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

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
For calendar year 2014

▶ 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.

-or c	alend	iar year 2014 or tax year beginning , a	and ending				
Nar	ne of fou	Indation			A Emplo	yer identification number	
TAT	TT.T.	IAM M & ANN K GRACE FOUNDATIO	NI.		F.C.	2520760	
Nur	nberand	I street (or P O box number if mail is not delivered to street address)		Room/suite		-2529760 one number (see instructions)	
		N 16TH STREET	'	TOOTI SOILE		2-956-8254	
City	or town,	, state or province, country, and ZIP or foreign postal code					
P	HOE	NIX AZ 85020			C If exem	ption application is pending, o	heck here
G C	heck a	all that apply 🔲 Initial return 🔲 Initial retui	rn of a former public cl	narity	D 1. For	eign organizations, check here	, ▶ □
		Final return Amended	return		2. For	eign organizations meeting the	
		Address change Name cha	inge		859	6 test, check here and attach	computation ►
H C	heck t	ype of organization X Section 501(c)(3) exempt private	foundation		E If privat	e foundation status was termi	nated under
	Section		le private foundation			507(b)(1)(A), check here	>
l Fa	ıır marl	ket value of all assets at J Accounting method		crual	F If the fo	undation is in a 60-month terr	nination
er	id of ye	ear (from Part II, col (c), Other (specify)			under s	ection 507(b)(1)(B), check he	re 🕨
lın	e 16) 🕽	▶ \$ 13,301,375 (Part I, column (d) must I	be on cash basis)				
Pa	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net in	veetment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	inco		income	purposes
	1	Contributions, gifts, grants, etc., received (attach schedule)	1,884,100				(cash basis only)
	2	Check ► If the foundation is not required to attach Sch B	1,001,100	1			
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	734	1	734	734	
	5a	Gross rents		<u> </u>	7.5.3	734	
a)	ь	Net rental income or (loss)	`			······································	
Revenue	6a	Net gain or (loss) from sale of assets not on line 10					
Ş.	á	Gross sales price for all assets on line 6a					
Be	7	Capital gain net income (from Part IV, line 2)	41		0	***************************************	
	8	Net short-term capital gain				0	
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	ь	Less Cost of goods sold					***************************************
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	1,884,83	1	734	734	
ဟ	13	Compensation of officers, directors, trustees, etc	(
benses	14	Other employee salaries and wages					
eu	15	Pension plans, employee benefits		ļ			
×	16a	Legal fees (attach schedule) SEE STMT 1	2,27				
ē	b	Accounting fees (attach schedule) STMT 2	2,96	1			
≩	С	Other professional fees (attach schedule)					
and Administrative E	17	Interest				-	
nis.	18	Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion.					
Ē	19		<u> </u>				
Ad	20	Occupancy	 				
g	21	Travell conferences, and meetings Printing and publications	1 20	<u> </u>			
<u>ā</u>	22	Other purposed (at the same as a same a	1,30	<u> </u>		· · · · · · · · · · · · · · · · · · ·	
ing	23	Other expenses (att schr) Total operating and administrative expenses.		 			· · · · · · · · · · · · · · · · · · ·
rati	•••	Add lines 13 through 23	6,54				^
Operating	25	Contributions, gifts, grants paid	428,74		0	0	429 744
° O	26	Total expenses and disbursements. Add lines 24 and 25	435,285		0	0	428,744
	27	Subtract line 26 from line 12.	333,20	1	<u> </u>		428,744
	a	Excess of revenue over expenses and disbursements	1,449,549	9			
	b	Net investment income (if negative, enter -0-)	1,330,03		734	1	
	c	Adjusted net income (if negative, enter -0-)		 	, , , ,	734	·····
			i		1	1.241	

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2014)

5

Decreases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Part IV Capital Gains a	nd Losses for Tax on Investme	nt Income				
	cribe the kind(s) of property sold (e.g., real estate, varehouse, or common stock, 200 shs. MLC Co.)		(b) How acquired P – Purchase D – Donation	(c) Date acc		(d) Date sold (mo , day, yr)
1a N/A			D - Donation			
b						
C						
d						
е						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	· ·	other basis nse of sale		(h) Gain (e) plus (f)	
<u>a</u>						
b						
С						
d						
e		<u></u>				
Complete only for assets showing	g gain in column (h) and owned by the four	ndation on 12/31/69		(1)	Gains (Col	(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ssofcol (i) (j) fany	col ((k), but not f Losses (fro	ess than -0-) or om col (h))
a						
b		<u></u>				
С						
d						
_ е						
2 Capital gain net income or (net ca	apital loss) If gain, also enter in F	.		2		
3 Net short-term capital gain or (los	es) as defined in sections 1222(5) and (6)	_				
If gain, also enter in Part I, line 8,	column (c) (see instructions) If (loss), ent	er-0 in				
Part I, line 8				3		
Part V Qualification U	nder Section 4940(e) for Reduc	ed Tax on Net I	nvestment Incor	ne		
(For optional use by domestic private	foundations subject to the section 4940(a)	tax on net investme	ent income)			
If section 4940(d)(2) applies, leave th	is part blank	*				
	·					
	tion 4942 tax on the distributable amount of		e period?			Yes X No
	ify under section 4940(e) Do not complete					
	each column for each year, see the instruct	tions before making	any entries			
(a) Base period years	(b)		(c)		Dist	(d) ribution ratio
Calendar year (or tax year beginning in			e of noncharitable-use asset		(col (b) c	divided by col (c))
2013		,857		826		0.062172
2012		,006	11,691,			0.054911
2011		,328	10,122,			0.068989
2010		,728	6,991,			0.103808
2009	607	, 647	5,069,	928		<u>0.119853</u>
					1	
2 Total of line 1, column (d)				2		0.409733
-	5-year base period – divide the total on line	e 2 by 5, or by the				
number of years the foundation h	as been in existence if less than 5 years			3		0.081947
4 Enter the net value of noncharital	ble-use assets for 2014 from Part X, line 5			4		11,536,730
5 Multiply line 4 by line 3				_5_	<u> </u>	<u>945,400</u>
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)			6	<u> </u>	7
						0.45
7 Add lines 5 and 6		·		7	 _ _ _ 	945,407
		•				
8 Enter qualifying distributions from				8	<u> </u>	<u>428,744</u>
If line 8 is equal to or greater that Part VI instructions	n line 7, check the box in Part VI, line 1b, a	ind complete that par	rt using a 1% tax rate	See the		

	orm 990-PF (2014) WILLIAM M & ANN K GRACE FOUNDATION 56-2529/60 Page 4							
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instruct	ions)						
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) Domestic foundations that meet the section 4940(e) requirements in Part V, check							
b								
	here ▶							
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	<u> </u>			0	
3	Add lines 1 and 2		3				15	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4				0	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	-	5	-			15	
6	Credits/Payments							
a	2014 estimated tax payments and 2013 overpayment credited to 2014 6a							
b	Exempt foreign organizations – tax withheld at source The product of the state of							
C	Tax paid with application for extension of time to file (Form 8868) 6c							
d	Backup withholding erroneously withheld Table and the angle and the second of the sec		_	1				
7	Total credits and payments Add lines 6a through 6d	ŀ		 				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8_	+			1 -	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	 			<u>15</u>	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	. 🏲	_10	 				
11 De	Enter the amount of line 10 to be Credited to 2015 estimated tax ► Refunded art VII-A Statements Regarding Activities		11					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it					V	NI-	
	participate or intervene in any political campaign?				10	Yes	No X	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				_1a_			
-					1b		Х	
	Instructions for the definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials							
	published or distributed by the foundation in connection with the activities							
С					1c		Х	
d								
-	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$							
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		_					
	on foundation managers > \$							
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		Х	
	If "Yes," attach a detailed description of the activities.							
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of							
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?			N/A	4b			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X	
	If "Yes," attach the statement required by General Instruction T							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.							
	By language in the governing instrument, or							
	By state legislation that effectively amends the governing instrument so that no mandatory directions that							
	conflict with the state law remain in the governing instrument?							
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 I	Part XV	′		7	Χ		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)							
	AZ							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General							
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation				8b	Χ		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or							
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"							
46	complete Part XIV				9		<u>X</u>	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	ידוואו	_			ι,		
	names and addresses S'I	TMT	<u> </u>		10	X		
				F	orm 95	ルード	(2014)	

	& ANN K GRACE FOUNDAT		529760			Page 6
	arding Activities for Which Form 4	720 May Be Re	equired (contin	ued)		
5a During the year did the foundation p				,		
	rise attempt to influence legislation (section 494			es X No		Į.
(2) Influence the outcome of any sp	ecific public election (see section 4955), or to o	carry on,				
directly or indirectly, any voter re			Y	es X No		
	for travel, study, or other similar purposes?		<u> </u>	es 🛚 No		
	on other than a charitable, etc , organization de	scribed in		() ()		
section 4945(d)(4)(A)? (see inst	·		Y	es X No		
	nan religious, charitable, scientific, literary, or ed	ducational				
	of cruelty to children or animals?			es X No		
	did any of the transactions fail to qualify under t	· ·	ribed in	27 / 7		
-	current notice regarding disaster assistance (s	•		N/A	5b	
• •	otice regarding disaster assistance check here			▶ 🔲		
·	(4), does the foundation claim exemption from	the tax	37 (7)			
because it maintained expenditure r	, -		N/A [] Y	es No		
•	ed by Regulations section 53 4945–5(d)					
	receive any funds, directly or indirectly, to pay p	oremiums	\Box	, ভি		
on a personal benefit contract?				es X No		
	pay premiums, directly or indirectly, on a perso	nal benefit contract	?		6b	X
If "Yes" to 6b, file Form 8870				(Tel		
• • •	the foundation a party to a prohibited tax shelt			es 🗵 No		
	any proceeds or have any net income attributab			N/A	7b	
	ıt Officers, Directors, Trustees, Fou	indation Mana	gers, Hignly F	ald Employe	es,	
and Contractors	, foundation managers and their compensa	tion /oog instructi				
List all officers, directors, trustees	, loundation managers and their compensa	lion (see instruction	ons).	4.D. Contabutana ta	1	
(a) Nan	ne and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		oense account, r allowances
HOWARD GRACE	PHOENIX	TRUSTEE				
7575 N 16TH ST	AZ 85020	0.00)	0
WILLIAM GRACE	PHOENIX	TRUSTEE				
7575 N 16TH STREET	AZ 85020	0.00	0			0
HEATHER KAISER	PHOENIX	TRUSTEE				· -
7575 N 16TH STREET	AZ 85020	0.00	0	c		0
- ,	id employees (other than those included or	line 1 – see instri	uctions). If none,	enter	<u> </u>	
"NONE."		1		(A) Contributions to	T -	
(a) Name and address of each emp	ployee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	 (d) Contributions to employee benefit plans and deferred 		pense account, er allowances
		devoted to position		compensation		
NONE						
					 	
otal number of other employees paid ov	er \$50 000	L	L	L		T 0
Total flambor of other employees paid ov	ei \$50,000 .	· · · · · · · · · · · · · · · · · · ·			Form 90	90-PF (2014

Form 990-PF (20	14) WILLIAM M & ANN K GRACE FOUNDATIO	N 56-2529760	Page 7
Part VIII	Information About Officers, Directors, Trustees, Found		
	and Contractors (continued)		
3 Five highe	st-paid independent contractors for professional services (see instru	ctions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of serve	ce (c) Compensation
NONE			
			
	·		
Total number of	others receiving over \$50,000 for professional services		>
Part IX-A	Summary of Direct Charitable Activities		
	four largest direct charitable activities during the tax year. Include relevant statistical information suc-	ch as the number of	Expenses
	ther beneficiaries served, conferences convened, research papers produced, etc		Exponses
1 N/A			
2			
2			
]
3			
4		7	
			į.
115			
Part IX-B	Summary of Program-Related Investments (see instru	uctions)	
/-	gest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2			
_			
All other program-re	plated investments. See instructions		
3			
Total. Add lines	1 through 3		▶

Form 990-PF (2014)

428.

3b

4

5

6

b

4

Cash distribution test (attach the required schedule)

Adjusted qualifying distributions. Subtract line 5 from line 4

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

Enter 1% of Part I, line 27b (see instructions)

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

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

57,540

164,236

Excess from 2012

Excess from 2013 Excess from 2014

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year SEE STATEMENT 8 428,744 **▶** 3a 428,744 Total Approved for future payment N/A Total ▶ 3b

Enter gross am	ounts unlèss otherwise indicated	(a) Business code	(b) Amount	(c) Exclusion	(d) Amount	(e) Related or exempt function income
1 Program s	ervice revenue			code		(See instructions)
a		_ [
b		_				
	and contracts from government agencies					
	ip dues and assessments					
	savings and temporary cash investments		· ·			
	and interest from securities			14	734	
5 Net rental	ncome or (loss) from real estate.					·
	nanced property					***************************************
	bt-financed property					,
	ncome or (loss) from personal property					······································
	stment income					
	ss) from sales of assets other than inventory					
•	e or (loss) from special events					
	it or (loss) from sales of inventory	-		+		
	• •			- -		
	nue a	- -	· · · · · · · · · · · · · · · · · · ·			
		- 				
		— 		- - -		
				- 		
e	dd ad y a dd day	-		- -	724	
	add columns (b), (d), and (e)	<u> </u>		0	734	734
	line 12, columns (b), (d), and (e)				13	/34
Part XVI-I	st in line 13 instructions to verify calculations) Relationship of Activities to the	Accomplishmen	t of Evennt I			· .
Line No. ▼	Explain below how each activity for which incon accomplishment of the foundation's exempt pur				προπαπτιγ το τηe	
N/A	accomplishment of the foundation's exempt pur	poses (other than by	Ji oviali ig Talitas iol	euch nurneen		
N/A				such purposes		
	<u> </u>			such purposes		
				such purposes		
				such purposes		
				such purposes		
		,		such purposes		
		,		such purposes		
		,		such purposes		
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		,		such purposes		
		,		such purposes		
				such purposes		
				such purposes		
				such purposes		
		,		such purposes		
				such purposes		

Part X	(VIII	Information Regardante Exempt Organiza		ansfers To and	d Transaction	ns and Relations	ships Witl	h Noncharitable	 -		
1 Did	the orga	anization directly or indir		e in any of the follow	wing with any oth	er organization descri	bed			Yes	No
ın s		01(c) of the Code (other									
•		om the reporting founds	ation to a no	ncharitable exempt	organization of						
	Cash	-		, , , , , , , , , , , , , , , , , , ,	o gamzanor, o,				1a(1)		Х
(2)	Other a	ssets							1a(2)		X
b Oth	er trans	actions							1		
(1)	Sales o	f assets to a noncharita	ble exempt	organization					1b(1)] [Х
(2)	Purcha	ses of assets from a no	ncharitable (exempt organization	n				1b(2)		Х
(3)	Rental	of facilities, equipment,	or other ass	ets					1b(3)		Х
(4)	Reimbu	irsement arrangements							1b(4)		Х
		or loan guarantees							1b(5)		Χ
		nance of services or me			•				1b(6)		X
		acılıtıes, equipment, ma							1c	L	X
		er to any of the above is									
		goods, other assets, or									
		transaction or sharing									
(a) Lin	ie no	(b) Amount involved	(c) Na	me of noncharitable exem	npt organization	(d) Description	n of transfers, tra	ansactions, and sharing arr	angeme	nts	
1/A		 									
			 			<u> </u>	_				
-								 -			
											
-			-								
											
-										•	
		<u> </u>						 			
											
								·			
								-			
2a Istl	he found	lation directly or indirect	ly affiliated v	with, or related to, o	ne or more tax-e	cempt organizations					
des	cribed ii	n section 501(c) of the C	ode (other	than section 501(c)	(3)) or in section	527?			Y	es X	No
b If "\	res," co	nplete the following sch	edule								
11.11		(a) Name of organization		(b) Type of	organization		(c) Descrip	otion of relationship			
N/ <i>I</i>	<u> </u>										<u>.</u>
											
		 					,				···
	Under no	nalties of perjury, I declare that	at I have evami	ned this return, including	accompanying school	ules and statements, and to	the best of my	kanudadan and belief it is			
	correct, a	ind complete Declaration of p	reparer (other t	than taxpayer) is based of	on all information of w	hich preparer has any know	ledge				
ian		1/1						May the IRS disci with the preparer			
ign Iere					,	1		(see instructions)		Yes	No
iele	\ ./	Mill b	·		1.///	125/15	TRUS	יתיביבי			
	Sign	nature of officer or trustee			Date	 6//	Title	166			
	T	ype preparer's name			Preparer's signatur			Data		Γ'	$\overline{}$
	'""'	The brobards a signific			i reparer a signatur	. i 1	U^{1}	Date		Check	if
aid	місн	AEL MATHER			MICHAEL M	ATHER MUX	4	05/1	5/15	self-em	Piosea
reparer	Firm's	name ► G & A	CPAS	AND ADVI						544C	
lse Only	<i>,</i>		N 15T						_	506	
				7 85007						5-6	

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

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

OMB No 1545-0047

Employer identification number

2014

_WILLIAM_M_&	ANN K GRACE FOUNDATION	56-2529760
Organization type (check	k one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a prival	vate foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
		formatable a
	4947(a)(1) nonexempt charitable trust treated as a private	toundation
	501(c)(3) taxable private foundation	
	n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General R	Rule and a Special Rule See
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, c by or property) from any one contributor. Complete Parts I and II. See in contributions	
Special Rules	•	
regulations under 13, 16a, or 16b, a	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Fo and that received from any one contributor, during the year, total contributor of the amount on (i) Form 990. Part VIII, line 1h, or (ii) Form 990-EZ, li	orm 990 or 990-EZ), Part II, line butions of the greater of (1)
contributor, durin	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-Eag the year, total contributions of more than \$1,000 exclusively for religitional purposes, or for the prevention of cruelty to children or animals	ous, charitable, scientific,
For an organization	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-Ea	Z that received from any one
	g the year, contributions exclusively for religious, charitable, etc., purpo lied more than \$1,000. If this box is checked, enter here the total contri	•
	or an exclusively religious, charitable, etc., purpose Do not complete a	
•	oplies to this organization because it received nonexclusively religious, r more during the year	charitable, etc , contributions * \$
990-EZ, or 990-PF), but it	that is not covered by the General Rule and/or the Special Rules does t must answer "No" on Part IV, line 2, of its Form 990, or check the box 2, to certify that it does not meet the filing requirements of Schedule B	x on line H of its Form 990-EZ or on its

Name of organization

WILLIAM M & ANN K GRACE FOUNDATION

Employer identification number 56-2529760

Part I	art I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	ANN K GRACE CHARITABLE LEAD TRUST 7575 N 16TH STREET PHOENIX AZ 85020	s 1,875,100	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
NO.	name, address, and zir + 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		

age 3

Name of organization

WILLIAM M & ANN K GRACE FOUNDATION

Employer identification number 56-2529760

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	GRANT		
_		\$ 1,875,100	12/31/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Federal Statements	Statement 1 - Form 990-PF, Part I, Line 16	Net Description Total Investmen	PLATTNER, SCHNEIDMAN PC \$ 1,076 \$ SEIDEL, HAVENS&DENNIS LP 1,200	\$ 2,276 \$	
56-2529760		Ğ	PLATTNER, SCHI SEIDEL, HAVENS	TOTAL	

<u>Legal Fees</u>	Adjusted Net	φ.
390-PF, Part I, Line 16a - Leg	Net Investment	w
91	Total	1,076
Statement 1 - Form		<i>ب</i>

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Charitable Purpose

<i>S</i>	Statement 2 - Fo	Form 990-PF, Part I, Line 16b - Accounting Fee	art I, Line 16k	- Accou	nting Fees	
Description		Total	Net Investment	ent	Adjusted Net	Charitable Purpose
MATHER CPA BOOKEEPING MATHER CPA TAX PREP	ψ	2,014	ઝ		v ₂	w
TOTAL	ν _ν	2,964	φ.	0	\$	\$

Statement 3 - F	- Form 990-PF, Part II,	orm 990-PF, Part II, Line 13 - Other Investment	tments	
Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
BANK OF AMERICA CASH RESERVES	\$ 2,465,911	\$ 1,980,914	COST	\$ 1,980,914

Fair Market	Value	\$ 1,980,914	\$ 1,980,914	
Basis of	Valuation	COST		
End of	Year	\$ 1,980,914	\$ 1,980,914	
Beginning	of Year	\$ 2,465,911	\$ 2,465,911	
	Description	BANK OF AMERICA CASH RESERVES	TOTAL	

ed Net FMV	ı	0 \$ 9,375,500
End Accumulate Depreciation	\$	v.
End Cost / Basis	\$ 9,375,500	\$ 9,375,500
Beginning Net Book	S.	S-
Description	WOODBRIDGE LAND	TOTAL

Statement 4 - Form 990-PF, Part II, Line 14 - Land, Building, and Equipment

Federal Statements

56-2529760

Statement 5 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors

Name

Address

City, State, Zip

ANN K GRACE CHAR. LEAD ANN. TRUST 7575 N 16TH ST

PHOENIX AZ 85020

56-2529760

Federal Statements

Statement 6 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

THE SCHOLARSHIP APPLICATION IS MADE AVAILABLE TO ANYONE REQUESTING A SCHOLARSHIP.

A COPY OF THE APPLICATION IS AVAILABLE UPON REQUEST.

Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

MARCH 1ST OF EACH YEAR.

Statement 7 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

PROVIDE INDIVIDUAL SCHOLARSHIPS DIRECTLY TO STUDENTS FOR MERIT OR NEED OR A COMBINATION OF BOTH. MAKE GRANTS TO EXISTING SCHOLARSHIP FUNDS. MAKE GRANTS DIRECTLY TO SCHOOLS FOR FACILITIES, SCHOLARSHIPS, OR GENERAL SUPPORT. MAKE GRANTS PRIMARILY IN ARIZONA AND MISSOURI.

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Federal Statements

Statement 8 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Name	Address		
Address	Relationship Status	Purpose	Amount
AZ STATE UNIVERSITY	425 E UNIV DR		
TEMPE AZ 8528/ AZ STATE UNIVERSITY	UNIVERSITY 1001 S MILL AVE	SCHOLARSHIP AWARDS	12,250
H H)	SCHOLARSHIP AWARDS	24,750
BISHOP LEBLOND HIGH	4		
ST JOSEPH MO 64506	HIGH SCHOOL	SCHOLARSHIP AWARDS	-2,000
CEDAR CREST COLLEGE ALLENTOWN PA 18104	IOO COLLEGE DR UNIVERSITY	SCHOLARSHIP AWARD	000 - 1-
CHANDLER GILBERT COMM COLL	2626 E PECOS RD		999
CHANDLER AZ 85225	١	SCHOLARSHIP AWARD	
CLEVELAND CHIKO. COLLEGE Overland dark kg 66210	LUSSO LOWELL AVE	ddeme athadeionaa	c c c c c c c c c c c c c c c c c c c
COLORADO MESA UNIVERSITY	1100 NORTH AVE		000.7
GRAND JUNCTION CO 81501	UNIVERSITY	SCHOLARSHIP AWARD	-2,000
COTTEY COLLEGE	1000 W AUSTIN BLVD		
NEVADA MO 64772	COLLEGE	SCHOLARSHIP AWARD	3,750
	1 COLLEGE HILL		
CANTON MO 63435	COLLEGE	SCHOLARSHIP AWARD	750
DOANE COLLEGE	1014 BOSWELL AVE		
CRETE NE 68333		SCHOLARSHIP AWARD	2,750
DRURY UNIVERSITY	900 N BENTON AVE		
SPRINGFIELD MO 65802		SCHOLARSHIP AWARD	3,750
	3000 N DYSART RD		
AVONDALE AZ 85392		SCHOLARSHIP AWARD	1,000
GLENDALE COMM COLLEGE	6000 W OLIVE AVE		
GLENDALE AZ 85302		SCHOLARSHIP AWARD	-6,750
	1 UNIVERSITY DR		
LAMONI IA 50140		SCHOLARSHIP AWARD	3,250
GRAND CANYON UNIVERSITY	3300 W CAMELBACK RD		
PHOENIX AZ 85017		SCHOLARSHIP AWARD	15,250
HILLYARD TECH CENTER	3434 FARAON ST		
ST JOSEPH MO 64506		SCHOLARSHIP AWARD	-1,000
INTERSERV MITCHELL WOODS SCH	5210 MITCHELL AVE		
		SCHOLARSHIP AWARD	5,460
KANSAS STATE UNIVERSITY	119 ANDERSON HALL		
MANHATTAN KS 66506	UNIVERSITY	SCHOLARSHIP AWARD	2,500
FREMONT NE 68025) :	SCHOLARSHIP AWARD	3,750
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Statement 8 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

	Amount	001 0	006 '61	68,750	C 1	1,250	10,500		6,500	000.06		1,000		2,000		1,000		1,500		3,000		2,000		000 7	-1,000		3,750		000 01	19,750		
	Purpose	7 L.1 A	SCHOLAKSHIP AWAKD	SCHOLARSHIP AWARD		SCHOLARSHIP AWARD	SCHOLARSHIP AWARD		SCHOLARSHIP AWARD	GCHOLARSHIP AWARD		SCHOLARSHIP AWARD		SCHOLARSHIP AWARD		SCHOLARSHIP AWARD		SCHOLARSHIP AWARD		STUDENT SUPPORT		SCHOLARSHIP AWARD		SCHOLARSHIF AWARD	SCHOLARSHIP AWARD		SCHOLARSHIP AWARD	ממאשא מדווסמא וכווכס		SCHOLARSHIP AWARD		
Address	Relationship Status	901 S NATIONAL AVE	UNIVERSITY ASST DOWNS OR	2	300 W 13TH ST	UNIVERSITY	¥1	P O 6100	UNIVERSITY	800 UNIVERSIII DR IINIVERSITY	1202 W FARD RD		18401 N 32ND ST		6840 NORTH OAK		1202 W THOMAS RD		8776 E SHEA BLVD		1 N GRAND BLVD		450 SIERRA MALL	ONIVERSIII 209 RAVINE PKWY		100 E NORMAL AVE	UNIVERS	1432 E UNIVERSITY BLVD	ONIVERSIII 1100 MARD FOMARDS		1502 IOWA ST	
Name	Address	MISSOURI STATE UNIVERSITY	SPRINGFIELD MO 6589/ Missolidi Western	SAINT JOSEPH MO 64507	MO UNIVERSITY OF SCIENCE TECH	ROLLA MO 65409 NOBTH CENTBAI MO COTTEGE	NORTH CENTRAL MO. COLLEGE TRENTON MO 64683	NORTHERN ARIZONA UNIVERSITY	-	NORTHWEST MO. STATE UNIVERSITY MARYVILLE MO 64468	OKLAHOMA STATE UNIVERSITY	STILLWATER OK 74078	PARADISE VALLEY COMM COLLEGE	PHOENIX AZ 85032	PARIS II EDUCATION CENTER	GLADSTONE MO 64118	PHOENIX COLLEGE	PHOENIX AZ 85013		SCOTTSDALE AZ 85260	ST LOUIS UNIVERSITY	ST LOUIS MO 63103	STANFORD UNIVERSITY	STANFORD CA 34505		TRUMAN STATE UNIVERSITY	KIRKSVILLE MO 63505		TOUSON AG 83/21	WARRENSBURG MO 64093	UNIVERITY OF KANSAS	

Statement 8 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	1	Address		
Address	Relationship	Status	Purpose	Amount
UNIVERSITY OF MISSOURI	230 JESSE HALL	HALL		
COLUMBIA MO 65211		UNIVERSITY	SCHOLARSHIP AWARD	74,200
UNIVERSITY OF MISSOURI	5100 ROCKHILL RD	ILL RD		
KANSAS CITY MO 64110		UNIVERSITY	SCHOLARSHIP AWARD	10,500
UNIVERSITY OF PORTLAND	5000 N WIL	WILLIAMETTE		
PORTLAND OR 97203		UNIVERSITY	SCHOLARSHIP AWARD	3,500
COMMUNITY OUTREACH GIRLS ALLIANCE	P O BOX 21651	651		
PHOENIX AZ 85036		501C 3	GRANT	7,472
METHODIST UNIVERSITY	BOX 2-1105			
FT BRAGG NC 28307		UNIVERSITY	STUDEND SCHOLARSHIP	000'9
NO. DAKOTA STATE UNIVERSITY	P 0 6050			
FARGO ND 58108		UNIVERSITY	STUDENT SCHOLARSHIP	2,750
W M GRACE COS	7575 N 16T	16TH ST		
PHOENIX AZ 85020		NONE	REIMBURSE STUDENT SUPPORT	29,612
TOTAL				428,744

Contributor R S HOYT FAMILY FOUNDATION TOTAL Taxable Dividends from Securities Description BANK OF AMERICA TOTAL \$ 734 TOTAL \$ 734 * 734	
Contributor R S HOYT FAMILY FOUNDATION TOTAL Taxable Dividends from Securities Description BANK OF AMERICA TOTAL TOTAL S 734 TOTAL S 734 TOTAL Cash Contribution 9,000 9,000 Included Exclusions Code Code Code Code Code Code Code Code	
Contributor R S HOYT FAMILY FOUNDATION TOTAL Taxable Dividends from Securities Description BANK OF AMERICA TOTAL \$ 734 TOTAL \$ 734 TOTAL	Noncash
Taxable Dividends from Securities Description Amount Business Code Column	Contribution
Description BANK OF AMERICA TOTAL \$ 734 \$ 734 \$	0
Description Amount BANK OF AMERICA TOTAL \$ 734 * 734 * * 734 * * 734 * * * 734 * * * 734 * * * 734 * * * 734 * * * * 734 * * * * * * * * * * * * * * * * * * *	
BANK OF AMERICA \$ 734 TOTAL \$ 734	lusion Postal US
	14 Code Obs (\$ 01 %)
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