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## **Return of Private Foundation**

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

OMB No 1545-0052

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

| For                              | calen  | dar year 2014 or tax year beginning                                     |                    | 4, and   | ending                   |   | , 20                    |
|----------------------------------|--------|---|--------------------|--|--------------------------|---|-------------------------|
|                                  |        | undation  |                    |  |                          | r identification numbe                                |                         |
| AME                              | R FOU  | INDATION FOR RESEARCH AND EDUCATION                                     | V                  |  | 45-5464                  | 550   | /                       |
|                                  |        | d street (or P O box number if mail is not delivered to street address) | Room               | /suite   |                          | e number (see instruction                             | ins)                    |
| 620                              | 00 S   | SYRACUSE WAY SUITE 200  |                    |  | 303-495                  | 5-1200  |                         |
|                                  |        | n, state or province, country, and ZIP or foreign postal code           |                    |  |                          | ion application is pendi                              | ng check here▶□         |
|                                  |        | OOD VILLAGE CO 80111-4737   |                    | o ii exemp                                       | on application to perior | g, 000x0.0  |                         |
|                                  |        |   | of a former public | charity  | D 1. Foreigi             | n organizations, check l                              | nere ▶□                 |
| _                                |        | ☐ Final return ☐ Amended r  |                    | •  |                          | -   | _                       |
|                                  |        | ☐ Address change ☐ Name char  |                    |  |                          | n organizations meeting<br>here and attach compu      |                         |
| н                                | Check  | type of organization. X Section 501(c)(3) exempt p                      | ·                  |  | E If private             | foundation status was t                               |                         |
|                                  |        | on 4947(a)(1) nonexempt charitable trust                                |                    | dation   | section 5                | 07(b)(1)(A), check here                               | ▶∐                      |
|                                  |        | narket value of all assets at J Accounting method                       |                    |  | F If the fou             | adation is in a 60 month                              | termination             |
|                                  |        | f year (from Part II, col (c),  |                    |  |                          | ndation is in a 60-montl<br>ction 507(b)(1)(B), check |                         |
|                                  |        | 5) ► \$ 491,622 (Part I, column (d) must be                             | on cash basis )    |  |                          |   |                         |
| Pa                               | art l  | Analysis of Revenue and Expenses (The total of                          | (a) Revenue and    |  |                          |   | (d) Disbursements       |
|                                  |        | amounts in columns (b), (c), and (d) may not necessarily equal          | expenses per       |  | investment<br>icome      | (c) Adjusted net<br>income                            | for charitable purposes |
|                                  |        | the amounts in column (a) (see instructions) )                          | books              | . "  |                          |   | (cash basis only)       |
|                                  | 1      | Contributions, gifts, grants, etc , received (attach schedule)          | 385,704            | ,  |                          |   |                         |
|                                  | 2      | Check ► ☐ if the foundation is not required to attach Sch B             |                    |  |                          |   |                         |
|                                  | 3      | Interest on savings and temporary cash investments                      | 111.0              |  |                          |   |                         |
|                                  | 4      | Dividends and interest from securities                                  |                    |  |                          |   | 1                       |
|                                  | 5a     | Gross rents   |                    |  |                          |   |                         |
|                                  | b      | Net rental income or (loss)   |                    |  |                          |   |                         |
| Revenue                          | 6a     | Net gain or (loss) from sale of assets not on line 10                   |                    |  |                          |   |                         |
|                                  | b      | Gross sales price for all assets on line 6a                             |                    |  |                          |   |                         |
| Š                                | 7      | Capital gain net income (from Part IV, line 2)                          |                    |  | 0                        |   |                         |
| ď                                | 8      | Net short-term capital gain .   |                    |  |                          |   |                         |
|                                  | 9      | Income modifications  |                    |  |                          |   |                         |
|                                  | 10a    | Gross sales less returns and allowances                                 |                    |  |                          |   |                         |
|                                  | b      | Less: Cost of goods sold .  |                    | _  |                          |   |                         |
|                                  | С      | Gross profit or (loss) (attach schedule)                                | 0                  | ļ <u></u>  |                          |   | _                       |
|                                  | 11     | Other income (attach schedule)  |                    |  |                          |   |                         |
|                                  | 12     | Total. Add lines 1 through 11   | 385,704            | <i>'</i>   | 0                        | 0   |                         |
| Ś                                | 13     | Compensation of officers, directors, trustees, etc                      |                    |  |                          |   |                         |
| enses                            | 14     | Other employee salaries and wages                                       |                    |  |                          |   |                         |
| _                                | 15     | Pension plans, employee benefits  |                    |  |                          |   |                         |
| X                                | 16a    | Legal fees (attachs@@lleED  |                    | <u></u>  |                          | -   |                         |
| ē                                | b      | Accounting fees (attach-schedule)                                       |                    |  | <del></del>              |   | <del> </del>            |
| Operating and Administrative Exp | C      | Other professional fees (attach scheft/le)                              |                    |  |                          |   |                         |
| štrė                             | 17     |   |                    |  |                          |   |                         |
| nis                              | 18     | Taxes (attach-schedule) (see instruction)                               |                    | -  |                          | <del> </del>  |                         |
| Ē                                | 19     | Depreciation (a) (a) Schedule) and depletion                            |                    | <del> </del>                                     |                          | <u></u>   |                         |
| Ad                               | 20     | Occupancy   | 37,491             | <del> </del>                                     |                          |   | 37,491                  |
| ק                                | 21     | Printing and publications   | 37,491             | <del> </del>                                     |                          |   | 37,491                  |
| ā                                | 22     | Other expenses (attach schedule)  | 98,141             | -  | <u></u>                  |   | 98,141                  |
| ing                              | 24     | Total operating and administrative expenses.                            | 70,141             | <del>                                     </del> |                          | <del>                                     </del>      | 20,141                  |
| rat                              |        | Add lines 13 through 23   | 135,632            |  | 0                        | 0   | 135,632                 |
| be.                              | 25     | Contributions, gifts, grants paid                                       | 43,509             | <del></del>                                      |                          | ļ — — — — — — — — — — — — — — — — — — —               | 43,509                  |
| ō                                | 26     | Total expenses and disbursements. Add lines 24 and 25                   | 179,141            | 17   | 0                        | 0   | 179,141                 |
|                                  | 27     | Subtract line 26 from line 12   | <u> </u>           |  |                          |   |                         |
| '                                |        | Excess of revenue over expenses and disbursements                       | 206,563            |  |                          |   |                         |
|                                  | a<br>b | Net investment income (if negative, enter -0-)                          | 200,303            | <u> </u>   | 0                        |   |                         |
|                                  |        | Adjusted net income (if negative, enter -0-)                            | <del></del>        | <b></b>  |                          | 0   |                         |
|                                  | , ,    | Adjusted liet income (ii negative, citter *0*/                          |                    | 1  |                          | <u> </u>  |                         |

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2014)

| Part II              | Attached schedules and amounts in the description column  | Beginning of year        | End o                                 | End of year           |  |  |
|----------------------|---|--------------------------|---------------------------------------|-----------------------|--|--|
| r art II             | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) | (a) Book Value           | (b) Book Value                        | (c) Fair Market Value |  |  |
| 1                    | Cash—non-interest-bearing   | 285,059                  | 491,622                               | 491,622               |  |  |
| 2                    | Savings and temporary cash investments  |                          |                                       |                       |  |  |
| 3                    | Accounts receivable ▶   |                          |                                       |                       |  |  |
|                      | Less: allowance for doubtful accounts ▶   |                          |                                       |                       |  |  |
| 4                    |   |                          |                                       |                       |  |  |
|                      | Less allowance for doubtful accounts ▶  |                          |                                       |                       |  |  |
| 5                    | Grants receivable   |                          |                                       |                       |  |  |
| 6                    | Receivables due from officers, directors, trustees, and other   |                          |                                       |                       |  |  |
|                      | disqualified persons (attach schedule) (see instructions) .   |                          |                                       |                       |  |  |
| 7                    | · · · · · · · · · · · · · · · · · · ·   |                          |                                       |                       |  |  |
| '                    | Other notes and loans receivable (attach schedule) ►  |                          |                                       |                       |  |  |
| ဖွ                   | Inventories for sale or use   | -                        |                                       |                       |  |  |
| 9                    |   |                          | · · · · · · · · · · · · · · · · · · · |                       |  |  |
| ומ                   | Prepaid expenses and deferred charges   |                          |                                       | -                     |  |  |
| 1                    | Investments—U.S. and state government obligations (attach schedule)   |                          |                                       |                       |  |  |
| b                    | Investments—corporate stock (attach schedule)   |                          |                                       | <del></del>           |  |  |
| C                    | Investments—corporate bonds (attach schedule)   |                          |                                       | <del> </del>          |  |  |
| 11                   | Investments—land, buildings, and equipment. basis ▶   |                          |                                       |                       |  |  |
|                      | Less accumulated depreciation (attach schedule) ▶   |                          |                                       | •                     |  |  |
| 12                   | Investments—mortgage loans  |                          |                                       |                       |  |  |
| 13                   | Investments—other (attach schedule) .   |                          |                                       |                       |  |  |
| 14                   | Land, buildings, and equipment basis ▶  |                          |                                       |                       |  |  |
|                      | Less accumulated depreciation (attach schedule)   |                          |                                       |                       |  |  |
| 15                   | Other assets (describe ►) <b>Total assets</b> (to be completed by all filers—see the  |                          |                                       |                       |  |  |
| 16                   | Total assets (to be completed by all filers—see the   |                          |                                       |                       |  |  |
| _                    | instructions Also, see page 1, item l)  | 285,059                  | 491,622                               | 491,622               |  |  |
| 17                   | Accounts payable and accrued expenses   | 12,000                   | 12,000                                |                       |  |  |
| ຸ 18                 | Grants payable  |                          |                                       |                       |  |  |
| <u>1</u> 9           | Deferred revenue  |                          |                                       |                       |  |  |
| 19<br>20<br>21       | Loans from officers, directors, trustees, and other disqualified persons  |                          |                                       |                       |  |  |
| 21                   | Mortgages and other notes payable (attach schedule)   |                          |                                       |                       |  |  |
| <b>22</b>            | Other liabilities (describe ►)  |                          |                                       |                       |  |  |
| 23                   | Total liabilities (add lines 17 through 22)   | 12,000                   | 12,000                                |                       |  |  |
|                      | Foundations that follow SFAS 117, check here . ▶ 🏻  |                          |                                       |                       |  |  |
| 24<br>25             | and complete lines 24 through 26 and lines 30 and 31.   |                          |                                       |                       |  |  |
| <u> </u>             | Unrestricted  | 19,557                   | 13,100                                | -                     |  |  |
|                      | Temporarily restricted  | 253,502                  | 466,522                               |                       |  |  |
| 26                   | Permanently restricted  |                          |                                       |                       |  |  |
| 26 27 28 29 30 31 31 | Foundations that do not follow SFAS 117, check here ▶ □   |                          | -                                     |                       |  |  |
| [                    | and complete lines 27 through 31.   |                          |                                       |                       |  |  |
| 5 27                 | Capital stock, trust principal, or current funds  |                          |                                       |                       |  |  |
| 2 28                 | Paid-in or capital surplus, or land, bldg , and equipment fund  |                          |                                       |                       |  |  |
| 2 29                 | Retained earnings, accumulated income, endowment, or other funds  |                          |                                       |                       |  |  |
| 30                   | Total net assets or fund balances (see instructions)  | 273,059                  | 479,622                               |                       |  |  |
| iii 31               | Total liabilities and net assets/fund balances (see   | 273,039                  | 479,022                               |                       |  |  |
| 2   °'               | instructions)   | 205 050                  | 401 600                               |                       |  |  |
| Part III             | Analysis of Changes in Net Assets or Fund Balances  | 285,059                  | 491,622                               |                       |  |  |
|                      | I net assets or fund balances at beginning of year—Part II, colui   | mn (a) line 30 (must     | agree with                            |                       |  |  |
| i iula<br>end.       | of-year figure reported on prior year's return)   | ini (a), inie 30 (must   | - 1                                   | 050 050               |  |  |
|                      |   |                          | 1                                     | 273,059               |  |  |
|                      | er amount from Part I, line 27a   |                          | 2                                     | 206,563               |  |  |
|                      | er increases not included in line 2 (itemize)   |                          | 1 1                                   |                       |  |  |
|                      | lines 1, 2, and 3   |                          | . 4                                   | 479,622               |  |  |
| 5 Dec                | reases not included in line 2 (itemize) ► Il net assets or fund balances at end of year (line 4 minus line 5)—f                   | <u> </u>                 | 5                                     |                       |  |  |
| ti lota              | il net assets or fund balances at end of year (line 4 minus line 5)—f   | art II, column (b), line | 30   6                                | 479,622               |  |  |

|  | 2-story brick warehou  | e kind(s) of property sold (e.g., real estate<br>se, or common stock, 200 shs MLC Co.)  |  | (b) How acquired<br>P—Purchase<br>D—Donation  | (c) Date acquired<br>(mo , day, yr)  | (d) Date sold<br>(mo , day, yr )   |  |  |
|--|--|---|--|---|--|--|--|--|
| 1a   | N/A  |   |  |   |  |  |  |  |
| b  | -,   |   | <u>.</u>   |   |  |  |  |  |
| <u> </u>   |  |   |  |   |  |  |  |  |
| <u>d</u>   |  |   |  |   |  |  |  |  |
| е_   |  | (f) Depreciation allowed  | (a) Cost o   | r other basis   | (b) Gar  | in or (loss)   |  |  |
|  | (e) Gross sales price  | (or allowable)  | 107  | ense of sale  |  | (f) minus (g)  |  |  |
| а  |  |   |  |   |  | 0.00   |  |  |
| b  |  |   |  |   |  |  |  |  |
| <u> </u>   |  |   |  |   |  |  |  |  |
| <u>d</u>   |  |   |  |   |  |  |  |  |
| е_   | Complete only for assets sho   | www.g.g.g.p.p.column (b) and owned l  | ov the foundation  | on 12/31/60   |  |  |  |  |
| -  | Complete only for assets showing gain in column (h) and own  |   |  |   |  | l (h) gain minus<br>t less than -0-) or  |  |  |
|  | (I) F M V as of 12/31/69   | (j) Adjusted basis<br>as of 12/31/69  |  | ss of col (i)   | col (k), but not less than -0-) or<br>Losses (from col (h))                              |  |  |  |
| a  |  |   |  |   |  |  |  |  |
| <u>b</u>   |  |   |  |   |  |  |  |  |
| c<br>d   |  |   |  |   |  |  |  |  |
| e  |  |   |  |   | <del>*</del>   |  |  |  |
| 2  | Capital gain net income o  |   | also enter in Pa   |   |  |  |  |  |
| _  |  | ( II (loss),  | enter -0- in Pa  |   | 2  | 0  |  |  |
| 3  |  | n or (loss) as defined in sections I, line 8, column (c) (see instruc   |  |   | 3  | 0  |  |  |
| Part   |  | ler Section 4940(e) for Redu  | cod Tay on !   | Not Investment  |  |  |  |  |
| For o  | •  | vate foundations subject to the   |  |   |  |  |  |  |
| For operation of the section of the    | ion 4940(d)(2) applies, leav   | vate foundations subject to the sethis part blank section 4942 tax on the distributions.  | section 4940(a)<br>table amount o  | tax on net invest   | ment income)   | ☐ Yes ☒ No   |  |  |
| For o<br>f sect<br><i>N</i> as tl  | ion 4940(d)(2) applies, leav<br>ne foundation liable for the<br>s," the foundation does not  | vate foundations subject to the sethis part blank section 4942 tax on the distributionalify under section 4940(e).  | section 4940(a)<br>table amount o<br>o not complete  | tax on net invest<br>of any year in the to<br>this part.  | ment income)  pase period?   | ☐ Yes ☒ No   |  |  |
| For operation of the section of the    | ion 4940(d)(2) applies, leave<br>ne foundation liable for the<br>s," the foundation does not<br>Enter the appropriate amo  | e this part blank section 4942 tax on the distribution qualify under section 4940(e) Dount in each column for each year   | section 4940(a)<br>table amount o<br>o not complete  | tax on net invest<br>of any year in the t<br>e this part.<br>ructions before ma   | ment income )  pase period?  aking any entries   | (d)  |  |  |
| For of sect  Was to form  for Yes  | ion 4940(d)(2) applies, leav<br>ne foundation liable for the<br>s," the foundation does not<br>Enter the appropriate amo   | e this part blank section 4942 tax on the distribute qualify under section 4940(e) Dount in each column for each year   | table amount on not complete ar, see the instr   | tax on net invest<br>of any year in the to<br>this part.  | ment income)  pase period?  aking any entries  |  |  |  |
| For of sect<br>Vas the following | ion 4940(d)(2) applies, leave<br>ne foundation liable for the<br>s," the foundation does not<br>Enter the appropriate amount<br>(a)<br>Base period years   | e this part blank section 4942 tax on the distribute qualify under section 4940(e) Dount in each column for each year   | table amount oo not complete ar, see the instr   | of any year in the betting part.  Fuctions before marks   | ment income )  pase period?  aking any entries  ssets (col (b)                           | (d)<br>tribution ratio<br>divided by col. (c))   |  |  |
| For of sect<br>Vas the following | ion 4940(d)(2) applies, leave<br>ne foundation liable for the<br>s," the foundation does not<br>Enter the appropriate amo<br>(a)<br>Base period years<br>ndar year (or tax year beginning in<br>2013<br>2012   | e this part blank section 4942 tax on the distributions qualify under section 4940(e) Dount in each column for each year  Adjusted qualifying distributions   | table amount oo not complete ar, see the instr   | of any year in the bethis part.  Tuctions before materials  (c)  of noncharitable-use as  | ment income )  pase period?  aking any entries  ssets (col (b))                          | (d)<br>tribution ratio<br>divided by col. (c))   |  |  |
| For of sect  Was to form  for Yes  | ion 4940(d)(2) applies, leave<br>the foundation liable for the<br>s," the foundation does not<br>Enter the appropriate amountained<br>(a) Base period years<br>indar year (or tax year beginning in<br>2013<br>2012<br>2011  | e this part blank section 4942 tax on the distributions qualify under section 4940(e) Dount in each column for each year  Adjusted qualifying distributions   | table amount of onot complete ar, see the instraction of the second of t | of any year in the tenths part.  Tuctions before many froncharitable-use as 342,  | ment income )  pase period?  aking any entries  ssets (col (b))                          | (d)<br>tribution ratio<br>divided by col. (c))<br>0.5233                                 |  |  |
| For of sect<br>Vas tif "Yes  | ion 4940(d)(2) applies, leave<br>the foundation liable for the<br>s," the foundation does not<br>Enter the appropriate amountained<br>Base period years<br>indar year (or tax year beginning in<br>2013<br>2012<br>2011<br>2010  | e this part blank section 4942 tax on the distributions qualify under section 4940(e) Dount in each column for each year  Adjusted qualifying distributions   | table amount of onot complete ar, see the instraction of the second of t | of any year in the tenths part.  Tuctions before many froncharitable-use as 342,  | ment income )  pase period?  aking any entries  ssets (col (b))                          | (d)<br>tribution ratio<br>divided by col. (c))<br>0.5233                                 |  |  |
| For one of sect of the sect of   | ion 4940(d)(2) applies, leave<br>the foundation liable for the<br>s," the foundation does not<br>Enter the appropriate amountained<br>(a) Base period years<br>indar year (or tax year beginning in<br>2013<br>2012<br>2011  | e this part blank section 4942 tax on the distributions qualify under section 4940(e) Dount in each column for each year  Adjusted qualifying distributions   | table amount of onot complete ar, see the instraction of the second of t | of any year in the tenths part.  Tuctions before many froncharitable-use as 342,  | ment income )  pase period?  aking any entries  ssets (col (b))                          | (d)<br>tribution ratio<br>divided by col. (c))<br>0.5233                                 |  |  |
| For o  | ion 4940(d)(2) applies, leaver the foundation liable for the s," the foundation does not the enter the appropriate amount (a)  Base period years and year (or tax year beginning in 2013  2012  2011  2010  2009   | e this part blank section 4942 tax on the distribute qualify under section 4940(e). Dount in each column for each year (b). Adjusted qualifying distributions 179, 92,  | table amount of onot complete ar, see the instraction of the second of t | of any year in the tenths part.  Tuctions before many froncharitable-use as 342,  | ment income )  pase period?  aking any entries  ssets (col (b))  118  324                | (d) tribution ratio divided by col (c))  0 . 5233  0 . 4 930                             |  |  |
| For o  | ion 4940(d)(2) applies, leave the foundation liable for the s," the foundation does not the foundation does not the enter the appropriate among the foundation does not the enter the appropriate among the foundation of the enter the appropriate among the foundation of the enter the foundation of the foundation does not the foundation of the foundation of the foundation does not the foundation of the foundation does not the foundation of the foundation does not the  | e this part blank section 4942 tax on the distribute qualify under section 4940(e) Dount in each column for each year (b) Adjusted qualifying distributions 179, 92,  | table amount of onot complete ar, see the instruction of the second of t | of any year in the tenths part.  (c) of noncharitable-use at 342, 188,  | ment income )  pase period?  aking any entries  ssets (col (b)  118  324                 | (d) tribution ratio divided by col (c))  0 . 5233  0 . 4930                              |  |  |
| For o  | ion 4940(d)(2) applies, leave the foundation liable for the s," the foundation does not the the appropriate amount (a)  Base period years and year (or tax year beginning in 2013 2012 2011 2010 2009  Total of line 1, column (d) Average distribution ratio  | e this part blank section 4942 tax on the distribute qualify under section 4940(e). Dount in each column for each year (b). Adjusted qualifying distributions (b). 179, 92, for the 5-year base period—divi   | table amount of onot complete ar, see the instruction of the second of t | of any year in the tenths part.  Tuctions before many of noncharitable-use and the state of the | ment income )  pase period?  aking any entries  (col (b)  118  324  the                  | (d) tribution ratio divided by col (c))  0.5233 0.4930                                   |  |  |
| For o  | ion 4940(d)(2) applies, leave the foundation liable for the s," the foundation does not the the appropriate amount (a)  Base period years and year (or tax year beginning in 2013 2012 2011 2010 2009  Total of line 1, column (d) Average distribution ratio  | e this part blank section 4942 tax on the distribute qualify under section 4940(e) Dount in each column for each year (b) Adjusted qualifying distributions 179, 92,  | table amount of onot complete ar, see the instruction of the second of t | of any year in the tenths part.  Tuctions before many of noncharitable-use and the state of the | ment income )  pase period?  aking any entries  ssets (col (b)  118  324                 | (d) tribution ratio divided by col (c))  0.5233 0.4930                                   |  |  |
| For o  | ion 4940(d)(2) applies, leave the foundation liable for the start the foundation does not  | e this part blank section 4942 tax on the distribute qualify under section 4940(e). Dount in each column for each year (b). Adjusted qualifying distributions (b). 179, 92, for the 5-year base period—divi   | table amount of o not complete ar, see the instructions of the second of the second of the second of the second of the total on second of the total on second of the second of the second of the total on second of the second of  | of any year in the tenths part. Tuctions before manager of noncharitable-use at 342, 188,   | ment income )  pase period?  aking any entries  (col (b)  118  324  the                  | (d) tribution ratio divided by col (c))  0.5233  0.4930  1.0163                          |  |  |
| For operation of forces of the force of forces   | ion 4940(d)(2) applies, leave the foundation liable for the start the foundation does not  | e this part blank section 4942 tax on the distribution qualify under section 4940(e) Dount in each column for each year (b) Adjusted qualifying distributions 179, 92, for the 5-year base period—dividation has been in existence if less  | table amount of o not complete ar, see the instructions of the second of the second of the second of the second of the total on second of the total on second of the second of the second of the total on second of the second of  | of any year in the tenths part. Tuctions before manager of noncharitable-use at 342, 188,   | ment income )  pase period?  aking any entries  ssets (col (b)  118 324.  the 3          | (d) tribution ratio divided by col (c))  0 . 5233 0 . 4930  1 . 0163 . 5082 465 , 711    |  |  |
| For of f sect Was tilf "Yes 1 Cale 2 3   | ion 4940(d)(2) applies, leave the foundation liable for the st," the foundation does not the state of the appropriate amount (a)  Base period years and year (or tax year beginning in 2013 2012 2011 2010 2009  Total of line 1, column (d) Average distribution ratio number of years the foundation of the state of the st | e this part blank section 4942 tax on the distribution qualify under section 4940(e) Dount in each column for each year (b) Adjusted qualifying distributions 179, 92, for the 5-year base period—dividation has been in existence if less  | table amount of onot complete ar, see the instruction of the value of the total on ss than 5 years from Part X, line   | of any year in the tenths part. Tuctions before manager of noncharitable-use at 342, 188,   | ment income )  pase period?  aking any entries  ssets (col (b))  118 / 324 / 2  the 3  4 | (d)<br>tribution ratio<br>divided by col. (c))<br>0.5233                                 |  |  |
| For operation of the sectom of   | ion 4940(d)(2) applies, leave the foundation liable for the st," the foundation does not the state of the appropriate amount (a)  Base period years and year (or tax year beginning in 2013 2012 2011 2010 2009  Total of line 1, column (d) Average distribution ratio number of years the foundation of the state of the st | e this part blank section 4942 tax on the distribute qualify under section 4940(e). Dount in each column for each year (b). Adjusted qualifying distributions (b). Adjusted qualifying distributions (b).  179, 92,  for the 5-year base period—dividation has been in existence if less that the section of the section (b). | table amount of onot complete ar, see the instruction of the value of the total on ss than 5 years from Part X, line   | of any year in the tenths part. Tuctions before manager of noncharitable-use at 342, 188,   | ment income )  pase period?  aking any entries  (col (b)  118  2 the  3 4  5             | (d) tribution ratio divided by col (c))  0.5233 0.4930  1.0163 .5082                     |  |  |
| For of f sect Was the factor of the factor o   | ion 4940(d)(2) applies, leave the foundation liable for the se," the foundation does not the foundation of the fou | e this part blank section 4942 tax on the distribut qualify under section 4940(e). Dount in each column for each year (b). Adjusted qualifying distributions 1779, 92,  | table amount of onot complete ar, see the instruction of the value of the total on ss than 5 years from Part X, lines  | of any year in the tenths part. Suctions before many of noncharitable-use at 188,  line 2 by 5, or by 5.  | ment income )  pase period?  aking any entries  ssets (col (b)  118 324  the 3 4 5 6     | (d) tribution ratio divided by col (c))  0.5233  0.4930  1.0163  .5082  465,711  236,674 |  |  |

| Part ' | VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948-  | —see ir   | stru | ctio       | าร)      |
|--------|--|-----------|------|------------|----------|
| 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   | i         |      | <u>-</u> . | 0        |
|        | 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 Part I, line 12, col. (b)  |           |      |            |          |
| 2      | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)   | 2         |      |            | 0        |
| 3      | Add lines 1 and 2  | 3         |      | (          | 0.00     |
| 4      | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  | 4         |      |            |          |
| 5      | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  | 5         |      | (          | 0.00     |
| 6      | Credits/Payments   |           |      |            |          |
| а      | 2014 estimated tax payments and 2013 overpayment credited to 2014 6a 6a  |           |      |            | 1        |
| b      | Exempt foreign organizations—tax withheld at source 6b   |           |      |            | 1        |
| С      | Tax paid with application for extension of time to file (Form 8868) . 6c   |           |      |            | ŀ        |
| d      | Backup withholding erroneously withheld 6d   |           |      |            |          |
| 7      | Total credits and payments Add lines 6a through 6d   | 7         |      | (          | 0.00     |
| 8      | Enter any portate, for an action of section and action action and action action and action action and action actio | 8         |      |            | 0        |
| 9      |  | 9         |      | (          | 0.00     |
| 10     | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid .  |           |      |            | 0.00     |
| 11     |  | 1         |      | (          | 0.00     |
|        | VII-A Statements Regarding Activities  |           | 1    | V          | NI.      |
| 1a     | During the tax year, did the foundation attempt to influence any national, state, or local legislation or  | י מום ונ  | 4-   | Yes        |          |
| L      | participate or intervene in any political campaign?  |           | 1a   |            | <u> </u> |
| b      | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes Instructions for the definition)?  | Į         | 1b   |            | X        |
|        | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mapublished or distributed by the foundation in connection with the activities   | atenals   |      |            |          |
| С      | 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:  (1) On the foundation. ▶ \$  0 (2) On foundation managers ▶ \$   | 0         | i    | ,          |          |
| е      | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impron foundation managers > \$  | osed      |      |            |          |
| 2      | Has the foundation engaged in any activities that have not previously been reported to the IRS?  | [         | 2    |            | x        |
| 3      | If "Yes," attach a detailed description of the activities.  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, arti   | cles of   |      |            |          |
| 3      | incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes   | 0.00 0.   | 3    |            |          |
| 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   |            |          |
| 5      | Was there a liquidation, termination, dissolution, or substantial contraction during the year? .  If "Yes," attach the statement required by General Instruction T   |           | 5    |            | x        |
| 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 direction   | ns that   |      | -          |          |
|        | conflict with the state law remain in the governing instrument?  | ·         | 6_   | <u> X</u>  |          |
| 7      | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and F   | art XV    | 7    | Х          |          |
| 8a     | Enter the states to which the foundation reports or with which it is registered (see instructions) ▶   |           |      |            |          |
|        | DELAWARE, COLORADO   |           |      |            | 1        |
| b      | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney G (or designate) of each state as required by General Instruction G? If "No," attach explanation  | eneral    | 8b   | X          |          |
| 0      | Is the foundation claiming status as a private operating foundation within the meaning of section 4942   | (1)(3) or | UD   | ^          | 1        |
| 9      | 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If  |           | - 1  | -          |          |
|        | complete Part XIV  |           | 9    | х          |          |
| 10     | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listin  | ıg their  |      |            |          |
|        | names and addresses  | ,         | 10   | Х          |          |

| Part | 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   |          | 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)  | 12   |          | х   |
| 13   | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?   | 13   | Х        |     |
| 14   | Website address ► N/A  The books are in care of ► BENJAMIN JOHNSON  Telephone no. ► 303-49  | 5-12 | 200      |     |
|      | Located at ▶ 6200 S. SYRACUSE WAY, STE 200, GRNWD VILLAGE, CO ZIP+4 ▶ 80111-  | 4737 | ,        |     |
| 15   | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year   | • •  | •        | ▶ ∐ |
| 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? See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1). If  | 16   |          | _ X |
|      | "Yes," enter the name of the foreign country ▶  |      |          |     |
| Part | 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.   |      | Yes      | No  |
| 1a   | During the year did the foundation (either directly or indirectly):  (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? ☐ Yes ☒ No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ 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 ☒ 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 ☒ No  |      |          |     |
| b    | If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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   |          |     |
|      | Organizations relying on a current notice regarding disaster assistance check here  |      |          |     |
| С    | 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?   | 1c   |          | 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))   |      | :        |     |
| а    | 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?  [Yes X No  |      |          |     |
| b    | If "Yes," list the years ▶ 20 , 20 , 20 , 20  |      |          |     |
|      | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).  | 2b   |          |     |
| С    | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here   |      |          |     |
| 2-   | ▶ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise   |      |          |     |
| 3a   | at any time during the year?  |      |          | 1   |
| 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.) | 3b   |          |     |
| 4a   | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?   | 4a   | <u> </u> | X   |
| b    | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?   | 4b   |          | ×   |

| Part     | VIES Statements Regarding Activities  | s for V  | Vhich Form                       | 4720         | May Be R                | equire  | ed (contu                     | nued)    |           |                      |          |
|----------|---|----------|----------------------------------|--------------|-------------------------|---------|-------------------------------|----------|-----------|----------------------|----------|
| 5a       | During the year did the foundation pay or incur a   | -        |                                  |              |                         |         |                               |          |           |                      |          |
|          | (1) Carry on propaganda, or otherwise attempt t   |          |                                  |              |                         |         | Yes                           | X No     | •         |                      |          |
|          | (2) Influence the outcome of any specific public  |          | on (see sect                     | on 495       | 55); or to ca           | arry on |                               | _        |           |                      | ļ        |
|          | directly or indirectly, any voter registration dr   |          |                                  | •            | •                       | •       | Yes                           | X No     |           |                      |          |
|          | (3) Provide a grant to an individual for travel, stu  |          |                                  |              |                         |         | ☐ Yes                         | X No     | •         |                      |          |
|          | (4) Provide a grant to an organization other than   | n a cha  | ritable, etc.,                   | organız      | ation desci             | ibed in |                               | _        |           |                      |          |
|          | section 4945(d)(4)(A)? (see instructions)   |          |                                  |              |                         |         | ∐ Yes                         | X No     | ·         |                      |          |
|          | (5) Provide for any purpose other than religious<br>purposes, or for the prevention of cruelty to o   |          |                                  |              | ary, or educ            | ationa  |                               | -        |           |                      | 1        |
| <b>h</b> | •   |          |                                  |              |                         |         | □Yes                          | X No     | f I       | i                    |          |
| b        | b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? |          |                                  |              |                         |         |                               |          | 5b        | —— -                 |          |
|          |   |          |                                  |              |                         |         |                               |          |           | -                    |          |
| С        | Organizations relying on a current notice regarding disaster assistance check here  |          |                                  |              |                         |         |                               |          | '         |                      |          |
| •        | because it maintained expenditure responsibility  |          |                                  | CACIII       | ption nom               |         | `<br>□Yes                     | □No      |           |                      |          |
|          | If "Yes," attach the statement required by Regula   |          | _                                | 45–5(d)      | ·<br>·                  | ·       | 163                           |          |           |                      |          |
| 6a       | Did the foundation, during the year, receive any  |          |                                  |              |                         | emiums  | <b>,</b>                      |          |           |                      |          |
|          | on a personal benefit contract?   |          |                                  | •            | , , , ,                 |         | ☐ Yes                         | X No     | ,         |                      | -        |
| b        | Did the foundation, during the year, pay premiun  | ns, dire | ctly or indire                   | ctly, on     | a personal              | benefi  | _                             |          | 6b        |                      | <u></u>  |
|          | If "Yes" to 6b, file Form 8870.   |          | •                                | •            | •                       |         |                               |          |           | 1                    |          |
|          | At any time during the tax year, was the foundation a   |          |                                  |              |                         |         | Yes                           | X No     | ,         |                      |          |
|          | If "Yes," did the foundation receive any proceeds   |          |                                  |              |                         |         |                               |          | 7b        |                      |          |
| Par      | VIII Information About Officers, Direc  | tors, 1  | Γrustees, F                      | ounda        | tion Mana               | igers,  | Highly F                      | aid E    | mploye    | es,                  |          |
|          | and Contractors   |          |                                  |              |                         |         |                               |          |           |                      |          |
| 1        | List all officers, directors, trustees, foundation  |          |                                  |              |                         |         |                               |          |           |                      |          |
|          | (a) Name and address  | hou      | e, and average<br>rs per week    | (If r        | mpensation<br>not paid, | emplo   | Contributions<br>byee benefit | plans    | (e) Exper | ise acco<br>Ilowance | unt,     |
| ANDV     | BRUNING   |          | ed to position                   | en           | ter -0-)                | and det | erred compe                   | nsation  | 011101 0  |                      |          |
|          | S. SYRACUSE WAY, GRNWD VILLAGE  | PRES     | IDENT                            |              | 0                       |         |                               | 0        |           |                      | ^        |
|          | T BOURN   | TDEA     | SURER                            |              |                         |         | <del></del>                   | 0        |           |                      | 0        |
|          | S. SYRACUSE WAY, GRNWD VILLAGE  | ותנותו   | SORER                            |              | 0                       |         |                               | 0        |           |                      | 0        |
|          | RD RACHT  | SECR     | ETARY                            | <del> </del> |                         |         |                               |          |           |                      |          |
|          | S. SYRACUSE WAY, GRNWD VILLAGE  |          |                                  |              | 0                       | ر ا     |                               | 0        |           |                      | 0        |
|          | ·   |          |                                  |              |                         |         |                               |          |           |                      | <u> </u> |
|          |   | _        |                                  |              |                         |         |                               |          |           |                      |          |
| 2        | Compensation of five highest-paid employee "NONE."  | s (oth   | er than thos                     | se incl      | uded on li              | ne 1—   | see instr                     | uction   | s). If no | ne, ei               | nter     |
|          |   |          | /h\ Tata and a                   |              |                         |         | (d) Contribu                  | tions to |           |                      |          |
|          | (a) Name and address of each employee paid more than \$50,00  | 0        | (b) little, and a<br>hours per v | /eek         | (c) Comper              | sation  | employee                      | benefit  | (e) Expen | se acco              | unt,     |
|          |   |          | devoted to pe                    | osition      |                         |         | compens                       |          | Other a   | iiowanici            |          |
| I/A      |   |          |                                  |              |                         |         |                               |          |           |                      |          |
|          |   |          |                                  |              |                         |         |                               |          |           |                      |          |
|          |   |          |                                  |              |                         |         |                               |          |           |                      |          |
|          | 11  |          |                                  |              |                         |         |                               |          |           |                      |          |
|          |   |          |                                  |              |                         |         |                               |          |           |                      |          |
|          |   |          |                                  |              |                         |         |                               |          |           |                      |          |
|          |   |          |                                  |              |                         |         |                               |          |           |                      |          |
|          |   |          | -                                |              |                         |         |                               |          |           |                      |          |
|          |   |          |                                  |              |                         |         |                               |          |           |                      |          |
| otal     | number of other employees paid over \$50,000 .  |          |                                  |              |                         |         |                               | . •      |           |                      |          |
|          |   |          |                                  |              |                         |         |                               |          | I         |                      |          |

| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En and Contractors (continued)   | npioyees,         |
|--|-------------------|
| 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON  | E."               |
| (a) Name and address of each person paid more than \$50,000 (b) Type of service  | (c) Compensation  |
| IONE   |                   |
|  |                   |
|  |                   |
|  |                   |
|  |                   |
|  |                   |
|  |                   |
|  |                   |
|  |                   |
| otal number of others receiving over \$50,000 for professional services  |                   |
| Part IX-A Summary of Direct Charitable Activities  |                   |
|  | T                 |
| List the foundation's four largest direct charitable 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 NEUROCRITICAL CARE SOCIETY   |                   |
|  |                   |
|  | 10,000            |
| 2 COMMUNITY MINDED ENTERPRISES   |                   |
|  | 10,000            |
| 3 SANTA BARBARA COUNTY SEARCH & RESCUE INC   | 10,000            |
| V DIENTE DIEGOTA DELECTION & REDOUG TO   |                   |
|  | 7,500             |
| 4 ARAPAHOE COMMUNITY COLLEGE FOUNDATION  |                   |
|  |                   |
| Deleted Investments (see instructions)   | 5,068             |
| 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   | Tunoun.           |
| I NONE   |                   |
|  |                   |
| 2  |                   |
|  |                   |
|  | ļ <u></u>         |
| All other program-related investments. See instructions  |                   |
| 3  |                   |
|  |                   |
| Total. Add lines 1 through 3   | 0.00              |
| Total Tide Tide Tide Tide Tide Tide Tide Tide  | Form 990-PF (2014 |

| Part | <del></del>   | ign founda  | ations,         |
|------|---|-------------|-----------------|
|      | see instructions.)  | Les agai    |                 |
| 1    | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,   |             |                 |
|      | purposes.   |             |                 |
| a    | Average monthly fair market value of securities   | 1a          |                 |
| b    | Average of monthly cash balances  | 1b          | 472,803         |
| C    | Fair market value of all other assets (see instructions)  | 1c          | <del></del>     |
| d    | Total (add lines 1a, b, and c)  | 1d          | 472,803         |
| е    | Reduction claimed for blockage or other factors reported on lines 1a and  |             |                 |
|      | 1c (attach detailed explanation) 1e   |             |                 |
| 2    | Acquisition indebtedness applicable to line 1 assets  | 2           | <del></del>     |
| 3    | Subtract line 2 from line 1d  | 3           | 472,803         |
| 4    | Cash deemed held for charitable activities Enter 1 $^{1}/_{2}$ % of line 3 (for greater amount, see   |             |                 |
|      | instructions)   | 4           | 7,092           |
| 5    | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4   | 5           | 465,711         |
| 6    | Minimum investment return. Enter 5% of line 5   | 6           | 23,285          |
| Part | XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating to and certain foreign organizations check here ► x and do not complete this part ) | foundation  | IS              |
| 1    | Minimum investment return from Part X, line 6   | 1           |                 |
| 2a   | Tax on investment income for 2014 from Part VI, line 5  | 720         |                 |
| b    | Income tax for 2014 (This does not include the tax from Part VI)  |             |                 |
| С    | Add lines 2a and 2b   | 2c          |                 |
| 3    | Distributable amount before adjustments Subtract line 2c from line 1  | 3           |                 |
| 4    | Recoveries of amounts treated as qualifying distributions   | 4           |                 |
| 5    | Add lines 3 and 4   | 5           |                 |
| 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           |                 |
| Part | XII Qualifying Distributions (see instructions)   |             |                 |
| 1    | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:  | 1486        |                 |
| a    | Expenses, contributions, gifts, etc —total from Part I, column (d), line 26   | 1a          | 179,141         |
| 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.,  | 15          |                 |
| _    | purposes  | 2           |                 |
| 3    | Amounts set aside for specific charitable projects that satisfy the   | 0.00        | ·               |
| а    | Suitability test (prior IRS approval required)  | 3a          |                 |
| b    | Cash distribution test (attach the required schedule)   | 3b          |                 |
| 4    | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4   | 4           | 179,141         |
| 5    | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income   | <del></del> |                 |
| •    | Enter 1% of Part I, line 27b (see instructions)   | 5           |                 |
| 6    |   | 6           | 170 141         |
| O    |   | L           | 179,141         |
|      | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years           | ig whether  | trie foundation |

|        | XIII Undistributed Income (see Instruction   | ne)    |                     |      | Page 9      |
|--------|--|--------|---------------------|------|-------------|
| Part   | Ondistributed income (see instruction  | (a)    | (b)                 | (c)  | (d)         |
| 1      | Distributable amount for 2014 from Part XI, line 7   | Corpus | Years prior to 2013 | 2013 | 2014<br>N/A |
| 2      | Undistributed income, if any, as of the end of 2014  |        |                     |      | 14/ A       |
| a      | Enter amount for 2013 only   |        |                     | N/A  |             |
| b      | Total for prior years: 20 ,20 ,20  |        | N/A                 |      |             |
| 3      | Excess distributions carryover, if any, to 2014  |        | 21/22               |      |             |
| а      | From 2009  |        |                     |      |             |
| b      | From 2010  |        |                     |      |             |
| С      | From 2011  |        |                     |      |             |
| d      | From 2012  |        |                     |      |             |
| е      | From 2013  |        |                     |      |             |
| f      | Total of lines 3a through e  | 0.00   | , ,                 |      |             |
| 4      | Qualifying distributions for 2014 from Part XII, line 4 ▶ \$   |        |                     |      |             |
| а      | Applied to 2013, but not more than line 2a   |        |                     |      |             |
| b      | Applied to undistributed income of prior years (Election required—see instructions)  |        |                     |      |             |
| С      | Treated as distributions out of corpus (Election required—see instructions)  |        |                     |      |             |
| d      | Applied to 2014 distributable amount   |        |                     |      |             |
| е      | Remaining amount distributed out of corpus   |        |                     |      |             |
| 5      | Excess distributions carryover applied to 2014   |        |                     |      |             |
|        | (If an amount appears in column (d), the same amount must be shown in column (a))  |        |                     |      |             |
| 6      | Enter the net total of each column as indicated below:   |        |                     |      |             |
| а      | Corpus Add lines 3f, 4c, and 4e Subtract line 5  | 0.00   |                     |      |             |
| b      | Prior years' undistributed income Subtract line 4b from line 2b  |        | 0.00                |      |             |
| С      | 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 |        |                     |      |             |
| d      | Subtract line 6c from line 6b Taxable amount—see instructions .  |        | 0.00                |      |             |
| е      | Undistributed income for 2013 Subtract line  |        | - 3.50              |      |             |
| •      | 4a from line 2a Taxable amount—see   |        |                     |      |             |
|        | instructions   |        |                     | 0.00 |             |
| f      | Undistributed income for 2014 Subtract lines   |        |                     |      |             |
|        | 4d and 5 from line 1 This amount must be distributed in 2015   |        |                     |      | 0.00        |
| 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   |        |                     |      |             |
| 0      | required—see instructions) .  Excess distributions carryover from 2009 not   |        |                     |      |             |
| 8      | applied on line 5 or line 7 (see instructions).  |        |                     |      | ·           |
| 9      | Excess distributions carryover to 2015.  |        |                     |      |             |
|        | Subtract lines 7 and 8 from line 6a  | 0.00   |                     |      |             |
| 10     | Analysis of line 9   |        |                     |      |             |
| a      | Excess from 2010 .   |        |                     |      |             |
| b      | Excess from 2011 Excess from 2012  |        |                     |      |             |
| ن<br>ن | Excess from 2013   |        |                     |      |             |
| u      | Excess from 2014   |        |                     |      |             |

| Part  | XIV Private Operating Founda  | tions (see instruc   | ctions and Part       | VII-A, question 9   | )  |                          |
|-------|---|----------------------|-----------------------|---------------------|--|--------------------------|
| 1a    | If the foundation has received a ruling   | or determination     | letter that it is a j | private operating   |  |                          |
|       | foundation, and the ruling is effective for   |                      |                       | •                   | 9/11/2012                                      |                          |
| b     | Check box to indicate whether the four  | ndation is a private | operating foundat     | ion described in se | ction 😠 4942(j)(                               | 3) or 4942(j)(5)         |
| 2a    | Enter the lesser of the adjusted net  | Tax year             |                       | Prior 3 years       |  | (e) Total                |
|       | income from Part I or the minimum investment return from Part X for                   | (a) 2014             | <b>(b)</b> 2013       | (c) 2012            | (d) 2011                                       |                          |
|       | each year listed  |                      |                       |                     |  | 0.00                     |
| b     | 85% of line 2a  | 0.00                 | 0.00                  | 0.00                | 0.00   | 0.00                     |
| С     | Qualifying distributions from Part XII,   |                      |                       |                     |  |                          |
|       | line 4 for each year listed   | 179,141              | 179,044               | 92,845              | 0  | 451,030                  |
| d     | Amounts included in line 2c not used directly for active conduct of exempt activities |                      |                       |                     |  | 0.00                     |
| е     | Qualifying distributions made directly  |                      |                       |                     |  |                          |
|       | for active conduct of exempt activities   |                      |                       |                     |  |                          |
|       | Subtract line 2d from line 2c   | 179,141              | 179.044               | 92,845              | 0  | 451,030                  |
| 3     | Complete 3a, b, or c for the alternative test relied upon                             |                      |                       |                     |  |                          |
| а     | "Assets" alternative test—enter   |                      |                       |                     |  |                          |
|       | (1) Value of all assets   | 491,622              | 285,059               | 420,655             | 0  | 1,197,336                |
|       | (2) Value of assets qualifying under  |                      |                       |                     |  |                          |
| L     | section 4942(j)(3)(B)(i) "Endowment" alternative test—enter 2/3                       | 491,622              | 285,059               | 420,655             | 0  | 1,197,336                |
| b     | of minimum investment return shown in   |                      |                       |                     |  |                          |
|       | Part X, line 6 for each year listed   |                      |                       |                     |  | 0.00                     |
| 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)   |                      |                       |                     |  | 0.00                     |
|       | (2) Support from general public and 5 or more exempt                                  |                      |                       |                     |  |                          |
|       | organizations as provided in  |                      |                       |                     |  |                          |
|       | section 4942(j(3)(B)(iii)   |                      |                       |                     |  | 0.00                     |
|       | (3) Largest amount of support from an exempt organization                             |                      |                       |                     |  |                          |
|       | (4) Gross investment income   | ~                    |                       |                     |  | 0.00                     |
| Part  |   | on (Complete th      | is part only if the   | he foundation h     | ad \$5.000 or me                               | 0.00<br>ore in assets at |
| ı aıı | any time during the year-   |                      |                       |                     | 40,000 01 1111                                 |                          |
| 1     | Information Regarding Foundation  |                      | 9.7                   |                     |  |                          |
| a     | List any managers of the foundation   |                      | ted more than 2%      | 6 of the total cont | ributions received                             | by the foundation        |
| _     | before the close of any tax year (but of  |                      |                       |                     |  | •                        |
| NONE  |   | ,                    |                       |                     |  |                          |
| b     | List any managers of the foundation   | who own 10% or       | more of the stoo      | ck of a corporation | n (or an equally la                            | rge portion of the       |
|       | ownership of a partnership or other e   |                      |                       |                     |  |                          |
| NONE  |   |                      |                       |                     |  |                          |
| 2     | Information Regarding Contribution  | n, Grant, Gift, Loa  | n, Scholarship, e     | tc., Programs:      | <u>.                                      </u> |                          |
|       | Check here ▶ 🗓 if the foundation  | only makes contr     | ibutions to prese     | lected charitable   | organizations and                              | does not accept          |
|       | unsolicited requests for funds. If the  | foundation makes     | gifts, grants, etc    | (see instructions)  | to individuals or or                           | ganizations under        |
|       | other conditions, complete items 2a,  | b, c, and d          |                       |                     |  |                          |
| a     | The name, address, and telephone no   | umber or e-mail ad   | dress of the perso    | on to whom applic   | ations should be a                             | iddressed:               |
|       |   |                      |                       |                     |  |                          |
|       |   |                      |                       |                     |  |                          |
| b     | The form in which applications should   | d be submitted and   | information and       | materials they sho  | ould include.                                  |                          |
|       |   |                      |                       |                     |  |                          |
|       |   |                      |                       |                     |  |                          |
| С     | Any submission deadlines  | -                    |                       |                     |  |                          |
|       |   | <u> </u>             |                       |                     |  |                          |
| d     | Any restrictions or limitations on av   | wards, such as by    | y geographical ai     | reas, charitable fi | elds, kınds of ins                             | titutions, or other      |
|       | factors   |                      |                       |                     |  |                          |

Total

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of Amount any foundation manager contribution Name and address (home or business) recipient or substantial contributor a Paid dunng the year NEUROCRITICAL CARE SOCIETY NONE 501(c)(3)STATEMENT 4 10,000 COMMUNITY MINDED ENTERPRISES NONE 501(c)(3)STATEMENT 4 10,000 SANTA BARBARA COUNTY SEARCH & RESCUE, INC NONE 501(c)(3)STATEMENT 4 7,500 ARAPAHOE COMMUNITY COLLEGE FOUNDATION 5,068 501(c)(3|STATEMENT 4 NONE CATHOLIC HEALTH INITIATIVES COLORADO FDTN NONE 501(c)(3)STATEMENT 4 4,999 / PUEBLO COMMUNITY COLLEGE FOUNDATION 2,000 NONE 501(c)(3)STATEMENT 4 HAWAIIAN LIFEGUARD ASSOCIATION 501(c)(3|STATEMENT 4 NONE 1,660 CITY & COUNTY OF HONOLULU NONE GOV'T STATEMENT 4 1,660 THE DENVER HEALTH & HOSPITALS FOUNDATION NONE 501(c)(3)STATEMENT 4 622 За Total 43,509 Approved for future payment

0.00

| Ente               | r gross amounts unless otherwise indicated   | Unrelated bu         | siness income | Excluded by section   | on 512, 513, or 514 | (e)  |
|--------------------|--|----------------------|---------------|-----------------------|---------------------|--|
|                    |  | (a)<br>Business code | (b)<br>Amount | (c)<br>Exclusion code | (d)<br>Amount       | Related or exempt function income (See instructions) |
| 1                  | Program service revenue  |                      |               |                       |                     | ,  |
|                    | <b>a</b>   |                      |               |                       | ····                |  |
|                    | b  |                      |               |                       |                     |  |
|                    | C  |                      |               |                       |                     |  |
|                    | d  |                      |               |                       |                     |  |
|                    | <b>e</b>   |                      |               |                       |                     |  |
|                    | f  |                      | <del></del>   |                       |                     | _  |
|                    | g Fees and contracts from government agencies  |                      |               |                       |                     |  |
| 2                  | Membership dues and assessments  |                      |               |                       |                     |  |
| 3                  | Interest on savings and temporary cash investments   |                      |               |                       |                     |  |
| 4                  | Dividends and interest from securities   |                      |               |                       |                     |  |
| 5                  | Net rental income or (loss) from real estate   |                      |               |                       |                     |  |
|                    | a Debt-financed property   |                      |               |                       |                     |  |
| _                  | b Not debt-financed property   |                      |               |                       |                     |  |
| 6                  | Net rental income or (loss) from personal property   |                      |               |                       |                     |  |
| 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   |                      |               |                       |                     |  |
| 11                 | Other revenue a  |                      |               |                       |                     |  |
|                    | b  |                      |               |                       |                     |  |
|                    | ·  |                      |               |                       |                     |  |
|                    | d  |                      |               |                       |                     |  |
| 4.0                | e  |                      |               |                       |                     |  |
| 12                 | Subtotal. Add columns (b), (d), and (e)  |                      | 0.00          |                       | 0.00                | 0.00   |
| 40                 | T 4 1 4 1 1 1 1 40 1 40 / (1) 1 / (1)  |                      |               |                       | 4.0                 |  |
|                    |  |                      | •             |                       | 13                  | N/A  |
| (See               | worksheet in line 13 instructions to verify calculation  | is)                  |               | t Durnoses            | 13                  | N/A  |
| (See<br>Pa         | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A   | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A   | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A   | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     |  |
| (See<br>Pal<br>Lin | worksheet in line 13 instructions to verify calculation <b>t XVI-B</b> Relationship of Activities to the A  e No.  Explain below how each activity for which accomplishment of the foundation's exempt put | ns)<br>Accomplishm   | ent of Exemp  | •                     |                     | mportantly to the                                    |

| Part        | XVII    |                          | n Regarding Tra               | nsfers To and Tran                              | sactions and           | Relationsh                            | ips Wit  | h Noncha              | ritab     | le        | <u> </u> |
|-------------|---------|--------------------------|-------------------------------|---|------------------------|---------------------------------------|--|-----------------------|-----------|-----------|----------|
| 1           | Did tl  | <u>-</u>                 |                               | engage in any of the                            | following with an      | v other orga                          | nızatıon   | described             |           | Yes       | No       |
|             |         |                          |                               | section 501(c)(3) orga                          |                        |                                       |  |                       |           |           | _        |
|             | orgar   | nizations?               |                               |   |                        |                                       |  |                       |           |           |          |
| а           | Trans   | sfers from the rep       | porting foundation t          | o a noncharitable exe                           | mpt organization       | of:                                   |  |                       |           |           |          |
|             | (1) C   | ash                      |                               |   |                        |                                       |  |                       | 1a(1)     |           | X        |
|             | (2) 0   | ther assets              |                               |   |                        |                                       |  |                       | 1a(2)     |           | Х        |
| b           | Othe    | r transactions:          |                               |   |                        |                                       |  |                       |           |           |          |
|             | (1) S   | ales of assets to        | a noncharitable ex            | empt organization                               |                        |                                       |  |                       | 1b(1)     |           | X        |
|             | (2) P   | urchases of asse         | ets from a noncharit          | able exempt organiza                            | tion                   |                                       |  |                       | 1b(2)     |           | Х        |
|             | (3) R   | ental of facilities,     | , equipment, or other         | er assets                                       |                        |                                       |  |                       | 1b(3)     |           | Х        |
|             | (4) R   | eimbursement ai          | rrangements .                 |   |                        |                                       |  |                       | 1b(4)     |           | X        |
|             | (5) L   | oans or loan gua         | ırantees .                    |   |                        |                                       |  |                       | 1b(5)     |           | Х        |
|             | (6) P   | erformance of se         | ervices or members            | hip or fundraising solid                        | citations .            | •                                     |  |                       | 1b(6)     |           | X        |
| C           |         |                          |                               | ists, other assets, or p                        |                        |                                       |  |                       | 1c        |           | Х        |
| d           | If the  | answer to any            | of the above is "Ye           | es," complete the folio                         | wing schedule          | Column (b)                            | should a   | lways show            | v the     | fair m    | arket    |
|             |         |                          |                               | ices given by the repo                          |                        |                                       |  |                       |           |           |          |
|             |         |                          | ,                             | gement, show in colum                           |                        |                                       |  |                       |           |           |          |
| (a) Line    | no (    | b) Amount involved       | (c) Name of nonc              | haritable exempt organization                   | on (d) Desc            | ription of transfe                    | ers, transac                                       | tions, and sha        | ring arra | angeme    | ents     |
|             |         |                          |                               |   |                        |                                       |  |                       |           |           |          |
|             |         |                          |                               |   |                        |                                       |  |                       |           |           |          |
|             |         |                          |                               |   |                        |                                       |  |                       |           |           |          |
|             |         |                          | ····                          | <del></del>                                     |                        |                                       |  |                       |           |           |          |
|             |         |                          |                               |   |                        |                                       |  |                       |           |           |          |
|             |         |                          |                               |   |                        |                                       |  |                       |           |           |          |
|             |         |                          |                               |   |                        |                                       |  |                       |           |           |          |
|             |         |                          |                               |   |                        |                                       |  |                       |           |           |          |
|             |         |                          |                               |   |                        |                                       |  |                       |           | ·····     |          |
|             |         |                          |                               |   |                        |                                       |  |                       |           |           |          |
|             |         |                          |                               |   |                        |                                       |  | <del></del>           |           |           |          |
|             |         |                          |                               |   |                        | · · · · · · · · · · · · · · · · · · · |  |                       |           |           |          |
| <del></del> |         |                          |                               |   |                        |                                       |  |                       |           |           |          |
|             |         |                          |                               | · · · · · · · · · · · · · · · · · · ·           |                        |                                       |  | <del></del> -         |           |           |          |
|             |         |                          |                               |   |                        |                                       |  |                       |           |           |          |
|             | le the  | foundation dire          | atly or indirectly of         | fillated with as solute                         | d 40                   | 4                                     | -4   |                       |           |           |          |
| Za          | descr   | thed in section 5        | 501(c) of the Code (          | filiated with, or relate other than section 501 | a to, one or mo        | re tax-exem                           | pt organ   | izations              | 7         | (TE)      |          |
| h           |         |                          | following schedule            |   | (0)(3)) 01 111 56011   | 011 5277                              |  |                       | 」 Yes     | X         | No       |
|             | 11 10   | (a) Name of organi       |                               | (b) Type of orga                                | nization               |                                       | (a) Dosser   | tion of relation      |           |           |          |
|             |         | (a) Name of Organi       | 128(1011                      | (b) Type of orga                                | anization              |                                       | (c) Descrip  | tion of relation      | isnip     |           |          |
|             |         | *****                    |                               | <del></del>                                     |                        |                                       |  |                       |           |           |          |
|             |         |                          |                               |   |                        |                                       |  |                       |           |           |          |
|             |         | <del></del>              |                               |   |                        |                                       |  |                       |           |           |          |
|             |         | //                       |                               |   |                        |                                       |  |                       |           |           |          |
|             | Unde    | r penalties of periury.  | declare that I have examin    | <br>ed this return, including accom             | panving schedules and  | d statements, and                     | I to the hest                                      | of my knowled         | ne and h  | nelief it | is true  |
| Sign        | corre   | ct, and complete Decla   | aration of preparer (other th | an taxpayer) is based on all inf                | ormation of which prep | parer has any kno                     | wiedge   |                       |           |           |          |
| Here        |         | 111                      | ~K                            | 18/17/10  | SECRETARY              | ,                                     |  | May the IF with the p | reparer   | shown     | below    |
|             |         | ature of officer or trus | stee                          | Date  | Title                  | · <u></u>                             |  | (see instruc          | tions)? [ | Yes[      | ∃No i    |
| D-:-        |         | Print/Type preparer      |                               | Preparer's signature                            |                        | Date                                  | <del>-   -   -   -   -   -   -   -   -   -  </del> |                       | TIN       |           |          |
| Paid        |         |                          |                               |   |                        |                                       |  | eck lif if femployed  |           |           |          |
| Prepa       |         | Firm's name ▶            |                               | <u> </u>  |                        | 1                                     | Firm's EIN   |                       |           |           |          |
| Use (       | ן אווזכ | Firm's address ▶         |                               |   |                        |                                       | Phone no   |                       |           |           |          |
|             |         |                          |                               |   |                        |                                       | 110116   |                       |           |           |          |

## Schedule B

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

Schedule of Contributors

OMB No 1545-0047

2014

Department of the Treasury Internal Revenue Service

Name of the organization

AMR FOUNDATION FOR RESEARCH AND EDUCATION

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

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

Employer identification number 45-5464550

| Organiz   | ation type (check on  | e)   |
|-----------|---|--|
| Filers of | f:  | Section:   |
| Form 99   | 0 or 990-EZ   | ☐ 501(c)( ) (enter number) organization  |
|           |   | 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation   |
|           |   | ☐ 527 political organization   |
| Form 99   | 0-PF  | ∑ 501(c)(3) exempt private foundation  |
|           |   | 4947(a)(1) nonexempt charitable trust treated as a private foundation  |
|           |   | 501(c)(3) taxable private foundation   |
| Ol I - 6  |   |  |
|           | nly a section 501(c)(7  | covered by the <b>General Rule</b> or a <b>Special Rule.</b> ), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See   |
| General   | Rule  |  |
| X         | For an organization to or more (in money or contributor's total co    | filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 r property) from any one contributor. Complete Parts I and II. See instructions for determining a ontributions.  |
| Special   | Rules   |  |
|           | regulations under se<br>13, 16a, or 16b, and                          | described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line that received from any one contributor, during the year, total contributions of the greater of (1) the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II  |
|           | contributor, during th  | described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one ne year, total contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, all purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III   |
|           | contributor, during the contributions totaled during the year for all | described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one ne year, contributions exclusively for religious, charitable, etc., purposes, but no such more than \$1,000. If this box is checked, enter here the total contributions that were received nexclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the sto this organization because it received nonexclusively religious, charitable, etc., contributions ore during the year. |

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its 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)

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization
AMR FOUNDATION FOR RESEARCH AND EDUCATION

Employer identification number

45-5464550

| Part I     | Contributors (see instructions) Use duplicate copies of                  | Tart il additional space is |   |
|------------|--|-----------------------------|---|
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions  | (d)<br>Type of contribution   |
| 1          | MEDTRONIC FOUNDATION 710 METRONIC PARKWAY LC110 MINNEAPOLIS, MN 55432    | \$250,000                   | Person X Payroll  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions  | (d)<br>Type of contribution   |
| 2          | SEDGWICK 65 TEJON STREET DENVER, CO 80223                                | \$10,000                    | Person X Payroll  Noncash  (Complete Part II for noncash contributions)   |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions  | (d)<br>Type of contribution   |
| 3          | BANK OF AMERICA  50 ROCKEFELLER PLZ  NEW YORK, NY 10020                  | \$8,500                     | Person 🗵 Payroll 🗌 Noncash 🗍 (Complete Part II for noncash contributions) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions  | (d)<br>Type of contribution   |
| 4          | AMR AMBULANCE SERVICE, INC.  1111 CLASSEN DRIVE  OKLAHOMA CITY, OK 73103 | \$7,500                     | Person X Payroll  Noncash  (Complete Part II for noncash contributions)   |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions  | (d)<br>Type of contribution   |
| 5          | CAPIO PARTNERS  2250 SATELLITE BLVD #110  DULUTH, GA 30097               | \$ <u>5,000</u>             | Person X Payroll  Noncash  (Complete Part II for noncash contributions)   |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions  | (d)<br>Type of contribution   |
| 6          | CENTURA HEALTH  34 VAN GORDON SUITE 200  LAKEWOOD, CO 80228              | \$5,000                     | Person 🗓 Payroll 🔲 Noncash 🗍 (Complete Part II for noncash contributions) |

Name of organization
AMR FOUNDATION FOR RESEARCH AND EDUCATION

Employer identification number

45-5464550

| Part I     | Contributors (see instructions) Use duplicate copies                         | of Part I if additional space is | needed.   |
|------------|--|----------------------------------|---|
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions       | (d)<br>Type of contribution   |
| 7          | FERNO 70 WEIL WAY WILMINGTON, OH 45177                                       | \$5,000<br>-                     | Person X Payroll  Noncash (Complete Part II for noncash contributions)  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions       | (d)<br>Type of contribution   |
| . 8        | RICOH  7245 SOUTH HAVANA STREET, SUITE 300  CENTENNIAL, CO 80112             | -<br>\$\$,000                    | Person X Payroll  Noncash  (Complete Part II for noncash contributions) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions       | (d)<br>Type of contribution   |
| 9          | UNIVERSITY OF PITTSBURGH  116 ATWOOD STREET, SUITE 201  PITTSBURGH, PA 15260 | -<br>\$ 5,000                    | Person X Payroll  Noncash (Complete Part II for noncash contributions)  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions       | (d)<br>Type of contribution   |
|            |  | - \$                             | Person  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions       | (d)<br>Type of contribution   |
|            |  | -<br>. \$                        | Person  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c)<br>Total contributions       | (d)<br>Type of contribution   |
|            |  | -<br>_ \$                        | Person  |

|   | raye                           |
|---|--------------------------------|
| Name of organization                      | Employer identification number |
| AMR FOUNDATION FOR RESEARCH AND EDUCATION | 45-5464550                     |

| Part II                   | Noncash Property (see instructions) Use duplicate co | pies of Part II if additional space      | ce is needed         |
|---------------------------|--|--|----------------------|
| (a) No.<br>from<br>Part I | (b)<br>Description of noncash property given         | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                           |  | \$                                       |                      |
| (a) No.<br>from<br>Part I | (b)  Description of noncash property given           | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                           |  | \$                                       |                      |
| (a) No.<br>from<br>Part I | (b) Description of noncash property given            | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                           |  | \$                                       |                      |
| (a) No.<br>from<br>Part I | (b) Description of noncash property given            | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                           |  | \$                                       |                      |
| (a) No.<br>from<br>Part I | (b) Description of noncash property given            | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                           |  | \$                                       |                      |
| (a) No.<br>from<br>Part I | (b) Description of noncash property given            | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                           |  | s  |                      |

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

| Name of or                | ganızation  |   |  |              | Employer identification number                                |  |  |  |
|---------------------------|---|---|--|--------------|---|--|--|--|
|                           | NDATION FOR RESEARCH AND ED   |   |  |              | 45-5464550  |  |  |  |
| Part III                  | Exclusively religious, charitable, e (10) that total more than \$1,000 fo the following line entry. For organiza contributions of \$1,000 or less for the Use duplicate copies of Part III if add | r the year from any one<br>tions completing Part III,<br>ne year (Enter this inforn | contributor. (enter the total            | Complete o   | columns (a) through (e) and vely religious, charitable, etc., |  |  |  |
| (a) No.                   |   |   |  |              |   |  |  |  |
| (a) No.<br>from<br>Part I | (b) Purpose of gift   | (c) Use of g  | ift                                      | (d) Des      | cription of how gift is held                                  |  |  |  |
|                           |   |   |  |              |   |  |  |  |
|                           |   |   |  |              | •••••   |  |  |  |
|                           |   |   |  |              |   |  |  |  |
|                           | <del>,</del>  | (e) Transfer o  | f gift                                   | <u></u>      |   |  |  |  |
|                           | Transferee's name, address, a   | nd ZIP + 4  | Relation                                 | ship of tran | sferor to transferee  |  |  |  |
|                           |   |   |  |              |   |  |  |  |
|                           |   | ·   |  |              |   |  |  |  |
|                           |   |   |  |              |   |  |  |  |
| (a) No.<br>from<br>Part I | (b) Purpose of gift   | (c) Use of g  | ft                                       | (d) Des      | cription of how gift is held                                  |  |  |  |
|                           |   |   |  |              |   |  |  |  |
|                           |   |   |  | *            |   |  |  |  |
|                           | (e) Transfer of gift  |   |  |              |   |  |  |  |
|                           | (e) Hallstel Ol Gill  |   |  |              |   |  |  |  |
|                           | Transferee's name, address, a   | nd ZIP + 4  | Relationship of transferor to transferee |              |   |  |  |  |
|                           |   |   |  |              |   |  |  |  |
|                           |   |   |  |              |   |  |  |  |
|                           |   |   |  |              |   |  |  |  |
| (a) No.                   |   |   |  |              |   |  |  |  |
| from<br>Part I            | (b) Purpose of gift   | (c) Use of gi   | ft                                       | (d) Des      | cription of how gift is held                                  |  |  |  |
|                           |   |   |  |              |   |  |  |  |
|                           |   |   |  |              |   |  |  |  |
|                           |   |   |  |              |   |  |  |  |
|                           |   | (e) Transfer o  | f gift                                   |              |   |  |  |  |
|                           |   |   |  |              |   |  |  |  |
|                           | Transferee's name, address, a   | nd ZIP + 4  | Relation                                 | ship of tran | sferor to transferee  |  |  |  |
|                           |   |   |  |              |   |  |  |  |
|                           |   |   |  |              |   |  |  |  |
|                           |   |   |  |              |   |  |  |  |
| (a) No.                   |   |   |  | <u> </u>     | · · · · · · · · · · · · · · · · · · ·                         |  |  |  |
| from<br>Part I            | (b) Purpose of gift   | (c) Use of gi   | ft                                       | (d) Des      | cription of how gift is held                                  |  |  |  |
| Faiti                     |   |   |  |              |   |  |  |  |
|                           |   | •   |  |              |   |  |  |  |
|                           |   |   |  |              |   |  |  |  |
|                           |   |   |  |              |   |  |  |  |
|                           | (e) Transfer of gift  |   |  |              |   |  |  |  |
| 1                         |   |   |  |              |   |  |  |  |
| L                         | Transferee's name, address, a   | nd ZIP + 4  | Relation                                 | ship of tran | sferor to transferee  |  |  |  |
|                           |   |   |  | ····         |   |  |  |  |
|                           |   |   |  |              | •••••   |  |  |  |
|                           |   |   |  |              |   |  |  |  |
| l                         |   | 1   |  |              |   |  |  |  |

| AMR FOUNDATION FOR      | RESEARCH AND EDUCATION        | 45-5464550<br>     |
|-------------------------|-------------------------------|--------------------|
| FORM 990-PF             | REVENUE                       | STATEMENT 1        |
| CONTRIBUTIONS, GIFT     | S, GRANTS, ETC., RECEIVED     | AMOUNT             |
| GRANTS<br>CONTRIBUTIONS |                               | 250,000<br>135,704 |
| TOTAL INCLUDED ON F     | ORM 990-PF, PART I, LINE 1(a) | 385,704            |

| AMR FOUNDATION FOR RESEARCH AND EDUCATIO | MR FC | NOITADNUC | FOR | RESEARCH | AND | EDUCATIO: |
|--|-------|-----------|-----|----------|-----|-----------|
|--|-------|-----------|-----|----------|-----|-----------|

45-5464550

|  | <del></del>       |
|--|-------------------|
| FORM 990-PF OPERATION AND ADMINISTRATIVE EXP   | ENSES STATEMENT 2 |
| OTHER EXPENSES                                 | TNUOMA            |
|  |                   |
| CONTRACT LABOR                                 | 49,220            |
| FUNDRAISING EVENT                              | 26,458            |
| BANK FEES                                      | 220               |
| POSTAGE  | 41                |
| RESUSCITATION CONFERENCE                       | 21,483            |
| SOFTWARE                                       | 135               |
| COMMUNITY OUTREACH - RESUSCITATION TRAINING    | 584               |
| TOTAL INCLUDED ON FORM 990-PF, PART I, LINE 23 | 98,141            |

FORM 990-PF STATEMENTS REGARDING ACTIVITIES STATEMENT 3

SUBSTANTIAL CONTRIBUTORS - PART VII-A, LINE 10

\_\_\_\_\_

SEDGWICK 65 TEJON STREET DENVER, CO 80223

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BANK OF AMERICA 50 ROCKERFELLER PLZ NEW YORK, NY 10020

AMERICAN MEDICAL RESPONSE AMBULANCE SERVICE, INC. 1111 CLASSEN DR. OKLAHOMA CITY, OK 73103

|  | AMR | FOUNDATION | FOR | RESEARCH | AND | EDUCATION |
|--|-----|------------|-----|----------|-----|-----------|
|--|-----|------------|-----|----------|-----|-----------|

45-5464550

| FORM 990-PF | SUPPLEMENTARY INFORMATION | STATEMENT 4 |
|-------------|---------------------------|-------------|

PURPOSE OF GRANT OR CONTRIBUTION - PART XV, LINE 3(a)

ALL GRANTS WERE DISTRIBUTED FOR THE PURPOSE OF IMPROVING CARDIAC ARREST SURVIVAL IN THESE COMMUNITIES.