

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



EXTENDED TO NOVEMBER 16,

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

For calendar year 2014 or tax year beginning and ending A Employer identification number Name of foundation 91-2167530 FARRELL FAMILY FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number P.O. BOX 205 310-414-9358 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here KENTFIELD, CA 94914-0205 G Check all that apply initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year J Accounting method X Cash Accrual if the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 11,232,845. (Part I, column (d) must be on cash basis) ▶\$ Analysis of Revenue and Expenses Part I (c) Adjusted net (d) Disbursements (a) Revenue and (b) Net investment ക (The total of amounts in columns (b), (c), and (d) may not for charitable purposes (cash basis only) expenses per books income income necessarily equal the amounts in column (a) 3,569,882 N/A Contributions, gifts, grants, etc., received SEP if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 117 117 STATEMENT 139,186. 139,186 STATEMENT Dividends and interest from securities 5a Gross rents D Net rental income or (loss) STATEMENT 504,063. 6a Net gain or (loss) from safe of assets not on line 10 Gross sales price for all assets on line 6a 9,155,395. 4,062,251 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications Gross sales less returns Gross profit or (less) 3 SEP 0 9 2015 Other income 4,213,248.4,201,554 Total. Add lines 1 through-1-2,750 Compensation of officers directors trustees, etc. 5,500. Other employee salaries and wages 15 Pension plans, employee benefits Expenses 16a Legal fees STMT 4 13,550. 13,550 0. **b** Accounting fees 57,000. 28,500. 28,500. STMT c Other professional fees and Administrative 17 Interest 101,390. 101,390 0. STMT 6 18 Taxes 19 Depreciation and depletion 20 Occupancy Travel, conferences, and meetings 22 Printing and publications 86,993. 86,993 STMT 7 0. Operating 23 Other expenses 24 Total operating and administrative 264,433 31,250. 233,183 expenses. Add lines 13 through 23 1,165,212. 1,165,212. 25 Contributions, gifts, grants paid Total expenses and disbursements. 1,429,645 233,183 1,196,462. Add lines 24 and 25 Subtract line 26 from line 12 2,783,603 2 Excess of revenue over expenses and disbursements 3,968,371 b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see Instructions.

Form **990-PF** (2014)

Form 990-PF

Department of the Treasury

For	m 99	0-PF (2014) FARRELL FAMILY FOUNDATION		91-2	216/53U Page 2
p	apt.	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	'
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	18,540.	- FOO F11	F02 F11
	ı	Savings and temporary cash investments	162,045.	503,511.	503,511.
	3	Accounts receivable ►			
;		Less allowance for doubtful accounts ▶			
	4	Pledges receivable		1	
		Less allowance for doubtful accounts			
	5	Grants receivable .			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less allowance for doubtful accounts	 · - · - · - · - · - · - · - · - · -		
ets	1	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
	l	Investments - U.S. and state government obligations Investments - corporate stock STMT 8	6 005 157	10,494,762.	10,729,334.
	_	mirestiments corporate stock	6,985,157.	10,494,702.	10,729,334.
	i i	Investments - corporate bonds		······································	111 (111) 11 / 11 / 11 / 11 / 11 / 11 /
	11	Investments - land, buildings, and equipment basis		1	
		Less accumulated depreciation			
		Investments - mortgage loans	282,925.		
		Investments - other	202,923.		
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	1	Other assets (describe			
	10	Total assets (to be completed by all filers - see the	7,448,667.	10,998,273.	11,232,845.
	17	Instructions Also, see page 1, item I) Accounts payable and accrued expenses	7,110,007.	10/330/2/31	11/202/0104
	18	Grants payable			
,	19	Deferred revenue			
Liabilities	20				
Ē	21	Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable			
Ξ.		Other liabilities (describe			
		Cities industries (describe >			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_	-	Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
ës	24	Unrestricted			
au	25	Temporarily restricted			
Bai	26	Permanently restricted			
or Fund Balances		Foundations that do not follow SFAS 117, check here			
Œ		and complete lines 27 through 31.			
SO	27	Capital stock, trust principal, or current funds	1,514,874.	1,514,874.	
Net Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
AS	29	Retained earnings, accumulated income, endowment, or other funds	5,933,793.	9,483,399.	
Šet	30	Total net assets or fund balances	7,448,667.	10,998,273.	
	i				
	31	Total liabilities and net assets/fund balances	7,448,667.	10,998,273.	
		Analysis of Changes in Net Assets or Fund B	alances		-
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
	-	st agree with end-of-year figure reported on prior year's return)		1	7,448,667.
		r amount from Part I, line 27a	_ <u> </u>	2	2,783,603.
3		r increases not included in line 2 (itemize) COST BASIS	ADJUSTMENT	3	766,003.
4		lines 1, 2, and 3		4	10,998,273.
		reases not included in line 2 (itemize)		5	0.
<u>6</u>	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	10,998,273.

6 10,998,273. Form **990-PF** (2014)

	Calefidat year (Of tax year beginning iii)	.,			(00. (0) 0.1.000 0) 00. (0)/
_	2013	1,137,140.	6,409,016.		.177428
_	2012 1,335,115. 3,982,975.				.335205
_	2011	1,253,193.	3,848,996.		.325590
_	2010	1,302,811.	3,597,479.		.362146
	2009	1,152,931.	2,240,331.		.514625
	Total of line 1, column (d)			2	1.714994
3	Average distribution ratio for the 5-year ba the foundation has been in existence if less		or by the number of years	3	.342999
4	Enter the net value of noncharitable-use as	sets for 2014 from Part X, line 5		4	9,837,510.
5	Multiply line 4 by line 3			5	3,374,256.
6	Enter 1% of net investment income (1% o	6	39,684.		
7	Add lines 5 and 6	7	3,413,940.		
8	Enter qualifying distributions from Part XII	, line 4		8	1,196,462.

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

Form 990-PF (2014)

See the Part VI instructions

Part VII Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions)		990-PF(2014) FARRELL FAMILY FOUNDATION		21675			Page 4
Date of ruling or determination latter Domestic boundations that meet the section 4940(a) requirements in Part V, check here is and enter 1% of Part 1, line 27b All other domestic foundations eaths? 4% of the 27b Exempt foreign organizations eaths? 4% of Part 1, line 12, col (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) And dines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3 if zero or fees, enter -0- Tax based on investment income. Subtract line 4 from line 3 if zero or fees, enter -0- Exempt foreign organizations - tax withheld at source Exempt foreign organizations - tax withheld at source By Subtitle A (line or section of the 4 from 868) Exempt foreign organizations - tax withheld at source By Subtitle A (line or section of the 4 from 868) Exempt foreign organizations - tax withheld at source By Subtitle A (line or section of the 4 from 868) Exempt foreign organizations - tax withheld at source By Subtitle A (line or section of the 4 from 868) Exempt foreign organizations - tax withheld at source By Subtitle A (line or section of the 4 from 868) Exempt foreign organizations - tax withheld at source By Subtitle A (line or section of the 4 from 868) Exempt foreign for underspanned or sections of the section 868 or section 4 from 868 or section 868 or sec			948	- see in	stru	ction	15)
D Domestic foundations that meet the section 4940(e) requirements in Part V, check here □ and enter 1% of Part I, line 170. All other domestic foundations enter 2% of the 270. Exempt foreign organizations selfr 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-) 3 79, 367. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on twestment income. Subtract line 4 from ine 3 it zero or less, enter -0- 6 Credist/Pyments 2 2014 estimated tax payments and 2013 overpayment credded to 2014 8 Exempt foreign organizations - tax withheld at source 1 Tax paid with application for exhauston of time to fire (Form 888) 8 Backup withholding erroneously withheld 7 Total credds and payments. Add lines 5 at though 6d 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 6 at smorts than her 2, retire amount overaged 10 Total credds and payments. Add lines 5 and 8, enter the amount overaged 11 Enter the amount of line 10 to be Credibed to 2015 estimated tax. 12 Dang the tax year, cit die foundation attempt to influence any national, state, or local legislation or did it participate or intervers in any political campagn? 10 Dod tis pend more than 3100 duming the year (either directly or indirectly) for political ipurposes (see instructions for the definition)? 12 Merit in the foundation in Exempt 12 (either directly or indirectly) for political ipurposes (see instructions for the definition)? 12 Merit in the foundation may be any completed execution or of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 13 D off the foundation has payment or proprietical expenditures (section 4985) imposed during the year? 14 The answer is "Nes" to face the attention of the activities. 15 A tente the reaumenter (if any) pad	1 a						
of Part I, line 279 All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) 2 Tax under vaction 511 (domestic section 4947(a)(1) frusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 5 Subtitle A (income) tax (domestic section 4947(a)(1) frusts and taxable foundations only. Others enter -0-) 5 Tax based on investment lincome. Subtract line 4 from line 3 if zero or less, enter -0- 5 Tax based on investment lincome. Subtract line 4 from line 3 if zero or less, enter -0- 5 Tax based on investment lincome. Subtract line 4 from line 3 if zero or less, enter -0- 5 Tax based on investment lincome. Subtract line 4 from line 3 if zero or less, enter -0- 5 Tax based on investment lincome. Subtract line 4 from line 5 if zero or less, enter -0- 5 Tax based on investment lincome. Subtract line 4 from line 5 if zero or less, enter -0- 5 Tax due, lift the organization star withheld at source 6 Ib					7	n 2	67
E All other domestic foundations ental 2% of the 27b Exempt foreign organizations antal 4% of Part I, line 12, cel. (b) 2	b		1	 .		9,3	0 / •
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Tax based on Investment Income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on Investment Income. Subtract line 4 from line 3 if zero or less, enter -0- Exempt foreign organizations - 1tx withheld at source Bib		·					
3							Λ
Subtitis A (income) bx (domestic section 4947(b)(1) trusts and taxable foundations only Others enter-0-) Tax based on investment lincome. Subtract line 4 from line 3 if zero or less, enter-0- Cedits/Pyments 2 014 4 stimated tax expands and 2013 overpayment credited to 2014 Exempt foreign organizations — tax withheld at source Exempt foreign organization organiz					7	0 2	- 0 •
5 Tax based on Investment Income. Subtract line 4 from line 3 if zero or less, enter -0- 6 Credds/Pympents a 2014 estimated tax payments and 2013 overpayment credited to 2014 b Exempt foreign organizations - Lax withheld at source 5 Tax paid with application for extension of time to life (Form 8868) 6 Backup withholding erroneously withheld 7 Total credits and payments. Add times 6a through 60 8 Enter any penalty for undernayment of estimated tax. Check here if if Form 2220 is attached 7 Tax due. If the total of lines 5 and 8 is more than time 7, enter amount owed 8 0 1, 781 - 9 Tax due. If the total of lines 5 and 8 is more than time 7, enter amount ower paid 10 Enter the amount of line 10 to be. Gredited to 2015 estimated tax. ► 11 Depart VIII-A 1 Statements Regarding Activities 1a During that ax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervere in any political campaign? 1a During that ax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervere in any political campaign? 1a During that ax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervere in any political campaign? 1b did 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 face 1 to attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection ment the activities and copies of any materials published or distributed by the foundation on connection ment the activities and copies of any materials published or distributed by the foundation on connection ment the activities and copies of any materials published or distributed by the foundation on connection with the activities and copies of any materials published or distributed by the foundation on connection on t						9,3	07.
6 Credits/Payments a 2014 estimated tax payments and 2013 overpayment credited to 2014 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) 6 c 6 d 8 Condition of the Control of time to file (Form 8868) 8 c 8 c 8 c 8 c 8 c 8 c 8 c 8 c 8 c 8 c				 	7	0 2	67
a 2014 astimated tax payments and 2013 overpayment credited to 2014 b Exempt foreign organizations - tax withheld at source 1 Tax paid with application for extension of time to title (Form 8668) 6 Bot			5	 		9,3	0 / •
b Exempt foreign organizations - Tax withhelid at source		·					
c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroreously withheld 7 Total credits and payments. Add lines 6s through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 1, 781. 9 Tax due, if the total of lines 5 and 8 is more than line 7, enter amount owed 9 \$ 81, 781. 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 overpald 11 Enter the amount of line 10 to be Credited to 2015 estimated tax. PERT VIII-A Statements Regarding Activities 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? 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? 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? 1b Dut it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1if the answer is "Yes" to Taor 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 1c Dut the foundation Part 120-POL for this year? 1c Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year 1f Total (in the foundation Part 120-POL for this year) 2 Enter the amount (if any) pad by the foundation during the year for political expenditure tax imposed on foundation managers > \$ 0. 2 Has the foundation negaged in any activities that have not previously been reported to the IRS? 1f "Yes," attach a detailed description of the activities. 2 Year 1 Yes, "attach a detailed description of th			-				
d Backup withholding erroneously withhold 7 Total credits and payments. Add intes & Startough 6d 8 Finter any penalty for underpayment of estimated tax. Check here		· · · · · · · · · · · · · · · · · · ·	-				
7 Total credits and payments Add lines 6a through 6d 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 9 81,148. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be Credited to 2015 estimated tax. ▶ Part VII-A Statements Regarding Activities 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 opitical campaign? 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 face it, attach a defauled description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation Form 1120-POL for this year? C Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation S			-				
8 Enter any penalty for underpayment of estimated tax Check here			∮				Λ
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 11 Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Retunded 11 Part VII-A Statements Regarding Activities 12 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? 12 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? 13 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? 14 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? 15 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? 15 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. 15 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. 16 During the tax year, did the foundation found the year for individual description or the activities and copies of any materials published or distributed by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$	_			<u> </u>		1 7	01
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refunded ▶ 11							
11 Enter the amount of line 10 to be Credited to 2015 estimated tax	-		$\overline{}$			1,1	40.
Part VII-A Statements Regarding Activities				 			
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 campaigin? 1b Did it spend more than \$100 during the year (either directly) or indirectly) for political purposes (see instructions for the definition)? 1b If the answer is "Yes" to **Laor it**, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 1c Did the foundation file For this year? 2 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation 2 Enter the amount (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers 3 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers 4 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers 5 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers 5 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation or by laws, or other similar instruments? If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS; in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a detailed description of the activities. 3 LY AB Did the foundation, termination, dissolution, or substantial contraction during the year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 6 X 7 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either 9 By state legislation that effectively amends the governin			11				
any political campaign? 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 faor th, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \(\bar{\text{P}} \sigma\) good by the foundation during the year for political expenditure tax imposed on foundation managers \(\bar{\text{P}} \sigma\) \(\bar{\text{Q}} \) as the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 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? 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 8a Enter the states to which 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 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(I)(3) or 4942(I)(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						Vaa	Na
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 face it, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-P0L for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$	1 a		: IN	-	4-	162	
If the answer is "Yes" to 1aor 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? © Did Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$.\0	F			· · ·
distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$	D			-	טו.		
to Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ► \$			ea or				
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \(\infty\) \\$ \(\text{O}\) (2) On foundation managers \(\infty\) \\$ \(\text{O}\). Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \(\infty\) \\$ \(\text{O}\). Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," estach a detailed description of the activities. 3 Has the foundation made any changes, not previously perported 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 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 8 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 16 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either 8 By language in the governing instrument, or 8 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 7 X 8a Enter the states to which 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 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 10 Did any persons become substantial contributors during the lax year? if "yes," stapp a schedule issin		·					v
(1) On the foundation ▶ \$ O . (2) On foundation managers ▶ \$ O . e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ O . 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. 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 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? bif "Yes," has tifled a tax return on Form 990-T for this year? If "Yes," attach the statement required by General Instruction T. A ten 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, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 7 X 8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ CA 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 9 Is the foundation claiming status as a private operating foundation within the meaning of section 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 contrib				-	16		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	0						
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. 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 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4b 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. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 7 X 8a Enter the states to which the foundation reports or with which it is registered (see instructions) CA 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 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 9 X 10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses	Е	•					
If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 5 If "Yes," has it filed a tax return on Form 990-T for this year? 8 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 8 If "Yes," attach the statement required by General Instruction T. 9 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either 9 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? 9 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 8a Enter the states to which the foundation reports or with which it is registered (see instructions) CA 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 9 If 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 9 X 10 Did any persons become substantial contributors during the tax year? if 'yes, "tatach a schedule listing their names and addresses	•				,	:	Y
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 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? b If Yes," has it filed a tax return on Form 990-T for this year? VAA Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. 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? 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 8a Enter the states to which the foundation reports or with which it is registered (see instructions) CA 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 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 9 X 10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses	2			-			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a tax return on Form 990-T for this year? N/A 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 8a Enter the states to which the foundation reports or with which it is registered (see instructions) CA 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 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 9 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses	•	·					
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 7 X 8a Enter the states to which the foundation reports or with which it is registered (see instructions) CA 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 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 9 X 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	J		UI	i	2		x
b If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. 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? 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 To bif 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 If "Yes," complete Part XIV State of the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation If "Yes," complete Part XIV It "Yes," complete Part XIV Did any persons become substantial contributors during the tax year? If "Yes," estach a schedule listing their names and addresses N/A Ab N/A Ab X/B	Aa			ŀ			X
Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either ■ By language in the governing instrument, or ■ By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 7 X 8a Enter the states to which the foundation reports or with which it is registered (see instructions) CA 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 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 9 X 10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses 10 X		· · · · · · · · · · · · · · · · · · ·	N	1/a			
If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 7 X 8a Enter the states to which the foundation reports or with which it is registered (see instructions) CA 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 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 9 X 10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses 10 X	5		_	· · · · ·			X
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? 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 Enter the states to which the foundation reports or with which it is registered (see instructions) CA 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 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 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses By Instruction 508(e) (relating to the tax year? If "Yes," attach a schedule listing their names and addresses	٠			ľ			
 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? 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 Ba Enter the states to which the foundation reports or with which it is registered (see instructions) CA 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 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 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses X 	6						
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 7 X 8a Enter the states to which the foundation reports or with which it is registered (see instructions) ► CA 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 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 9 X 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	٠						
remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 8a Enter the states to which the foundation reports or with which it is registered (see instructions) CA 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 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 9 X 10 Did any persons become substantial contributors during the tax year? If "yes," attach a schedule listing their names and addresses 10 X			e law	ł			
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 8a Enter the states to which the foundation reports or with which it is registered (see instructions) CA 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 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 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X			0 1011	İ	6	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) CA 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 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 9 X 10 Did any persons become substantial contributors during the tax year? If "yes," attach a schedule listing their names and addresses 10 X	7		/	Ī			
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 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 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	·	and the foundation flate at found to good in according to good in a foundation flat in, configuration at the		Ī			
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 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 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	82	· · · · · · · · · · · · · · · · · · ·					
of each state as required by General Instruction G? If "No," attach explanation 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 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	t						
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 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X		· · · · · · · · · · · · · · · · · · ·		İ	8b	Х	[
year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	g		endar	ľ			
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	•			İ	9		X
	10				10		X

Form **990-PF** (2014)

0.

Total. Add lines 1 through 3

	rt X Minimum Investment Return (All domestic foundations	must complete	this part. Foreign four	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charital	ble, etc , purposes	i		
a	Average monthly fair market value of securities		1a	9,987,320.	
b.	Average of monthly cash balances			1b	
C	Fair market value of all other assets			10	
ď	Total (add lines 1a, b, and c)			1d	9,987,320.
6	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	0.		
	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	9,987,320.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amour	nt, see instructions	s)	4	149,810.
	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and o		•	5	9,837,510.
	Minimum investment return. Enter 5% of line 5	·		6	491,876.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) a foreign organizations check here and do not complete this par		operating foundations ar	d certain	
1	Minimum investment return from Part X, line 6	· -		1	491,876.
	Tax on investment income for 2014 from Part VI, line 5	2a	79,367.		
	Income tax for 2014 (This does not include the tax from Part VI)	2b			
	Add lines 2a and 2b		·	2c	79,367.
3	Distributable amount before adjustments Subtract line 2c from line 1			3	79,367. 412,509.
	Recoveries of amounts treated as qualifying distributions			4	0.
	Add lines 3 and 4			5	412,509.
	Deduction from distributable amount (see instructions)			6	0.
	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Pai	rt XIII, line 1		7	412,509.
	Qualifying Distributions (see Instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pu	ırposes	•		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	1,196,462.
b	Program-related investments - total from Part IX-B			1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charits	able, etc., purpose	s	2	
3	Amounts set aside for specific charitable projects that satisfy the				
а	Suitability test (prior IRS approval required)			3a	
b	Cash distribution test (attach the required schedule)			3b	
	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8,	and Part XIII, line	4	4	1,196,462.
	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inv				
	income Enter 1% of Part I, line 27b			5	0.
	Adjusted qualifying distributions. Subtract line 5 from line 4			6	1,196,462.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years 4940(e) reduction of tax in those years	when calculating	whether the foundation (qualifies for	the section

Form **990-PF** (2014)

Part XIII Undistributed Income (see instructions)

	(2)	(h)	(c)	(d)
	(a) Corpus	(b) Years prior to 2013	2013	2014
1 Distributable amount for 2014 from Part XI,				
line 7				412,509.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	······································
b Total for prior years		_		
		0.	***************************************	
3 Excess distributions carryover, if any, to 2014				
a From 2009 1,040,928.				
b From 2010 1,173,079.				
c From 2011 1,064,963.				
d From 2012 e From 2013 1,172,053. 912,893.				
	5,363,916.			
f Total of lines 3a through e	3,303,910.			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 1,196,462.			***************************************	
a Applied to 2013, but not more than line 2a			0.1	
b Applied to undistributed income of prior	· · · · · · · · · · · · · · · · · · ·			., , , , , , , , , , , , , , , , , , ,
years (Election required - see instructions)		0.	1	
c Treated as distributions out of corpus			· ····	
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount		'	- ' - ' - ' - ' - ' - ' - ' - ' - ' - '	412,509.
e Remaining amount distributed out of corpus	783,953.			
5 Excess distributions carryover applied to 2014	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as Indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	6,147,869.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b Taxable		0.		
amount - see instructions				
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2014 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				0.
7 Amounts treated as distributions out of		<u>'' </u>	. : : : : : : : : : : : : : : : : : : :	THE PROPERTY AND THE PROPERTY OF
corpus to satisfy requirements imposed by		į		
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			***************************************
8 Excess distributions carryover from 2009	1 040 000			
not applied on line 5 or line 7	1,040,928.		#	
9 Excess distributions carryover to 2015.	F 106 041			
Subtract lines 7 and 8 from line 6a	5,106,941.	······	·····	
10 Analysis of line 9		Į.	***************************************	
a Excess from 2010 1,173,079.	, and a second s		•	
b Excess from 2011 1,064,963.				
c Excess from 2012 1,172,053. d Excess from 2013 912,893.	1			
d Excess from 2013 912,893. e Excess from 2014 783,953.		المحتفظة		
423581 11-24-14	<u></u>			Form 990-PF (2014)

	art XIV Private Operating Fo	oundations (see ins		-A. question 9)	N/A	07330 Tugo T
	If the foundation has received a ruling or	·		,		
•	foundation, and the ruling is effective for					
ŀ	Check box to indicate whether the found		•	n section	4942(J)(3) or 49	42(j)(5)
	Enter the lesser of the adjusted net	Tax year	g roundation decompose	Prior 3 years	10 12 1/(0) - 10	\//\0/
- '	income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	investment return from Part X for		, ,		<u> </u>	
	each year listed					
	9 85% of line 2a					
	Qualifying distributions from Part XII,					
•	line 4 for each year listed					
,	Amounts included in line 2c not		·			
•	used directly for active conduct of					
	exempt activities					
	Qualifying distributions made directly					
•	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the				 	
-	alternative test relied upon					
í	a "Assets" alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)		<u> </u>			
ı	"Endowment" alternative test - enter					
	2/3 of minimum investment return shown in Part X, line 6 for each year listed					
(: "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)			1		
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(III)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
P	art XV Supplementary Info			if the foundation	had \$5,000 or mo	ore in assets
	at any time during t	he year-see instr	uctions.)			
1	Information Regarding Foundatio	n Managers:				
;	a List any managers of the foundation who year (but only if they have contributed m			ributions received by the	foundation before the clos	se of any tax
ΡE	TER C. FARRELL					
1	List any managers of the foundation who			(or an equally large porti	on of the ownership of a pa	artnership or
	other entity) of which the foundation has					
NC	NE					
2	Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pr	rograms:		
	Check here 🕨 🗓 If the foundation o	nly makes contributions t	to preselected charitable	organizations and does i	not accept unsolicited requ	ests for funds If
	the foundation makes gifts, grants, etc.					
	The name, address, and telephone number	ber or e-mail address of the	he person to whom appl	ications should be addre	ssed	
ı	The form in which applications should b	e submitted and informat	tion and materials they s	hould include		
	Any submission deadlines					
	1 Any restrictions or limitations on awards	s, such as by geographica	al areas, charitable fields	kinds of institutions, or	other factors	

Part AV Supplementary Information 3 Grants and Contributions Paid During the		Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
SEE SCHEDULE ATTACHED			GENERAL	1,165,21
			-	
		<u> </u>		
Total			3a	1,165,21
b Approved for future payment				
NONE				
Total			► 3b	

 Amalucaia c	f Incomo	Draduain	a Activities

Enter gross amounts unless otherwise indicated	Unrelated	business income		by section 512, 513, or 514	(8)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue	code	Amount	code	Amount	
a	_				
b					
C	_				
d	_				
e	_				
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	117.	
4 Dividends and interest from securities			14	139,186.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property				_	
6 Net rental income or (loss) from personal					
property					
7 Other investment income					<u></u>
8 Gain or (loss) from sales of assets other					
than inventory			14	504,063.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			.		
11 Other revenue					
a					
b	1				
C					·-·
d					
0					
12 Subtotal Add columns (b), (d), and (e)		().	643,366.	0
13 Total. Add line 12, columns (b), (d), and (e)				13	643,366
(See worksheet in line 13 instructions to verify calculations)				

Part XV	Relationship of Activities to the Accomplishment of Exempt Purposes
Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)
	

Form **990-PF** (2014)

01111 990			DE PANTEI			10.1.1	J1-210	330		ye is
Part :	ΧVII			sters To a	and Transactions	and Relationsh	iips With Nonchai	ritable	9	
		Exempt Organ				 			V	Na
					g with any other organizati		on 501(c) of		Yes	No
					7, relating to political orga	nizations?				1
	_	rom the reporting founda	ation to a noncharitat	ble exempt or	ganization of					v
	Cash							1a(1)		X
	Other							1a(2)		Х
		sactions								
(1)	Sales	of assets to a noncharital	ble exempt organizat	ion				1b(1)		X
(2)	Purch	ases of assets from a no	ncharitable exempt o	rganization				1b(2)		Х
(3)	Rental	of facilities, equipment,	or other assets					1b(3)		Х
(4)	Reimb	oursement arrangements						1b(4)		X
(5)	Loans	or loan guarantees						1b(5)		X
(6)	Perfor	mance of services or me	mbership or fundrais	sing solicitatio	ns			1b(6)		X
c Sh	aring of	facilities, equipment, ma	iling lists, other asset	ts, or paid em	ployees			10		X
					dule Column (b) should a	lways show the fair m	arket value of the goods, o	ther as	sets,	
		-		-	ed less than fair market val					
		the value of the goods,				-	•			
(a) Line n		(b) Amount involved			exempt organization	(d) Description	of transfers, transactions, and	sharing a	mangeme	ents
				N/A	•					
	-			· · · · · · · · · · · · · · · · · · ·	1-1		··			
		-						-		
·	_									
 -										
				· - · · · · · · · · · · · · · · · · · · 						
										
	-									
	-									
			 	· · · · · ·						
	_			-						
					··					
										
			<u> </u>							
2a Is 1	the four	idation directly or indirec	tly affiliated with, or r	related to, one	or more tax-exempt organ	izations described		_		_
ın :	section	501(c) of the Code (othe	r than section 501(c))(3)) or in sect	ion 527?		L_	Yes	X	☐ No
b If"	Yes," co	mplete the following sch	edule							
		(a) Name of org	janization		(b) Type of organization	(c) Description of relations	hip		
		N/A								
			•							
		<u> </u>								
	Under	penalties of perjury, I declare	that I have examined this	s return, ıncludir	g accompanying schedules and	d statements, and to the I	est of my knowledge	the IRS	discuss	this
Sign	and be	lief, it is true, correct, and cor	nplete Declaration of pre	eparer (other tha	ng accompanying schedules and nataxpayer) is based on all infor	mation of which preparer	FINANCIAL retu	m with the	ne prepa	rer
Here		Kust Bu	rlun -		1 9/2/15	OFFICE		Yes		_ ∐ No
	Sign	ature of officer or trustee	, <u> </u>		Date	Title				
		Print/Type preparer's na	ame	Preparer's s		Date	Check X If PTIN			
		LAWRENCE S		1 · 2	10		self- employed			
Paid		CPA		12	WAT	8.15.15		1257	564	
Prep	arer	Firm's name ► LAW	RENCE S.	POSTER	, CPA	1 1	Firm's EIN		J U 4	
Use		THILISTIANIE - LICAN	THIT D.	- OPTH	., 0111		THIN S LIN			
Firm's address > 3790 VIA DE LA VALLE, #207										

Form **990-PF** (2014)

Phone no 858-794-0600

DEL MAR, CA 92014

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

Department of the Treasury Internal Revenue Service

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

2014

Name of the organization

Employer identification number

	F <i>F</i>	ARRELL FAMILY FOUNDATION	91-2167530				
Organiz	ation type (check o	ne):					
Filers of	f:	Section:					
Form 99	0 or 990-EZ	501(c)() (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private foundation					
		527 political organization					
Form 99	0-PF	X 501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
	nly a section 501(c)	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul	e. See instructions.				
X	_	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's	· · · · · · · · · · · · · · · · · · ·				
Special	Rules						
	sections 509(a)(1) any one contribute	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount, line 1. Complete Parts I and II.	or 16b, and that received from				
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
	year, contributions is checked, enter l purpose. Do not c	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a sexclusively for religious, charitable, etc., purposes, but no such contributions totaled make the total contributions that were received during the year for an exclusively religious, omplete any of the parts unless the General Rule applies to this organization because it e, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box , charitable, etc.,				
but it m	ust answer "No" on	hat is not covered by the General Rule and/or the Special Rules does not file Schedule B i Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fo t the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

Name of organization

Employer Identification number

FARRELL FAMILY FOUNDATION

91-2167530

Part I	Contributors (see instructions). Use duplicate copies of Part I	if additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PETER FARRELL 7220 ROMERO DRIVE LA JOLLA, CA 92037	\$\$ <u>3,569,882</u> .	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

FARRELL FAMILY FOUNDATION

91-2167530

Part II	Noncash Property (see instructions). Use duplicate copies of Part	II IT additional space is needed.	
(a) No.	<i>n.</i> s	(c)	1.A
rom	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I	Description of noncash property given	(see instructions)	Date received
	64,966 SHARES RESMED, INC. COMMON		
1	STOCK	_	
		\$_3,569,882.	12/17/14
(a)		(c)	4.0
No.	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I	Description of noncash property given	(see instructions)	Date received
		_	
		_	
		\$	
(a) No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I		(see instructions)	
		_	
		\$	
(a) No.	(1-)	(c)	(A)
from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I	becompact of memorals property given	(see instructions)	
		\$	
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I	Description of noncash property given	(see instructions)	Date received
		_	
		_ _	
		\$	
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
from Part I	Description of noncash property given	(see instructions)	Date received
		_	
		_	
		\$	90, 990-EZ, or 990-PF) (

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) **Employer identification number** Name of organization 91-2167530 FARRELL FAMILY FOUNDATION Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for Part III the year from any one contributor. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, chantable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed. (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Transferee's name, address, and ZIP + 4

(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

Part I

(a) No. from Part I

(a) No. from Part I

Relationship of transferor to transferee

Relationship of transferor to transferee

FORM 990-PF G	AIN OR	(LOSS)	FROM	SALE	OF	ASSETS		STA	TEMENT	1
(A) DESCRIPTION OF PROPERTY					1	MANNER ACQUIRED	DA ACQU		DATE S	OLE
MERRILL LYNCH - 04086					PU	URCHASED			· · · · · · · · · · · · · · · · · · ·	
(B) GROSS SALES PRICE	VALU	C) JE AT DF ACQ.	EXI	(D) PENSE SALE	OF	(E) DEPRE		GAIN	(F) OR LOS	ss
3,415,394.	3,3	333,751	•		0	•	0.		81,6	43.
(A) DESCRIPTION OF PROPERTY	<u>. </u>					MANNER ACQUIRED		TE IRED	DATE S	OLI
MERRILL LYNCH - 04086					ΡŪ	URCHASED				
(B) GROSS SALES PRICE	VAL	C) JE AT OF ACQ.	EXI	(D) PENSE SALE	OF	(E) DEPRE		GAIN	(F)	SS
2,029,923.	1,	747,699	•		0	•	0.		282,2	24.
(A) DESCRIPTION OF PROPERTY	·					MANNER ACQUIRED		TE	DATE S	OLI
64966 SHARES RESMED, IN	IC				P	URCHASED				
(B) GROSS SALES PRICE		C) F OR BASIS	EXI	(D) PENSE SALE	OF	(E) DEPRE		GAIN	(F)	ss
3,627,143.	3,5	569,882	•		0	•	0.		57,2	61.
CAPITAL GAINS DIVIDENDS	FROM 1	PART IV							82,9	35,
TOTAL TO FORM 990-PF, F	ד יייסגי	TIME 6	7						504,0	

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT 2
SOURCE		(A REVE PER B	NUE NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
MERRILL LYNCH			117.	117.	
TOTAL TO PART I, LI	NE 3		117.	117.	
FORM 990-PF	DIVIDEND	S AND INTER	EST FROM SE	CURITIES	STATEMENT 3
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENU		
MERRILL LYNCH	222,121	. 82,93	5. 139,1	86. 139,18	36.
TO PART I, LINE 4	222,121	82,93	139,1	86. 139,18	36.
FORM 990-PF		ACCOUNTI	NG FEES		STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
ACCOUNTING FEES	_	13,550.	13,55	0.	0.
TO FORM 990-PF, PG	1, LN 16B =	13,550.	13,55	0.	0.
FORM 990-PF	0	THER PROFES	SIONAL FEES	1	STATEMENT 5
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
	_	· · · · · · · · · · · · · · · · · · ·			
CONSULTING FEES		57,000.	28,50	0.	28,500.

FORM 990-PF	XAT	ES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
FOREIGN TAXES WITHHELD FEDERAL TAXES STATE TAXES	3,064. 98,316. 10.	98,316	•	0. 0. 0.
TO FORM 990-PF, PG 1, LN 18	101,390.	101,390	•	0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCON	
COMPUTER COSTS OTHER OFFICE EXPENSES INVESTMENT MANAGEMENT	233. 5,812. 513. 80,435.	5,812 513	•	0 • 0 • 0 •
TO FORM 990-PF, PG 1, LN 23	86,993.	86,993	•	0.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 8
DESCRIPTION		В	OOK VALUE	FAIR MARKET VALUE
MUTUAL FUNDS			10,494,762.	10,729,334.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		10,494,762.	10,729,334.

A Reason To Survive	10,000 00
Advance Charitable And Edu Fund	10,000 00
AEI	10,000 00
American Heart Association	5,000 00
Amigos de Las Americas	1,000 00
ARCS Foundation	7,500 00
Australian Academy of Tech	4,162 59
Bach Collegium San Diego	10,500 00
Big Brothers Big Sisters San Diego	66,250 00
Bioethics Art	5,000 00
Blinded Veterans	250
Boston College	500
Boys and Girls Club San Diego	5,000 00
BSA-SD Imperial Council	3,000 00
Burn Institute	5,000 00
Business Today	6,000 00
CA Patron Of The Arts	8,000 00
Capital Research Center	1,000 00
Casa Cornelia Legal Services	10,000 00
Cato Institute	30,000 00
Center For Independent Studies	2,421 68
Cfact.org	3,500 00
Challenged Athletes	500
Children Lifeline	10,500 00
Citizens United Foundation	200
Community Resources Center	10,000 00
Competitive Enterprise	2,500 00
David Horowitz Freedom Center	500
Doctors Without Borders	1,000 00
Elder Help	15,000 00
Family Health Center	10,000 00
Fogarty Institute For Innovation	10,000 00
Foster Parents Association	2,000 00
Friedman Foundation	5,000 00
Friends of the Poor	1,000 00
Friends of Vista Hill	20,000 00
Foundation for Education	5,000 00
Girl Scouts Of San Diego	1,000 00
Goldwater Institute	1,000 00
Happiness For The Children Of Kenya	5,000 00
Hillsdale College	1,000 00
Institute for Justice	2,500 00
International Rescue Comm	2,000 00
IPA	2,129 95
Jackie Robinson YMCA	10,000 00
Judicial Watch	250
Junior Achievement	52,375 00

Just Giving.com	1,000 00	
Just In Time Youth Program	20,000 00	
Just Like my Child	10,000 00	
Kids Korp USA	500	
Kootenal Humane Society	2,500 00	
Kyoto Prize Symposium	10,000 00	
La Jolla Playhouse	29,600 00	
La Jolla Town Council La Jolla Youth Soccer League	2,000 00	
Las Patronas	600 15,000 00	
Liberty Institute	500	
Lucy Burns Institute	5,000 00	
Mama's Kitchen	10,000 00	
MCASD	19,720 53	
Mending Kids	2,500 00	
MIT	31,500 00	
MOPA	4,800 00	
National Academies	20,000 00	
National Center for Public Policy Research	2,500 00	
Nativity Prep Academy	5,000 00	
Network for Good	1,015 00	
New Children's Museum	27,500 00	
NSW Family Foundation	2,500 00	
Ocean Discovery Institute	25,000 00	
Our Lady's School	12,120 00	
Pacific Research Institute	11,000 00	
Pedal the Cause	600	
Peers Network Inc.	8,800 00	
Project Concern Rady's Hospital	10,000 00	
Reality Changers	22,500 00 19,500 00	
Reason Foundation	5,000 00	
Reuben H Fleet Science Center	10,000 00	
Ronald McDonald House	27,500 00	
Ronald Reagan Presidential Foundation	1,000 00	
Sacred Heart School	5,000 00	
Salk Institute	35,000 00	
Salvation Army	9,000 00	
San Diego Center For Children	2,500 00	
San Diego Symphony	52,200 00	
San Diego Youth Services	7,500 00	
Sanford Burnham	5,000 00	
Scripps Foundation	6,000 00	
SD Museum Of Art	15,000 00	
Second Chance	10,000 00	
Senior Community Centers	2,500 00	
St. Katherine College	2,500 00	

· ... ·

TOTAL		1,165,212.28
	Zoological Society Of SD	25,000 00
	Youth Tennis San Diego	1,000 00
	Wıkımedia	1500
	Voices For Children	25,000 00
	Veterans 360	26,000 00
	USO Donations	39,000 00
	University Of Washington	5,000 00
	UCSD Foundation SOS Eye Mobile	25,000 00
	UCSD Foundation	25,500 00
	The Salvation Army	15,000 00
	The Marist Brothers	1,000 00
	The Independent Institute	1,000 00
	The Heritage Foundation	12,500 00
	The Chest Foundation	1,500 00
	The Center for Neighborhood Enterprise	2,500 00
	The Beeve Foundation	20,000 00
	Teach For America	15,000 00
	Sydney Opera House	4,717 53
	Sudan Relief Fund	1,000 00
	Students For Liberty	3,500 00
	St. Vincent DePaul Village	10,000 00
		1,000 00

1,000 00

St. Michael's Foundation

						Dogo 2
If your	8 (Rev. 1-2014) are filing for an Additional (Not Automatic) 3-Month Ex	tension o	complete only Part II and check this	box		Page 2 ► X
-	ly complete Part II if you have already been granted an a				2868	لغيا م
	are filing for an Automatic 3-Month Extension, comple		•	ea i oiiii t	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Part II				al (no co	pies ne	eded).
* ***	Additional (Itel Addition of the Itel	3.1011010	·· ·		•	, see instructions
Type or	Name of exempt organization or other filer, see instru	ctions				ion number (EIN) or
print	Traine of exempt organization of earlier many see means	000.		Zp.(0) 0.		
File by the	FARRELL FAMILY FOUNDATION				91-23	167530
due date for	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.	Social se	curity num	ber (SSN)
filing your return See	P.O. BOX 205				•	
instructions	City, town or post office, state, and ZIP code. For a fo	oreign add	ress, see instructions.			
	KENTFIELD, CA 94914-0205					
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
Applicati	on	Return	Application			Return
ls For		Code	Is For			Code
Form 990	or Form 990-EZ	01				
Form 990	PBL	02	Form 1041-A			08
	90 (Individual)	03	Form 4720 (other than individual)			09
Form 990)-PF	04	Form 5227			10
	7-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	PT (trust other than above) O not complete Part II if you were not already granted	06	Form 8870			12
Teleph	books are in the care of \blacktriangleright $\frac{\#207 - DEL}{MAR}$ mone No. \blacktriangleright $\frac{310-414-9358}{MAR}$ organization does not have an office or place of business	s in the Ur	9 2 0 1 4 Fax No. ► nited States, check this box		·	A VALLE
Teleph If the c If this box ▶ If the c If this box ▶ If the c If this box ▶ If the c If	organization does not have an office or place of business is for a Group Return, enter the organization's four digit . If it is for part of the group, check this box	s in the Ur Group Exc and atta NOVEM sheck reas	Fax No. ► Fax No. ► Inited States, check this box emption Number (GEN) In ach a list with the names and EINs of BER 15, 2015. , and ending on: Initial return	this is fo all memb	ers the ext	▶ □
Teleph If the complete of the	arone No. ► 310-414-9358 Deganization does not have an office or place of business is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit in the standard part of the group, check this box ► [s in the Ur Group Exc and atta NOVEM check reas	Fax No. ► Inted States, check this box emption Number (GEN) In the halist with the names and EINs of BER 15, 2015. , and ending on: Initial return	this is fo all memb	ers the ext	e group, check this ension is for.
Teleph If the c If this box 4	anone No. ► 310-414-9358 Design reganization does not have an office or place of business is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the group, check this box ► [Indeed to both the calculation of time until is calendar year 2014], or other tax year beginning into the tax year entered in line 5 is for less than 12 months, or including the indetail why you need the extension DITIONAL INFORMATION FROM TOTAL INFORMATION	s in the Ur Group Exc and atta NOVEM check reas	Fax No. ► Inted States, check this box emption Number (GEN) In the halist with the names and EINs of BER 15, 2015. , and ending on: Initial return	f this is fo all memb	ers the ext	e group, check this ension is for.
Teleph If the complete in the second	anone No. ► 310-414-9358 Derganization does not have an office or place of business is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the group, check this box ► [Indeed to both the calculation of time until is calendar year 2014], or other tax year beginning into tax year entered in line 5 is for less than 12 months, or a Group Change in accounting period into the extension DITIONAL INFORMATION FROM TO COMPLETE AND ACCURATE RETURN COMPLETE AND ACCURATE RETURN COMPLETE AND ACCURATE RETURN COMPLETE AND ACCURATE RETURN COMPLETE AND ACCURATE RETURN COMPLETE See instructions.	s in the Ur Group Exe and atta NOVEM check reas HIRD N.	Fax No. Fax No	this is fo all memb	ers the ext	e group, check this ension is for.
Teleph If the complete in the second	none No. ► 310-414-9358 organization does not have an office or place of business is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return of the group, check this box ► [Indeed to the calculation of time until is calendar year 2014], or other tax year beginning in the tax year entered in line 5 is for less than 12 months, or including the calculation of the extension of time until is for Forms 900-BL, 900-PF, 990-T, 4720, or 6069 in application is for Forms 990-PF, 990-T, 4720, or 6069 in application is for Forms 990-PF, 990-T, 4720, or 6069 in a Group Return of the property of the calculation is for Forms 990-PF, 990-T, 4720, or 6069 in a Group Return of the property of the calculation is for Forms 990-PF, 990-T, 4720, or 6069 in a Group Return of the property of the calculation is for Forms 990-PF, 990-T, 4720, or 6069 in a Group Return of the calculation is for Forms 990-PF, 990-T, 4720, or 6069 in a Group Return of the calculation is for Forms 990-PF, 990-T, 4720, or 6069 in a Group Return of the calculation is for Forms 990-PF, 990-T, 4720, or 6069 in a Group Return of the calculation is for Forms 990-PF, 990-T, 4720, or 6069 in a Group Return of the calculation is for Forms 990-PF, 990-T, 4720, or 6069 in a Group Return of the calculation is for Forms 990-PF, 990-T, 4720, or 6069 in a Group Return of the calculation is for Forms 990-PF, 990-T, 4720, or 6069 in a Group Return of the calculation is for Forms 990-PF, 990-T, 4720, or 6069 in a Group Return of the calculation is for Forms 990-PF, 990-T, 4720, or 6069 in a Group Return of the calculation is for Forms 990-PF, 990-T, 4720, or 6069 in a Group Return of the calculation is for Forms 990-PF, 990-T, 4720, or 6069 in a Group Return of the calculation is for Forms 990-PF, 990-T, 4720, or 6069 in a Group Return of the calculation is for Forms 990-PF, 990	s in the Ur Group Exe and atta NOVEM Theck reas HIRD N , or 6069,	Fax No. Fax No. Inted States, check this box emption Number (GEN) In the halist with the names and EINs of BER 15, 2015. Initial return and ending on: Initial return PARTIES IS REQUIRE: enter the tentative tax, less any yellow and estimated	f this is fo all memb	ers the ext	e group, check this ension is for.
Teleph If the complete in the	anone No. ► 310-414-9358 Derganization does not have an office or place of business is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the group, check this box ► [Indeed to both the calculation of time until is calendar year 2014], or other tax year beginning into tax year entered in line 5 is for less than 12 months, or a Group Change in accounting period into the extension DITIONAL INFORMATION FROM TO COMPLETE AND ACCURATE RETURN COMPLETE AND ACCURATE RETURN COMPLETE AND ACCURATE RETURN COMPLETE AND ACCURATE RETURN COMPLETE AND ACCURATE RETURN COMPLETE See instructions.	s in the Ur Group Exe and atta NOVEM Theck reas HIRD N , or 6069,	Fax No. Fax No. Inted States, check this box emption Number (GEN) In the halist with the names and EINs of BER 15, 2015. Initial return and ending on: Initial return PARTIES IS REQUIRE: enter the tentative tax, less any yellow and estimated	f this is fo all memb	ers the ext	e group, check this ension is for.
Teleph If the c If this box ▶ If this box ▶ If the c If this box ▶ If this	anone No. ► 310-414-9358 Derganization does not have an office or place of business is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return of time until is calendar year 2014, or other tax year beginning in the tax year entered in line 5 is for less than 12 months, or include in accounting period in the indetail why you need the extension DITIONAL INFORMATION FROM TO COMPLETE AND ACCURATE RETURN COMPLETE AND ACCURATE RETURN in application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069 in payments made. Include any prior year overpayment all	s in the Ur Group Exe and atta NOVEM sheck reas HIRD N.	Fax No. Fax No. Inted States, check this box emption Number (GEN) In the halist with the names and EINs of BER 15, 2015, and ending on: Initial return PARTIES IS REQUIRED Enter the tentative tax, less any yerefundable credits and estimated a credit and any amount paid	f this is fo all memb	eturn THE	e group, check this ension is for.
Teleph If the complete in the	anone No. ► 310-414-9358 Deganization does not have an office or place of business is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return and it is for part of the group, check this box ► [Indeed to be calculated and the calculation of time until indicated and the calculation of time until indicated and the calculation is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069. This application is for Forms 990-PF, 990-T, 4720, or 6069. The payments made. Include any prior year overpayment all eviously with Form 8868.	s in the Ur Group Exe and atta NOVEM Check reas HIRD N , or 6069, D, enter an lowed as a	Fax No. Fax No. Inted States, check this box emption Number (GEN) In the halist with the names and EINs of BER 15, 2015, and ending on: Initial return PARTIES IS REQUIRED Enter the tentative tax, less any yerefundable credits and estimated a credit and any amount paid	f this is fo all memb	eturn THE	e group, check this ension is for.
Teleph If the complete in the	anone No. ► 310-414-9358 Derganization does not have an office or place of business is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization of time until is calendar year 2014, or other tax year beginning in the tax year entered in line 5 is for less than 12 months, organization is counting period attended in the extension in the second of the indication is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069. The payments made. Include any prior year overpayment alleviously with Form 8868. Include your patricular in the second of perior, I declare that I have examined this form, include the payment of perior, I declare that I have examined this form, include the payment of the payment of perior, I declare that I have examined this form, include the payment of the payment of perior, I declare that I have examined this form, include the payment of the p	s in the Ur Group Exe and atta NOVEM Theck reas HIRD N , or 6069, , enter an lowed as a ayment wr uctions. tion mu	Fax No. Fax No. Inted States, check this box emption Number (GEN) In the halist with the names and EINs of BER 15, 2015, and ending on: Initial return PARTIES IS REQUIRE: enter the tentative tax, less any yerefundable credits and estimated a credit and any amount paid the this form, if required, by using the completed for Part II of the states and the completed for Part II of the states are states and the states are states and the states are states and the states are states and the states are states and the states are states are states and the states are states	Final r For this is for all members Final r For this is for all members Final r For this is for all members For this is for al	eturn THE	e group, check this ension is for. FILING OF 0. 0.
Teleph If the complete in the	anone No. ► 310-414-9358 Derganization does not have an office or place of business is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return, enter the organization's four digit is for a Group Return and it is for part of the group, check this box ► [Include Interest of	s in the Ur Group Exe and atta NOVEM Theck reas HIRD N , or 6069, , enter an lowed as a ayment wr uctions. tion mu	Fax No. Fax No. Inted States, check this box emption Number (GEN) In the halist with the names and EINs of BER 15, 2015, and ending on: Initial return PARTIES IS REQUIRE: enter the tentative tax, less any yerefundable credits and estimated a credit and any amount paid the this form, if required, by using the completed for Part II of the states and the completed for Part II of the states are states and the states are states and the states are states and the states are states and the states are states and the states are states are states and the states are states	Final r For this is for all members Final r For this is for all members Final r For this is for all members For this is for al	eturn THE \$ \$ f my knowled	e group, check this ension is for. FILING OF 0. 0.