Other liabilities (describe Total liabilities (add lines 17 through 22)	0			8 9 - 4
_	23		<u> </u>		씍	***
S		Foundations that follow SFAS 117, check here			ł	,
2	24	•	700 400	700	220	^ *
alances	24	Unrestricted	789,499		073	
	25	Temporarily restricted			\dashv	·
힏	26	Permanently restricted			\dashv	
or Fund B		Foundations that do not follow SFAS 117, check here				
Ĕ	07	and complete lines 27 through 31.			-	
S	27	Capital stock, trust principal, or current funds			\dashv	
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			\dashv	
Ş	29	Retained earnings, accumulated income, endowment, or other funds	700 400	700	ᆲ	·
ĭ	30	Total net assets or fund balances (see instructions)	789,499	792,	0/3	. **
ž	31	Total liabilities and net assets/fund balances (see				
	4 IIII	instructions)	789,499	792,	073	
	rt III	Analysis of Changes in Net Assets or Fund Balances	L. 00 (—т	
1		net assets or fund balances at beginning of year—Part II, column (a)			_	
_		of-year figure reported on prior year's return)			1	789,499
		amount from Part I, line 27a			2	-2,999
3		increases not included in line 2 (itemize) Prior period adjustr	nent		3	5,573
4		nes 1, 2, and 3			4	792,073
5		eases not included in line 2 (itemize)			5	
6	iotal	net assets or fund balances at end of year (line 4 minus line 5)—Part	t II, column (b), line 30)	6	792,073

Page 3

Part	(a) List and describe to	d Losses for Tax on Investment of the kind(s) of property sold (e.g., real estate		ome	(b) How acquired P—Purchase		Date acquired	(d) Date sold
		ouse, or common stock, 200 shs MLC Co)			D—Donation	(m	no , day, yr)	(mo , day, yr)
_ <u>1a</u>	Capital Gains Distributions	<u> </u>			<u> </u>	-		
<u>b</u> _		· · · · · · · · · · · · · · · · · · ·						
<u>c</u> d							<u> </u>	
<u>-</u>								
	(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis ise of sale			in or (loss) (f) minus (g)
a								
<u>b</u>			-			ļ		
<u>_</u>						<u> </u>		
<u>d</u>								
<u>e</u>	Complete only for assets st	nowing gain in column (h) and owned	by the fou	ndation	on 12/31/69			·
	(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(1	k) Exces	s of col (i) (j), if any		col (k), but no	l (h) gain minus it less than -0-) or from col (h))
a								(
b								
С								
d								
е_		<u> </u>						
2	Capital gain net income or	TINAT CANITAL IOSEL 1 -	also enter), enter -0-		,	2		2,723
3		n or (loss) as defined in sections 1 , line 8, column (c) (see instructio			er -0- in \			
Part		der Section 4940(e) for Red			<u> J</u>	3		
Was t		section 4942 tax on the distributa qualify under section 4940(e). Do				e perio	od?	☐ Yes 🔀 No
1		ount in each column for each year				ng any	entries	
Cal	(a) Base period years endar year (or tax year beginning in	(b)			(c) f noncharitable-use a		Dis	(d) stribution ratio divided by col (c))
	2013		3,464		77	6,862		0 081693
	2012	2	8,995			3,661		0 070094
	2011		2,383			1,124		0.085718
	2010		3,770			1,907		0.098261
	2009		4,092		23	7,312		0.101520
2		footbass successful and desired					2	0.437286
3	•	for the 5-year base period—divide dation has been in existence if les					3	0 087457
4	Enter the net value of non-	charitable-use assets for 2014 fro	om Part X,	line 5			4	778,925
5	Multiply line 4 by line 3 .						5	68,122
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)				·	6	298
7	Add lines 5 and 6						7	68,420
8		ns from Part XII, line 4 ter than line 7, check the box in F					8 sing a 1% ta	62,775 x rate. See the

Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instr	uctions)			
1a `	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	,			
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	_1		595	
	here ▶ ☐ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	***************************************	*********	z	**********
•	Part I, line 12, col (b)			0	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	3		595	
3	Add lines 1 and 2	4		- 393	
4 5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	5		595	
6	Credits/Payments			000	
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a	/ *		}	
b	Exempt foreign organizations—tax withheld at source			,	
c	Tax paid with application for extension of time to file (Form 8868) 6c				İ
d	Backup withholding erroneously withheld 6d			`	
7	Total credits and payments. Add lines 6a through 6d	7		0	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8		10	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		605	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		0	
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax ► Refunded ►	11		0	
Part '	VII-A Statements Regarding Activities		<u>,</u>		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				
	Instructions for the definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	s			ĺ
	published or distributed by the foundation in connection with the activities.			********	
C	Did the foundation file Form 1120-POL for this year?		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		* **	4	
	(1) On the foundation (2) On foundation managers. (5)				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impos	ea			
2	on foundation managers > \$ Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	***************************************	X
2	If "Yes," attach a detailed description of the activities	• •	-	20.0	 ^
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		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b	N/A	-
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
•	If "Yes," attach the statement required by General Instruction T.		`		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that	at	PROBLEM 1967		
	conflict with the state law remain in the governing instrument?		6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		1		
	CO				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3		A. 1744000000	·····	
	or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)?				
40	"Yes," complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the names and addresses		10	·	
	. names and addresses		1 .0	, ^	

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)		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified		
person had advisory privileges? If "Yes," attach statement (see instructions)		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? . 13	Х	
Website address ► N/A		
14 The books are in care of ► Michael Pay Telephone no. ► (970) 218-97	76	
Located at ► 6360 Gindler Ranch Road Fort Collins CO ZIP+4 ► 80526		
Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here		▶ [
16 At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority	Yes	No
over a bank, securities, or other financial account in a foreign country?		X
See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1) If		 ^- -
"Yes," enter the name of the foreign country		
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required		<u> </u>
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).	163	110
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		
disqualified person?	1	1 4
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		
(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)?		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		
foundation agreed to make a grant to or to employ the official for a period after		
termination of government service, if terminating within 90 days.)		
b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in		
Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?1b	N/A	
Organizations relying on a current notice regarding disaster assistance check here ▶ □	\ \frac{1}{20}	
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		
were not corrected before the first day of the tax year beginning in 2014?		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		
operating foundation defined in section 4942(j)(3) or 4942(j)(5)).		
a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and		
6e, Part XIII) for tax year(s) beginning before 2014?		
If "Yes," list the years 20, 20, 20, 20		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		`
(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		
all years listed, answer "No" and attach statement—see instructions.)	N/A	-
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		
➤ 20, 20, 20, 20 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	'`	
at any time during the year?		\
b If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or	1	
disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	1	
Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse		
of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		
foundation had excess business holdings in 2014.)	N/A	1
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a	1077	x
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		1
charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	y ampanesa	X

Part	VII-B	Statements Regarding Activities	for W	hich Form	4720 I	May Be Ro	quire	d (contin	ued)			
5a '	During th	e year did the foundation pay or incur any	amou	nt to:								
	•	on propaganda, or otherwise attempt to i		•	•			☐ Yes	X No)		
		nce the outcome of any specific public ele ly or indirectly, any voter registration drive						☐ Yes	X No			
		de a grant to an individual for travel, study						Yes	⊠ No		<i>y</i> *	
		de a grant to an organization other than a	•	•	•						430	ļ
		on 4945(d)(4)(A)? (see instructions)						Yes Yes	⊠ No			5
		de for any purpose other than religious, ch						_				
		ses, or for the prevention of cruelty to chi						∐ Yes	X No	·]		
b	-	swer is "Yes" to 5a(1)–(5), did any of the t		•	-		•		d in	a 19800.a		outures.
	-	ons section 53.4945 or in a current notice	-	-		•		3)?		<u>5b</u>	N/A	X
_		tions relying on a current notice regarding wer is "Yes" to question 5a(4), does the fo							▶∟	, .		
·		it maintained expenditure responsibility fo						☐ Yes	☐ No			
		attach the statement required by Regulation	_					<u> </u>				٠
6a	Did the fo	oundation, during the year, receive any fur				pay premiu	ns	_			,	·
	•	sonal benefit contract?						☐ Yes	X No			***************************************
b		oundation, during the year, pay premiums,	directl	y or indirectly	on a p	ersonal ber	efit cor	itract? .		6b		X
_		o 6b, file Form 8870.								8 *	**	
7a b		e during the tax year, was the foundation a pa did the foundation receive any proceeds o						Yes		7b	N/A	
_		nformation About Officers, Directo										
		and Contractors	,				,			۰,۳۰۰,۰	,	
1	List all o	fficers, directors, trustees, foundation i	manag	ers and their	compe	ensation (s	ee inst	ructions).				
		(a) Name and address		e, and average irs per week		mpensation not paid,		Contributions byee benefit		(e) Expe		
N di ala a	-I D-			ted to position		nter -0-)		erred compe		otner a	allowan	ces
	el Pay	nch Rd Fort Collins, CO 80526	Presid	1.00			,					
Rona		inch Na Fort Collins, CO 80320	Secret									
		nch Rd Fort Collins, CO 80526	000,0	1 00								
_						_						
									1			
2	Compon	sation of five highest-paid employees (othou t	han thaga in		on line 4	!	44	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
_	"NONE."		oniei t	nan mose m	ciuueu	on line i-	266 IIIS	Structions	s). II 110	ne, enu	er	
				(b) Title, and a	werage			(d) Contribi	utions to			
	(a) Name ar	nd address of each employee paid more than \$50,000		hours per w	reek	(c) Comper	sation	employee plans and o		(e) Expe	nse aco	
				devoted to po	osition			compens				
NONE		·										
						-		·				
												
				_								
		·····				ļ	_					
												
Total	number of	other employees paid over \$50,000				<u> </u>						

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Er and Contractors (continued)	nployees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NOI	NE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	<u> </u>
Total number of others receiving over \$50,000 for professional services	<u> </u>
Part IX-A Summary of Direct Charitable Activities	
	T
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 Assisted four churches with mission efforts	
7 / Joseph Grand G	
	18,205
2 Provided support to five mission organizations	· · · · · · · · · · · · · · · · · · ·
	8,000
3 Financially assisted Compassion International with support of children in third world countries	
	5,982
4 Financially assisted eight organizations in support for disaster relief, homeless outreach	
	19,943
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
2	
All other program-related investments. See instructions	+
•	
3	
Total. Add lines 1 through 3	0
	Form 990-PF (2014)

Part	•	n foundati	ons,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,	1 1	
	purposes.	viencemen :	
a	Average monthly fair market value of securities	1a	500,054
b	Average of monthly cash balances	1b	290,733
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	790,787
е	Reduction claimed for blockage or other factors reported on lines 1a and	-	
_	1c (attach detailed explanation)	- AURTHALIAN I	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	790,787
4	Cash deemed held for charitable activities. Enter 1 ½ % of line 3 (for greater amount, see		
_	instructions)	4	11,862
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	778,925
6_	Minimum investment return. Enter 5% of line 5	6	38,946
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)		
1	Mınımum investment return from Part X, line 6	1	38,946
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (This does not include the tax from Part VI.)	1	
С	Add lines 2a and 2b	2c	595
3	Distributable amount before adjustments Subtract line 2c from line 1	3	38,351
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	38,351
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	38,351
Part	XII Qualifying Distributions (see instructions)		
			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	62,775
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	man pulit	
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	62,775
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.] _	
_	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	62,775
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whetl qualifies for the section 4940(e) reduction of tax in those years.	her the fou	ndation

Page 9

Part	Alli Ondistributed income (see ii	isti uctions	<i>1</i>	1		
1	Distributable amount for 2014 from Part X	l,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
	line 7		, *	XXes fr		38,351
2	Undistributed income, if any, as of the end of 2	2014		Х	*	
а	Enter amount for 2013 only		* * * * * * * * * * * * * * * * * * *	4	0	
b	Total for prior years 20, 20		* _w	<u>. </u>		
3	Excess distributions carryover, if any, to 20			. ,	V 44 V 4	- 20
а	From 2009	12,348	land of a land	· ·		, ,
-			\$ *	, , , , , , ,		,
b	From 2010	11,782		* *************************************	A 1	
C	From 2011	9,506		, (2) (2 ° (2 ° (2 ° (2 ° (2 ° (2 ° (2 °	* * *	5
d	From 2012	8,842	,	* ***	٠, `	***
е	From 2013	25,185	~~************************************	(4 .	
f	Total of lines 3a through e		67,663		* * * ',	
4	Qualifying distributions for 2014 from Part	XII,	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	*	· ; ; ; * *	i
	line 4 [·] ▶ \$ 62,775		*	,		3
а	Applied to 2013, but not more than line 2a	١				•,*
b	Applied to undistributed income of prior ye	ears	· · · · · · · · · · · · · · · · · · ·		*.\$^ ^	, ^ }
	(Election required—see instructions)		54.800		r Schooled Contract	,
С	Treated as distributions out of corpus (Ele	ction			No. 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	»», ₉ ,
	required—see instructions)				, , , , ,	, ; ` "'^"'
d	Applied to 2014 distributable amount		** *	10 00 Jan 25	* 4	38,351
е	Remaining amount distributed out of corpo	us	24,424	10 mg (\$10 111)		٠, ٠,
5	Excess distributions carryover applied to 2				<	
	(If an amount appears in column (d), the s	same		` n n		· ·
	amount must be shown in column (a))			<i>*</i>		
6	Enter the net total of each column as		i san i	, , ,	pin "	
	indicated below:		Same of			** , '
а	Corpus. Add lines 3f, 4c, and 4e. Subtract	: line 5	92,087	,		` ' '
b	Prior years' undistributed income Subtract					222 \$ L
_	line 4b from line 2b	`		0		
С	Enter the amount of prior years' undistribu	ited	*****			
·	income for which a notice of deficiency ha		<i>'</i>		,	**** * * * *
	been issued, or on which the section 4942		Ä		A november	1
	tax has been previously assessed	-(u)				y
d	Subtract line 6c from line 6b. Taxable		. Lindies + g4		****** ****	
u	amount—see instructions					,
_	Undistributed income for 2013 Subtract li	no ·	X #4 (10 444 4 1	`		`
е	4a from line 2a Taxable amount—see	116	(1)	*		` ^ ^
	instructions				0	345.4
f	Undistributed income for 2014. Subtract li		72.	< //>		·
•	4d and 5 from line 1. This amount must be		1 · · · · · · · · · · · · · · · · · · ·	\$\text{2}\text{2}\text{2}\text{2}\text{2}\text{2}\text{2}\text{3}\text{2}\text{3}\text{2}\text{3}\text{2}\text{3}\text{2}\text{3}\text{4}\text{4}\text	/ ` ` .xX	
	distributed in 2015	5		~*. ***.	,	^
7	Amounts treated as distributions out of co	roue.	* * * . ` ,			
7	to satisfy requirements imposed by section			<i>\$1</i> :	. *	
				,		
	170(b)(1)(F) or 4942(g)(3) (Election may be a supply and the second seco			, .		* *
_	required—see instructions)			;	2 % X X 2 4 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
8	Excess distributions carryover from 2009		40.040			
_	applied on line 5 or line 7 (see instructions		12,348			
9	Excess distributions carryover to 2015.	•			, rate	
	Subtract lines 7 and 8 from line 6a		79,739	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
10	Analysis of line 9				* *	ė
а	Excess from 2010	11,782	*		5 % 2	
b	Excess from 2011	9,506		an pip		
С	Excess from 2012	8,842	* *** ******* ****		,	
d	Excess from 2013	25,185	*, * * * *	1,200	***	
е	Excess from 2014	24,424	,			\$

Part	XIV Private Operating Foundat	ions (see instru	ctions and Part \	/II-A, question 9)		N/A
1a	If the foundation has received a ruling o					
	foundation, and the ruling is effective fo	r 2014, enter the d	ate of the ruling .	▶		
b	Check box to indicate whether the foundation	on is a private operat	ting foundation desc	ribed in section	4942(j)(3) or 4942(J)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	investment return from Part X for each year listed					0
b	85% of line 2a					0
C	Qualifying distributions from Part XII,					
•	line 4 for each year listed					o
d	Amounts included in line 2c not used directly				-	
_	for active conduct of exempt activities					l o
е	Qualifying distributions made directly					
	for active conduct of exempt activities.		1	1		
	Subtract line 2d from line 2c					О .
3	Complete 3a, b, or c for the					
•	alternative test relied upon:					
а	"Assets" alternative test—enter		}			
_	(1) Value of all assets					0
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in Part X, line 6 for each year listed					0
С	"Support" alternative test—enter					
·	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)					o
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)			1		o
	(3) Largest amount of support from			 	· · · · · · · · · · · · · · · · · · ·	
	an exempt organization					О
	(4) Gross investment income					0
Part		n (Complete thi	s part only if th	e foundation had	d \$5 000 or mo	
- 410	any time during the year—			o roundation na	a 40,000 or mo	io in accous at
1	Information Regarding Foundation M					
'a	List any managers of the foundation wh		more than 2% of	the total contribution	ns received by the	foundation
_	before the close of any tax year (but on					
Micha	el Pay Rona Pay	,,		, -,, -,	(-)(-)	
	List any managers of the foundation wh	0 0WD 10% or mor	e of the stock of a	corporation (or an e	equally large portion	on of the
	ownership of a partnership or other enti			•		,,, o, a,,,
None	• •	.,, 0		or ground, miles ou.	•	
2	Information Regarding Contribution,	Grant Gift Loan	Scholarshin etc	Programe		
~	Check here ► X if the foundation on		• •		ations and does n	ot accont
	unsolicited requests for funds. If the fou					
	under other conditions, complete items		o, g	,		
<u> —</u> _а	The name, address, and telephone num		ess of the person	to whom application	s should be addre	
a	The hame, address, and telephone ham	iber or e-mail addr	ess of the person	to whom application	is silould be addle	:33CU.
— <u> </u>	The form in which applications should be	o cubmitted and in	formation and mat	torials that should in	adudo:	
b	The form in which applications should b	e submitted and in	normanon anu mat	enais uicy SHOUIG II	iciaae.	
	Any submission deadlines					
U	, any caphillosion acadimes					
_ _	Any restrictions or limitations on awards	s such as by geog	raphical areas cha	aritable fields kinds	of institutions or o	other
u	factors:	, caon as by goog.	المارين المارين المارين			

Part XV Supplementary Information (continued)

3 · Grants and Contributions Paid During Recipient	If recipient is an individual,	Foundation		
· · · · · · · · · · · · · · · · · · ·	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				5.00
Compassion International			Support for children	5,98
12290 Voyager Parkway				
Colorado Springs, CO 80921			Summer for missions	4,00
Vineyard Church of the Rockies			Support for missions	4,00
1201 Riverside Ave				
Fort Collins, CO 80524			Support for missions	5,00
Metro Detroit Christian Church 33045 Hamilton Court			Support for imagions	0,00
Farmington Hills, MI 48334				
MercyCorps			Disaster relief	2,00
45 SW Ankeny Street			Bloader Teller	2,00
Portland, OR 97204				
Heart to Hart Detroit			Mission to homeless	1,50
32310 Shrewsbury				,
Farmington Hills, MI 48334				
Charity.water			Water projects to third world	3,50
200 Varick St, Suite 201			' '	ĺ
New York, NY 10014				
Marietta Vineyard Christian Fellowship			Support for missions	4,00
2060 Lower Russell Rd				
Marietta, GA 30068				
Olive Branch			Support for missions	2,00
P O Box 236				
Becker, MN 55308				
Vineyard City Church			Support for missions	1,00
P O Box 12368				
Tucson, AZ 85730				
Pioneers			Support for missions	3,00
10123 William Carey Dr				1
Orlando, FL 32832			L	
Go Forth Ministries			Support for missions	1,00
P O Box 26863				
Salt Lake City, UT 84126	<u>l</u>	<u> </u>	▶ 3 a	E0 40
Total See Attached Statement b Approved for future payment				52,13
b Approved for fature payment				
		1		
		1		
		<u> </u>	▶ 3b	

20-8153065 Page **12**

	_	Analysis of income-Producing Ad	7,1716100				
Ente	r·gros	s amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by sect	ion 512, 513, or 514	(e)
4	Drog	TOM CONTROL TO VOTUS	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1	a a	ram service revenue:					
	. –						
	_						
	d _						
	e –						
	f -		-				<u> </u>
	_	ees and contracts from government agencies					
2	_	bership dues and assessments					
3		est on savings and temporary cash investments .				· · · · · · · · · · · · · · · · · · ·	
4		lends and interest from securities					(
5		rental income or (loss) from real estate:		`y.c.**``*			*
		Debt-financed property					
		Not debt-financed property			 		
6		rental income or (loss) from personal property					
7		r investment income					
8		or (loss) from sales of assets other than inventory				 	
9		ncome or (loss) from special events					
10		s profit or (loss) from sales of inventory					
11		r revenue. a					
	b						
	с _						
	d _						
	е _		1				
12	Subt	otal. Add columns (b), (d), and (e)		0		0	. 0
13		I. Add line 12, columns (b), (d), and (e)				13	0
							U
		sheet in line 13 instructions to verify calculations	s)				
(See	work		s)				
(See	work	sheet in line 13 instructions to verify calculations	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
Par Lin	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which income	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
Par Lin	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
Par Lin	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur Investment income on foundation corpus	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
Par Lin	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur Investment income on foundation corpus	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
Par Lin	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur Investment income on foundation corpus	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
Par Lin	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur Investment income on foundation corpus	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
Par Lin	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur Investment income on foundation corpus	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
Par Lin	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur Investment income on foundation corpus	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
(See	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur Investment income on foundation corpus	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
(See	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur Investment income on foundation corpus	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
(See	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur Investment income on foundation corpus	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
(See	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur Investment income on foundation corpus	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
(See	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur Investment income on foundation corpus	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
(See	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur Investment income on foundation corpus	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
Par Lin	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur Investment income on foundation corpus	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
Par Lin	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur Investment income on foundation corpus	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
Par Lin	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur Investment income on foundation corpus	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
Par Lin	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur Investment income on foundation corpus	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
Par Lin	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur Investment income on foundation corpus	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
Par Lin	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur Investment income on foundation corpus	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
Par Lin	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur Investment income on foundation corpus	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
Par Lin	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur Investment income on foundation corpus	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	
(See	work t XV e No.	sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur Investment income on foundation corpus	s) Accomplishm ne is reported in c	ent of Exempt	t Purposes	importantly to the	

Part .	XVII	Information Exempt Org	Regarding Tran	sfers To an	nd Transac	tions and	Relation	ships W	ith Nonchar	table		
1		e organization d	lirectly or indirectly e e Code (other than s								Yes	No
	_	ızatıons?										
а			porting foundation to							In delimente	A1000000000000000000000000000000000000	***************************************
										1a(1)		X
										1a(2)	,	X
b		transactions:										
			a noncharitable exe							1b(1)		X
			ets from a noncharita							1b(2)		X
			equipment, or other							1b(3)		X
		eimbursement ar	•							1b(4)		X
			rantees							1b(5)		X
•			rvices or membershi quipment, mailing lis							1b(6)		X
			he above is "Yes," cor							10		
	value (of the goods, othe	er assets, or services of or sharing arrangement	given by the re	eporting found	ation. If the	foundation r	eceived le	ss than fair mark	et ed.		
(a) Line	no (b) Amount involved	(c) Name of none	charitable exemp	t organization	(d)	Description of	transfers, tr	ansactions, and sha	rıng arrar	ngemen	ıts
_			<u> </u>									
									 			
-		<u> </u>										
								·-·				
	_											
-		·						•				
		-						•				
	descri	bed in section 50	ctly or indirectly affilia 01(c) of the Code (of following schedule.	ited with, or r ther than sec	elated to, on tion 501(c)(3	e or more to	ax-exempt (ion 527?	organizatı		Yes	X N	0
		(a) Name of organ		(b)	Type of organiz	ation		(c) [escription of relatio	nship		
				İ								
			lare that I have examined this re					of my knowled	ge and belief, it is true,			
Sign Here	×	ature of officer or trus	on of preparer (other than taxpa	yer) is based on all	: 14115 D	D	eside.	<u>t</u>	May the IR with the pro-	parer sho	wn beloy	<u>w</u>
	<u> </u>	Print/Type preparer's		Premarer's s	-		Date			PTIN		
Paid		Gary Richards, (•	100	The	<u> </u>		24/2015	Check if self-employed	P0035	13/13	
Prepa	arer [Richards and Richa	- 			1 -1/2		s EIN ► 84-10		10-10	
Use (Onlyt	Firm's address	1136 E Stuart St, St		rt Collins, CC	0 80525				493-54	94	
		i initi o addicas	L Oldari Ol, Ol	1200, 10	00	2 20020		FIIO	ie 110 (310)) DE	

Schedule B

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

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service

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

Name of the organization		Employer identification number
THE MACLEOD CHARITABLE	FOUNDATION, INC	20-8153065
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	40.47(a)(4) nonexempt objectively twist and treated as a private form	dation
	4947(a)(1) nonexempt charitable trust not treated as a private found	Jauori
	527 political organization	
	oz. political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	on
	501(c)(3) taxable private foundation	
• •	vered by the General Rule or a Special Rule .	
	(8), or (10) organization can check boxes for both the General Rule and a	Special Rule See
instructions.		
General Rule		
- · · · · · · · · · · · · · · · · · · ·		
	g Form 990, 990-EZ, or 990-PF that received, during the year, contribution	
	operty) from any one contributor. Complete Parts I and II See instructions	s for determining a
contributor's total contril	butions.	
Special Rules		
Special Rules		
For an organization des	cribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 %	6 support test of the
	ons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or	
	at received from any one contributor, during the year, total contributions of	
	amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Con	
For an organization des	cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece	eived from any one
	ear, total contributions of more than \$1,000 exclusively for religious, char-	
literary, or educational p	ourposes, or for the prevention of cruelty to children or animals. Complete	Parts I, II, and III
For an organization des	cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece	end from any one
contributor, during the y	ear, contributions exclusively for religious, charitable, etc., purposes, but r	10 such
	ore than \$1,000. If this box is checked, enter here the total contributions the xclusively religious, charitable, etc., purpose. Do not complete any of the p	
	o this organization because it received nonexclusively religious, charitable	
	during the year	
totaling wo, ooo of more	adding the your control of the contr	· · · · · · · · · · · · · · · · · · ·
Caution. An organization that is	not covered by the General Rule and/or the Special Rules does not file S	schedule B (Form 990,
	answer "No" on Part IV, line 2, of its Form 990, or check the box on line F	

Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Page 2 Name of organization **Employer identification number** THE MACLEOD CHARITABLE FOUNDATION, INC. 20-8153065 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (a) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Mike & Rona Pay ...1 Person 6360 Gindler Road **Payroll** Fort Collins CO 80526 30,000 Noncash Foreign State or Province: (Complete Part II for Foreign Country noncash contributions.) (a) (d) (c) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person ------**Payroll** Noncash Foreign State or Province: (Complete Part II for Foreign Country. noncash contributions) (b) (a) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash Foreign State or Province (Complete Part II for Foreign Country: noncash contributions) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroli** Noncash Foreign State or Province (Complete Part II for Foreign Country. noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash Foreign State or Province: (Complete Part II for Foreign Country: noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash Foreign State or Province (Complete Part II for Foreign Country. noncash contributions.)

Continuation of Part XV, Li	<u>ne 3a (990-PF) -</u>	Gran	ts and Con	<u>tributions Paid</u>	During the	<u>e Year</u>
Recipient(s) paid during the year						
Name						
Homeless Prevention Initiative						
Street 503 Remington St						
City		State	Zip Code	Foreign Count	rv	
Fort Collins		co	80524	C.O.g., Coun.		
Relationship	Foundation Status					
P3					14	
Purpose of grant/contribution Mission to homeless					Amount	1,000
					1	1,000
Name Humble Design						
Street						
180 N Saginaw						
City		State	Zip Code	Foreign Count	ry	
Pontiac	T	MI	48342			
Relationship	Foundation Status					
Purpose of grant/contribution	<u> </u>				Amount	
Housing assistance to poor					Amount	1,500
Name						
Ride 2 Recovery						
Street						
23679 Calabasas Rd						
City		State		Foreign Count	ry	
Calabasas	l= 10 50	CA	91302			
Relationship	Foundation Status					
Purpose of grant/contribution					Amount	
Veteran rehabilitation						1,500
Name					•	
Crisis Response International						
Street			· · · · · · · · · · · · · · · · · · ·			
P O Box 59226						
City		State		Foreign Count	try	
Nashville Relationship	Foundation Status	TN	37205			
Relationship	Touridation Status					
Purpose of grant/contribution					Amount	
Disaster relief					<u> </u>	5,000
Name						
Macmillan Cancer Support						
Street						
89 Albert Embankment City		Ctoto	Zip Code	Foreign Count		
London		State	Zip Code	United Kingdon		rthern Irelai
Relationship	Foundation Status	l .	<u> </u>	Torrited Ringdon	ii (England, No	uleili ilelai
Purpose of grant/contribution				•	Amount	
Cancer treatment support					<u> </u>	3,443
Name						
Just Giving						
Street						
City		State	Zip Code	Foreign Count	TV	
,		Julio		United Kingdon		rthern Irelar
Relationship	Foundation Status	<u> </u>	J	1 = =	<u> </u>	
Purpose of grant/contribution					Amount	0.500
Mountain rescue						2,500

Continuation of Part XV, Lir Recipient(s) paid during the year	ne 3a (990-PF) -	Gran	ts and Con	tributions Paid	During the Year
Name					
Kings Community Church					
Street					
City		State	Zip Code	Foreign Count	rv
Southhampton					(England, Northern Irelai
Relationship	Foundation Status		,	To the state of th	. (
Purpose of grant/contribution	<u> </u>				Amount
Support for missions					4,205
Name		·			
Street					
City		State	Zip Code	Foreign Count	ry
Relationship	Foundation Status	1			
Purpose of grant/contribution	<u></u>				Amount
Name					•
Street					
City		State	Zip Code	Foreign Count	ry
Relationship	Foundation Status		<u> </u>		
Purpose of grant/contribution			 		Amount
Name			······································		1
Street		<u>.</u>			
City		State	Zip Code	Foreign Count	ry
Relationship	Foundation Status	l	1		
Purpose of grant/contribution	l				Amount
Name				•	•
Street					
City		State	Zip Code	Foreign Count	ry
Relationship	Foundation Status		.1		
Purpose of grant/contribution	_1				Amount
Name					
Street					
City		State	Zip Code	Foreign Count	ry
Relationship	Foundation Status	J	·	<u> </u>	
Purpose of grant/contribution			· .		Amount

Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

	_	က	တ	_			_	0	တ	6
Net Gain	or Loss	2,72				Net Gain	or Loss			
Net (orl						Adjustments			
ther	xpenses	0	120,020				Depreciation			
Cost, Other	Basis and Expenses				Expense of Sale	and Cost of	Improvements			
		2,723	120,026			Valuation	Method			
Gross	Sales					Cost or	Other Basis	20'000	20	000'02
Totals		Capital Gains/Losses	Other sales			Gross Sales	Pnœ	20'000	26	000'02
		ප				Date	Sold	8/14/2014	712/2014	11/20/2014
					•	Acquisition	Method	d	Ъ	Ь
						Date	Acquired	8/6/2013	11/19/2012	11/13/2013
				Check "X" ff	Purchaser	ısa	Business			
							Purchaser			
	Amount	2,723					CUSIP#			
		Long Term CG Distributions	Short Term CG Distributions				Description	BANK OF CHINA	TORTOISE ENERGY CAPITAL	BANK OF CHINA
				-	Check "X"	to include	in Part IV	8		B
								-	7	~

Part I, Line 11 (990-PF) - Other Income

	0	0	0
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income
1 MISC		0	

Part I, Line 16b (990-PF) - Accounting Fees

	,	<u> </u>			
		975	0	0	975
		Revenue and			Disbursements for Charitable
		Expenses per	Net Investment	Adjusted Net	Purposes
L	Description	Books	Income	Income	(Cash Basis Only)
1	RICHARDS & RICHARDS P C	975			975

Part I, Line 18 (990-PF) - Taxes

			574	574	Ō	0
Г			Revenue			Disbursements
			and Expenses	Net Investment	Adjusted	for Charitable
		Description	per Books	Income	Net Income	Purposes
Г	1 Excise to	ax on investment income	574	574		0

Part I, Line 23 (990-PF) - Other Expenses

		245	245	0	0
	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	Investment fees	245	245		
2					

Part II, Line 10b (990-PF) - Investments - Corporate Stock

Description Face Value Book Value Book Value Book Value Beg of Year End of Year Beg of Year <				403,135	199,879	409,864	4
Face Value Beg of Year End of Year 1,900 75,709 25,308 D 1,200 26,059 25,932 ETURN 1,400 24,794 24,628 N HIGH YIE 4,000 100,000 24,720 24,122 RION 400 25,560 25,560 NTION 400 26,435 26,435 AGD 1,200 24,530 47,894			Num. Shares/	Book Value	Book Value	FMV	
D 1,900 75,709 900 25,328 ETURN 1,400 24,794 N HIGH YIE 4,000 100,000 MICH XIE 800 24,720 400 25,560 MICH XIE 400 26,435 MGD 1,200 50,000		Description	Face Value	Beg of Year	End of Year	Beg of Year	ä
D 1,200 25,328 ETURN 1,400 24,794 N HIGH YIE 4,000 24,794 800 24,794 800 24,794 400 24,720 ATION 400 25,560 ATION 200 24,530 AGD 1,200 50,000	_	S&P US PFD STK INDEX FD	1,900	75,709		69	226'69
D 1,200 26,059 ETURN 1,400 24,794 N HIGH YIE 4,000 100,000 800 24,720 A100 25,560 NTION 400 26,435 AGD 1,200 50,000	7	TORTOISE ENERGY CAPITAL	006	25,328	25,308	29	29,385
A HIGH YIE 4,000 100,000 100,000 24,794 800 24,720 800 24,720 800 25,560 800 26,435 800 25,500 50,000 800 800 800 800 800 800 800 800 80	က	FIDUCIARY.CLAY MLP OPPTY FUD	1,200	26,059	25,932	30	30,552
N HIGH YIE 4,000 100,000 800 24,720 800 25,560 810 26,435 810 800 24,530 800 800 800 800 800 800 800 800 800 8	4	NUVEEN ENERGY MLP TOTAL RETURN	1,400	24,794	24,628	27,	27,370
800 24,720 400 25,560 ATION 400 26,435 AGD 1,200 24,530 2,500 50,000	2			100,000		92,480	8
400 25,560 VTION 400 26,435 AGD 1,200 24,530 2,500 50,000	9	KAYNE ANDERSON MLP	800	24,720	24,122	31,880	8
AGD 400 26,435 AGD 1,200 24,530 2,500 50,000	7	ISHARES SELECT DIVIDEND	400	25,560	25,560	28,540	8
AGD 1,200 24,530 2,500 50,000	8	VANGUARD DIVIDEND APPRECIATION	400	26,435	26,435	30,08	96
2,500 50,000	6	GUGGENHEIM BUILD AMR BDS MGD	1,200	24,530		23,784	8
	19	COHEN & STEERS MLP INCOME	2,500	20,000	47,894	45,800	8

Part II, Line 10c (990-PF) - Investments - Corporate Bonds

			100,000	297,093	91,375	274,602
	Interest	Maturity	Book Value	Book Value	FMV	FMV
Description	Rate	Date	Beg of Year	End of Year	Beg of Year	End of Year
LIBOR FLOATER ISS HSBC	3 00%	12/21/2022	100,000		91,375	
HSBC INC MED TERM	0 94%	12/21/2022		96,854		92,290
BABSON CAP GLOBAL SHORT	%26.6	VARIOUS		100,000		80,760
GUGGENHEIM BUILD AMER BDS	7.48%	VARIOUS		24,530		26,616
ISHARES US PFD STOCK	6 32%	VARIOUS		75,709		74,936

Part II, Line 15 (990-PF) - Other Assets

	0)	392
	Book Value	Book Value	FMV End
Asset Description	Beg of Year	End of Year	of Year
1 Accrued interest			392

Part IV (990-PF) - Capital Gains and Losses for Tax on Investment Income

THE MACLEOD CHARITABLE FOUNDATION, INC

		0	_			1
		(Garns Minus Excess	of FMV Over Adjusted	Basis or Losses][
ı)		Excess of FMV	Over Adj Basis	
		0	Adjusted Basis	asof	12/31/69	0
		0		F.M.V as of	1231/69	0
		0			Gain or Loss	0
		0	Cost or Other	Basis Plus	Expense of Sale	0
		0			Adjustments	
		0		Deprecation	Allowed	
		0 0		Græs	Sales Pnce	
				Date	Sold	
				Date	Acquired	
				Acquisition	Method	
Amount	2,723	0			CUSIP#	
	Long Term CG Distributions	Short Term CG Distributions			Description of Property Sold	1 Capital Gains Distributions

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

THE MACLEOD CHARITABLE FOUNDATION, INC

Expense Account				
Benefits	:			
Avg Hrs Title Per Week Compensation				
Avg Hrs Per Week	100		100	_
Title	President		Secretary	
Foreign Country				
State Zip Code	80526		80526	
State	တ		8	
Cıty	Fort Collins		Fort Collins	
Street	6360 Gindler Ranch Rd		6360 Gindler Ranch Rd	
Check "X" if Business				
Name	Michael Pay	1	Rona Pay	2
_ '		_		