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Form **990-PF**

EXTENDED TO AUGUST 17, 2015 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

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. OMB No 1545-0052

For calendar year 2014 or tax year beginning		, and ending		
Name of foundation			A Employer identification	number
HAZEL ROSE FAMILY CHARITAE	BLE		73-1519254	:
Number and street (or P O box number if mail is not delivered to stree		Room/suite	B Telephone number	
3631 S ELM PLACE SUITE 805	5		(918) 455-	2415
City or town, state or province, country, and ZIP or foreign	postal code		C If exemption application is p	ending, check here
BROKEN ARROW, OK 74011				
G Check all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	s, check here 🕨 🔲
Final return	Amended return			
Address change	Name change		2 Foreign organizations me check here and attach co	eeting the 85% test, pmputation
H Check type of organization: X Section 501(c)(3) e	xempt private foundation		F If private foundation sta	tus was terminated
Section 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation	under section 507(b)(1)	(A), check here 🕨 🗀
I Fair market value of all assets at end of year J Account	ting method: X Cash	Accrual	F If the foundation is in a	60-month termination
	ther (specify)		under section 507(b)(1)	(B), check here 🕨 🗔
▶\$ 251,347. (Part I, colu	ımn (d) must be on cash i	basis)		· · · · · · · · · · · · · · · · · · ·
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received	, ,			(Saari Saari Striy)
2 Check X If the foundation is not required to attach Sch. B				
Interest on savings and temporary cash investments	7.	7.	7.	STATEMENT 1
4 Dividends and interest from securities	3,417.	3,417.		STATEMENT 2
	3/11/0		~	
5a Gross rents b Net rental income or (loss)			7976	
6a Net gain or (loss) from sale of assets not on line 10	10,213.		I TECENT	
b Gross sales price for all 269, 466.				-2
b Gross sales price for all assets on line 6a 269, 466. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain		10,213.	MAY DOG	اکرا
8 Net short-term capital gain			N/A OZJ	
		1,	C. Marilla Co.	[65]
9 Income modifications 10a and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total Add lines 1 through 11		· · · · · · · · · · · · · · · · · · ·	- 1 = 2 : 1 1	
b Less Cost of goods sold				
c Gross profit or (loss)				
11 Other income				
12 Total Add lines 1 through 11	13,637.	13,637.	3,424.	
13 Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
ဗ္ဗိ 16a Legal fees		······································		
b Accounting fees STMT 3 c Other professional fees STMT 4	375.	0.	0.	0.
c Other professional fees STMT 4		2,464.		
17 Interest				
18 Taxes STMT 5	2.	0.	0.	0.
19 Depreciation and depletion				
E 20 Occupancy	0.10	•		
21 Travel, conferences, and meetings	848.	0.	0.	0.
22 Printing and publications				
17 Interest 18 Taxes STMT 5 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses Add lines 13 through 23			 	
24 Total operating and administrative	1 225	2 4 6 4		
expenses Add lines 13 through 23	1,225. 8,190.	2,464.	0.	0.
25 Contributions, gifts, grants paid	0,190.			8,190.
26 Total expenses and disbursements.	9,415.	2,464.	0.	8,190.
Add lines 24 and 25 27 Subtract line 26 from line 12:	7,413.	4,404.	<u> </u>	0,190.
l e e e e e e e e e e e e e e e e e e e	4,222.			
 Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-) 	4,444.	11,173.	<u> </u>	
C Adjusted net income (if negative, enter -0-)		11,113.	3,424.	
11-24-14 LHA For Paperwork Reduction Act Notice, see				Form 990-PF (2014)

Par	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	223,828.	214,413.	214,413.
2	Savings and temporary cash investments			
3	Accounts receivable ►			
	Less: allowance for doubtful accounts			
4	Pledges receivable ►			
	Less, allowance for doubtful accounts ▶			
5	Grants receivable			
e	Receivables due from officers, directors, trustees, and other			
-	disqualified persons			
7	Other notes and loans receivable			
] [Less: allowance for doubtful accounts ▶			
م ا م	Inventories for sale or use			· · · · · · · · · · · · · · ·
Assets				
8 10	a Investments - U.S. and state government obligations			
''	b Investments - corporate stock STMT 6	25,761.	36,934.	36,934.
	c Investments - corporate bonds	23,101.	30,734.	30,334.
	investments - land, buildings, and equipment basis			
' '				
	Less accumulated depreciation			
	! Investments - mortgage loans			
13	F	-		
14				
	Less accumulated depreciation			·
15				
16	Total assets (to be completed by all filers - see the	240 500	051 245	051 045
-	instructions. Also, see page 1, item I)	249,589.	251,347.	251,347.
	Accounts payable and accrued expenses			
18	' ' '			
<u>8</u> 19	Deferred revenue			
₩ 20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities 51	, ,			
_ 22	Other liabilities (describe)			
23	Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
w	and complete lines 24 through 26 and lines 30 and 31.			
Fund Balances	Unrestricted			
호 25	Temporarily restricted			
<u>m</u> 26				
בַּ	Foundations that do not follow SFAS 117, check here			
Ē	and complete lines 27 through 31			
Assets or	Capital stock, trust principal, or current funds	0.	0.	
ම් 28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
¥ 29	Retained earnings, accumulated income, endowment, or other funds	249,589.	253,811.	
₹ 30	Total net assets or fund balances	249,589.	253,811.	
31	Total liabilities and net assets/fund balances	249,589.	253,811.	
Par				
Par				
1 Tot	al net assets or fund balances at beginning of year - Part II, column (a), line 3	0		
(m	ust agree with end-of-year figure reported on prior year's return)		1	249,589.
	er amount from Part I, line 27a		2	4,222.
	ner increases not included in line 2 (itemize)		3	0.
	d lines 1, 2, and 3		4	253,811.
	creases not included in line 2 (itemize)		5	0.
	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	253,811.
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Enter 1% of net investment income (1% of Part I, line 27b) 6 112.

7 7 Add lines 5 and 6

8 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

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14,431.

8,190.

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Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948 -	see ii	nstru	ıctioı	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 here 🕒 🔲 and enter 1%	}	1			2	<u>23.</u>
	of Part I, line 27b						
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	J					
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			2	23.
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			2	<u>23.</u>
6	Credits/Payments:						
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a]				
b	Exempt foreign organizations - tax withheld at source 6b	_]				
C	: Tax paid with application for extension of time to file (Form 8868)]				
d	Backup withholding erroneously withheld 6d		_				
7	Total credits and payments. Add lines 6a through 6d		7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		9			2	23.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10				
		nded 돈	11				
	art VII-A Statements Regarding Activities					1	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or	ınterven	e in			Yes	
	any political campaign?				1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the	definitio	n)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	publist	ed or				
	distributed by the foundation in connection with the activities						
	Did the foundation file Form 1120-POL for this year?				1c		<u>X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$	0	<u>.</u>				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on founda	tion					
	managers. ▶ \$0.						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		<u>X</u>
_	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 incorp	oration,	Or		_		
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		3.7	/3	4a		<u>X</u>
	of "Yes," has it filed a tax return on Form 990-T for this year?		IN	/A	4b	<u> </u>	37
9	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
c	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 wit 	n the eta	to love				
	remain in the governing instrument?	1 1116 514	ic law		6	x	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and	l Dart Y	v		7	X	
•	the foundation have at least \$5,000 in assets at any time during the year in 183, complete 1 art ii, con. (c), and	, r all A	•				
Ra	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE						
- Ou	1 Enter the states to which the foundation reports of with which it is registered (see instructions)						
h	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designal	e)					
•	of each state as required by General Instruction G? If "No," attach explanation	-,			8b	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cal	endar				
-	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," 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 names and address	ses			10		X

orm 990-PF (2014) HAZEL ROSE FAMILY CHARIT	ABLE		<u>73-15192</u>	54 Pag	je 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					_
(1) Carry on propaganda, or otherwise attempt to influence legislation (sectio	n 4945(e))?	Ye	es X No		
(2) 'Influence the outcome of any specific public election (see section 4955); (• • •	ectly.			
any voter registration drive?		Y6	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	;?		s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
4945(d)(4)(A)? (see instructions)		☐ Y _f	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary.	or educational nurnoses or				
the prevention of cruelty to children or animals?	, or caudational parposco, or		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the excentions described		.3 (22) 110		
section 53.4945 or in a current notice regarding disaster assistance (see instru	· · · · · · · · · · · · · · · · · · ·	in regulations	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	•			, u	—
• • •		unad			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f			. —		
expenditure responsibility for the grant?		I/A L Ye	es L No		
If "Yes," attach the statement required by Regulations section 53 494	, ,				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	es 🗶 No		_
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		<u>_</u>	6b 2	X_
If "Yes" to 6b, file Form 8870		[]			
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b	_
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	inagers, Highly	/		
Paid Employees, and Contractors	 				
List all officers, directors, trustees, foundation managers and their			(d) 0		
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expens account, oth	ie her
(a) Maine and address	to position	enter -0-)	compensation	allowance	<u>s</u>
DIANE LOVE KARNUTH	PRESIDENT		!		
3728 SOUTH ELM PLACE PMB 520					
BROKEN ARROW, OK 74011	1.00	0.	0.	().
GLENDA L. DURANO	SEC-TREAS				
P.O. BOX 90625					
ALBUQUERQUE, NM 87199-0625	1.00	0.	0.).
	·				_
					—
Compensation of five highest-paid employees (other than those inc	cluded on line 1). If none,	enter "NONE."			
	(b) Title, and average		(d) Contributions to employee benefit plans and deferred	(e) Expens account, oth	e e
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, oth allowance:	1er
NONE	devoted to position		compensation	anomanoc	
NONE					
					—
	1				
		-			—
					—
	-				
					
		1	<u> </u>		
Total number of other employees paid over \$50,000					0
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Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	, see instructions.)
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	14,711.
b	Average of monthly cash balances	1b	235,757.
С	Fair market value of all other assets	1c	
	Total (add lines 1a, b, and c)	1d	250,468.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	250,468.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,757.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	246,711.
6	Minimum investment return Enter 5% of line 5	6	12,336.
_	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	ıd certaın	
1	Minimum investment return from Part X, line 6	1	12,336.
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	223.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	12,113.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	12,113.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	12,113.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	8,190.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
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	8,190.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		-
	income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	8,190.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies f	or the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,				
line 7				12,113.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years:		_		
		0.	-	
3 Excess distributions carryover, if any, to 2014:				
a From 2009 1,554.				
b From 2010 3,548.				
c From 2011 2,090. dFrom 2012 788.				
e From 2013 2,905.				
	10,885.			
f Total of lines 3a through e 4 Qualifying distributions for 2014 from	10,003.			
Part XII, line 4: ► \$ 8,190.				
a Applied to 2013, but not more than line 2a	1		0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		•	-	
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				8,190.
e Remaining amount distributed out of corpus	0.			0 / 2 3 0 0
5 Excess distributions carryover applied to 2014	3,923.			3,923.
(If an amount appears in column (d), the same amount must be shown in column (a))	- 1			
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	6,962.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015				0.
7 Amounts treated as distributions out of				<u>U•</u>
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015				
Subtract lines 7 and 8 from line 6a	6,962.			
10 Analysis of line 9:				
a Excess from 2010 1,179.				
b Excess from 2011 2,090.				
c Excess from 2012 788.				
d Excess from 2013 2,905.				
e Excess from 2014 423581 11-24-14		<u> </u>		5 000 DE (00 t t)
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	OSE FAMILY				19254 Page 10
Part XIV Private Operating F			A, question 9)	N/A	
1 a If the foundation has received a ruling o		· · · · · · · · · · · · · · · · · · ·			
foundation, and the ruling is effective fo		-	▶ └_	<u> </u>	
b Check box to indicate whether the found		ng foundation described i		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(5) 2012	Prior 3 years	(4) 2011	_ /o\Total
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed			-		
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	f the foundatio	n had \$5,000 or m	ore in assets
at any time during t					
1 Information Regarding Foundation	n Managers:	<u> </u>		·····	
a List any managers of the foundation wh	•	than 2% of the total conti	abutions received by t	ne foundation before the cl	se of any tax
year (but only if they have contributed or	nore than \$5,000). (See s	ection 507(d)(2).)			in any tao
NONE					
b List any managers of the foundation wh	o own 10% or more of th	e stock of a corporation (or an equally large por	tion of the ownership of a	partnership or
other entity) of which the foundation has					
NONE					
2 Information Regarding Contributi	ion, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms		
Check here ► X if the foundation o	nly makes contributions	to preselected charitable (organizations and does		
the foundation makes gifts, grants, etc.	· · · · · · · · · · · · · · · · · · ·				d d.
a The name, address, and telephone num	ber or e-mail address of t	the person to whom appli	cations should be addi	essed:	
b The form in which applications should b	e submitted and informa	tion and materials they sh	ould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields,	kınds of ınstıtutıons, o	r other factors:	
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_					

Part XV

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** SEE PURPOSE OF GRANT CONTINUATIONS

Part XVI-A	Analysis	of Income-	-Producing	Activities
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Enter gross amounts unless otherwise indicated.	Unrelate	d business income		led by section 512, 513, or 514	(e)
•	(a)	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion code	Amount	function income
a					
b					
С					
d					
e					· · · · · · · · · · · · · · · · · · ·
f		-,			
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			25	7.	
4 Dividends and interest from securities			25	3,417.	
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					<u>-</u>
property					
7 Other investment income		•			
8 Gain or (loss) from sales of assets other					
than inventory			18	10,213.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b	_			<u>.</u>	
C	_				
d	_				
e	_ [
12 Subtotal. Add columns (b), (d), and (e)		0		13,637.	0
13 Total. Add line 12, columns (b), (d), and (e)				13	13,637.
(See worksheet in line 13 instructions to verify calculations.))				

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)
423821	
423621 11-24-14	Form 990-PF (2014

orm 990					HARITABLE		73-1519			ige 13
Part 2	KVII			ansfers To	and Transactions	and Relations	hips With Nonchar	itabl	е	
4 D.d	`	Exempt Organ					504/-> -4	т	Yes	Nia
					ving with any other organizati		10N 5U1(C) 01		162	NO
		other than section 50 f(c from the reporting found			527, relating to political orga	IIIZALIUIIS?				
	Cash	iroin the reporting found	ation to a noncha	iritabie exempt	organization or.			1a(1)		х
	Other	accetc						1a(1)		X
		sactions:						10(2)		
		of assets to a noncharita	able exempt organ	nization				1b(1)		X
		ases of assets from a no						1b(2)		Х
(3)	Renta	l of facilities, equipment,	or other assets					1b(3)		Х
(4)	Reimb	oursement arrangements	;					1b(4)		Х
(5)	Loans	or loan guarantees						1b(5)		X
(6)	Perfor	rmance of services or me	embership or func	draising solicita	tions			1b(6)		X
		facilities, equipment, ma						_ 1c_	l	X
		-		-	hedule. Column (b) should a	•			sets,	
					eived less than fair market val	ue in any transaction	i or sharing arrangement, st	low in		
(a) Line no) the value of the goods, (b) Amount involved			ble exempt organization	(d) Decouption	of transfers, transactions, and s			
La) Line in	<u></u>	(D) / IIIIO DITE III VOIV CO	(0) 1441111	N/A		(u) Description	tor transiers, transactions, and s	iainy a	rangeme	1115
				11/2						
	1		 							
								 .		
			ļ <u> </u>							
	-									
		···								
	-		 			-				
			+			• •	······································			
	+-									
2a Isti	he foun	idation directly or indirec	tly affiliated with.	or related to, o	ne or more tax-exempt organ	izations described				
		501(c) of the Code (othe	-		• •			Yes	X	No
		mplete the following sch								
		(a) Name of org	ganization		(b) Type of organization		(c) Description of relationsh	ıp		
		N/A		<u> </u>	_					
										
						1				
	Under	penalties of periury. I declare	that I have examiner	d this return, inclu	ding accompanying schedules and	statements, and to the	best of my knowledge			
Sign					than taxpayer) is based on all infor		r has any knowledge retur	n with th	discuss t le prepar	er
Here		Jelle	Munu -		15/8/15	Secer	^ <i>!/\!/// /</i> \	Yes	(see ins	ຫຼັງ? No
	Sign	ature of officer or trustee	8		Dayle /	Title	/L	. 163		10
		Print/Type preparer's na	ame	Preparer's	s signature	Date	Check if PTIN			
				10		, ,	self- employed			
Paid		CYNTHIA JA		(Egn)	thin sames	5/5/15			703	
Prepa		Firm's name ► PAT	TILLO,	BROWŃ &	HILL, L.L.P.	•	Firm's EIN ► 74-11	305	99	
Use (אוחל	Fumlo address > 5-	143 - 55							
		Firm's address > 67	/4 ⊀ Δ('ΔΠ'	H:MY RD	NE STE R		1			

Phone no. 505-266-5904 Form **990-PF** (2014)

ALBUQUERQUE, NM 87109

Form **8868**

(Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► File a separate application for each return.

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

		iniormation about 1 orm oc	200 and 113	mod dottono to de minimo govino		1		
• If you	are filing for an Aut	omatic 3-Month Extension, compl	ete only Pa	art I and check this box			>	[X]
• If you	are filing for an Ado	ditional (Not Automatic) 3-Month E	xtension,	complete only Part II (on page 2 of	this form)			
		ss you have already been granted					38	
		ou can electronically file Form 8868 if						oration
	- · · · · · · · · · · · · · · · · · · ·	or an additional (not automatic) 3-me						
•	•	ns listed in Part I or Part II with the ex		•			-	
	•		•					
		which must be sent to the IRS in pa	•	(see instructions) For more details (on the ele	Ctronic	ming or this i	Offfi,
Part		lick on e-file for Charities & Nonprofit C 3-Month Extension of Tim		submit original (no conjes ne	eded)			
		Form 990-T and requesting an auto						
Part I o	•	51 Om 330-1 and requesting an auto	Jillatic Offic	Shirt extension " Check this box and	Complete		_	
	•	d 1100 O (t) 1t D51						ш
	r corporations (includ Icome tax returns	ding 1120-C filers), partnerships, REf	viics, and t	rusts must use Form 7004 to reques				
							entifying num	
Type or	Name of exemp	t organization or other filer, see instru	uctions		Employe	r identi	fication numb	er (EIN) o
print								
File by the	HAZEL RO	SE FAMILY CHARITAB	BLE			<u>73</u>	<u>-151925</u>	4
due date f		and room or suite no. If a P O. box,	see instruc	tions	Social s	curity i	number (SSN)
filing your return See	3631 S E	LM PLACE SUITE 805	<u> </u>					
instruction	S City, town or po	st office, state, and ZIP code For a	foreign add	fress, see instructions				
	BROKEN A	RROW, OK 74011						
Enter th	ne Return code for th	e return that this application is for (fi	ile a separa	te application for each return)				0 4
			·					
Applica	ntion		Return	Application				Return
is For			Code	Is For				Code
	90 or Form 990-EZ		01	Form 990 T (corporation)				07
Form 99			02	Form 1041-A			08	
	720 (individual)	•	03	Form 4720 (other than individual)				09
Form 99			04	Form 5227				10
	90 T (sec 401(a) or 4	(DR/a) truet)	05	Form 6069				11
			_					
FOIIII 9	90 T (trust other than		06	Form 8870				12
• The	h (GLENDA DURANO		DIJOHEDOHE NA 0062	E 0 7 1 (
		e of ► P.O. BOX 90625) – AL.		20/17	9		
		5) 797-2715		Fax No 🕨				
	•	not have an office or place of busines		•			•	
• If the	s is for a Group Retu	ırn, enter the organızatıon's four digit	t Group Exe	emption Number (GEN) I	f this is fo	or the w	hole group, c	heck this
		t of the group, check this box				oers the	extension is	for
1 1:	request an automation	c 3-month (6 months for a corporatio	n required	to file Form 990·T) extension of time	until			
_	AUGUST 15	, 2015 , to file the exem	pt organiza	tion return for the organization name	ed above	The ex	tension.	
	for the organization							
•	- 🗶 calendar year	<u>2014</u> or						
•	tax year begin	nning	, an	id ending				
	. 0		•			_		
2 If	the tax year entered	I in line 1 is for less than 12 months.	check reas	on· Initial return	Final retu	rn		
Ī	Change in acco	·						
3a If		r Forms 990·BL, 990·PF, 990·T, 4720	0. or 6069	enter the tentative tax less any		1		
	onrefundable credits		-, - ,	The tonder tax, loss any	3a	s		0.
_		r Forms 990-PF, 990-T, 4720, or 606	SQ enter on	v refundable credits and	130	 "		<u>_</u>
. 11	una application is to		יט, סונכו מוו	y returnable credits allu	1	i		

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

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions. 423841 05-01-14

by using EFTPS (Electronic Federal Tax Payment System) See instructions

estimated tax payments made. Include any prior year overpayment allowed as a credit

Balance due. Subtract line 3b from line 3a Include your payment with this form, if required,

Form 8868 (Rev 1-2014)

3b

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) recipient or substantial contributor OUTREACH TO ASIAN NATIONS 501C3 RELIGIOUS, WELFARE 261 BETHANY HILL DR WINCHESTER, VA 22603 250. NEW COVENANT CAMPUS MINISTRY 501C3 RELIGIOUS PO BOX 40687 ALBUQUERQUE, NM 87196 15. SAMARITAN'S PURSE 501C3 WELFARE, RELIGIOUS PO BOX 3000 BOONE, NC 28607 300. MANDY'S SPECIAL FARM 501C3 EDUCATION PO BOX 9346 ALBUQUERQUE, NM 87119 75. TCU-DEVELOPMENT SCHOLARSHIP 501C3 EDUCATION, RELIGIOUS TCU BOX 297044 FT WORTH TX 76129 300. WORLD RELIEF 501C3 4059 BRYAN AVE WELFARE FORT WORTH, TX 76110 250. WELFARE THE NARO FOUNDATION 501C3 EDUCATION 15 WEST 16TH ST. SUITE 2626 TULSA, OK 74119 500. COLLEGE GOLF FELLOWSHIP 501C3 WELFARE, RELIGIOUS 5098 FOOTHILLS BLVD STE 3 ROSEVILLE, CA 95747 250. TOTAL FAMILY OUTREACH 501C3 PO BOX 1900 LEHIGH ACRES FL 33970 WELFARE 500, ALBUQUERQUE YOUTH SYMPHONY 501C3 CULTURAL 4407 MENAUL BLVD NE ALBUQUERQUE, NM 87110 200. Total from continuation sheets 2,640,

HAZEL ROSE FAMILY CHARITABLE	73-1519254
Part XV Supplementary Information	
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution	
NAME OF RECIPIENT - WORLD RELIEF	
NAME OF RECIPIENT - WORLD RELIEF	
	-
WELFARE	
WELFARE	
	· · · · · · · · · · · · · · · · · · ·

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT	1
SOURCE		(A) REVENUE PER BOOKS		(B) NET INVESTMENT INCOME		(C) ADJUSTED NET INCOME	
AMERITRADE			7.		7.		7.
TOTAL TO PART I, LINE 3			7.		7.	7.	
FORM 990-PF	DIVIDENDS	S AND INTER	EST FRO	OM SECUR	RITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RI	(A) EVENUE R BOOKS	(B) NET INVES MENT INCO		
AMERITRADE - DIVIDENDS AMERITRADE -	2,169	•	0.	2,169.	2,16	9. 2,1	69.
DIVIDENDS	1,248	•	0.	1,248.	1,24	8. 1,2	48.
TO PART I, LINE 4	3,417	•	0.	3,417.	3,41	7. 3,4	17.
FORM 990-PF		ACCOUNTI	NG FEE	S		STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTED NET INCOM		
ACCOUNTING	_	375.		0.		0.	0.
TO FORM 990-PF, PG	1, LN 16B	375.		0.		0.	0.

FORM 990-PF	OTHER PROFES	SIONAL FEES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
INVESTMENT FEES	0.	2,464.		0.	0.
TO FORM 990-PF, PG 1, LN 16C	0.	2,464.		0.	0.
FORM 990-PF	TAX	ES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
IRS	2.	0.		0.	0.
TO FORM 990-PF, PG 1, LN 18	2.	0.		0.	0.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT	6
DESCRIPTION		во	OK VALUE	FAIR MARKET VALUE	
BRK B JKS VARIOUS STOCKS - TD AMERITRAI KELLOGG	DE		0. 0. 36,934.	36,93	0. 0. 4.
KEDDOGG					