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EXTENDED TO NOVEMBER 16, 2 Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

For	alen	dar year 2014 or tax year beginning		, and e	nding		
Nar	ne of	foundation				A Employer identification	n number
_	~					26 155200	1
		ER FAMILY FOUNDATION and street (or PO box number if mail is not delivered to street	addrace)		Room/suite	26-155200: B Telephone number	<u> </u>
		28 E COTTONTAIL LANE	address)		ROOMVSBILE	480-661-1	700
		own, state or province, country, and ZIP or foreign p	netal code			C If exemption application is	
		TTSDALE, AZ 85255	ostar couc			o il exemption application is	perioring, check here
		all that apply: Initial return	Initial return of a fo	rmer public o	harity	D 1 Foreign organization	ns, check here
-		Final return	Amended return	, , , , , ,			•
		Address change	Name change			2 Foreign organizations or check here and attach or	neeting the 85% test, computation
H C	heck	type of organization: X Section 501(c)(3) ex	empt private foundation			E If private foundation st	atus was terminated
	Sec	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	tion		under section 507(b)(
I Fa	ır ma	rket value of all assets at end of year J Accounting	ng method; X Cash	Accr	ual	F If the foundation is in a	60-month termination
•			her (specify)			under section 507(b)(1)(B), check here $ ightharpoonup$
_		1,719,122. (Part I, colu	mn (d) must be on cash b	oasis)			
Pa	ırt 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))	(a) Revenue and expenses per books		vestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received				N/A	
	2	Check If the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and merest from seoutives	104,582.	10	<u>4,582</u> .		STATEMENT 1
		Gross rente					
	ا ا	Net rental ricome or (loss) 2015					
ě	6a,	Net remain from e or (loss) 1 Net gain or (loss) 1 Net gain or (loss) from sale of assets not on line 10 Gross sales Price for all appers on line 6a			-		
Revenue	7	aseets on line 6a Capital gain net ipcome (from Part V, line 2)			0.		
æ	7	Net short termaginar gain					
	9	Income modifications					
	40-	Gross sales less returns and allowances					
		Less Cost of goods sold		-			
		Gross profit or (loss)					
	11	Other income					<u></u>
	12	Total. Add lines 1 through 11	104,582.	10	4,582.		
. .	13	Compensation of officers, directors, trustees, etc	0.		0.		0.
%	14	Other employee salaries and wages					
≱ Sa		Pension plans, employee benefits					
≋ es	16a	Legal fees					
CULINE Expense	D	Accounting fees Other professional fees					
		Interest					
LJU	18	Taxes STMT 2	1,956.		0.		0.
<u>.0</u>	19	Depreciation and depletion	2/3300				
∌ ਵ	20	Occupancy					
ر A	21	Travel, conferences, and meetings					
	22	Printing and publications					
50 B	23	Other expenses					
rati	24	Total operating and administrative					_
ē		expenses. Add lines 13 through 23	1,956.		0 .		0.
J	25	Contributions, gifts, grants paid	0.				0.
	26	Total expenses and disbursements.	1 056		^		
	-	Add lines 24 and 25	1,956.		0	•	0.
		Subtract line 26 from line 12:	102,626.				
	ļ	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	102,020.	1 ^	4,582		
		Adjusted net income (if negative, enter -0-)				N/A	
423	01 4-14	LHA For Paperwork Reduction Act Notice, see	instructions				Form 990-PF (2014)

<u>For</u>	m 99	0-PF(2014) DOMER FAMILY FOUNDATION			L552001 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
_	•		(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing		1,222.	1,222.
		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			
	7	Other notes and loans receivable			
1		Less: allowance for doubtful accounts ▶			·
ets	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
٩		Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 3	1,616,496.	1,717,900.	<u>1,717,900.</u>
	14	Land, buildings, and equipment: basis ▶			
		Less accumulated depreciation		····-	
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the			
	L.	instructions. Also, see page 1, item I)	1,616,496.	1,719,122.	<u>1,719,122.</u>
	17	Accounts payable and accrued expenses			
	18	Grants payable		<u> </u>	
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
jab.	21	Mortgages and other notes payable			
_	22	Other liabilities (describe >)			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
s		and complete lines 24 through 26 and lines 30 and 31.			
čě	24	Unrestricted			
alar	25	Temporarily restricted			
Net Assets or Fund Balances	26	Permanently restricted			
Ĕ		Foundations that do not follow SFAS 117, check here			
Ē	ļ	and complete lines 27 through 31.			
ts	27	Capital stock, trust principal, or current funds	0.	0.	
sse	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
ţ	29	Retained earnings, accumulated income, endowment, or other funds	1,616,496.	1,719,122.	
Š	30	Total net assets or fund balances	1,616,496.	1,719,122.	
			1 616 406	1 510 100	
_	31	Total liabilities and net assets/fund balances	1,616,496.	1,719,122.	
F	art	III Analysis of Changes in Net Assets or Fund B	alances		
=			30		
1		I net assets or fund balances at beginning of year - Part II, column (a), line	30		1,616,496.
_	•	st agree with end-of-year figure reported on prior year's return)		2	102,626.
		or amount from Part I, line 27a		3	0.
3		er increases not included in line 2 (itemize)			1,719,122.
4		lines 1, 2, and 3		5	0.
5		reases not included in line 2 (itemize) In net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (h) line 30	6	1,719,122.
<u>6</u>	1018	il net assets ut tunu valances at enu ut year (line 4 fillitus line 3) - Part II, C	orazini (o), iirie oo		Form 990-PF (2014)

8 Enter qualifying distributions from Part XII, line 4

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

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8

0.

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		FAMILY FOUNDATION d on Investment Income (Section 49)	40(a), 4940(b), 49			155200 see inst		Page 4
1a, l	Exempt operating foundations descr	ribed in section 4940(d)(2), check here 🕨 🔲 and	l enter "N/A" on line 1.	ì				
1	Date of ruling or determination letter	r: (attach copy of letter if n	ecessary-see instruction	ıs)				
b (Domestic foundations that meet the	section 4940(e) requirements in Part V, check here	➤ X and enter 1%)	1		1,0	046.
(of Part I, line 27b							
C /	All other domestic foundations enter	r 2% of line 27b. Exempt foreign organizations enter 4	4% of Part I, line 12, col. ((b). J				
		ction 4947(a)(1) trusts and taxable foundations only.	Others enter -0-)		2			<u>0.</u>
	Add lines 1 and 2				3		1,0	046.
4 5	Subtitle A (income) tax (domestic se	ection $4947(a)(1)$ trusts and taxable foundations only.	. Others enter -0-)		4			0.
		Subtract line 4 from line 3. If zero or less, enter -0-			5		1,(046.
	Credits/Payments:		1 1					
	2014 estimated tax payments and 20		6a					
	Exempt foreign organizations - tax w		6b					
	Tax paid with application for extension	,	6c	1,046.				
	Backup withholding erroneously with		6d					
	Total credits and payments Add line				7		1,0	046.
		t of estimated tax. Check here if Form 2220 is at	ttached		8			24.
		is more than line 7, enter amount owed			9			24.
		the total of lines 5 and 8, enter the amount overpaid	1		10			
	Enter the amount of line 10 to be: Cr			Refunded >	11			
	rt VII-A Statements Re						V	
		on attempt to influence any national, state, or local leg	gislation or did it participa	te or intervene	ın	<u> </u>	_	No
	any political campaign?					18		X
		the year (either directly or indirectly) for political purp				11)	X
		o, attach a detailed description of the activities a	and copies of any mate	erials publishe	ed or			
	distributed by the foundation in a							,,
	Did the foundation file Form 1120-P					10	;	X
		political expenditures (section 4955) imposed during t		0		İ		
		0 . (2) On foundation manage		0.		ļ		
	managers. > \$	id by the foundation during the year for political exper $oldsymbol{0}$.	iditure tax imposed on to	undation				
	· · · · · · · · · · · · · · · · · · ·		NIDEO					x
	lf "Yes," attach a detailed descrip		inor			2	+	 ^ -
		es, not previously reported to the IRS, in its governing	a instrument, articles of i	accrearation o				İ
		? If "Yes," attach a conformed copy of the chan		icorporation, o	"	3		x
		usiness gross income of \$1,000 or more during the y	-			4:		X
	If "Yes," has it filed a tax return on Fo		cai ·		N	/3 4		+~
		, dissolution, or substantial contraction during the yea	ar?		11,	/ A 40		X
	If "Yes," attach the statement rec							1
		(e) (relating to sections 4941 through 4945) satisfied	either:					
	By language in the governing instr	• • • • • • • • • • • • • • • • • • • •						
	· · · · · · · · · · · · · · · · · · ·	amends the governing instrument so that no mandat	ory directions that conflic	t with the state	law			
	remain in the governing instrument?		,		,	6		х
	• •	000 in assets at any time during the year? If "Yes," co	omplete Part II. col. (c)	. and Part XV	,	7		
	,.	, ,	,	,			1 -	
8a 8	Enter the states to which the foundat	tion reports or with which it is registered (see instruct	tions) >					
	AZ	, , ,		· · · · · · · · · · · · · · · · · · ·				
b 1	If the answer is "Yes" to line 7, has th	he foundation furnished a copy of Form 990-PF to the	Attorney General (or des	ignate)	_			
		al Instruction G? If "No," attach explanation	•	•		81	<u> </u>	
9	Is the foundation claiming status as	a private operating foundation within the meaning of	section 4942(j)(3) or 494	2(j)(5) for cale	ndar			
)	year 2014 or the taxable year beginn	ning in 2014 (see instructions for Part XIV)? If "Yes,"	" complete Part XIV			9		X
10	Did any persons become substantial	I contributors during the tax year? if "Yes," attach a sche	edule listing their names and a	ddresses		1()	X

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Pa	art VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			Ţ	
	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory (rivileges?			
	If "Yes," attach statement (see instructions)		12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
	Website address ► N/A				
14	The books are in care of TAXPAYER Telephone no.	▶ <u>480-66</u>		<u>700</u>	
	Located at ► 10728 E COTTONTAIL LANE, SCOTTSDALE, AZ	ZIP+4 ►85	<u> 255</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			. •	
		15	N	/A	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,		.	Yes	No
	securities, or other financial account in a foreign country?		16		<u> </u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name	e of the			
_	foreign country				
٢٤	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		ı I	V- '	
	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):				
		es X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	(1)			
		es X No			
		es X No			
		es X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available				
	· · · ·	es X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"				
	If the foundation agreed to make a grant to or to employ the official for a period after	[]			
		es X No			
t	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	37 / 3	ا ا	}	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here				
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			- 1	v
_	before the first day of the tax year beginning in 2014?		1c		<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation				
	defined in section 4942(j)(3) or 4942(j)(5)): At the end of toy year 2014, did the foundation have any underlybyted magnetic files. Ed. and So. Best XIII) for tay year(a) beginning.	10			
â	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?	ng es X No			
		C2 LALINO			
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,	•			
	or 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 attact				
	statement - see instructions.)	N/A	2b	İ	
	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	M/A	20		
,					
3:	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
00		es X No			
	b If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons at				
٠	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to				
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule 6)				
	Form 4720, to determine if the foundation had excess business holdings in 2014)	, N/A	35		
4:	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	/	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpos	e that	<u> </u>		
•	had not been removed from jennardy before the first day of the tay year beginning in 2014?		₄₆		Y

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orm 990-PF (2014) DOMER FAMILY FOUNDATION			26-15520	01 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
.(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	es X No	
(2) Influence the outcome of any specific public election (see section 4955); or	or to carry on, directly or indir			
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	es X No	1
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section			
4945(d)(4)(A)? (see instructions)		Ye	es 🗶 No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t	for		
the prevention of cruelty to children or animals?		Y6	es X No	·
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described	ın Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	nere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ined		
expenditure responsibility for the grant?	N	1/A 🔲 Y	es 🔲 No	
If "Yes," attach the statement required by Regulations section 53 494		•		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	F-, F	☐ y ,	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?	٠. بــــــ		Sb X
If "Yes" to 6b, file Form 8870	ordenar benefit dentrate.		 '	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	chelter transaction?	□ v ₄	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Trust		nagers Highly		
Paid Employees, and Contractors	cco, i canadation me	inagoro, rugin	,	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
MICHAEL A DOMER	CO-TRUSTEE	enter-o-j	compensation	allowalices
10728 E COTTONTAIL LANE	COTROBIEE			
SCOTTSDALE, AZ 85255	10.00	0.	0.	0.
PEGGY J DOMER	CO-TRUSTEE	.	<u> </u>	
10728 E COTTONTAIL LANE	CO-IROSIEE			
SCOTTSDALE, AZ 85255	2.00	0.	0.	0.
COTTODADE, AZ 03233	2.00	0.	0.	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	ontor "NONE "		
Compensation of tive highest-paid employees (other than those inc	(b) Title, and average	enter NONE.	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	account, other
	devoted to position		compensation	allowances
NONE				
	<u> </u>			
	-			
	1			
	, ,			
	_			
	l			
Total number of other employees paid over \$50,000				0
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1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1 1	
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
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	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	1,046.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	<1.046.>

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

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)			
	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			_ 0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009	_			
b From 2010]			
c From 2011	_			
d From 2012	_			
e From 2013 1,153.	-			
f Total of lines 3a through e	1,153.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: ► \$ 0.	<u>-</u>			
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,153.			
b Prior years' undistributed income Subtract		_		
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.				
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	0.	<u> </u>		
9 Excess distributions carryover to 2015.	1 153			
Subtract lines 7 and 8 from line 6a	1,153.			
10 Analysis of line 9:				
a Excess from 2010	4			
b Excess from 2011	4			
c Excess from 2012	-			
d Excess from 2013 1,153	싁			

▶ 3b

Total

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Part XVI-A Analysis of Income-Produ	cing Activitie	s			
Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income		by section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a					
b					
C					
d		·			
e		·			
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			\perp		
4 Dividends and interest from securities	900001	104,582.	·		
5 Net rental income or (loss) from real estate:			1 1		
a Debt-financed property			1	-	
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			1		
7 Other investment income			 		
8 Gain or (loss) from sales of assets other					
than inventory			+ +		
9 Net income or (loss) from special events			 		·· - · -
10 Gross profit or (loss) from sales of inventory			1		
11 Other revenue:					
å	·		+ +	=.	
b	-		 		
C	1 1		+		
d e			+		
12 Subtotal. Add columns (b), (d), and (e)		104,582		0.	0
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>	1017002	 	13	444 = 44
(See worksheet in line 13 instructions to verify calculations.)					
	to the Assem	nlichment of E	vomnt l	Purmosos	
Part XVI-B Relationship of Activities	to the Accom	ipiisnment of E	xempt i	Purposes	
Line No. Explain below how each activity for which inc	ome is reported in c	olumn (e) of Part XVI-	A contribut	ed importantly to the accon	plishment of
▼ the foundation's exempt purposes (other than					
				_	
				. <u></u>	
					
					
				<u> </u>	
					<u> </u>

423821 11-24-14

Pa	rt XVII	Information Re Exempt Organ		sfers To a	and Transactions	and Relati	ionships With Noncha	ritable	•	
1	Did the or	ganization directly or indir		of the followin	g with any other organiza	ion described i	n section 501(c) of		Yes	No
•		(other than section 501(c)					11 00011011 00 1(0) 01			
a		from the reporting founda			-					
	(1) Cash	· -		•	•			1a(1)		<u>x</u>
	(2) Other	assets						1a(2)		X
b	Other tran	sactions:								
	(1) Sales	of assets to a noncharital	ble exempt organizati	ion				1b(1)	_	<u> </u>
	(2) Purcl	hases of assets from a noi	ncharitable exempt o	rganization				1b(2)		X
	(3) Renta	al of facilities, equipment,	or other assets					1b(3)		<u>X</u>
		bursement arrangements						1b(4)		X
		s or loan guarantees						1b(5)		<u>X</u>
		rmance of services or me						1b(6)	 -	X
		f facilities, equipment, ma			•			1c		X
a	or service	s given by the reporting fo	oundation. If the foun	idation receive	• •	-	e fair market value of the goods, action or sharing arrangement,		ets,	
(a) L		i) the value of the goods, (b) Amount involved	· · · · · · · · · · · · · · · · · · ·		e exempt organization	(d) Des	cription of transfers, transactions, and	ebaring arr	angeme	
(4)	110	(b) / anobit involved	(c) Harric Or	N/A	cxempt organization	(u) Des	cription of transiers, transactions, and	Shallig al	angenie	
				11/12						
				· · · · · · · · · · · · · · · · · · ·						
			······································							
							· -,			
										
							···· - · · ·			
										
										
	ın section	ndation directly or indirect 501(c) of the Code (other omplete the following schi	r than section 501(c)	•	, ,	nizations descri	bed	Yes	X	No
		(a) Name of org			(b) Type of organization		(c) Description of relations	ship		
		N/A								
						4				
Sig He	re and b	r penalties of perjury, I declare elief, it is true; somech and con			n taxpayer) is based on all info	CO-	oreparer has any knowledge Ref	ay the IRS of the Irs of the Irs	e prepar (see ins	rer
	519	nature of officer or trustee Print/Type preparer's na	ama	Preparer's s		Date	Check I if PTIN			
		Transcripts preparer Sile	ille	i ichaici 22	ignature	Date	self- employed			
Pa	id	DONALD R.	T.FO	1.1.	OR. J. AS	2/12/1		0288	307	
	eparer	Firm's name ► DON			COMPANY, LT		Firm's EIN ▶ 86 – 0			
	e Only	Times name > DOM	11	O MILL	Committy III	- •	Thin seller 50 0	5555		
	•	Firm's address ▶ 23	90 E. CAM	ELBACK	ROAD, #310					
			OENIX, AZ				Phone no. (602)	957-	818	1
								orm 99 0		

FORM 990-PF	DIVIDENDS	S AND INTER	EST FROM	SECUR	ITIES	STATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	_	ENUE	(B) NET INVES MENT INCO		
LOAN INVESTMENT	104,582.	•	0. 104	1,582.	104,58	2.	
TO PART I, LINE 4	104,582.		0. 104	1,582.	104,58	2.	
FORM 990-PF		TAX	ES	., :		STATEMENT	2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		
TAXES		1,956.		0.			0.
TO FORM 990-PF, PG	1, LN 18 =	1,956.		0.			0.
FORM 990-PF		OTHER INV	ESTMENTS	······································		STATEMENT	3
DESCRIPTION			LUATION ETHOD	вос	K VALUE	FAIR MARKET VALUE	
REAL ESTATE INVESTM	ENTS		COST	1	,717,900.	1,717,90	0.
TOTAL TO FORM 990-P	F, PART II	, LINE 13		1	,717,900.	1,717,90	0.

Form'	8868 (Rev. 1-2014)					Page 2
	ou are filing for an Additional (Not Automatic) 3-Month E	xtension, o	complete only Part II and check this	box		X
	Only complete Part II if you have already been granted an				3868.	
• If y	ou are filing for an Automatic 3-Month Extension, comple					
Par	t II Additional (Not Automatic) 3-Month E	Extensio	n of Time. Only file the origin	al (no co	opies needed)	-
			Enter filer's	identifyin	g number, see ir	structions
Туре	or Name of exempt organization or other filer, see instr	uctions		Employer	identification nur	nber (EIN) or
print						
File by					<u> 26-15520</u>	01
due dat	ur I Number, street, and room of suite no man o box,	see instruc	tions	Social sec	curity number (SS	iN)
return	See 10728 E COTTONTAIL LANE					
instruct	City, town or post office, state, and ZIP code For a	foreign add	dress, see instructions			
	SCOTTSDALE, AZ 85255					
Enter	the Return code for the return that this application is for (fi	ile a separa	ite application for each return)			0 4
		- 1				
Appli	cation	Return	Application			Return
<u>Is Fo</u>	<u> </u>	Code	Is For			Code
Form	990 or Form 990-EZ	01				
<u>Form</u>	990-BL	02	Form 1041-A			08
Form	4720 (Individual)	03	Form 4720 (other than individual)			09
Form	990-PF	04	Form 5227			10
	990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	990-T (trust other than above)	06	Form 8870			12
STOP	P! Do not complete Part II if you were not already grante	d an autor	matic 3-month extension on a prev	ously file	d Form 8868.	
	TAXPAYER				F 0 F F	
	e books are in the care of ▶ 10728 E COTTON	ITAIL		AZ 8	5255	
	lephone No ▶ <u>480-661-1700</u>		Fax No 🕨			
	he organization does not have an office or place of busine					·
	his is for a Group Return, enter the organization's four digi					
box			ach a list with the names and EINs of	all memb	ers the extension	is for
4	· —	NOVEM	BER 15, 2015			
5	For calendar year $\underline{2014}$, or other tax year beginning $_$, and endin		.	
6	If the tax year entered in line 5 is for less than 12 months,	check reas	son Initial return _	Final r	eturn	
	Change in accounting period					
7	State in detail why you need the extension	.== ==	OV MUTER REPORTED T		77 MO F1	
	ADDITIONAL INFORMATION REQUIR		OM THIRD PARTIES I	N ORD	ER TO FI	LE A
	COMPLETE AND ACCURATE RETURN.)				
					-	
						
						
8a	If this application is for Forms 990-BL, 990-PF, 990-T, 472	U, or 6069,	enter the tentative tax, less any		_	1 046
	nonrefundable credits See instructions			8a	\$	1,046.
b	If this application is for Forms 990-PF, 990-T, 4720, or 606					
	tax payments made Include any prior year overpayment	allowed as	a credit and any amount paid	- Oh		0.
_	previously with Form 8868		Al- Al- a formation of management of the company	8b	\$	
С	Balance due. Subtract line 8b from line 8a Include your p	-	im mis form, it required, by using			1,046.
	EFTPS (Electronic Federal Tax Payment System) See inst	tructions	st be completed for Part II	8c_	 \$	<u> </u>
					of my knowledge ca	d haliof
Under It is tr	penalties of perjury, I declare that I have examined this form, include, correct, and complete, and that I am authorized to prepare this	form.		o tile dest C	n my knowledge and	ı uenei,
<u>Signa</u>	ture ▶ Title ▶	CO-TR	USTEE	Date		
					Form 8868	(Rev 1-2014)