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## **Return of Private Foundation**

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

▶ Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

Department of the Treasury

Int	Internal Revenue Service Information about Form 990-PF and its separate instructions is at <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a> . Open to Public Inspection									
F	or ca	lendar year 2014	or tax year beginning			, 2014	, and endi	ng		, 20
_		of foundation				<u> </u>	,	Ĭ	A Employer iden	tification number
•	гнЕ	CAESARS FOU	NDATION						74-3050	)638
_			ox number if mail is not delivere	to stree	et address)		Room/suite			mber (see instructions)
				·					,	
_	ME	CAESARS PALA	ACE DETUE						702 407	. 6002
_			e, country, and ZIP or foreign po	stal code				$\dashv$	702-407	7-6093
	Only 0	town, state or province	e, country, and zir or loreign po	siai code	<b>.</b>				C If exemption app	leaster
									C If exemption app pending check h	ere · · · · · · · ·
		<u> </u>	89109_	- 1						
G	Che	ck all that apply:	Initial return	_	Initial return		oublic chari	ty	D 1 Foreign organ	zations, check here
			Final return	L	Amended ref					izations meeting the
_			Address change		Name chang					k here and attach
H	Che	ck type of organiza	ation X Section 501	c)(3) e	exempt private f	oundation			E If newsta founds	ition status was terminated
1	s	ection 4947(a)(1) no	onexempt charitable trust		Other taxable pr	ıvate founda	tion		·	7(b)(1)(A) check here .
ı	Fair	market value of	all assets at J Acco	unting	method Ca	ash X Acc	rual			is in a 60-month termination
	end	of year (from Part	II, col. (c), line	ther (s	pecify)					7(b)(1)(B) check here . >
	16)	▶ \$	725,801.00 (Part I, c	olumn	(d) must be on cas	sh basis )		I		_
G	art l	Analysis of Reve	enue and Expenses (The	(2)	Revenue and			•		(d) Disbursements
		total of amounts in a	columns (b), (c), and (d)		Revenue and xpenses per	(b) Net inve		(c	) Adjusted net	for charitable
		may not necessarily column (a) (see inst	y equal the amounts in tructions))		books	ıncom	ie		income	purposes (cash basis only)
	1		, etc , received (attach schedule) .	2.6	40,000.00					(
	2	Check I if the	foundation is not required to		,					<del></del>
		attach	Sch B				+			<del></del>
	3		temporary cash investments.		3.00		3.00			
	4	Dividends and inter	est from securities		3.00		3.00			
	5a	Gross rents	/1				+			
	b	Net rental income or (ic	sale of assets not on line 10							
ž	6a/ b	Net√gain or/(loss) from Gross sales price)for all	sale of assets not on line 10							
Revenue	1	assets on line 6a	ome (from Éart IV, line 2) .							
é	7.						+			
_	8	Net short term capit	tal-gain.							
	9	Income modification	ns ?"							
	10 a	Gross sales less returns and allowances								
	b	Less Cost of goods sole	d		<u> </u>					
	С	Gross profit or (loss)	) (attach schedule)							
	11	Other income (attac	h schedule)							
	12	Total. Add lines 1 th	nrough 11	2,6	40,003.00		3.00			
	13	Compensation of office	ers, directors, trustees, etc							
šės	14 15 16a b c 17 18 19		aries and wages							
Ĕ	15	Pension plans, emp	loyee benefits							
ğ	16a		chedule)							
ω̈́	ь		tach schedule)							
Ş	c		ees (attach schedule)	1	41,332.00	_				
ä	17									
ᇙ	18		ule) (see instructions)	•						<del> </del>
₫	10		n schedule) and depletion.		-					
Ę	20	,	, ,							
ĕ	21		and mostures				-			
2	21 22		, and meetings	1	24,690.00					124,690.00
a	22		itions	1	75.00		+			
Ī	23	·	ach schedule)	-	75.00		- +			75.00
rat	23 24 25	•	d administrative expenses.	_	066 007 00		1			124 765 00
be			h 23		266,097.00	•	+			124,765.00
0			grants paid		70,385.00	<u> </u>	+			3,070,385.00
_	26		rsements Add lines 24 and 25	3,3	36,482.00		-			3,195,150.00
	27	Subtract line 26 from		-						
			cpenses and disbursements	-6	96,479.00					
			ome (if negative, enter -0-)	_			3.00			<del>                                     </del>
	C	Adjusted net incom	e (if negative, enter -0-)							

\*\*\*\*\*\* : APR 28 2015

Part		Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	of year	
		Dalance Silects	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash - non-interest-beari	ng	1,422,279.00	725,800.00	725,800.00	
	2		cash investments				
	3	Accounts receivable ▶					
		Less allowance for doul	btful accounts ►				
	4						
		Less allowance for doul	btful accounts ▶				
	5						
	6		officers, directors, trustees, and other				
		disqualified persons (att	tach schedule) (see instructions)				
	7	Other notes and loans r	eceivable (attach schedule) 🕨		** -		
		Less allowance for doub	btful accounts ▶				
ts	8		e				
ssets	9		eferred charges				
ď	10 a		e government obligations (attach schedule)				
	b	Investments - corporate	stock (attach schedule)				
	С	Investments - corporate	bonds (attach schedule)				
	11	Investments - land, buildings and equipment basis					
		Less accumulated deprecia (attach schedule)	ation				
	12	Investments - mortgage	loans				
	13	Investments - other (atta	ach schedule)				
	14	Land, buildings, and equipment basis	<b></b>				
		Less accumulated deprecia (attach schedule)	tion				
	15	Other assets (describe I	<b>&gt;</b> )				
	16	,	completed by all filers - see the				
_		instructions Also, see pa	age 1, item I)	1,422,279.00	725,800.00	725,800.00	
	17	Accounts payable and a	ccrued expenses				
	18	Grants payable					
es	19	Deferred revenue				1	
Ħ	1		rs, trustees, and other disqualified persons				
Liabiliti	21		tes payable (attach schedule)				
_	22	Other liabilities (describe	; <b>▶</b> )				
_			s 17 through 22)			_	
			ow SFAS 117, check here . ▶				
es		and complete lines 2	24 through 26 and lines 30 and 31.				
anc	24						
3al							
Net Assets or Fund Balanc	26	•					
Ē			not follow SFAS 117, ▶ X				
ŏ		· · · · · · · · · · · · · · · · · · ·	plete lines 27 through 31.	1 400 070 00	705 000 00		
şţs	27		cipal, or current funds	1,422,279.00	725,800.00	_	
SS			land, bldg, and equipment fund			1	
t A	29		ulated income, endowment, or other funds	1 400 070 00	705 000 00	-	
Š			balances (see instructions)	1,422,279.00	725,800.00	1	
			net assets/fund balances (see	1 400 070 00	705 000 00		
			nges in Net Assets or Fund Bala		725,800.00		
			alances at beginning of year - Part		must sarge with		
1						1 400 070 00	
•			d on prior year's return)		1 .	1,422,279.00	
		er amount from Part I,			2	-696,479.00	
3	3 Other increases not included in line 2 (itemize) ▶						
_	4 Add lines 1, 2, and 3 4 725,800.00  5 Decreases not included in line 2 (itemize) ▶ 5						
5	Dec	reases not included in	i line 2 (itemize) ►alances at end of year (line 4 minus	lino 5) Port II solvers //	b). line 30 6	725 000 00	
<u>°</u>	10[8	in her assers of fund b	aiances at end of year (line 4 minus	ine 5) - Fart II, Column (I	υ <sub>j</sub> , iii le 30   <b>δ</b>	725,800.00	

Par	V Capital Gains	and Losses for Tax on Inv	restment Income			
		d describe the kind(s) of property sold		(b) How acquired	(c) Date acquired	(d) Date sold
	2-story b	orick warehouse; or common stock, 200	) shs MLC Co)	P Purchase D Donation	(mo , day, yr )	(mo, day, yr)
<u>1a</u>						
<u>_b</u>						
_c_						
_d		·				
<u>e</u>	·					<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
<u>a</u>						
<u>_b</u> _	<del>.</del>					<u>.</u>
_ <u>C</u>				ļ <u>-</u>		
<u>d</u>						
<u>e</u>						
	Complete only for assets	showing gain in column (h) and own	ed by the foundation on 12/31/69		Gains (Col (h) g	
(i)	F M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less Losses (from co	•
a						
b						
С						
d					<u> </u>	
е				ļ		
2	Capital gain net income	or (not canital loss)	f gain, also enter in Part I, line 7 f (loss), enter -0- in Part I, line 7	2		
3	Net short-term capital ga	ain or (loss) as defined in sections	,			
			structions) If (loss), enter -0- in )			
				3		
Par	V Qualification	Under Section 4940(e) for Re	educed Tax on Net Investment I	ncome		
	ction 4940(d)(2) applies,	•	ibutable amount of any year in the b	ase period	42 [	Yes No
If "Ye	es," the foundation does	not qualify under section 4940(e)	. Do not complete this part.		_	
1	Enter the appropriate an	nount in each column for each ye	ar, see the instructions before making	ng any ent	ries.	
Cale	(a) Base period years ndar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution r (col (b) divided by	
	2013					
	2012					
	2011					
	2010					
	2009					
	-					
2	Total of line 1, column (c	d)		2		
3	Average distribution ratio	o for the 5-year base period - divi	de the total on line 2 by 5, or by the			
			ess than 5 years	3		
	<b>,</b>		•			
4	Enter the net value of no	oncharitable-use assets for 2014 f	from Part X, line 5	4	1,3	24,282.26
5	Multiply line 4 by line 3			5	<u>.                                    </u>	
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		0.03
7	Add lines 5 and 6			7		0.03
8	Enter qualifying distributi	ions from Part XII, line 4		8		95,150.00
	If line 8 is equal to or g Part VI instructions	reater than line 7, check the box	x in Part VI, line 1b, and complete	that part	using a 1% ta	x rate See the

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	nstru	ction	s)		
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	b Domestic foundations that meet the section 4940(e) requirements in Part V, check					
	here and enter 1% 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)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2					
3	Add lines 1 and 2		1	.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		1	.00		
6	Credits/Payments					
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 11.00					
b	Exempt foreign organizations - tax withheld at source					
C	Tax paid with application for extension of time to file (Form 8868) 6c					
d	Backup withholding erroneously withheld					
7	Total credits and payments Add lines 6a through 6d		11	.00		
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	.00		
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ 10.00 Refunded ▶ 11					
	t VII-A Statements Regarding Activities	r				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No		
	participate or intervene in any political campaign?	1a		X		
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see					
	Instructions for the definition)?	1b		X		
	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					
	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 ► \$ (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 > \$			١		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X		
_	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			ļ ,,		
	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?	4b		V		
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 chote legislation which effectively expende the constraint production which are the constraint or the constraint of t					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6		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 Part XV	7	X	-		
7						
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
J	(or designate) of each state as required by General Instruction G <sup>2</sup> If "No," attach explanation	8b	Х			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		<del></del> -			
,	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"					
	complete Part XIV	9		x		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		_	<u> </u>		
10	names and addresses	10		x		
		<del></del>				

Pai	rt VII-A Statements Regarding Activities (continued)		_	
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12	ŀ	Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	x	
	Website address			_
14	The books are in care of ► Leslie Parker Telephone no ► 702-407-	6093	:	
• •	Located at ▶ One Caesars Palace Drive, Las Vegas, NV ZIP+4 ▶ 89109			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			ΤТ
	and enter the amount of tax-exempt interest received or accrued during the year	• • •	–	ш
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?	16		X
			-	
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1) If "Yes," enter the name of the foreign country ▶			
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		1	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Г	Yes	No
4.	•		163	140
ıa	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	[	}	
	disquamos porosi.			
	(c) I almost goods, services, or tacimines to (or assept arem from) a disqualified person.			
	(1) ray componential to pay of reinfection and observed on, a unequalified person.		ŀ	
	(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)?			
	(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)			
b	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	١ ا		
	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			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected 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			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions )	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			
_	<b></b>			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year? Yes X No		]	
b	off "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		j	
	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		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	,	}	v
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		<u> X</u>

Pa	rt VII-B	Statements Regarding Activities	for Which Form	4720 May Be Red	uired (continued)			
5a	During the	year did the foundation pay or incur any amo	unt to					
	(1) Carry of	on propaganda, or otherwise attempt to influe	ence legislation (sectio	n 4945(e))?	Yes X No	ه ا		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on,							
	directly or indirectly, any voter registration drive?							
		e a grant to an individual for travel, study, or o			[V]	o		
		e a grant to an organization other than a	• • •					
		1 4945(d)(4)(A)? (see instructions)				<b>。</b>		
		e for any purpose other than religious, ch						
		es, or for the prevention of cruelty to children	· · · · · · · · · · · · · · · · · · ·	•				
b						n		
_	o 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)?							
	_	ons relying on a current notice regarding disas	-	,				
•	_	wer is "Yes" to question 5a(4), does the				<u> </u>		
·		maintained expenditure responsibility for the		•		,		
		· · · · ·	•		res m	<b>'</b>		
<b>C</b> -		tach the statement required by Regulations sec	• •					
6a		oundation, during the year, receive any fun			Yes X No	,	ļ ,	
		nal benefit contract?				6ь		х
b			ctry or mulifectry, on a	personal benefit contra	act,	.   60		
<b>-</b> -		6b, file Form 8870			. Yes X No	_		
7a		e during the tax year, was the foundation a pa d the foundation receive any proceeds or hav			• — —	I .		
		nformation About Officers, Director					L	
		and Contractors		•		p.0,000,		
_1	List all off	icers, directors, trustees, foundation n	nanagers and their (b) Title, and average	r compensation (see	e instructions). (d) Contributions to			
		(a) Name and address	hours per week devoted to position	(If not paid,	employee benefit plans	(e) Expen		
See	Attach	ed Worksheet	devoted to position	enter -0-)	and deferred compensation		-	
222								
							_	
2	Compensa	tion of five highest-paid employees	(other than thos	e included on lin	e 1 - see instructi	ons). If n	one.	enter
	"NONE."					,	. ,	
(0)	Mome and ad	Ideas of each ample as and mark that \$50,000	(b) Title, and average	(-) ()	(d) Contributions to employee benefit	(e) Expen	se accou	unt
(a)	ivanie and ad	dress of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred compensation	other al	lowance	!S
Non	е.				Compensation			
		<del></del>						
	<del>-</del>	· <del></del>						
	<u> </u>	<del></del>			<del> </del>			
					<del> </del>			
		·						
Tota	I number of	other employees paid over \$50,000	·		<u> </u>			
. Ola	i number of	other employees paid over \$50,000.		<u> </u>	· · · · · · · · · · · · · · · · · · ·	5 00	n DE	

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."  (a) Name and addiess of seen person paid more man \$50,000  (b) Type of service  (c) Compensance  None  Total number of others receiving over \$50,000 for professional services.  Fail IX-A Summary of Direct Charitable Activities  Liut the foundations for largest direct charitable activities  Liut the foundations denerally does not engage in any direct charitable activities activities. Rather, it uses its funds to provide financial assistance to charities chosen by its directors.  2  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  All other program-related investments See instructions  3 N/A  Little Add lates 1 broads 2	Part VIII Infor	mation About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empl. Contractors (continued)	oyees,
(a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation  None  Total number of others receiving over \$50,000 for professional services	3 Five highest	paid independent contractors for professional services (see instructions). If none, enter "NON	NE."
Total number of others receiving over \$50,000 for professional services.  Part IX-A Summary of Direct Charitable Activities  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 benefocaries served, conferences convend, research papers produced, etc.  1 The Foundation generally does not engage in any direct charitable activities. Rather, it uses its funds to provide financial assistance to charities chosen by its directors.  2  3  4  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  All other program-related investments See instructions  3 N/A  All other program-related investments See instructions			(c) Compensation
Total number of others receiving over \$50,000 for professional services.  Part IX-A Summary of Direct Charitable Activities  Lest the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  1 The Foundation generally does not engage in any direct charitable activities. Rather, it uses its funds to provide financial assistance to charities chosen by its directors.  2	None		
Total number of others receiving over \$50,000 for professional services.  Part IX-A Summary of Direct Charitable Activities  Lest the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  1 The Foundation generally does not engage in any direct charitable activities. Rather, it uses its funds to provide financial assistance to charities chosen by its directors.  2			
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Let the foundation's four largest direct charitable Activities  Let 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  1 The Foundation generally does not engage in any direct charitable activities. Rather, it uses its funds to provide financial assistance to charities chosen by its directors.  2			
Let the foundation's four largest direct charitable Activities  Let 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  1 The Foundation generally does not engage in any direct charitable activities. Rather, it uses its funds to provide financial assistance to charities chosen by its directors.  2			
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2	activities	. Rather, it uses its funds to provide financial assistance	
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  Amount	to chariti	es chosen by its directors.	
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  2  All other program-related investments See instructions  3 N/A	2		
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  2  All other program-related investments See instructions  3 N/A			
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Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  1 N/A  2  All other program-related investments See instructions 3 N/A	3		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  1 N/A  2  All other program-related investments See instructions 3 N/A			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  1 N/A  2  All other program-related investments See instructions 3 N/A	_		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  1 N/A  2  All other program-related investments See instructions 3 N/A	4		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  1 N/A  2  All other program-related investments See instructions 3 N/A			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  1 N/A  2  All other program-related investments See instructions 3 N/A	Part IX-B Su	mmary of Program-Related Investments (see instructions)	
1 N/A  2  All other program-related investments See instructions 3 N/A			Amount
All other program-related investments See instructions  3 N/A		yes, program routed intestinone made by the localitation coming the tax year of miles i and 2	-
All other program-related investments. See instructions  3 N/A		<b></b>	1
All other program-related investments. See instructions  3 N/A			
3 <u>N/A</u>	2		
3 <u>N/A</u>			
3 <u>N/A</u>			
	All other program-rel	ated investments. See instructions	
	3 <u>N/A</u>		

Par	X	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)							
1	Fair	market value of assets not used (or held for use) directly in carrying out charitable, etc.,							
	purp	oses.		•					
а	Aver	age monthly fair market value of securities	1a						
b	Aver	age of monthly cash balances	1b	1,344,449.00					
С	Fair	market value of all other assets (see instructions).	1c						
d	Tota	I (add lines 1a, b, and c)	1d	1,344,449.00					
е	Redu	action claimed for blockage or other factors reported on lines 1a and							
		attach detailed explanation)							
2	Acqu	usition indebtedness applicable to line 1 assets	2						
3	Subt	ract line 2 from line 1d	3	1,344,449.00					
4	Cash	ract line 2 from line 1d	<u> </u>						
	ınstr	uctions)	4	20,166.74					
5	Net	value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,324,282.26					
6		mum investment return. Enter 5% of line 5	6	66,214.11					
Par	t XI	Distributable Amount (see instructions) (Section 4942(J)(3) and (J)(5) private operating found							
		and certain foreign organizations check here ▶ and do not complete this part.)							
1	Mınır	mum investment return from Part X, line 6	1	66,214.11					
2 a	Tax	on investment income for 2014 from Part VI, line 5							
b	Incor	me tax for 2014. (This does not include the tax from Part VI). 2b	1						
С	Add	lines 2a and 2b	2c	1.00					
3	Distr	ibutable amount before adjustments. Subtract line 2c from line 1	3	66,213.11					
4		overies of amounts treated as qualifying distributions	4						
5		lines 3 and 4	5	66,213.11					
6	Ded	uction from distributable amount (see instructions).	6	<u> </u>					
7		ributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,							
		1	7	66,213.11					
Por			1						
reu	. All	Qualifying Distributions (see instructions)							
1		unts paid (including administrative expenses) to accomplish charitable, etc., purposes							
а	Expe	enses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	3,195,150.00					
b	Prog	ram-related investments - total from Part IX-B	1b						
2	Amo	unts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,							
	purp	oses	2						
3	Amo	unts set aside for specific charitable projects that satisfy the.							
а	Suita	ability test (prior IRS approval required)	3a						
b	Cash	distribution test (attach the required schedule)	3b						
4		fying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	3,195,150.00					
5		idations that qualify under section 4940(e) for the reduced rate of tax on net investment income.							
		r 1% of Part I, line 27b (see instructions)	5						
6	Adju	sted qualifying distributions. Subtract line 5 from line 4	6	3,195,150.00					
	Not	e. The amount on line 6 will be used in Part V, column (b), in subsequent years when c	alcula	ating whether the foundation					
		qualifies for the section 4940(e) reduction of tax in those years		-					

Form **990-PF** (2014)

Pa	rt XIII Undistributed Income (see instru	uctions)			<del>-</del>
_	Distributable amount for 2014 from Det VI	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1	Distributable amount for 2014 from Part XI,				66,213.11
_	Undistributed income, if any, as of the end of 2014				00,213.11
2	· · · · · · · · · · · · · · · · · · ·				
	Enter amount for 2013 only				<del></del>
3	Total for prior years 20,20,20,20,20			<del></del>	
-	F 0000				
	From 2009				
	From 2012				
	From 2013				
	Total of lines 3a through e				
4	Qualifying distributions for 2014 from Part XII,				
	line 4 ▶ \$ 3,195,150.00				
а	Applied to 2013, but not more than line 2a				
	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				
	Remaining amount distributed out of corpus			· · · · · · · · · · · · · · · · · · ·	
5	Excess distributions carryover applied to 2014				, <del></del>
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a) ) Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
ь	Prior years' undistributed income Subtract				
_	line 4b from line 2b				
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				
е	amount - see instructions				
	4a from line 2a Taxable amount - see instructions				
f	Undistributed income for 2014 Subtract lines				
	4d and 5 from line 1 This amount must be				66 010 11
	distributed in 2015		-		66,213.11
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)	<del></del>			
8	Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	<del></del> .		· · · · · · · · · · · · · · · · · · ·	
9	Excess distributions carryover to 2015.				
	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9:				
	Excess from 2010				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013  Excess from 2014				
E	EAUUSS HUILEULT		1		L

Pa	rt XIV Private Op	erating Foundations	s (see instructions a	nd Part VII-A, questi	ion 9)				
1 a	1a If the foundation has received a ruling or determination letter that it is a private operating								
	foundation, and the rulin								
b	Check box to indicate v					)(3) or 4942(j)(5)			
2 2	Enter the lesser of the ad-	Tax year		Prior 3 years					
2 0	justed net income from Part	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(e) Total			
	I or the minimum investment return from Part X for each		- "						
	year listed								
b	85% of line 2a								
	Qualifying distributions from Part								
·	XII, line 4 for each year listed .								
d	Amounts included in line 2c not								
	used directly for active conduct								
e	of exempt activities								
·	directly for active conduct of								
	exempt activities Subtract line 2d from line 2c								
3	Complete 3a, b, or c for the	-	_			<del></del>			
_	alternative test relied upon								
а	"Assets" alternative test - enter								
	(1) Value of all assets (2) Value of assets qualifying				<del>                                     </del>	<del> </del>			
	under section								
h	4942(j)(3)(B)(i) *Endowment* alternative test-	<del></del>		<u> </u>					
_	enter 2/3 of minimum invest-								
	ment 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)					· · · · · · · · · · · · · · · · · · ·			
	public and 5 or more								
	exempt organizations as provided in section 4942								
	(j)(3)(B)(iii)								
	port from an exempt								
	organization								
Pa	<u> </u>	ntary Information (	Complete this part	t only if the found	lation had \$5 000	or more in accete			
Ļά	at any time	during the year - s	ee instructions.)	conty if the found	iation nau \$5,000	or more in assets			
1	Information Regarding					<del></del>			
	List any managers of			e than 2% of the tota	al contributions receiv	ed by the foundation			
	before the close of any	tax year (but only if th	iey have contributed in	nore than \$5,000) (Se	ee section 507(d)(2))				
N/A	1								
	List any managers of	the foundation who	own 10% or more of	the stock of a corn	oration (or an equally	large portion of the			
	ownership of a partner					, large pertient or the			
				-					
N/A	1								
2	Information Regarding	g Contribution, Grant	, Gift, Loan, Scholarsh	ip, etc., Programs:					
	Check here ▶ ☐ if t				itable organizations :	and does not accept			
	unsolicited requests for	or funds. If the found	ation makes gifts, gra	ants, etc (see instruct	tions) to individuals of	or organizations under			
	other conditions, comp			, ,	,	<b>J</b>			
a	The name, address, a	nd telephone number	or e-mail address of t	he person to whom ap	plications should be ad	dressed			
	a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed  Leslie Parker, One Caesars Palace Drive, Las Vegas, NV 89109 702-407-6093								
	b The form in which applications should be submitted and information and materials they should include								
See	Attached Works	sheet							
	Any submission deadli								
	•								
N/F	1								
	Any restrictions or lii	mitations on awards,	such as by geogra	phical areas, charita	ble fields, kinds of i	nstitutions, or other			
	factors:		<del>-</del>						
N/F	1								

4E1490 1 00

Part XV Supplementary Information (continued)								
3 Grants and Contributions Paid During the Year or Approved for Future Payment  Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contribution  Name and address (home or business) Purpose of grant or contribution  Amo								
Recipient	Amount							
Name and address (home or business)	or substantial contributor	recipient	Purpose of grant or contribution					
a Paid during the year								
See Attached Schedule								
	1							
	<u> </u>							
Total		<u></u>	▶ 3a					
<b>b</b> Approved for future payment N/A								
N/A								
Total	<u> </u>	L						

Part XV	<ul><li>Analysis of Income-Produ</li></ul>	icing Activ	vities		-	
Enter gross	s amounts unless otherwise indicated	Unrela	ated business income	Excluded b	y section 512, 513, or 514	(e)
1 Program	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d)	Related or exempt function income
_						(See instructions)
	-	<del></del>				<u> </u>
				-		-
				_		
					-	· · · · · · · · · · · · · · · · · · ·
f		-			<u> </u>	
g Fees	and contracts from government agencies					
2 Membe	rship dues and assessments					
3 Interest	on savings and temporary cash investments		_			
4 Dividen	ds and interest from securities	522100	3.00			<u>-</u>
	tal income or (loss) from real estate					· · · · · · · · · · · · · · · · · · ·
	t-financed property					
	debt-financed property		<u> </u>			
	al income or (loss) from personal property .					
	nvestment income					
	(loss) from sales of assets other than inventory					
	ome or (loss) from special events					<del></del>
	profit or (loss) from sales of inventory					<del></del>
	evenue a					
e						
	I Add columns (b), (d), and (e)		3.00			
	add line 12, columns (b), (d), and (e)			*	13	3.00
(See works	heet in line 13 instructions to verify calcu	ulations )				
Part XVI	-B Relationship of Activities	to the Ac	complishment of Exe	empt Purp	oses	
Line No. ▼	Explain below how each activity accomplishment of the foundation	-			•	
			<del> </del>	<del></del>		
			·			<u> </u>
			•			
				•	-	
		_				
			<del>_</del>			
	<del></del>		<del></del>			
			<del></del>			·
		<del></del>		. <del>.</del>		-
<u> </u>		<del> </del>	_		<del></del>	
· · · · · ·	<del></del>		<del></del>		<del></del>	
_	<u> </u>					<del></del>
<u> </u>					<del></del>	

Form 990			ogordine Tro	noforo To and Tra-		d Dalatian	hina Wish Nan	a la a ui à .		ge 13
Part X	VII	Exempt Organ	egarding rra nizations	nsfers To and Tran	isactions an	a Relations	snips with None	cnarit	abie	,
ın	sect	on 501(c) of the Co		ngage in any of the fo ection 501(c)(3) organ				<u> </u>	Yes	No
	-	ations?	a foundation to	a noncharitable exemp	t araamization of					
				· · · · · · · · · · · · · · · · · · ·	_			1a(1)		х
								1a(2)		X
		ransactions								
(1	) Sal	es of assets to a no	ncharitable exem	ipt organization				1b(1)		X
				ole exempt organization						X
(3	) Her	ntal of facilities, equi	pment, or other a	assets				1b(3)		X
									-	$\frac{\Lambda}{X}$
				p or fundraising solicital						Х
c St	narıng	g of facilities, equipm	nent, mailing list	s, other assets, or paid	employees			1c		X
				," complete the follow						
				es given by the report ement, show in colum						
(a) Line		(b) Amount involved		oncharitable exempt organizat	<del></del>		ers, transactions, and share			
		<b>V</b> -7-1	(1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,		(4,/			3	9	
									_	
		<del></del>					<del></del>			
	_				-	<del></del> -				
		_		· · · · · ·						
				<del></del>						
	_	<del></del>								
	+									
<u> </u>	1	<del></del>								
		•	-	lated with, or related			-		_	٦
		" complete the follow		ner than section 501(c)	(3)) or in sectio	11 5277	L	Yes	, <u></u>	] No
	_, 00,	(a) Name of organization		(b) Type of organia	ation		c) Description of relations	hip		
	_									
				<del></del>	- +					
	Under	penalties of penury, I decla	re that I have examine	ed this return including accomp	anying schedules and	statements and to	the best of my knowledg	e and bel	lief it	ıs true
Sign	Correct	, and comprete Declaration of	preparer tolrier than tax	payer) is based on all information	or which preparer has:	any knowledge	May the IRS	discriss	this	return
Here		X	<u>/_/_</u>	14/3/15		ector		eparer sh		below
	Sigñ	ature of officer of trustee	_	Date* /	Title		(see instruction	s)?	Yes	No
	<del></del>	Print/Type preparer's nar		Preparer's signature		Date	Check If F	PTIN		
Paid							self-employed			
Prepa	rer	Firm's name			<del></del>		Firm's EIN			
Use O	nly	Firm's address			·					
							Phone no	000	חב	(00:11
							For	m <b>990</b> -		(2014)

#### 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, or 990-PF) and its instructions is at www irs gov/form990.

OMB No 1545-0047

Employer identification number

THE CAESARS FOUNDATIO	N	74-3050638
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private fou	ndation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundat	.ion
	501(c)(3) taxable private foundation	
- <del>-</del>	ered 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 S	Special Rule See
General Rule		
	ng Form 990, 990-EZ, or 990-PF that received, during the year, contributoreporty) from any one contributor. Complete Parts I and II See instructions.	
Special Rules	o	
regulations under secti 13, 16a, or 16b, and th	scribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1. ons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 at received from any one contributor, during the year, total contributions a amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Co	or 990-EZ), Part II, line s of the greater of (1)
contributor, during the	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that re year, total contributions of more than \$1,000 <i>exclusively</i> for religious, ch purposes, or the prevention of cruelty to children or animals Complete P	arıtable, scientific,
contributor, during the contributions totaled m during the year for an e	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that revear, contributions exclusively for religious, charitable, etc., purposes, but ore than \$1,000. If this box is checked, enter here the total contributions exclusively religious, charitable, etc., purpose Do not complete any of the original transfer to this organization because it received nonexclusively religious, charitable and during the year	at no such s that were received e parts unless the e, etc , contributions
Caution. An organization that is r	not covered by the General Rule and/or the Special Rules does not file Sinswer "No" on Part IV, line 2, of its Form 990, or check the box on line I	chedule B (Form 990,

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).

Name of organization
THE CAESARS FOUNDATION

Employer identification number 74-3050638

Part I	Contributors (see instructions).	Use duplicate copies of Part I if additional space is needed.
--------	----------------------------------	---------------------------------------------------------------

(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
1	Caesars Entertainment Operating Company, Inc.  One Caesars Palace Drive  Las Vegas, NV 89109	\$ 2,640,000.00	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		- \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		- - -	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

THE CAESARS FOUNDATION

Employer identification number

74-3050638

⊇art∥	Noncash Property (see instructions	). Use duplicate copies of Part II if addi	tional space is needed.
2.U.S.III	tronicación repenty (coo mondonono	). Obe auphoute copies of fait if it again	tional opaco lo nicoaca.

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_1	Pledges Receivable (Various Dates)		
		\$2,640,000.00	<u></u>
(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
<b></b>		   \$	
(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
- <b>-</b> -		    \$	

•		•				
Schedule	В	(Form	990,	990-EZ,	or 990-PF)	(2014)

Page 4

Name of or	ganization			Employer identification number			
THE CA	ESARS FOUNDATION		_	74-3050638			
Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or						
	that total more than \$1,000 for the						
	following line entry. For organizations	s completing Part III,	enter the total of e	exclusively religious, charitable, etc.,			
	contributions of \$1,000 or less for th						
	Use duplicate copies of Part III if addit			,			
(a) No. from	(b) Purpose of gift	(2) 1122	-4 -:44	(d) Decariation of how sife is held			
Part I	(b) Fulpose of gift	(c) Use	or gin	(d) Description of how gift is held			
			<del>-</del>				
		(e) Transf	er of gift				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use	of aift	(d) Description of how gift is held			
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	<u></u>	(a) Tagan	ing of cif4				
		(e) Transf	er or gift				
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(a) No.							
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee			
(a) No		<u> </u>	<u> </u>				
(a) No. from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
Part I			<del></del>				
<del>-</del>							
		(e) Transf	er of gift				
		• •	-				
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee			
10.4			· <del></del> -	Schedule B (Form 990, 990-EZ, or 990-PF) (2014)			

The Caesars Foundation
FEIN: 74-3050638
Attachment to Form 990-PF
Page 11, Part XV, Line 3a
Grants and Contributions Paid 2014

If recipient is an individual, show any relationship to Foundation

Name and address (home or business)  ARAPP Foundation  ARAPP Foundation  N/A  ARAPP Foundation  N/A  ARAPP Foundation  S01 (c)(3)  Program Support  Both States of Management Support  Both States of Society of Management Support  Reference Society of DeSoto County, MS  Reference Cancer Society of Usiley Center, CA  Reference Cancer Society of Valley Center, CA  Reference Cancer Society of DeSoto County, MS  Reference Cancer Cancer Society of DeSoto County, MS  Reference Cancer Cancer Cancer Society of DeSoto Cancer	
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1427 Clarkview Road, Ste 100	
	10,000
Rollimore MD 21200	
Cars 4 Christmas N/A 501(c)(3) Program Support	12,000
P O Box 518	
Belton, MO 64012	
Catholic Schools Foundation N/A 501(c)(3) Scholarships	7,500
260 Franklin Street, Suite 630	
Boston, MA 02100	
Chicago Gateway Green N/A 501(c)(3) Program Support	25,000
541 N Fairbanks Suite 830	*
Chicago, IL 60611	

• •	If recipient is an individual, show any relationship to	Foundation		
• Recipient	any foundation manager	status of	Purpose of Grant or	
Name and address (home or business)	or substantial contributor	receipient	Contribution	Amount
Chicanos Por La Causa Southwest	N/A	501(c)(3)	Housing Counseling	25,000
601 South 10th Street, Suite 105		1		
Las Vegas, NV 89101		L	<b>_</b>	
Cityteam Ministries	N/A	501(c)(3)	Program Support	10,000
634 Sproul Street		1		
Chester, PA 19013		<u> </u>		
Clark County Public Education Foundation	N/A	501(c)(3)	Program Support	125,000
3360 W Sahara Ave, Suite 160		1		
Las Vegas, Nv 89102	L	1_	ì	ì
Clean The World Foundation	N/A	501(c)(3)	Program Support	150,000
8026 Sunport Drive, #306		1		1
Orlando, FL 32809				
Cystic Fibrosis Foundation	N/A	501(c)(3)	Scholarships	25,000
220 North Main Street, Suite 104	İ	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		}
Natick, MA 01760		1		
Desert Research Institute	N/A	501(c)(3)	Program Support	16,250
2215 Raggio Parkway	],,,,	] 55 . (5),(5)	l rogiam Support	10,200
Rento, NV 89512		1	J	1
Don Bosco Senior Center	N/A	501(c)(3)	Program Support	10,000
3050 E Flamingo Road	IVO.	130 1 (0)(3)	i Togram Support	10,000
	İ	1	1	
Las Vegas, NV 89121	N/A	E01/-\/0\	Cabalambus	+
Education Collaborative of Washoe County	IN/A	501(c)(3)	Scholarships	20,000
2880 Sutro Street	1	1	1	
Reno, NV 89512	<del></del>	F041 155	<del> </del>	<b></b>
First Missionary Life Center	N/A	501(c)(3)	Program Support	5,000
413 W 7th St	<u>.</u>	1	Į.	ļ
Metropolis, IL 62690	·	<u> </u>		
First Place for Youth	N/A	501(c)(3)	Event Support	10,000
426 17th Street	1	}	1	1
Oakland, CA 94612		<u> </u>	<u> </u>	<u> </u>
French Quarter Festivals	N/A	501(c)(3)	Event Support	12,500
400 N Peters St , Suite 205	]			
New Orleans, LA 70130				
Girl Scouts of S NV	N/A	501(c)(3)	Program Support	25,000
2941 Harns Avenue	1		i	
Las Vegas, NV 89101		1		
GLAAD	N/A	501(c)(3)	Event Support	25,000
5455 Wilshire Boulevard, Suite 1500	i			}
Los Angeles, CA 90036	ļ	ł	ļ	ļ
Goodwill of Southern Nevada	N/A	501(c)(3)	Program Support	25,000
1280 West Chevenne Avenue		1 ```	"	
North Las Vegas, NV 89030	1	ł	1	ì
Green Chips	N/A	501(c)(3)	Program Support	50,000
3050 E Flamingo Road		1 (-)(-)	g	
Las Vegas, NV 89121	}		]	
Habitat for Humanity Council Bluffs	N/A	501(c)(3)	Event Support	12,000
645 9th Ave		35.(5)(5)	- Sin Cappoin	12,000
Council Bluffs, IA 51501			1	1
Heartland Family Services	N/A	501(c)(3)	Program Support	30,000
2101 South 42nd Street		301(0)(3)	l Togram Support	30,000
Omaha, NE 68105				
ITN Las Vegas Valley	N/A	ED1(a)(2)	Decree Superi	
	liv/A	501(c)(3)	Program Support	25,000
8965 S Eastern Ave , #120F	]		1	1
Las Vegas, NV 89123		E04/-\(0)	B	<del> </del>
Jewish Federation of Las Vegas	N/A	501(c)(3)	Program Support	10,000
2317 Renaissance Drive		1		
Las Vegas, NV 89119			<del></del>	<u> </u>
Joliet Area Historical Museum	N/A	501(c)(3)	Program Support	15,000
204 N. Ottawa Street	į		Į.	Į.
Joliet, IL 60432		<u> </u>	<del> </del>	
Junior Achievement of S. Nevada	N/A	501(c)(3)	Program Support	15,000
7220 S Cimaπon, Suite 130			1	1
Las Vegas, NV 89113			<u> </u>	
Keep Memory Alive	N/A	501(c)(3)	Event Support	25,000
888 West Bonneville Avenue	1	] ''''	]	1
	•		i e	1

If recipient is an individual, show any relationship to Foundation

	snow any relationship to	roundation		
. Recipient Name and address (home or business)	any foundation manager or substantial contributor	status of receipient	Purpose of Grant or Contribution	Amount
Kliptown Youth Program	N/A	501(c)(3)	Program Support	30,000
PO Box 127	IVA	301(0)(3)	Program Support	30,000
Kliptown South Africa	1	Į.	Į.	į
Legacy Donor Foundation		501(c)(3)	Event Support	15,000
2701 Kingman St. Suite 101	N/A	301(0)(3)	Event Support	13,000
Metaine, LA 70006			1	ľ
Liberty's Kitchen	N/A	501(c)(3)	Program Support	25,000
422 1/2 South Broad St	1473	301(0)(0)	l logialii Support	25,000
New Orleans, LA 70119			1	
Lorraine Civil Rights Museum Foundation	N/A	501(c)(3)	Program Support	50,000
450 Mulberry Street		001(0)(0)	Trogram Support	30,000
Memphis, Tn 38103			1	
Lou Ruvo Center for Brain Health	N/A	501(c)(3)	Program Support	200,000
888 W Bonneville Ave		(-)(-)	J. rogiam Support	
Las Vegas, NV 89106			1	j
Mad Anthony's Children's Hope House	N/A	501(c)(3)	Program Support	50,000
7922 West Jefferson Blvd	1	(-)(-)	J. regium Support	
Fort Wayne, IN 46804		1		1
MANNA Food Bank	N/A	501(c)(3)	Program Support	25,000
627 Swannanoa River Road	1.27.	155.(6)(6)	) rogiam cappoin	20,000
Asheville, NC 28805	1		1	
Meals on Wheels Association of America	N/A	501(c)(3)	Program Support	150,000
203 South Union Street	1.57.	(0)(0)	l rogram Sappon	100,000
Alexandra, VA 22314				
National Association of Area Agencies on Aging	N/A	501(c)(3)	Event Support	25,000
1730 Rhode Island Ave, NW, Suite 1200	, , , ,	001(0)(0)	Zvorii Gapport	20,000
Washington, DC 20036				
National Center for Responsible Gaming	N/A	501(c)(3)	Program Support	150,000
1299 Pennsylvania Ave , NW, Suite 1175		00.(0)(0)	l rogiam capport	1000,000
Washigton, DC 20004		}	ļ	
National Council on Aging	N/A	501(c)(3)	Event Support	25,000
3397 Barham Boulevard	1	001(0)(0)	Later Capport	20,000
Los Angeles, CA 90068			}	
National Park Trust	N/A	501(c)(3)	Event Support	63,000
401 E Jefferson St , Suite 102		00.(0)(0)	L Com Cappen	00,000
Rockville, MD 20850				
Nevada Senior Games	N/A	501(c)(3)	Event Support	20,000
3925 S Jones Blvd #1123	[	150 /(0)(0)	Lusin Cappon	20,000
Las Vegas, NV 89124		1	ł	
New Vista Ranch	N/A	501(c)(3)	Program Support	25,000
P O Box 80025	(***	( , , , , ,	l rogium cappon	20,000
Las Vegas, NV 89180			ł	
Opportunity Village	N/A	501(c)(3)	Program Support	275,000
6300 W Oakey Blvd	F	1551(5)(5)	, rogiain Sappon	2.0,000
Las Vegas, NV 89146	1	1	]	
Prevention Links	N/A	501(c)(3)	Event Support	10,000
121 Chestnut St		(0)(0)	Liverin Support	10,000
Roselle, NJ 07203		1	ì	
PRIME Initiative	N/A	501(c)(3)	Program Support	41,268
Astral House 1268 London Road			l regium cappen	11,200
London, England SW16 4ER	}	}	\	1
Relay for Life of Hamson Gulfport		501(c)(3)	Fundraising Match	500
250 Williams Street NW	1			1
Atlanta, GA 30303	1	1	<b>\</b>	1
Relay for Life of Joliet	N/A	501(c)(3)	Fundraising Match	2,500
250 Williams Street NW	ļ	(0)(0)		2,500
Atlanta, GA 30303	1	1	Į.	
Relay for Life of Massac County IL	<sub>N/A</sub>	501(c)(3)	Fundraising Match	5,000
250 Williams Street NW	[		L. C.	] 3,000
Atlanta, GA 30303		1	l	
Relay for Life of North Lake County		501(c)(3)	Fundraising Match	2,500
250 Williams Street NW	[""	]50.(0)(0)	anaraising water	2,300
Atlanta, GA 30303		1		
Relay for Life of South Valley, NV		501(c)(3)	Fundraising Match	5,000
250 Williams Street NW	177		I dividising Mater	5,000
Atlanta, GA 30303	1	1	1	]
/ III de la la de de de de de de de la la la la la la la la la la la la la			<del></del>	

If recipient is an individual, show any relationship to Foundation

Desimont	snow any relationship to	-1		
Recipient Name and address (home or business)	any foundation manager or substantial contributor	status of	Purpose of Grant or Contribution	Amount
Relay for Life of Tate County, MS	N/A	receipient	<del>~</del>	500
250 Williams Street NW	IN/A	501(c)(3)	Fundraising Match	500
Atlanta, GA 30303		}	ļ	1
Relay for Life of Tunica County, MD	N/A	501(c)(3)	Fundraising Match	500
250 Williams Street NW	177	301(0)(3)	rundraising water	] 300
Atlanta, GA 30303		}	ļ	ļ
Relay for Life of Valley Center, CA	N/A	501(c)(3)	Fundraising Match	5,000
250 Williams Street NW	ļ		Tundraising water	0,000
Atlanta, GA 30303		1	ļ	
Rose Brooks Center	N/A	501(c)(3)	Event Support	10,000
P O Box 320599			Com Support	10,000
Kansas City, MO 64132	Į.	1		Į.
Second Harvest Food Bank	N/A	501(c)(3)	Program Support	10,000
1201 Sams Avenue				
New Orleans, LA 70123		ļ		1
Second Wind Dreams	N/A	501(c)(3)	Program Support	75,000
1031 Cambлdge Square, Suite G		```	" ''	
Alpharetta, GA 30004		Į.		Į.
Senior Community Services	N/A	501(c)(3)	Program Support	25,000
600 Swarthmore Ave			1	
Folsom, PA 19033		<u></u>	L	
Senior Services Center of Will County	N/A	501(c)(3)	Program Support	25,000
251 N Center St				
Joliet, IL 60435				
The Smith Center	N/A	501(c)(3)	Program Support	20,000
361 Symphony Park Ave				
Las Vegas, NV 89106				
Special Olympics Nevada	N/A	501(c)(3)	Program Support	25,000
5670 Wynn Road, Suite H				
Las Vegas, NV 89118		<u> </u>		
St Jude Children's Research Hospital	N/A	501(c)(3)	Event Support	20,000
2104 Orchard Mist Ct				
Las Vegas, NV 89135				
St Rose Dominican Health Foundation	N/A	501(c)(3)	Program Support	10,000
3001 St, Rose Parkway			İ	
Henderson, NV 89052				<del></del>
Teach for America Las Vegas Valley	N/A	501(c)(3)	Program Support	150,000
1785 East Sahara, Surte 460			ĺ	
Las Vegas, NV 89104		504( )(0)		<del> </del>
The Angel's Depot	N/A	501(c)(3)	Program Support	25,000
1495 Poinsettia Avenue, Suite 151			1	ļ
Vista, CA 92081		F04(-)(0)	[	05.000
The Cooper Flora	N/A	501(c)(3)	Event Support	25,000
One Cooper Plaza			J	
Camden, NJ 08103 Touro University Nevada	N/A	E01/a\/2\	Drogram Cupper	
874 American Pacific Drive	liv'A	501(c)(3)	Program Support	25,000
Henderson, NV 89104				
United Negro College Fund		501(c)(3)	Scholarships	100,000
105 Adams Street, Suite 2400	100	1201(0)(3)	Journal Strips	100,000
Chicago, IL 60603			1	
USA Cares	N/A	501(c)(3)	Program Support	20,000
562 B North Dixie Blvd, Suite 3	lwo.	30 1(0)(3)	i rogiam Support	20,000
Radcliff, KY 40160				
USO of Metro Washington D C		501(c)(3)	Event Support	25,000
228 McNair Bldg 405	177	33.(0)(0)	L.ou oupport	25,000
Fort Myer, VA 22211			]	1
Vegas PBS	N/A	501(c)(3)	Program Support	50,000
3050 E Flamingo Road	]	](-)(-)	grain cappoit	30,000
Las Vegas, NV 89121			ł	1
YMCA Omaha Council Bluffs Metro	N/A	501(c)(3)	Program Support	20,000
430 South 20th Street	1	33.(0)(3)		20,000
			1	ĺ
Omaha, NE 68102			-	
	N/A	501(c)(3)	Program Support	15,000
Omaha, NE 68102 YMCA of Southern Nevada 4141 Meadows Lane	N/A	501(c)(3)	Program Support	15,000

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Recipient Name and address (home or business)	any foundation manager or substantial contributor	status of receipient	Purpose of Grant or Contribution	Amount	
Youth Empowerment Project 1600 Oretha Castle Haley Boulevard New Orleans, LA 70113	N/A	501(c)(3)	Program Support	6,867	
			Total Payments	3 070 385	

The Caesars Foundation FEIN. 74-3050638 Attachment to Form 990-PF Page 10, Part XV, line 2b Giving Guidelines 12/31/2014

- 1 Gift must be given to a 501(c)(3) not-for-profit organization. The following should be provided
  - a. Amount requested;
  - b. Statement of proposed objective,
  - c Brief statement of history, goals, and accomplishments to date,
  - d. Current annual report;
  - e. Internal Revenue Service tax exemption letter 501(c)(3),
  - f Current year's budget showing anticipated expenses and income,
  - g List of current corporate and foundation funding sources, public and/or private, with amounts contributed within the most recent 12 months or last fiscal year,
  - h. Most recent independently audited financial statement,
  - I. List of members of applicant's governing board,
  - List of accrediting agencies, where appropriate; and
  - k Cultural organizations should submit their most recent 12-month audience statistics

The Caesars Foundation FEIN 74-3050638 Attachment to Form 990-PF Page 6, Part VIII, line 1 List of officers, directors, trustees 12/31/2014

(a) Name and address	(b) Title/ Hours per week	( c ) Compensation	(d) Contributions to Employee Benefit Plans	(e) Expense acct, other allowances
Janet Beronio 777 Harrah's Rincon Way, Valley Center, CA 92082	Chairman/Trustee 2 hours per week	0	0	0
Jan Jones One Caesars Palace Drive, Las Vegas, NV 89109	Trustee 2 hours per week	0	0	0
Scott Weigand One Caesars Palace Drive, Las Vegas, NV 89109	Secretary 2 hours per week	0	0	0
Thomas M Jenkin One Caesars Palace Drive, Las Vegas, NV 89109	Vice-Chairman/Trustee 2 hours per week	0	0	0
John Payne 8 Canal Street, New Orleans, LA 70130	Trustee 2 hours per week	0	0	0

The Caesars Foundation FEIN: 74-3050638 Attachment to Form 990-PF 12/31/2013

### Form 990-PF, Part 1, page 1, question 16c Other professional fees

Consulting	\$ 141,332
	\$ 141,332
Form 990-PF, Part 1, page 1, question 23 Other expenses	
Annual Report Fee	\$ 75
	\$ 75