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

OMB No 1545-0052 2014

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.

Open to Public Inspection

F	or	cale	ndar	year 2014, or tax year b	eginning	, 2014,	and ending		,	
	BI	LL	AND	DIANNE MENSCH			<u>-</u>	A	Employer identification nur 45-4015961	
				OOKOUT RIDGE YON, AZ 85118				В	Telephone number (see inst 480-844-7363	ructions)
-					-	1		С	If exemption application is	pending, check here 🕨 🗌
(G (Chec	k all	that apply Initial i	eturn	Initial return of a forn Amended return	ner public charity	D	1 Foreign organizations, ched	<u></u>
ī	H (Chec	k ty		ss change [X] Section 501	Name change (c)(3) exempt private f	oundation	1	2 Foreign organizations meet here and attach computation	ing the 85% test, check
-	Section 4947(a)(1) nonexempt charitable trust			rust Other taxable pounting method: XC	orivate foundation	Ε	If private foundation status under section 507(b)(1)(A)			
				II, column (c), line 16)		Other (specify) column (d) must be or		F	If the foundation is in a 60 under section 507(b)(1)(B)	
٢			TAI	nalysis of Revenue					I	
L			co sa	(penses (The total of al lumns (b), (c), and (d) rr rily equal the amounts in ee instructions))	mounts in nav not neces-	(a) Revenue and expenses per books	(b) Net investme income	Πţ	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
-			1 2	Contributions, gifts, grants, etc, received Ck ► if the foundn is not requ		27,966.	•		<u>.</u>	
			3	Interest on savings and temporary cash in Dividends and interest from securities	Ì	12.		12.	N/A	
			5 a	Gross rents						·
	-		_	or (loss) . Net gain or (loss) from sale of assets no	t on line 10			•	· ·	ļ
	REVENUE			Gross sales price for all	t on the to .	·	Soleth	41	AL .	
		<u> </u>	7	assets on line 6a Capital gain net income (from F	art IV, line 2).		HKION		,	1
		Ī	8	Net short-term capital gain.						-
			9 10 a	Income modifications Gross sales less	•	· · · · · · · · · · · · · · · · · · ·			1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	
		İ		allowances.		<u> </u>	,	-	, '	
		:	b	Less Cost of goods sold		· · ·		•	, , , , , , , , , , , , , , , , , , , ,	
ru	1			Gross profit or (loss) (attach schedule) Other income (attach schedule)			- '			
2015) 		11	Office income (attach schedule)	•					? }
00			12	Total. Add lines 1 through 11,		27,978.		12.		- 11 - 11 - 11 - 11 - 11 - 11 - 11 - 1
8	1		13	Compensation of officers, direct		0.				
AUG	i	İ	14 15	Other employee salaries and v Pension plans, employee benef	•					
¥				Legal fees (attach schedule) .		_ 				
Ω		A D M		Accounting fees (attach sch)	See St 1	600.				
SCANNED		i N	-	Other prof fees (attach sch).	•			7	TEIVED	
Ξ	9	<u>s</u>	17 18	Interest	• •			\ <u></u>	70	
္ပ	R	R	19	Taxes (attach schedule)(see instrs) Depreciation (attach				A 1.1	2015	
S	Î	Î		sch) and depletion .			800	AU	ા છા	•
	Ň	Ý	20 21	Occupancy	· ·			_		
	A	Е	22	Printing and publications				元	DEN: UT	
	A N D	P	23	Other expenses (attach schedul						
		E N S	24		atement 2	69.				
		E	24	Total operating and administration expenses. Add lines 13 through	n 23	669.	1			
		•	25	Contributions, gifts, grants paid	Part XV	12,351.				12,351.
			26	Total expenses and disbursen Add lines 24 and 25	nents.	13,020.		0		12,351.
			27	Subtract line 26 from line 12:						
			a	Excess of revenue over expen and disbursements	ses 	14,958.				
			b	Net investment income (if neg	ative, enter -0-)			12		
			c	Adjusted net income (if negati	ve, enter -0-) .					



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Part VI instructions.

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

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - sec	instructions)		
1 a Exempt operating foundations described in section 4940(d)(2), check here				
Date of ruling or determination letter: (attach copy of letter if necessary – see instrs)	1			
b Domestic foundations that meet the section 4940(e) requirements in Part V,	1			0.
check here. ► and enter 1% of Part I, line 27b	1 1			
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)	'			3
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
foundations only Others enter -0-)	2			0.
3 Add lines 1 and 2	3			0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			0.
6 Credits/Payments:				1
a 2014 estimated tax pmts and 2013 overpayment credited to 2014 6a	↓			į
b Exempt foreign organizations — tax withheld at source . 6b	_			•
c Tax paid with application for extension of time to file (Form 8868).	1			1
d Backup withholding erroneously withheld 6d	」			,
7 Total credits and payments. Add lines 6a through 6d	7			<u>0.</u>
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
11 Enter the amount of line 10 to be. Credited to 2015 estimated tax	- 11			
Part VII-A Statements Regarding Activities			—	
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	.	1 a	⁄es	No X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?		1 Ь		<u>х</u>
·	ŀ	- 	\dashv	_
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				_ }
c Did the foundation file Form 1120-POL for this year?		1 c		<u>X</u>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	ا م	ļ		_1
(1) On the foundation ►\$ 0. (2) On foundation managers ►\$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	0.	. 1		. }
foundation managers >\$ 0.		'		يَ عَ
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	`	X
If 'Yes,' attach a detailed description of the activities				. 4
2. Use the foundation made any changes, not provide the reported to the IDS, in its governing instrument, articles			التعثا	
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
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	ļ	4 a		<u>x</u>
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		4 b	N	⁄Α
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.			- 1	
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			ļ	1
By language in the governing instrument, or	ł	'	1	j
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		6	х	,
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV.	-	7	$\frac{x}{x}$	
8a Enter the states to which the foundation reports or with which it is registered (see instructions)	ĺ			
AZ			- 1	
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		8ь	х	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If 'Yes,' compile	or 4942(j)(5) ete Part XIV	9		X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		10		х
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Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		х
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		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A	<u> </u>		
14	The books are in care of ► PACKARD & APPLEBY, P.C. Telephone no ► 480-	<u>834-3</u>	550	
	Located at ► 2158 N GILBERT ROAD, SUITE 117 MESA AZ ZIP + 4 ► 85203	, _, _		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	N/A	\ >	Ц
	and enter the amount of tax-exempt interest received or accrued during the year		Т	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, securities, or other financial account in a foreign country?	16	Yes	No 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			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		·	
_	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	<u> </u>	Yes	No
1 a	During the year did the foundation (either directly or indirectly):		ļ	}
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		}	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			;
	(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? Yes X No			:
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) Yes X No			
١	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)?	16	N	/A_
	Organizations relying on a current notice regarding disaster assistance check here		ŀ	•
•	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?	10		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 $4942(j)(5)$).			;
i	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d		ł	'
	and 6e, Part XIII) for tax year(s) beginning before 2014? Yes X No	'		
	If 'Yes,' list the years ► 20 , 20 , 20 , 20		1	į
١	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)	21	N	A
•	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		1	
9.	a Did the foundation hold more than a 2% direct or indirect interest in any business			ļ
	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 disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014)	31) N	/A _
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	48		х
	b Dud the foundation make any investment in a prior year (but offer December 21, 1960) that could			
1	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			
<u> </u>	the tax year beginning in 2014?	41		(2014)
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Part VII-B Statements Regarding Activitie		4720 May Be Requ	ired (continued)	
5 a During the year did the foundation pay or incur	-			
(1) Carry on propaganda, or otherwise attempt	t to influence legislation	n (section 4945(e))?	. Yes X	10
(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registra	ic election (see section tion drive?	4955); or to carry	Yes X	10
(3) Provide a grant to an individual for travel,	study, or other sımılar p	ourposes?	Yes X	to · i
(4) Provide a grant to an organization other th in section 4945(d)(4)(A)? (see instructions)	an a charitable, etc, org	ganization described	. Yes X	4o 3
(5) Provide for any purpose other than religiou educational purposes, or for the prevention			Yes XI	No O
b If any answer is 'Yes' to 5a(1)-(5), did any of t described in Regulations section 53 4945 or in (see instructions)?	he transactions fail to c a current notice regard	qualify under the except ling disaster assistance	ions	5b N/A
Organizations relying on a current notice regar	ding disaster assistanc	e check here .	▶ 🗌	
c If the answer is 'Yes' to question 5a(4), does t tax because it maintained expenditure respons If 'Yes,' attach the statement required by Regu	sibility for the grant? .		N/A Yes	No
6 a Did the foundation, during the year, receive an			•	
on a personal benefit contract? b Did the foundation, during the year, pay premi			. ∐Yes XI	No 6b X
If 'Yes' to 6b, file Form 8870.	,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
7 a At any time during the tax year, was the found				No L
b If 'Yes,' did the foundation receive any proceed				/A 7b
Part VIII Information About Officers, Di	rectors, Trustees,	Foundation Manag	ers, Highly Paid E	mployees,
and Contractors			 	
1 List all officers, directors, trustees, foundatio	*			(-) <u>F</u>
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
WILLIAM D. MENSCH JR. 2943 S LOOKOUT RIDGE GOLD CANYON, AZ 85118	Pres & CEO O As Regid	0.	0.	0.
DIANNE MENSCH	TREAS & SEC	0.	0.	0.
2943 S LOOKOUT RIDGE GOLD CANYON, AZ 85118-1708	O A. Regid			
2 Compensation of five highest-paid employees (o	ther than those included	on line 1 – see instructio	ns). If none, enter 'NONE.	1
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
None				
				
]		ļ
	1			
Total number of other employees paid over \$50,00	0	!	>	0
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Form 990- Part VIII	PF (2014) BILL AND DIANNE MENSCH FOUNDATION Information About Officers, Directors, Trustees, Foundand Contractors (continued)	45-401 dation Managers, Highly Paid Ei	
3 Five	highest-paid independent contractors for professional services (see in	structions). If none, enter 'NONE.'	
	a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None			
Total num	hber of others receiving over \$50,000 for professional services		0
		<u>. </u>	<u> </u>
Part IX-	A Summary of Direct Charitable Activities		
List the foun	idation's four largest direct charitable activities during the tax year. Include relevant statistics and other beneficiaries served, conferences convened, research papers produced, etc.	al information such as the number of	Expenses
1 N/			
			· · ·
2			
		·	
3			
4			
"		·	
Part IX	B Summary of Program-Related Investments (see instru	ctions)	
Describe	the two largest program-related investments made by the foundation during th	e tax year on lines 1 and 2.	Amount
1			
<u>N/</u>	<u>A</u>	·	
	program-related investments. See instructions		
3			
			I
Total. Ad	d lines 1 through 3		0.
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2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes

2 3 a

3 b

6

Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) **b** Cash distribution test (attach the required schedule).

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

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). 6 Adjusted qualifying distributions. Subtract line 5 from line 4

4 12 351 5

12,351

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.

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
Distributable amount for 2014 from Part XI, line 7				728.
2 Undistributed income, if any, as of the end of 2014:			,	720.
a Enter amount for 2013 only .	:		0.	
b Total for prior years: 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2014				
a From 2009				
b From 2010				
c From 2011			•	
d From 2012 . 32,880.		i		
e From 2013 17, 947.	-			4
f Total of lines 3a through e.	50,827.		,	:
4 Qualifying distributions for 2014 from Part	, , , , ,	•		
XII, line 4. ► \$ 12,351.			•	· .
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.	/		· 12.
d Applied to 2014 distributable amount				728.
e Remaining amount distributed out of corpus	11,623.	•		
5 Excess distributions carryover applied to 2014	0.		.	0.
(If an amount appears in column (d), the same amount must be shown in column (a).)		, ,	, , , ,	,
Same amount most be shown in column (cy)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· .	
6 Enter the net total of each column as			1.	
indicated below:	Believe Silver			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	62,450.	, ^*	· · · · · · · · · · · · · · · · · · ·	<u> </u>
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		0.		
amount - see instructions .	s or to to	7	<u> </u>	
e Undistributed income for 2013. Subtract line 4a from line 2a Taxable amount — see instructions.		140	ĺ	
THE Za Taxable amount 355 ms actions.				
f Undistributed income for 2014 Subtract lines		~ , ,		
4d and 5 from line 1. This amount must be distributed in 2015.		•	1,	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 (see instructions)	0.			
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	62,450.		<u> </u>	
10 Analysis of line 9:	, ,	,		
a Excess from 2010	_	,		,
b Excess from 2011	_]		,	
c Excess from 2012 32,880		1	•	
d Excess from 2013 17, 947				
e Excess from 2014		<u> </u>	<u> </u>	<u> </u>
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Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A					
1 a If the foundation has received a ruling or dete is effective for 2014, enter the date of the	ruling	•	•	_ ` •	
b Check box to indicate whether the foundat		rating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for each year listed	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
b 85% of line 2a .					
 Qualifying distributions from Part XII, line 4 for each year listed 					
d Amounts included in line 2c not used directly for active conduct of exempt activities.					· · · · · · · · · · · · · · · · · · ·
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:	i				
(1) Value of all assets .					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, fine 6 for each year fisted					
c 'Support' alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income			<u> </u>		
Part XV Supplementary Information assets at any time during the	Complete this) e year — see in	part only if the structions.)	foundation had	i \$5,000 or more	in
1 Information Regarding Foundation Mana	-				
a List any managers of the foundation who hav close of any tax year (but only if they have	e contributed more ti	nan 2% of the total co	ontributions received	by the foundation bef	ore the
None	e contributed more	(liai) 45,000). (Occ	36011011 347 (4)(2) 7		
b List any managers of the foundation who owr	10% or more of the	stock of a corporation	on (or an equally larg	e portion of the owner	ship of
a partnership or other entity) of which the None	foundation has a 1	0% or greater inter	est		·
2 Information Regarding Contribution, Gra	nt Gift Loan Scho	plarship etc Progra	ams:		
Check here X if the foundation only ma				does not accept unso	licited
requests for funds. If the foundation make					
a The name, address, and telephone number of		he nerson to whom o	and and an an and a	a dideasa a di	
a The Hame, address, and telephone number of	ii e-iiiaii auuress or t	ne person to whom a	pplications should be	e addressed.	
b The form in which applications should be	submitted and info	rmation and materia	als they should inclu	ude:	
c Any submission deadlines:					
d Any restrictions or limitations on awards,	such as by geograf	phical areas charita	able fields, kinds of	institutions or other	r factors:
army restrictions of miniations of awards,	occir as by geograp	Januar arcus, criarite	iolo nolus, kilius Ul	mandions, or other	idetti 3.

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3 Grants and Contributions Paid Du				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	ness) substantial contributor	recipient		
Name and address (home or busing a Paid during the year) See Statement 4	ness) substantial contributor	recipient	contribution	
			▶ 3:	12 251
Total b Approved for future payment			> 3	12,351.
Total	<u> </u>		. ▶ 3	ь

Part XVI-A Analysis of Income-Producing Activities

Enter gros	ss amounts unless otherwise indicated.	Unrelated	business income	Excluded by	section 512, 513, or 514	(2)
		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions)
	gram service revenue:			code		
а Ь		 				
		 		- - -		
g		 		+		
ĕ——		 		+ +-		
ř—		+				
a Fees	s and contracts from government agencies					
_	nbership dues and assessments			- 		
	est on savings and temporary cash investments			14	12.	
	dends and interest from securities					
5 Net	rental income or (loss) from real estate:					
	t-financed property					
b Not	debt-financed property					
6 Net r	ental income or (loss) from personal property		<u> </u>			
7 Othe	er investment income					
8 Gain	or (loss) from sales of assets other than inventory					
9 Net	income or (loss) from special events					
10 Gros	ss profit or (loss) from sales of inventory					
11 Othe	er revenue.	, , ,	-1		· · · · · · · · · · · · · · · · · · ·	
a					···-	
b						
c						
d				_		
40 ^e		7-7-		, , , , , , , , , , , , , , , , , , , 		
	total. Add columns (b), (d), and (e)				12.	
	al. Add line 12, columns (b), (d), and (e)				13	12.
	ksheet in line 13 instructions to verify calculated. 71-B Relationship of Activities to the		shment of Exer	npt Purpos	es	
Line No. ▼	Explain below how each activity for which accomplishment of the foundation's exemp	income is report of purposes (of	rted in column (e) oner than by providir	of Part XVI-A ong funds for su	contributed importan	tly to the instructions)
N/A						
			· · · · · · · · · · · · · · · · · · ·			
						
			<u> </u>			
						
				<u>.</u>		
			<u></u>			
			·			
			. 		· · · · · · · · · · · · · · · · · · ·	
	Ī					
						

Form 990-PF (2014) BILL AND DIANNE MENSCH FOUNDATION 45-4015961 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

descrirelatur a Trans (1) C (2) C b Other (1) S (2) P (3) R (4) R (5) L (6) P c Shari d If the	ibed in section 501(c) or any to political organizate of the reporting cash. Other assets or transactions. Sales of assets to a non-Purchases of assets from the remainder of facilities, equipmental of facilities, equipmental or facilities, equipmental of facilities, equipmental of facilities, equipmental of facilities, equipmental of facilities, equipmental answer to any of the abods, other assets, or ser	of the Code (of ions? foundation to ions? foundation to ionalize exemple a noncharitation of the iments or membershient, mailing listove is 'Yes,' vices given by	r assets ip or fundraising solicitations its, other assets, or paid emplo complete the following schedu the reporting foundation. If the fo	nyees le Column (b)	should always show the fair	1a(1) X 1a(2) X 1b(1) X 1b(2) X 1b(3) X 1b(4) X 1b(5) X 1b(6) X 1c X
	,,,	, _	how in column (d) the value of			
(a) Line no.	(b) Amount involved	(c) Name o	of noncharitable exempt organization	(d) Descr	iption of transfers, transactions, an	sharing arrangements
N/A				1	· · · · · · · · · · · · · · · · · · ·	
	 					······································
		· · · · · · · · · · · · · · · · · · ·				
	 					
	 					
						
	 					
	 	 			 -	
descr	foundation directly or inc ribed in section 501(c) c is,' complete the following	of the Code (or	d with, or related to, one or more ther than section 501(c)(3)) or	tax-exempt orga in section 527	enizations	Yes XNo
	(a) Name of organization	on	(b) Type of organization	n	(c) Description of re	lationship
N/A			<u> </u>			
				1	· · · · · · · · · · · · · · · · · · ·	
						
Sign Here			whed this return, including accompanying than taxpayer) is based on all information \$/10/20	of which preparer		May the IRS discuss this return with the preparer snown below (see instructions)? X Yes No
	Print/Type preparer's nam	ne	Prepare forbyen	/ / Dale	- Charles II.	PTIN
מה: מ	1			und CHAT	Check II	1
Paid		CKARD, CPA				P00161106
Preparer		ackard &			Firm's EIN * 86-0)975987
Use Only			lbert Rd., Suite 11			
	<u> </u>	<u>esa, AZ 8</u>	5203		Phone no 480	-834-3550
BAA						Form 990-PF (2014)

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

2014

Department of the Treasury Internal Revenue Service	► Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instruction	ns is at www.irs.gov/form990.
Name of the organization		Employer Identification number
BILL AND DIANNE	MENSCH FOUNDATION	45-4015961
Organization type (check	one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organi	zation
	4947(a)(1) nonexempt charitable trust	t not treated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust	t treated as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization	n is covered by the General Rule or a Special Rule	
Note. Only a section 501((c)(7), (8), or (10) organization can check boxes for both the Ger	neral Rule and a Special Rule See instructions.
General Rule		
	ling Form 990, 990-EZ, or 990-PF that received, during the year,	contributions totaling \$5,000 or more (in money or
property) from any on	ne contributor Complete Parts I and II. See instructions for deter	rmining a contributor's total contributions.
Special Rules		
-	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met	the 33-1/3% support test of the regulations
under sections 509(a)(1	1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-E	Z), Part II, line 13, 16a, or 16b, and that
Form 990, Part VIII, I	lescribed in section 501(c)(3) filing Form 990 or 990-EZ that met 1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ e contribution, during the year, total contributions of the greater cine 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	of (1) \$3,000 or (2) 2% of the amount on (i)
For an organization d	lescribed in section 501(c)(7), (8), or (10) filing Form 990 or 990- contributions of more than \$1,000 exclusively for religious, chari	-EZ that received from any one contributor, itable, scientific, literary, or educational
purposes, or for the p	prevention of cruelty to children or animals. Complete Parts I, II,	and III.
_		
	lescribed in section 501(c)(7), (8), or (10) filing Form 990 or 990	
	ributions exclusively for religious, charitable, etc., purposes, but	
	checked, enter here the total contributions that were received du ose. Do not complete any of the parts unless the General Rule a	
	ively religious, charitable, etc., contributions totaling \$5,000 or m	
	- ·	
Caution: An organization	that is not covered by the General Rule and/or the Special Rule	es does not file Schedule B (Form 990, 990-EZ, or
Part I, line 2, to certify th	wer 'No' on Part IV, line 2, of its Form 990, or check the box on nat it does not meet the filing requirements of Schedule B (Form	ine H of its Form 990-EZ or on its Form 990-PF, 990, 990-EZ, or 990-PF).
	duction Act Notice, see the Instructions for Form 990, 990EZ,	Schedule B (Form 990, 990-EZ, or 990-PF) (201
or 990-PF.	Addition but notice, see the instructions for Form 550, 550LL,	Concadic & (1 01111 550, 550-E2, 01 550-FF) (20

	B (Form 990, 990-EZ, or 990-PF) (2014)	Page	1 of 1 of Part 1
Name of org	AND DIANNE MENSCH FOUNDATION	(' '	r Identification number 015961
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space		313301
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WILLIAM D. MENSCH JR		Person X Payroll
	2943 S LOOKOUT RIDGE	\$13,983.	Noncash
	GOLD CANYON, AZ 85118		(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	DIANNE MENSCH		Person X Payroll
	2943 S LOOKOUT RIDGE	\$ <u>13,983.</u>	Noncash
	GOLD CANYON, AZ 85118		(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
			noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)

Page

L to

1 of Part II

Name of organization

BILL AND DIANNE MENSCH FOUNDATION

Employer identification number 45-4015961

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed (a) No. from Part I (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received N/A (a) No. from Part I (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received (a) No. from (b)
Description of noncash property given (d) Date received (c) FMV (or estimate) Part I (see instructions) (a) No. from (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received Part I (a) No. from (d) Date received (b) Description of noncash property given (c) FMV (or estimate) (see instructions) Part I (a) No. from (d) Date received (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) Part I BAA Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

of Part III

Employer identification number

	ND DIANNE MENSCH FOUNDATION	45-4015961					
Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8)						
	or (10) that total more than \$1,000 for the	ne year from any one contrib	outor. Complete columns (a) through (e) and				
	the following line entry. For organizations of contributions of \$1,000 or less for the year.	empleting Part III, enter the tota					
	Use duplicate copies of Part III if additional	(Enter this information once Se space is needed	ee instructions)				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	N/A						
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e)					
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
			ļ				
	i						

(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

(c) Use of gift

(d) Description of how gift is held

(a) No. from Part I

(b) Purpose of gift

2014 `	Federal Statements	Page 1
BIL	45-4015961	
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees		
ACCOUNTINGDEPARTMENT.COM	(a) (b) Net (c) Expenses Investment Adjusted Per Books Income Net Income Total \$\frac{600}{5000}\$. \$\frac{5}{600}\$.	(d) Charitable Purposes \$ 0.
Statement 2 Form 990-PF, Part I, Line 23 Other Expenses		
BANK FEES	(a) (b) Net (c) Expenses Investment Adjusted Net Income \$ 69. Total \$\frac{\$\frac{69}{5}}{69}\$. \$\frac{\$\frac{5}{3}}{3}\$.	(d) Charitable Purposes 0.
Statement 3 Form 990-PF, Part II, Line 22 Other Liabilities		
CHASE CREDIT CARD #3604 .		220.
Statement 4 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year		
Name and Address	Found- Donee ation Purpose of Relationship Status Grant	Amount
PARTNERS IN HEALTH P.O. BOX 996 FREDERICK, MD 21705	501(C)(3) GENERAL FUND	\$ 1,200.
THE UNIVERSITY OF ARIZONA FOUNDATION 1111 NORTH CHERRY AVE TUCSON, AZ 85721	501(C)(3) DA VINCI CIRCLE	1,000.
TEMPLE UNIVERSITY DEVELOPMENT P.O. BOX 827651 PHILADELPHIA, PA 19122	501(C)(3) SCHOLARSHIP FUND	1,000.

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Federal Statements

Page 2

BILL AND DIANNE MENSCH FOUNDATION

45-4015961

Total \$

12,351.

Statement 4 (continued)
Form 990-PF, Part XV, Line 3a
Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
DURANGO EDUCATION FOUNDATION 201 E 12TH ST DURANGO, CO 81301	_	501(C)(3)	AEROSPACE DESIGN TEAM	\$ 4,500.
PENNRIDGE SCHOOL DISTRICT 1228 N 5TH ST PERKASIE, PA 18944		501 (C) (3)	SCHOLARSHIP FUND	1,000.
XAVIER COLLEGE PREPARATORY 4710 NORTH FIFTH ST PHOENIX, AZ 85012		501 (C) (3)	SCHOLARSHIP FUND	1,000.
COMPUTER HISTORY MUSEUM 1401 N SHORELINE BLVD MOUNTAIN VIEW, CA 94043		501 (C) (3)	GENERAL FUND	1,024.
ALTERNATING HEMIPLEGIA OF CHILDHOOD FDN TOWN CENTER SUITE 1900 SOUTHFIELD, IL 48075		501 (C) (3)	GENERAL FUND	100.
FRIENDS OF PUBLIC RADIO ARIZONA 2323 W 14TH ST TEMPE, AZ 85281		501 (C) (3)	GENERAL FUND	120.
FRIENDS OF EIGHT, ARIZONA PBS 555 N CENTRAL AVE, SUITE 500 PHOENIX, AZ 85004		501 (C) (3)	GENERAL FUND	120.
NAPERVILLE EDUCATION FOUNDATION 203 W HILLSIDE ROAD NAPERVILLE, IL 60540		501 (C) (3)	GENERAL FUND	262.
TAU BETA PI ASSOCIATION, INC P.O. BOX 2697 KNOXVILLE, TN 37901		501 (C) (3)	GENERAL FUND	125.
FORT LEWIS COLLEGE CONCERT HALL 1000 RIM DRIVE DURANGO, CO 81301		501 (C) (3)	GENERAL FUND	400.
DURANGO ARTS CENTER 802 EAST SECOND AVE DURANGO, CO 81301		501 (C) (3)	GENERAL FUND	500.

Form **8868** (Rev January 2014)

(ital bankary activity

Department of the Treasury Internal Revenue Service

payment instructions.

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

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

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box.

OMB No 1545-1709

Electronic corporation request an of Associated	filing (e-file). You can electronically file Form 8868 in required to file Form 990-T), or an additional (not extension of time to file any of the forms listed in Part II With Certain Personal Benefit Contracts, which must filing of this form, visit www.irs.gov/efile and click of	if you need automatic) or Part II w ust be sent	I a 3-month automatic extension of time 3-month extension of time. You can ele tith the exception of Form 8870, Information to the IRS in paper format (see instructi	to file ctronica Return	(6 months ally file Fo for Transf	orm 8868 to ers	
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed).						
A corporati	ion required to file Form 990-T and requesting an a	utomatic 6	month extension - check this box and	complet	e Part I d	only ▶ 🗍	
	orporations (including 1120-C filers), partnerships,			an ext	ension of	time to file	
	Name of exempt organization or other filer, see instructions.					on number (EIN) or	
Type or print	BILL AND DIANNE MENSCH FOUNDATION Number, street, and room or suite number If a P O box, see instructions			45-4015961 Social security number (SSN)			
File by the due date for filing your	2943 S LOOKOUT RIDGE			Social security number (SSN)			
return See instructions	GOLD CANYON, AZ 85118	City, town or post office, state, and ZIP code. For a foreign address, see instructions GOLD CANYON, AZ 85118					
Enter the F	Return code for the return that this application is fo	r (file a sep	parate application for each return)	•		. 04	
Applicatio Is For	Application Is For		Application Is For			Return Code	
Form 990 o	or Form 990-EZ	01	Form 990-T (corporation)			07	
Form 990-BL		02	Form 1041-A			08	
Form 4720 (individual)		03	Form 4720 (other than individual)			09	
Form 990-PF		04				10	
	T (section 401(a) or 408(a) trust)	05	Form 6069 11				
Form 990-	T (trust other than above)	06	Form 8870			12	
Telephe If the c If this check the exi I required The	one No. organization does not have an office or place of but is for a Group Return, enter the organization's four this box . if it is for part of the group, of tension is for. uest an automatic 3-month (6 months for a corporation 8/15 , 20 15 , to file the exempt organization is for the organization's return for: X calendar year 20 14 or tax year beginning , 20 e tax year entered in line 1 is for less than 12 months.	Fax No siness in the digit Group check this be required to anization re	the United States, check this box	f this is	for the wand EINs o	hole group,	
	Change in accounting period s application is for Forms 990-BL, 990-PF, 990-T,						
nonr	nonrefundable credits. See instructions					0.	
tax p	payments made. Include any prior year overpayments made. Include any prior year overpayments due. Subtract line 3b from line 3a. Include you	nt allowed	as a credit	3 b	\$	0.	
EFT	PS (Electronic Federal Tax Payment System). See	Instruction	S	3 с	\$	0.	

Form 8868 (Rev 1-2014)

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for