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Form **990-PF**Department of the Treasury
Internal Revenue Service**Return of Private Foundation**

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

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▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014 or tax year beginning , **2014**, and ending , **20**

Name of foundation THE SI REDD & TAMARA REDD CHARITABLE FOUNDATION		A Employer identification number 88-0291338
Number and street (or P O box number if mail is not delivered to street address) 388 E. FORD AVENUE		B Telephone number (see instructions) (702) 263-3600
Room/suite		
City or town, state or province, country, and ZIP or foreign postal code LAS VEGAS, NV 89123-3002		C If exemption application is pending, check here <input type="checkbox"/> D 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
G Check all that apply	<input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change	<input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 897,182.		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash 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) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	16,679.	16,679.	16,679.	ATCH 1
	4 Dividends and interest from securities				ATCH 2
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	-88,997.			
	b Gross sales price for all assets on line 6a	11,003.			
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	-72,318.	16,679.	16,679.		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	11,628.			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule) ATCH 3	645.	645.	645.	
	b Accounting fees (attach schedule) ATCH 4	3,300.	3,300.	3,300.	
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) [5]	600.	600.	600.	
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule) ATCH 6	836.	836.	836.	
	24 Total operating and administrative expenses. Add lines 13 through 23.	17,009.	5,381.	5,381.	
	25 Contributions, gifts, grants paid	50,000.			50,000.
26 Total expenses and disbursements. Add lines 24 and 25	67,009.	5,381.	5,381.	50,000.	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	-139,327.				
b Net investment income (if negative, enter -0-)		11,298.			
c Adjusted net income (if negative, enter -0-)			11,298.		

SCANNED JUL 24 2015

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	18,815.	9,046.	9,046.
	3	Accounts receivable ▶ Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶ Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ Less allowance for doubtful accounts ▶			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10 a	Investments - U S and state government obligations (attach schedule)			
	b	Investments - corporate stock (attach schedule) ATCH 7	646,060.	346,060.	293,730.
	c	Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule) ▶			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule) ATCH 8	650,000.	603,658.	594,406.
	14	Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) ▶			
15	Other assets (describe ▶)				
16	Total assets (to be completed by all filers - see the instructions Also, see page 1, item I)	1,314,875.	958,764.	897,182.	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶)			
23	Total liabilities (add lines 17 through 22)	0	0		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here . ▶ <input type="checkbox"/>				
	and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, . . . ▶ <input checked="" type="checkbox"/>				
	check here and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	1,314,875.	958,764.	
30	Total net assets or fund balances (see instructions)	1,314,875.	958,764.		
31	Total liabilities and net assets/fund balances (see instructions)	1,314,875.	958,764.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,314,875.
2	Enter amount from Part I, line 27a	2	-139,327.
3	Other increases not included in line 2 (itemize) ▶ ATCH 9	3	2,311.
4	Add lines 1, 2, and 3	4	1,177,859.
5	Decreases not included in line 2 (itemize) ▶ ATCH 10	5	219,095.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	958,764.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1a SEE PART IV SCHEDULE					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))		
(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			
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }			2	-88,997.	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8			3	0	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2013	50,000.	1,214,785.	0.041160
2012	41,500.	1,148,135.	0.036146
2011	125,823.	1,222,786.	0.102899
2010	101,200.	1,289,521.	0.078479
2009	104,300.	1,023,005.	0.101955
2 Total of line 1, column (d)			2 0.360639
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 0.072128
4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5			4 1,014,749.
5 Multiply line 4 by line 3			5 73,192.
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 113.
7 Add lines 5 and 6			7 73,305.
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			8 50,000.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary - see instructions)	1	226.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> 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	3	226.
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	226.
6 Credits/Payments		
a 2014 estimated tax payments and 2013 overpayment credited to 2014	6a	721.
b Exempt foreign organizations - tax withheld at source	6b	
c Tax paid with application for extension of time to file (Form 8868)	6c	
d Backup withholding erroneously withheld	6d	
7 Total credits and payments. Add lines 6a through 6d	7	721.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	495.
11 Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ 495. Refunded ▶	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
c Did the foundation file Form 1120-POL for this year?		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 ▶ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		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	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	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 calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions).	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	X	
14	The books are in care of DARLENE LYNDES Telephone no 702-263-3600 Located at 388 E. FORD AVENUE LAS VEGAS, NV ZIP+4 89123-3002			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year. 15			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? 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 ▶	16	Yes	No X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/>	1b	
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? <input type="checkbox"/>	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))		
a 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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) <input type="checkbox"/>	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014) <input type="checkbox"/>	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b	X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). ☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☒ **5b**

Organizations relying on a current notice regarding disaster assistance check here ☒

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☒ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No **6b**

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No **7b**

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ATCH 11		11,628.	0	0

2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000. ☐

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		0
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 beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 SMITH CENTER FOR THE PERFORMING ARTS BUILD AND ESTABLISH A HIGH-QUALITY PERFORMING ARTS CENTER THAT IS EMBRACED BY THE COMMUNITY	2,000.
2 ZIONS YOUTH SYMPHONY & CHORUS TO SERVE OTHERS THROUGH MUSIC	1,500.
3 LAS VEGAS RESCUE MISSION SERVES HOMELESS AND ABUSED WOMEN AND CHILDREN, VICTIMS OF DOMESTIC VIOLENCE, VICTIMS OF ELDER ABUSE	2,000.
4 NEVADA S.P.C.A PROMOTES HUMANE EDUCATION, MAKES REFERRALS, AND CHALLENGES PEOPLE TO BE THE BEST POSSIBLE GUARDIANS FOR ANIMALS IN CARE	2,000.

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NOT APPLICABLE	
2	
All other program-related investments See instructions	
3 NONE	
Total. Add lines 1 through 3	

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Part 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., purposes		
a	Average monthly fair market value of securities	1a	493,182.
b	Average of monthly cash balances	1b	67,805.
c	Fair market value of all other assets (see instructions)	1c	469,215.
d	Total (add lines 1a, b, and c)	1d	1,030,202.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,030,202.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	15,453.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,014,749.
6	Minimum investment return. Enter 5% of line 5	6	50,737.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	50,737.
2a	Tax on investment income for 2014 from Part VI, line 5	2a	226.
b	Income tax for 2014 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	226.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	50,511.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	50,511.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	50,511.

Part 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	50,000.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	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	50,000.
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 (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	50,000.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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				50,511.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only				
b Total for prior years 20 <u>12</u> , 20 <u>11</u> , 20 <u>10</u>				
3 Excess distributions carryover, if any, to 2014				
a From 2009	43,391.			
b From 2010	37,042.			
c From 2011	65,038.			
d From 2012				
e From 2013				
f Total of lines 3a through e	145,471.			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ <u>50,000.</u>				
a Applied to 2013, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2014 distributable amount				50,000.
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).)	511.			511.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	144,960.			
b Prior years' undistributed income Subtract line 4b from line 2b				
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				
d Subtract line 6c from line 6b Taxable amount - see instructions				
e Undistributed income for 2013 Subtract line 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 distributed in 2015				
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)				
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	42,880.			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	102,080.			
10 Analysis of line 9				
a Excess from 2010	37,042.			
b Excess from 2011	65,038.			
c Excess from 2012				
d Excess from 2013				
e Excess from 2014				

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

<div>Recipient</div> <div>Name and address (home or business)</div>	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year ATCH 12				
Total			▶ 3a	50,000.
b Approved for future payment				
Total			▶ 3b	

Enter gross amounts unless otherwise indicated

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

JSA
4E1492 1 000

FORM 990-PF - PART IV**CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
11,003.		2500 SHARES VRTB 100,000.					VAR -88,997.	12/15/2014
TOTAL GAIN (LOSS)							<u>-88,997.</u>	

ATTACHMENT 1FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>
INTEREST INCOME - BANK OF NEVADA	30.	30.	30.
INTEREST INCOME- CHASE SAVINGS			
INTEREST INCOME- MVP MORTGAGE	13,800.	13,800.	13,800.
INTEREST INCOME- NOW FUND I	2,849.	2,849.	2,849.
TOTAL	<u>16,679.</u>	<u>16,679.</u>	<u>16,679.</u>

ATTACHMENT 2FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>
DIVIDENDS - FROM PASS THROUGH	
	TOTAL

ATTACHMENT 3FORM 990PF, PART I - LEGAL FEES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>	<u>CHARITABLE PURPOSES</u>
LIONEL, SAWYER, & COLLINS	645.	645.	645.	
TOTALS	<u>645.</u>	<u>645.</u>	<u>645.</u>	

ATTACHMENT 4

FORM 990PF, PART I - ACCOUNTING FEES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>	<u>CHARITABLE PURPOSES</u>
PIERCY BOWLER TAYLOR & KERN	3,300.	3,300.	3,300.	
TOTALS	<u>3,300.</u>	<u>3,300.</u>	<u>3,300.</u>	

ATTACHMENT 5

FORM 990PF, PART I - TAXES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME
FEDERAL INCOME TAX EXPENSE	600.	600.	600.
TOTALS	<u>600.</u>	<u>600.</u>	<u>600.</u>

ATTACHMENT 6FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME
OFFICE SUPPLIES	25.	25.	25.
PASS THROUGH PORTFOLIO DED	811.	811.	811.
TOTALS	836.	836.	836.

ATTACHMENT 7FORM 990PF, PART II - CORPORATE STOCK

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
VESTIN REALTY MORTGAGE I INC	269,900.	195,510.
VESTIN REALTY MORTGAGE II INC	76,160.	98,220.
TOTALS	<u>346,060.</u>	<u>293,730.</u>

ATTACHMENT 8FORM 990PF, PART II - OTHER INVESTMENTS

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
MVP - NOW I FUND	253,658.	244,406.
MVP - PARKVIEW POINTE	50,000.	50,000.
MVP - THL SERVICING	200,000.	200,000.
MVP - M3	100,000.	100,000.
TOTALS	<u>603,658.</u>	<u>594,406.</u>

ATTACHMENT 9FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u>	<u>AMOUNT</u>
BOOK/TAX DIFFERENCE MVP INTEREST INC	1,500.
BOOK/TAX DIFF - NOW FUND K-1 PORTFOLIO	811.
TOTAL	<u>2,311.</u>

ATTACHMENT 10FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u>	<u>AMOUNT</u>
DISTRIBUTION PURSUANT TO SETTLEMENT	
AGREEMENT DATED 4/28/14 FORM 706	199,904.
ADJUSTMENT TO NOW I FUND INVESTMENT	19,191.
TOTAL	<u>219,095.</u>

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEESATTACHMENT 11

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u>	<u>COMPENSATION</u>
DARLENE LYNDES 388 E. FORD AVENUE LAS VEGAS, NV 89123-3002	TRUSTEE	11,628.
JOHN E. DAWSON 3052 SABINE HILL AVENUE HENDERSON, NV 89052-3029	TRUSTEE	
SCOTT W. TAYLOR PIERCY BOWLER TAYLOR & KERN 6100 ELTON AVE, SUITE 1000 LAS VEGAS, NV 89107	TRUSTEE	
MICHAEL V. SHUSTEK 6149 S. RAINBOW BLVD. LAS VEGAS, NV 89118	TRUSTEE	
MATTHEW R POLICASTRO 300S 4TH ST #1700 LAS VEGAS, NV 89101	TRUSTEE	
GRAND TOTALS		<u>11,628.</u>

FORM 990EF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 12

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
	FOUNDATION STATUS OF RECIPIENT			
ALS OF NEVADA 6370 W. FLAMINGO #3 LAS VEGAS, NV 89103	NONE N/A		TO HELP FUND RESEARCH FOR A CURE & PROVIDE PATIENT CARE	
ANIMAL FOUNDATION 655 N MOJAVE RD LAS VEGAS, NV 89101-2801	NONE N/A		TO HELP FUND ANIMAL CARE & ADOPTION ASSISTANCE	1,000.
CHILDREN'S SERVICE GUILD 701 N. PECOS LAS VEGAS, NV 89101-2411	NONE N/A		TO HELP FUND ON-GOING OPERATIONS FOR ABUSED AND NEGLECTED CHILDREN	1,000.
F.A.C.T (FAMILY AND CHILD TREATMENT) 1050 S RAINBOW BLVD LAS VEGAS, NV 89145-6231	NONE N/A		TO PROVIDE ASSISTANCE FOR ABUSED CHILDREN	1,000.
NEVADA S.P.C.A. 4800 W. DEWEY DRIVE LAS VEGAS, NV 89118-2207	NONE N/A		TO HELP SAVE AND PROTECT HOMELESS ANIMALS	2,000.
PUPPIES BEHIND BARS 10 E 40TH STREET - 19TH FLOOR NEW YORK, NY 10016	NONE N/A		TO HELP TRAIN INMATES TO RAISE SERVICE DOGS FOR THE DISABLED & EXPLOSIVE DETECTION CANINES FOR LAW ENFORCEMENT	

FORM 990EF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 12 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ST. JUDE'S RANCH FOR CHILDREN P.O. BOX 60100 BOULDER CITY, NV 89006-1904	NONE N/A	TO HELP CARE FOR ABUSED, ABANDONED & NEGLECTED CHILDREN	1,000.
CANINE PARTNERS FOR LIFE PO BOX 170 COCHRANVILLE, PA 19330	NONE N/A	TRAINS SERVICE DOGS, HOME COMPANION DOGS, AND RESIDENTIAL COMPANION DOGS TO ASSIST INDIVIDUALS WHO HAVE A WIDE RANGE OF PHYSICAL AND COGNITIVE DISABILITIES	
OPERATION GRATITUDE 16444 REFUGIO RD ENCINO, CA 91436	NONE N/A	TO LIFT MORALE AND PUT SMILES ON FACES BY SENDING CARE PACKAGES ADDRESSED TO INDIVIDUAL SOLDIERS, SAILORS, AIRMEN AND MARINES DEPLOYED OVERSEAS	1,000.
PERFORMING ANIMAL WELFARE SOCIETY PO BOX 849 GALT, CA 95632	NONE N/A	PROVIDES 3 SANCTUARIES IN CALIFORNIA TO ABUSED, ABANDONED, & RETIRED CAPTIVE WILDLIFE	1,000.
SHOES THAT FIT 1420 NORTH CLAREMONT BLVD SUITE 107-B CLAREMONT, CA 91711	NONE N/A	TO HELP BUILD THE SELF-ESTEEM OF SCHOOLCHILDREN IN NEED BY PROVIDING THEM WITH NEW SHOES AND CLOTHES	1,000.
WILDLIFE CONSERVATION NETWORK 25745 BASSETT LAND LOS ALTOS, CA 94022	NONE N/A	PROTECTS ENDANGERED SPECIES & PRESERVES THEIR NATURAL HABITATS	1,000.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 12 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ANIMAL RESCUE TWO HERITAGE FARM DRIVE NEW FREEDOM, PA 17349	NONE N/A	ANIMAL RESCUE IS DEDICATED TO THOSE ANIMALS THAT ARE WAITING FOR A HOME, OR NEVER FIND A HOME.	1,000.
GUIDE DOGS OF THE DESERT 60740 DILLON ROAD WHITewater, CA 92282	NONE N/A	PROVIDE QUALITY GUIDE DOGS TO THE BLIND AND THE MULTI-HANDICAPPED BLIND.	
HUMANE SOCIETY OF SOUTH MISSISSIPPI 2615 25TH AVE GULFPORT, MS 39501	NONE N/A	PROVIDE THE HIGHEST QUALITY SERVICES AND COMPASSION TO THE ANIMALS ENTRUSTED TO OUR CARE, REDUCE COMPANION ANIMAL OVERPOPULATION AND INCREASE THE SAVE-RATE OF ANIMALS IN OUR COMMUNITY, AND PROMOTE THE BOND BETWEEN ANIMALS AND HUMANS.	1,000.
HABITAT FOR HUMANITY 1401 NORTH DECATUR LAS VEGAS, NV 89108	NONE N/A	BUILD SIMPLE, DECENT, AFFORDABLE SINGLE FAMILY HOMES IN CLARK COUNTY.	1,000.
HAPPY ACRE SANCTUARY 4540 EAST MARTIN AVE PAHRUMP, NV 89061	NONE N/A	CREATING A HUMANE AND COMPASSIONATE ALTERNATIVE FOR DIFFICULT-TO-PLACE, SPECIAL NEEDS, ABUSED, ABANDONED, AND HOMELESS PETS	
LAS VEGAS RESCUE MISSION ONE WEST OWENS AVE NORTH LAS VEGAS, NV 89030	NONE N/A	SERVING HOMELESS AND ABUSED WOMEN AND CHILDREN, VICTIMS OF DOMESTIC VIOLENCE, VICTIMS OF ELDER ABUSE, VICTIMS OF STREET VIOLENCE, FEMALE VETERANS, HOMELESS YOUTH AND THE PHYSICALLY DISABLED.	2,000.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 12 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
NEW VISTA COMMUNITY PO BOX 80025 LAS VEGAS, NV 89180	NONE N/A	PROVIDE THE PEOPLE WE SERVE WITH THE SAME OPPORTUNITIES AND EQUALITY AS EVERY CITIZEN.	1,000.
PET NETWORK ANIMAL FRIENDS OF NEVADA 401 VILLAGE BOULEVARD INCLINE VILLAGE, NV 89451	NONE N/A	RESCUE ADOPTABLE ANIMALS FROM EUTHANASIA, CONNECT ABANDONED ANIMALS WITH LOVING FAMILIES, INSTILL RESPECT FOR ANIMALS THROUGH EDUCATION AND PROMOTE QUALITY OF LIFE THROUGH ANIMAL COMPANIONSHIP.	
SEA SHEPHERD CONSERVATION PO BOX 2616 FRIDAY HARBOR, WA 98250	NONE N/A	END THE DESTRUCTION OF HABITAT AND SLAUGHTER OF WILDLIFE IN THE WORLD'S OCEANS IN ORDER TO CONSERVE AND PROTECT ECOSYSTEMS AND SPECIES.	1,000.
THE WILD FOUNDATION 717 POPLAR AVE BOULDER, CO 80304	NONE N/A	PROTECT THE PLANET'S LAST WILD PLACES,THE WILDLIFE, AND PEOPLE WHO DEPEND UPON THEM.	1,000.
ALL ABOUT ANIMAL RESCUE 23451 PINWOOD ST WARREN, MI 48091	N/A NONE	PROVIDE ADOPTION AND SPAY/NEUTER CLINICS TO HOMELESS PETS IN THE DETROIT MICHIGAN AREA	1,000.
YWCA SAN GABRIEL VALLEY 943 N GRAND AVE COVINA, CA 91724	NONE N/A	EMPOWER WOMEN AND GIRLS AND TO ELIMINATE RACISM, SEXISM, POVERTY AND VIOLENCE	1,000.

FORM 990FF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 12 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
	FOUNDATION STATUS OF RECIPIENT			
ADOPT A RESCUE PET 1500 E TROPICANA, STE 105 LAS VEGAS, NV 89121	NONE		PROMOTE THE ADOPTION PROCESS FOR PETS.	
ANGEL FLIGHT WEST 3161 DONALD DOUGLAS LOOP SOUTH SANTA MONICA, CA 90405	NONE		ARRANGE FREE, NON-EMERGENCY AIR TRAVEL FOR CHILDREN AND ADULTS WITH SERIOUS MEDICAL CONDITIONS	1,500.
CANINE ASSISTANTS 3160 FRANCIS ROAD MILTON, GA 30004	NONE		TRAINING AND PLACEMENT OF SERVICE AND SEIZURE RESPONSE DOGS WITH CHILDREN AND ADULTS	
CHILDHOOD LEUKEMIA FOUNDATION 807 MANTOLOKING ROAD BRICK, NJ 08723	NONE		EDUCATE, EMPOWER AND RAISE AWARENESS AND THE NECESSARY FUNDS TO SUPPORT PROGRAMS TAHT BENEFIT CHILDREN LIVING WITH CANCER	
CHILDREN OF THE NIGHT 14530 SYLVAN STREET VAN NUYS, CA 91411	NONE		RESCUES AMERICA'S CHILDREN FROM THE RAVAGES OF PROSTITUTION	1,000.
CYSTIC FIBROSIS RESEARCH INC 2672 BAYSHORE PARKWAY, SUITE 520 MOUNTAIN VIEW, CA 94043	NONE		FUND RESEARCH TO PROVIDE EDUCATIONAL AND PERSONAL SUPPORT, AND SPREAD AWARENESS OF CYSTIC FIBROSIS	1,000.

FORM 990FE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 12 (CONT'D)RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR
AND

RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
DAYS END FARM HORSE RESCUE 1372 WOODBINE ROAD WOODBINE, MD 21797	NONE	ENSURE QUALITY CARE AND TREATMENT OF HORSES THROUGH INTERVENTION, EDUCATION AND OUTREACH	1,000.
FREEDOM SERVICE DOGS 2000 W UNION AVE ENGLEWOOD, CO 80110		TRAIN RESCUE DOGS TO ASSIST AND PROVIDE COMPANIONSHIP FOR PEOPLE WITH DISABILITIES	1,000.
MAKE A WISH FOUNDATION OF UTAH 771 EAST WINCHESTER MURRAY, UT 84107	NONE	GRANT WISHES OF CHILDREN WITH LIFE-THREATENING MEDICAL CONDITIONS AND ENRICH THEIR LIVES WITH HOPE, STRENGTH AND JOY	1,000.
ORGANIZATION FOR AUTISM 2000 NORTH 14TH STREET, SUITE 710 ARLINGTON, VA 22201	NONE	FUND RESEARCH STUDIES THAT INVESTIGATE TREATMENT, EDUCATIONAL APPROACHES, AND STATISTICAL ASPECTS OF AUTISM	1,000.
POLARIS PROJECT P.O. BOX 53315 WASHINGTON, DC 20009	NONE	PROVIDE SURVIVORS OF HUMAN TRAFFICKING WITH THE SUPPORT NECESSARY TO REBUILD LIVES AND REGAIN HOPE FOR THE FUTURE	1,000.
SMITH CENTER FOR PERFORMING ARTS 361 SYMPHONEY PARK AVENUE LAS VEGAS, NV 89106	NONE	BUILD AND ESTABLISH A HIGH-QUALITY PERFORMING ARTS CENTER THAT IS EMBRACED BY THE COMMUNITY	2,000.

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 12 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
WHITE HORSE YOUTH RANCH 3315 EAST RUSSELL ROAD #205 LAS VEGAS, NV 89120	NONE	EDUCATE MINDS, INSPIRE CREATIVITY, AND ENCOURAGE INTEGRITY FOR THE UNDERPRIVILEGED YOUTH OF CLARK COUNTY	1,500.
ZIONS YOUTH SYMPHONY AND CHORUS 6100 ELTON, SUITE 1000 LAS VEGAS, NV 89107	NONE	TO SERVE OTHERS THROUGH MUSIC.	1,500.
BIG BROTHERS BIG SISTERS OF SOUTHERN NEVADA 2000 EAST FLAMINGO ROAD LAS VEGAS, NV 89119	NONE N/A	HELP CHILDREN REALIZE THEIR POTENTIAL AND BUILD THEIR FUTURES. NURTURE CHILDREN AND STRENGTHEN COMMUNITIES.	
CITICARE NV PO BOX 7101 RENO, NV 89510	NONE NONE	PROVIDE TRANSPORTATION NEEDS OF INDIVIDUALS WITH DISABILITIES, INCLUDING FRAIL/ELDERLY SENIORS.	1,500.
LAS VEGAS NATURAL HISTORY MUSEUM 900 LAS VEGAS BLVD. N. LAS VEGAS, NV 89101	NONE NONE	TO INSPIRE THROUGH EDUCATIONAL EXHIBITS AND PROGRAMS, A BETTER UNDERSTANDING AND APPRECIATION OF THE NATURAL WORLD, THE SCIENCES, AND OURSELVES.	1,000.
S.A.F.E. HOUSE	NONE	TO STOP VIOLENCE AND ABUSE IN THE FAMILY ENVIRONMENT BY PROVIDING SAFE SHELTER, SUPPORT, ADVOCACY, COUNSELING AND EDUCATION.	1,500.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 12 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
THE LAST POST 95 BELDEN STREET ROUTE 126 FALLS FILLAGE, CT 06031	NONE N/A	PROVIDE A SAFE, HOMELIKE SURROUNDING FOR ANIMALS WHOSE PREVIOUS OWNERS HAVE DIED OR GONE INTO NURSING HOMES.	1,000.
CAN YOU IDENTIFY ME 9550 S. EASTERN AVE. STE. 253 LAS VEGAS, NV 89123		TO PROMOTE RESOLUTION FOR AMERICA'S UNIDENTIFIED.	1,500.
EYE CARE 4 KIDS 6911 SOUTH STATE STREET SALT LAKE CITY, UT 84047		TO PROVIDE PROFESSIONAL EYECARE TO LOW INCOME, VISUALLY IMPAIRED CHILDREN.	1,000.
COMMONWEALTH FELINE ORGANIZATION 141 NEWBURYPORT TURNPIKE SUITE 351 ROWLEY, MA 01969		TO HELP DOMESTICATED, STRAY, FERAL AND WILD FELINES IN THEIR CARE AND TREATMENT; AS WELL AS CREATE A BEHAVIORAL ENRICHMENT ENVIRONMENT FOR FELINES BY PROVIDING PERMANENT HOUSING AND PROPER CARE & SUPPORT.	1,000.
SPREAD THE WORD NEVADA 1075 AMERICAN PACIFIC, SUITE B HENDERSON, NV 89074		ADVANCING EARLY CHILDHOOD LITERACY BY PLACING BOOKS INTO THE HANDS AND HOMES OF CHILDREN WITHIN SOUTHERN NEVADA'S AT-RISK, LOW INCOME COMMUNITIES.	1,000.
PETS OF THE HOMELESS 116 EAST 7TH STREET SUITE 204 CARSON CITY, NV 89701		FEEDING PETS OF THE HOMELESS A NONPROFIT ORGANIZATION THAT PROVIDES PET FOOD AND MERGENCY VETERINARY CARE TO THE HOMELESS	1,000.

FORM 990EF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEARATTACHMENT 12 (CONT'D)RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR
AND

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

AMPLIFY LIFE HOME OF CAMP LOTSAFUN
3660 BAKER LANE
SUITE 103
RENO, NV 89509

HOT RECREATIONAL PROGRAMS FOR PEOPLE WITH
SPECIAL NEEDS.

1,000.

GOODIE TWO SHOES FOUNDATION
10620 SOUTHERN HIGHLANDS PARKWAY
#110-474
LAS VEGAS, NV 89141

PROVIDES DISADVANTAGED CHILDREN AND CHILDREN IN
CRISIS WITH NEW SHOES AND SOCKS AS WELL AS OTHER
ITEMS DEEMED ESSENTIAL FOR GOOD HEALTH AND
POSITIVE DEVELOPMENT

1,500.

HELP OF SOUTHERN NEVADA
1640 E FLAMINGO RD #100
LAS VEGAS, NV 89119

ASSIST FAMILIES AND INDIVIDUALS THROUGHOUT
SOUTHERN NEVADA TO OVERCOME BARRIERS AND ATTAIN
SELF-SUFFICIENCY THROUGH DIRECT SERVICES,
TRAINING, AND REFERRAL TO COMMUNITY RESOURCES

1,500.

NATIONAL EDUCATION ASSISTANCE DOG SERVICE
305 REDEMPTION ROCK TRAIL SOUTH
PRINCETON, MA 01541

PROVIDE ASSISTANCE DOGS TO DEAF AND DISABLED
AMERICANS

1,000.

NEVADA PARTNERSHIP FOR HOMELESS YOUTH
4981 SHIRLEY ST
LAS VEGAS, NV 89119

PROVIDES

1,000.

TOTAL CONTRIBUTIONS PAID

50,000.

**SCHEDULE D
(Form 1041)**

Department of the Treasury
Internal Revenue Service

Capital Gains and Losses

▶ Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

▶ Information about Schedule D and its separate instructions is at www.irs.gov/form1041.

OMB No 1545-0092

2014

Name of estate or trust
FOUNDATION
THE SI REDD & TAMARA REDD CHARITABLE

Employer identification number
88-0291338

Note: Form 5227 filers need to complete *only* Parts I and II

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

See instructions for how to figure the amounts to enter on the lines below

This form may be easier to complete if you round off cents to whole dollars

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked.				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked.				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked.				
4 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824				4
5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts				5
6 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2013 Capital Loss Carryover Worksheet				6 ()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h) Enter here and on line 17, column (3) on the back				7

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

See instructions for how to figure the amounts to enter on the lines below

This form may be easier to complete if you round off cents to whole dollars

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked.	11,003.	100,000.		-88,997.
9 Totals for all transactions reported on Form(s) 8949 with Box E checked.				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked.				
11 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824				11
12 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts.				12
13 Capital gain distributions.				13
14 Gain from Form 4797, Part I.				14
15 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2013 Capital Loss Carryover Worksheet				15 ()
16 Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h) Enter here and on line 18a, column (3) on the back				16 -88,997.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2014

Part III Summary of Parts I and II**Caution:** Read the instructions *before* completing this part

	(1) Beneficiaries' (see instr)	(2) Estate's or trust's	(3) Total
17 Net short-term gain or (loss)	17		
18 Net long-term gain or (loss):			
a Total for year	18a		-88,997.
b Unrecaptured section 1250 gain (see line 18 of the wrksh)	18b		
c 28% rate gain	18c		
19 Total net gain or (loss). Combine lines 17 and 18a. ▶	19		-88,997.

Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 18a and 19, column (2), are net gains, go to Part V, and **do not** complete Part IV. If line 19, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet**, as necessary.

Part IV Capital Loss Limitation

20 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of	20	(3,000.)
a The loss on line 19, column (3) or b \$3,000		

Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the **Capital Loss Carryover Worksheet** in the instructions to figure your capital loss carryover.

Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part **only** if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero.

Caution: Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if

- Either line 18b, col (2) or line 18c, col (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero

Form 990-T trusts. Complete this part **only** if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if either line 18b, col (2) or line 18c, col (2) is more than zero.

21 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34). . .	21		
22 Enter the smaller of line 18a or 19 in column (2) but not less than zero.	22		
23 Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T). . .	23		
24 Add lines 22 and 23	24		
25 If the estate or trust is filing Form 4952, enter the amount from line 4g, otherwise, enter -0- . . . ▶	25		
26 Subtract line 25 from line 24. If zero or less, enter -0-	26		
27 Subtract line 26 from line 21. If zero or less, enter -0-	27		
28 Enter the smaller of the amount on line 21 or \$2,500	28		
29 Enter the smaller of the amount on line 27 or line 28	29		
30 Subtract line 29 from line 28. If zero or less, enter -0-. This amount is taxed at 0% ▶	30		
31 Enter the smaller of line 21 or line 26	31		
32 Subtract line 30 from line 26	32		
33 Enter the smaller of line 21 or \$12,150	33		
34 Add lines 27 and 30	34		
35 Subtract line 34 from line 33. If zero or less, enter -0-	35		
36 Enter the smaller of line 32 or line 35	36		
37 Multiply line 36 by 15% ▶	37		
38 Enter the amount from line 31	38		
39 Add lines 30 and 36	39		
40 Subtract line 39 from line 38. If zero or less, enter -0-	40		
41 Multiply line 40 by 20% ▶	41		
42 Figure the tax on the amount on line 27. Use the 2014 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041). . . .	42		
43 Add lines 37, 41, and 42	43		
44 Figure the tax on the amount on line 21. Use the 2014 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041). . . .	44		
45 Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36). ▶	45		

Schedule D (Form 1041) 2014

Name(s) shown on return Name and SSN or taxpayer identification no. not required if shown on other side

THE SI REDD & TAMARA REDD CHARITABLE

Social security number or taxpayer identification number

88-0291338

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later).

Part II **Long-Term.** Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a, you are not required to report these transactions on Form 8949 (see instructions).

You **must** check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

☒ **(D)** Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

☐ **(E)** Long-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS

☐ **(F)** Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions.	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g).
						(f) Code(s) from instructions	(g) Amount of adjustment	
	2500 SHARES VRTB		12/15/2014	11,003.	100,000.			-88,997.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶				11,003.	100,000.			-88,997.

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

**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.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions	Name of exempt organization or other filer, see instructions THE SI REDD & TAMARA REDD CHARITABLE FOUNDATION	Employer identification number (EIN) or 88-0291338
	Number, street, and room or suite no. If a P.O. box, see instructions 388 E. FORD AVENUE	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions LAS VEGAS, NV 89123-3002	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► **DARLENE LYNDES, 388 E. FORD AVENUE LAS VEGAS, NV 89123-3002**

Telephone No ► **702 263-3600**

FAX No ► **702 263-3636**

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 1** I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **08/15, 2015**, to file the exempt organization return for the organization named above. The extension is for the organization's return for
- ☒ calendar year **2014** or
- ☐ tax year beginning _____, 20____, and ending _____, 20____

- 2** If the tax year entered in line 1 is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a \$	0
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b \$	0
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c \$	0

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

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2014)

JSA