



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 AUGUST 17, 2015**  
**Return of Private Foundation**

Form 990-PF

Department of the Treasury  
Internal Revenue Service

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](http://www.irs.gov/form990pf)

OMB No 1545-0052

**2014**

Open to Public Inspection

For calendar year 2014 or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

Name of foundation

**ANNA MAY FAMILY FOUNDATION**

Number and street (or P O box number if mail is not delivered to street address)

**1314-B CENTER DRIVE BOX 264**

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

**MEDFORD, OR 97501**

G Check all that apply:  Initial return  Initial return of a former public charity  
 Final return  Amended return  
 Address change  Name change

H Check type of organization:  Section 501(c)(3) exempt private foundation

Section 4947(a)(1) nonexempt charitable trust  Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) **\$ 3,247,121.** (Part I, column (d) must be on cash basis.)

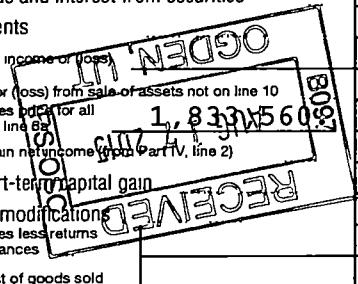
J Accounting method:  Cash  Accrual  
 Other (specify) \_\_\_\_\_

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received				<b>N/A</b>	
2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B					
Interest on savings and temporary cash investments		<b>5,227.</b>	<b>5,227.</b>		<b>STATEMENT 1</b>
4 Dividends and interest from securities		<b>80,757.</b>	<b>80,757.</b>		<b>STATEMENT 2</b>
5a Gross rents					
b Net rental income or loss					
6a Net gain or (loss) from sale of assets not on line 10		<b>239,374.</b>			
b Gross sales price for all assets on line 6a	<b>1,833</b>	<b>560</b>			
7 Capital gain net income (from Part IV, line 2)			<b>239,374.</b>		
8 Net short-term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income		<b>-8,334.</b>	<b>-8,334.</b>		<b>STATEMENT 3</b>
12 Total. Add lines 1 through 11		<b>317,024.</b>	<b>317,024.</b>		
13 Compensation of officers, directors, trustees, etc		<b>30,000.</b>	<b>15,000.</b>		<b>15,000.</b>
14 Other employee salaries and wages		<b>4,013.</b>	<b>2,006.</b>		<b>2,007.</b>
15 Pension plans, employee benefits					
16a Legal fees					
b Accounting fees	<b>STMT 4</b>	<b>15,161.</b>	<b>7,580.</b>		<b>7,581.</b>
c Other professional fees	<b>STMT 5</b>	<b>23,606.</b>	<b>23,606.</b>		<b>0.</b>
17 Interest					
18 Taxes	<b>STMT 6</b>	<b>4,599.</b>	<b>3,131.</b>		<b>1,468.</b>
19 Depreciation and depletion					
20 Occupancy					
21 Travel, conferences, and meetings					
22 Printing and publications					
23 Other expenses	<b>STMT 7</b>	<b>2,484.</b>	<b>1,241.</b>		<b>1,243.</b>
24 Total operating and administrative expenses. Add lines 13 through 23		<b>79,863.</b>	<b>52,564.</b>		<b>27,299.</b>
25 Contributions, gifts, grants paid		<b>144,665.</b>			<b>144,665.</b>
26 Total expenses and disbursements. Add lines 24 and 25		<b>224,528.</b>	<b>52,564.</b>		<b>171,964.</b>
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements		<b>92,496.</b>			
b Net investment income (if negative, enter -0-)		<b>264,460.</b>			
c Adjusted net income (if negative, enter -0-)				<b>N/A</b>	

423501  
11-24-14 LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2014)

SCANNED AUG 11 2015



G14

Assets	Part II Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	37,454.	33,260.	33,260.
2	Savings and temporary cash investments	86,589.	89,479.	89,479.
3	Accounts receivable ►			
	Less: allowance for doubtful accounts ►			
4	Pledges receivable ►			
	Less: allowance for doubtful accounts ►			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other disqualified persons			
7	Other notes and loans receivable ►			
	Less: allowance for doubtful accounts ►			
8	Inventories for sale or use			
9	Prepaid expenses and deferred charges			
10a	Investments - U.S. and state government obligations	STMT 9	266,939.	126,328.
b	Investments - corporate stock	STMT 10	2,378,192.	2,736,273.
c	Investments - corporate bonds			
11	Investments - land, buildings, and equipment: basis ►			
	Less accumulated depreciation ►			
12	Investments - mortgage loans			
13	Investments - other	STMT 11	157,300.	28,455.
14	Land, buildings, and equipment: basis ►			
	Less accumulated depreciation ►			
15	Other assets (describe ► <u>INTEREST/DIVIDENDS</u> )		1,207.	676.
16	<b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I)		2,927,681.	3,014,471.
17	Accounts payable and accrued expenses			
18	Grants payable			
19	Deferred revenue			
20	Loans from officers, directors, trustees, and other disqualified persons			
21	Mortgages and other notes payable			
22	Other liabilities (describe ► )			
23	<b>Total liabilities</b> (add lines 17 through 22)		0.	0.
Liabilities	Foundations that follow SFAS 117, check here ► <input type="checkbox"/>			
	and complete lines 24 through 26 and lines 30 and 31.			
24	Unrestricted			
25	Temporarily restricted			
26	Permanently restricted			
Net Assets or Fund Balances	Foundations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/>			
	and complete lines 27 through 31.			
27	Capital stock, trust principal, or current funds		0.	0.
28	Paid-in or capital surplus, or land, bldg., and equipment fund		0.	0.
29	Retained earnings, accumulated income, endowment, or other funds		2,927,681.	3,014,471.
30	<b>Total net assets or fund balances</b>		2,927,681.	3,014,471.
31	<b>Total liabilities and net assets/fund balances</b>		2,927,681.	3,014,471.

## Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	2,927,681.
2	Enter amount from Part I, line 27a	2	92,496.
3	Other increases not included in line 2 (itemize) ► <u>NON-TAXABLE DISTRUBTIONS</u>	3	110.
4	Add lines 1, 2, and 3	4	3,020,287.
5	Decreases not included in line 2 (itemize) ►	5	5,816.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	3,014,471.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a</b>	<b>UBS - PUBLICLY TRADED SECURITIES</b>	P	VARIOUS	12/31/14
<b>b</b>	<b>UBS - PUBLICLY TRADED SECURITIES</b>	P	VARIOUS	12/31/14
<b>c</b>	<b>UBS - DISALLOWED WASH SALE LOSS</b>	P	VARIOUS	12/31/14
<b>d</b>	<b>UBS - RETURN OF PRINCIPAL</b>	P	VARIOUS	12/31/14
<b>e</b>	<b>CAPITAL GAINS DIVIDENDS</b>			
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
<b>a</b> 684,511.		679,036.	5,475.	
<b>b</b> 1,127,768.		909,037.	218,731.	
<b>c</b>		-871.	871.	
<b>d</b> 6,984.		6,984.	0.	
<b>e</b> 14,297.			14,297.	
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
<b>a</b>				5,475.
<b>b</b>				218,731.
<b>c</b>				871.
<b>d</b>				0.
<b>e</b>				14,297.
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2	239,374.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8	{ If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8 }		3	N/A

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

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

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

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

 Yes  No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2013	171,717.	3,164,749.	.054259
2012	171,006.	3,095,698.	.055240
2011	128,792.	3,157,073.	.040795
2010	121,116.	2,964,631.	.040854
2009	119,500.	2,602,946.	.045910

2 Total of line 1, column (d)

2 .237058

3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years

3 .047412

4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5

4 3,253,923.

5 Multiply line 4 by line 3

5 154,275.

6 Enter 1% of net investment income (1% of Part I, line 27b)

6 2,645.

7 Add lines 5 and 6

7 156,920.

8 Enter qualifying distributions from Part XII, line 4

8 171,964.

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

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

1a Exempt operating foundations described in section 4940(d)(2), check here ►  and enter "N/A" on line 1.

Date of ruling or determination letter: \_\_\_\_\_ (attach copy of letter if necessary-see instructions)

b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ►  and enter 1% of Part I, line 27b

c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).

2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

3 Add lines 1 and 2

4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-

6 Credits/Payments:

a 2014 estimated tax payments and 2013 overpayment credited to 2014

6a 3,200.

b Exempt foreign organizations - tax withheld at source

6b

c Tax paid with application for extension of time to file (Form 8868)

6c

d Backup withholding erroneously withheld

6d

7 Total credits and payments. Add lines 6a through 6d

8 Enter any penalty for underpayment of estimated tax. Check here  if Form 2220 is attached

9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed

10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid

11 Enter the amount of line 10 to be: Credited to 2015 estimated tax ►

555. Refunded ►

11 11 0.

## 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 campaign?

Yes No

1a X

b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?

1b X

*If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.*

1c

X

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. ► \$ 0. (2) On foundation managers. ► \$ 0.

e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ 0.

2 Has the foundation engaged in any activities that have not previously been reported to the IRS?

2 X

*If "Yes," attach a detailed description of the activities*3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*

3 X

4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?

4a X

b If "Yes," has it filed a tax return on Form 990-T for this year?

4b

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?

5 X

*If "Yes," attach the statement required by General Instruction T.*

6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:

N/A

• By language in the governing instrument, or

6 X

• 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 X

7 Did the foundation have at least \$5,000 in assets at any time during the year? *If "Yes," complete Part II, col. (c), and Part XV*

8a Enter the states to which the foundation reports or with which it is registered (see instructions) ►

OR

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)

8b X

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

## Part VII-A Statements Regarding Activities (continued)

11		
12		
13	X	
Website address ►	N/A	
14	AMY BELKIN, EXECUTIVE DIRECTOR	Telephone no. ► 541-857-1040
	Located at ► 1314-B CENTER DRIVE BOX 264, MEDFORD, OR	ZIP+4 ► 97501
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year	► 15   N/A
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the foreign country ►	16   Yes No X

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

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

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

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

5a During the year did the foundation pay or incur any amount to:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?			N/A	5b
Organizations relying on a current notice regarding disaster assistance check here	<input checked="" type="checkbox"/>			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes <input type="checkbox"/> No		N/A	
<i>If "Yes," attach the statement required by Regulations section 53.4945-5(d).</i>				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<i>If "Yes" to 6b, file Form 8870.</i>				
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		N/A	7b
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		N/A	

## Part VIII | Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

## 1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 12		30,000.	0.	0.

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

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

Total number of other employees paid over \$50,000 ► 0

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

**3 Five highest-paid independent contractors for professional services. If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
<b>NONE</b>		

**Total number of others receiving over \$50,000 for professional services**

►

0

**[Part IX-A] Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

Expenses

<b>1</b> <b>NONE</b>	
	0.
<b>2</b>	
<b>3</b>	
<b>4</b>	

**[Part IX-B] Summary of Program-Related Investments**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

Amount

<b>1</b> <b>NONE</b>	
	0.
<b>2</b>	
<b>3</b>	
<b>Total. Add lines 1 through 3</b>	► 0.

Form 990-PF (2014)

## Part X

## Minimum Investment Return (All domestic foundations must complete this part Foreign foundations, see instructions)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:

a Average monthly fair market value of securities

b Average of monthly cash balances

c Fair market value of all other assets

d Total (add lines 1a, b, and c)

e Reduction claimed for blockage or other factors reported on lines 1a and

1c (attach detailed explanation)

2 Acquisition indebtedness applicable to line 1 assets

3 Subtract line 2 from line 1d

4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)

5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4

6 Minimum investment return. Enter 5% of line 5

1a		3,141,994.	
1b		161,481.	
1c		0.	
1d		3,303,475.	
1e		0.	
2		0.	
3		3,303,475.	
4		49,552.	
5		3,253,923.	
6		162,696.	

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

1 Minimum investment return from Part X, line 6

2a Tax on investment income for 2014 from Part VI, line 5

b Income tax for 2014. (This does not include the tax from Part VI.)

c Add lines 2a and 2b

3 Distributable amount before adjustments. Subtract line 2c from line 1

4 Recoveries of amounts treated as qualifying distributions

5 Add lines 3 and 4

6 Deduction from distributable amount (see instructions)

7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1

			1	162,696.
2a		2,645.		
2b				
2c		2,645.		
3		160,051.		
4		0.		
5		160,051.		
6		0.		
7		160,051.		

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26

b Program-related investments - total from Part IX-B

2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes

3 Amounts set aside for specific charitable projects that satisfy the:

a Suitability test (prior IRS approval required)

b Cash distribution test (attach the required schedule)

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

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

income. Enter 1% of Part I, line 27b

6 Adjusted qualifying distributions Subtract line 5 from line 4

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

1a		171,964.		
1b		0.		
2				
3a				
3b				
4		171,964.		
5		2,645.		
6		169,319.		

## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				160,051.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			33,712.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009				
b From 2010				
c From 2011				
d From 2012				
e From 2013				
f Total of lines 3a through e		0.		
4 Qualifying distributions for 2014 from Part XII, line 4: ► \$ 171,964.			33,712.	
a Applied to 2013, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)		0.		
d Applied to 2014 distributable amount				138,252.
e Remaining amount distributed out of corpus		0.		
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))		0.		0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5		0.		
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2013. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015				21,799.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)		0.		
8 Excess distributions carryover from 2009 not applied on line 5 or line 7		0.		
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a		0.		
10 Analysis of line 9:				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013				
e Excess from 2014				



## Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution **	Amount
<b>a Paid during the year</b>				
A FAMILY FOR EVERY CHILD 1675 W 11TH AVE EUGENE, OR 97402	NONE	PC	ADOPTION SERVICES FOR CHILDREN AND FAMILIES	5,000.
ASHLAND EMERGENCY FOOD BANK 560 CLOVER LANE ASHLAND, OR 97520	NONE	PC	EMERGENCY FOOD DISTRIBUTION	2,400.
BOYS & GIRLS CLUB 203 S E 9TH STREET GRANTS PASS, OR 97540	NONE	PC	WILD: WILDERNESS INTERACTIVE LEADERSHIP DEVELOPMENT	3,000.
BRITT FESTIVALS 216 W MAIN STREET MEDFORD, OR 97501	NONE	PC	HIGH SCHOOL INTERNSHIP PROGRAM	2,000.
CENTER FOR NONPROFIT LEGAL SERVICES 225 W MAIN STREET MEDFORD, OR 97501	NONE	PC	PROTECTING OUR VETERANS	2,000.
<b>Total</b>	<b>SEE CONTINUATION SHEET(S)</b>			► 3a 144,665.
<b>b Approved for future payment</b>				
NONE				
<b>Total</b>				► 3b 0.

## Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514	(e) Related or exempt function income
	(a) Business code	(b) Amount		
1 Program service revenue:				
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	5,227.
4 Dividends and interest from securities			14	80,757.
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			14	-8,334.
8 Gain or (loss) from sales of assets other than inventory			18	239,374.
9 Net income or (loss) from special events				
10 Gross profit or (loss) from sales of inventory				
11 Other revenue:				
a				
b				
c				
d				
e				
12 Subtotal. Add columns (b), (d), and (e)	0.		317,024.	0.
13 Total. Add line 12, columns (b), (d), and (e)	13		317,024.	
(See worksheet in line 13 instructions to verify calculations.)				

## **Relationship of Activities to the Accomplishment of Exempt Purposes**



## FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
UBS	3,301.	3,301.	
UBS - US GOVT INT	1,926.	1,926.	
TOTAL TO PART I, LINE 3	5,227.	5,227.	

## FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
UBS	95,054.	14,297.	80,757.	80,757.	
TO PART I, LINE 4	95,054.	14,297.	80,757.	80,757.	

## FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
OTHER INVESTMENT INCOME/LOSS	-8,334.	-8,334.	
TOTAL TO FORM 990-PF, PART I, LINE 11	-8,334.	-8,334.	

## FORM 990-PF ACCOUNTING FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	15,161.	7,580.		7,581.
TO FORM 990-PF, PG 1, LN 16B	15,161.	7,580.		7,581.

## FORM 990-PF

## OTHER PROFESSIONAL FEES

## STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADVISORY FEES	23,606.	23,606.		0.
TO FORM 990-PF, PG 1, LN 16C	23,606.	23,606.		0.

## FORM 990-PF

## TAXES

## STATEMENT 6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OREGON STATE TAX	10.	0.		10.
FOREIGN TAX	1,673.	1,673.		0.
PAYROLL TAXES	2,916.	1,458.		1,458.
TO FORM 990-PF, PG 1, LN 18	4,599.	3,131.		1,468.

## FORM 990-PF

## OTHER EXPENSES

## STATEMENT 7

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DUES & SUBSCRIPTIONS	775.	387.		388.
INSURANCE	750.	375.		375.
OFFICE EXPENSE	305.	152.		153.
REIMBURSEMENTS	158.	79.		79.
MILEAGE	384.	192.		192.
WEBSITE	112.	56.		56.
TO FORM 990-PF, PG 1, LN 23	2,484.	1,241.		1,243.

ANNA MAY FAMILY FOUNDATION

93-1269424

FORM 990-PF OTHER DECREASES IN NET ASSETS OR FUND BALANCES STATEMENT 8

DESCRIPTION	AMOUNT
FEDERAL TAXES PAID	4,945.
WASH SALE LOSSES DISALLOWED	871.
 TOTAL TO FORM 990-PF, PART III, LINE 5	 5,816.

FORM 990-PF U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS STATEMENT 9

DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
SEE ATTACHED STATEMENT	X		126,328.	123,994.
 TOTAL U.S. GOVERNMENT OBLIGATIONS			126,328.	123,994.
 TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS				
 TOTAL TO FORM 990-PF, PART II, LINE 10A			126,328.	123,994.

FORM 990-PF CORPORATE STOCK STATEMENT 10

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
SEE ATTACHED STATEMENT	2,736,273.	2,970,804.
 TOTAL TO FORM 990-PF, PART II, LINE 10B	2,736,273.	2,970,804.

ANNA MAY FAMILY FOUNDATION

93-1269424

FORM 990-PF

OTHER INVESTMENTS

STATEMENT 11

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
SEE ATTACHED STATEMENT - OTHER ASSETS	COST	28,455.	28,908.
TOTAL TO FORM 990-PF, PART II, LINE 13		28,455.	28,908.

10430728 146892 263071

24 STATEMENT(S) 11  
2014.04010 ANNA MAY FAMILY FOUNDATIO 263071\_1

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS  
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 12

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
AMY BELKIN 1314-B CENTER DRIVE NO 264 MEDFORD, OR 97501	EXECUTIVE DIRECTOR 20.00	30,000.	0.	0.
MICHAEL LYNCH 1314-B CENTER DRIVE NO 264 MEDFORD, OR 97501	PRESIDENT/FINANCE & OPERATIONS 0.50	0.	0.	0.
DOUGLASS SCHMOR 1314-B CENTER DRIVE NO 264 MEDFORD, OR 97501	VICE PRESIDENT/FINANCE & OPERATIONS 0.50	0.	0.	0.
JOHN DAILEY 1314-B CENTER DRIVE NO 264 MEDFORD, OR 97501	TREASURER/FINANCE & OPERATIONS 0.50	0.	0.	0.
KAREN BARTALINI 1314-B CENTER DRIVE NO 264 MEDFORD, OR 97501	DIRECTOR 0.50	0.	0.	0.
RALPH BURRELLE 1314-B CENTER DRIVE NO 264 MEDFORD, OR 97501	DIRECTOR 0.50	0.	0.	0.
STEVE ERB 1314-B CENTER DRIVE NO 264 MEDFORD, OR 97501	DIRECTOR 0.50	0.	0.	0.
BOB SCHEELEN 1314-B CENTER DRIVE NO 264 MEDFORD, OR 97501	PRESIDENT/PROGRAMS 0.50	0.	0.	0.
JAYMEY SWEENEY 1314-B CENTER DRIVE NO 264 MEDFORD, OR 97501	PRESIDENT/PROGRAMS 0.50	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		30,000.	0.	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION  
PART XV, LINES 2A THROUGH 2D

STATEMENT 13

## NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

AMY BELKIN  
1314-B CENTER DRIVE BOX 264  
MEDFORD, OR 97501

## TELEPHONE NUMBER

(541) 601-9915

## FORM AND CONTENT OF APPLICATIONS

WRITTEN

## ANY SUBMISSION DEADLINES

NONE

## RESTRICTIONS AND LIMITATIONS ON AWARDS

DISTRIBUTIONS WILL BE MADE WHICH PRIMARILY BENEFIT OR HAVE CHARITABLE, EDUCATIONAL AND SCIENTIFIC PURPOSES WITHIN JACKSON, JOSEPHINE AND KLAMATH COUNTIES OF OREGON. SECONDARY CONSIDERATION WILL BE GIVEN TO THOSE THAT BENEFIT OR HAVE CHARITABLE, EDUCATIONAL & SCIENTIFIC PURPOSES WITHIN CURRY, LAKE, DOUGLAS, DESCHUTES AND COOS COUNTIES OF OREGON.

## ANNA MAY FAMILY FOUNDATION

93-1269424

## Part XV Supplementary Information

## 3 Grants and Contributions Paid During the Year (Continuation)

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
COLLEGE DREAMS: COLLEGE DREAMS 1000 REDWOOD AVE GRANTS PASS, OR 97527	NONE	PC	INVESTING CRITICAL RESOURCES IN YOUTH	3,000.
COMMUNITY HEALTH CENTER 19 MYRTLE STREET MEDFORD, OR 97504	NONE	PC	EMERGENCY PRESCRIPTION MEDICATION ASSISTANCE/EMERGENCY GRANT	5,000.
COMMUNITY VOLUNTEER NETWORK 1 W MAIN ST STE 303 MEDFORD, OR 97501	NONE	PC	FOSTER GRANDPARENT PROGRAM OF SOUTHERN OREGON	3,000.
COYOTE TRAILS 2931 S PACIFIC HWY MEDFORD, OR 97520	NONE	PC	TITLE 1 NATURE OBSERVATION WINTER CLASSROOM-BASED PROGRAMS	2,500.
EASTER SEALS OREGON 5757 SW MACADAM AVE STE 100 PORTLAND, OR 97239	NONE	PC	SUMMER DAY CAMP	3,000.
HABITAT FOR HUMANITY 2233 S PACIFIC HWY MEDFORD, OR 97501	NONE	PC	HELP PURCHASE HEATING SYSTEMS FOR SIX HOUSES	3,000.
HEARTS WITH A MISSION 521 EDWARDS ST MEDFORD, OR 97501	NONE	PC	EXPAND ACADEMIC HELP FOR AT-RISK HOMELESS YOUTH	4,000.
HOPE EQUESTRIAN PO BOX 396 EAGLE POINT, OR 97524	NONE	PC	ADOPT A RIDER FUND	2,000.
KAIROS 715 SW RAMSEY AVENUE GRANTS PASS, OR 97527	NONE	PC	THE SCHOOL COMMUNITY TEAM MENTORING INTEGRATION PROJECT	5,000.
LIVING OPPORTUNITIES 861 VALLEY VIEW DRIVE MEDFORD, OR 97504	NONE	PC	DEVELOPMENT OF EMPLOYMENT SKILLS TRAINING FOR PEOPLE WITH INTELLECTUAL AND DEVELOPMENTAL	4,490.
<b>Total from continuation sheets</b>				<b>130,265.</b>

## ANNA MAY FAMILY FOUNDATION

93-1269424

## Part XV Supplementary Information

## 3 Grants and Contributions Paid During the Year (Continuation)

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
MAGDALENE HOME 12 BLACK OAK DRIVE MEDFORD, OR 97501	NONE	PC	HOMELESS TEEN MOTHER EMERGENCY FUND	2,500.
MEDFORD SCHOOL DISTRICT 549C 500 MONROE MEDFORD, OR 97501	NONE	PC	EMERGENCY FUNDS FOR BASIC NEEDS/EMERGENCY GRANT	10,000.
MEDIATION WORKS 33 N. CENTRAL, SUITE 219 MEDFORD, OR 97501	NONE	PC	CHOICEPOINT BULLYING INTERVENTION AND STUDENT BYSTANDER EMPOWERMENT	3,000.
MULTICULTURAL ASSOC. OF SOUTHERN OREGON P O BOX 67 MEDFORD, OR 97501	NONE	PC	CULTURAL ROOTS AND SHOOTS	2,000.
OREGON CONSERVATORY OF PERFORMING ARTS P.O. BOX 1359 MEDFORD, OR 97501	NONE	PC	OCPA SCHOLARSHIP PROGRAM	1,500.
PHOENIX COUNSELING CENTER 149 N MAIN STREET PHOENIX, OR 97535	NONE	PC	STEP FORWARD: A COMMUNITY PARTNERSHIP SUMMER PROGRAM	1,000.
PLANNED PARENTHOOD HEALTH SERVICES OF SOUTHWESTERN OREGON 125 S CENTRAL AVE #201 MEDFORD, OR 97501	NONE	PC	ADOLESCENT HEALTH CARE COMMUNICATION PROJECT	5,000.
PROSPECT SCHOOL DISTRICT 59 160 MILL CREEK DR. PROSPECT, OR 97536	NONE	PC	EARLY LEARNING LITERACY IN THE WOODS	4,000.
ROGUE GALLERY & ART CENTER 40 SO. BARTLETT MEDFORD, OR 97501	NONE	PC	ELEMENTARY SCHOOL ARTS OUTREACH PROGRAM	2,000.
ROGUE VALLEY MANOR FOUNDATION 1200 MIRA MAR AVE MEDFORD, OR 97504	NONE	PC	MANOR MENTORS AND FINANCIAL AID: MENTORING DISENFRANCHISED MALE YOUTH AGES 16-25	2,000.
<b>Total from continuation sheets</b>				

## ANNA MAY FAMILY FOUNDATION

93-1269424

## Part XV Supplementary Information

## 3 Grants and Contributions Paid During the Year (Continuation)

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ROGUE VALLEY SMART 670 SUPERIOR CT. STE 108 MEDFORD, OR 97504	NONE	PC	RV SMART READING PROGRAM FOR CHILDREN IN ELEMENTARY SCHOOL	8,000.
ROSE CIRCLE MENTORING NETWORK 295 E MAIN STREET STE 6 ASHLAND, OR 97520	NONE	PC	CAMP LUNA SCHOLARSHIPS	2,000.
ROGUE VALLEY COUNCIL OF GOVERNMENT 155 N. 1ST STR. CENTRAL POINT, OR 97502	NONE	PC	EMERGENCY FUND/EMERGENCY GRANT	2,175.
SALVATION ARMY 304 BEATTY MEDFORD, OR 97501	NONE	PC	HOPE HOUSE TRANSITIONAL SHELTER FOR HOMELESS MEN, WOMEN, CHILDREN (IN FAMILIES)	7,500.
SCIENCEWORKS HANDS-ON MUSEUM 1500 E. MAIN ST. ASHLAND, OR 97520	NONE	PC	INSPIRING MINDS -- ENRICHING THE LIVES OF AT-RISK CHILDREN	2,000.
SOUTHERN OREGON CHILD STUDY & FAMILY COUNCIL (PROJECT LISTO) P.O. BOX 3697 CENTRAL POINT, OR 97502	NONE	PC	LISTO FAMILY LITERACY PROGRAM FOR LOW-INCOME LATINOS	8,000.
SOUTHERN OREGON EDUCATIONAL SERVICE DISTRICT-ESD 101 NORTH GRAPE ST MEDFORD, OR 97501	NONE	PC	HISPANIC ACADEMIC OUTREACH (HAO)	4,000.
ST. MARK'S EPISCOPAL 426 W. 6TH STREET MEDFORD, OR 97501	NONE	PC	ST. MARK'S FOOD PANTRY	4,000.
ST. VINCENT DE PAUL SOCIETY 2424 NORTH PACIFIC HWY MEDFORD, OR 97501	NONE	PC	EMERGENCY FUND/EMERGENCY GRANT	5,000.
ROGUE VALLEY WORKFORCE DEVELOPMENT COUNCIL DBA THE JOB COUNCIL 100 E MAIN STREET STE A MEDFORD, OR 97501	NONE	PC	YOUNG MOMS CIRCLE AND YOUNG MOMS CLUB	2,000.
Total from continuation sheets ..				

## ANNA MAY FAMILY FOUNDATION

93-1269424

## Part XV Supplementary Information

## 3 Grants and Contributions Paid During the Year (Continuation)

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
THE PREGNANCY CENTER 2019 AERO WAY #103 MEDFORD, OR 97504	NONE	PC	STRAPPED IN AND READY TO ROLL: A PROGRAM TO PROVIDE CONVERTIBLE CAR SEATS	2,000.
UNITED WAY OF JACKSON COUNTY 711 E MAIN STE 17 MEDFORD, OR 97504	NONE	PC	FOR HOPE (HELPING OUT PEOPLE EVERY DAY) CHEST, AN EMERGENCY ASSISTANCE FUND	5,000.
UPPER ROGUE COMMUNITY CENTER P.O. BOX 216 SHADY COVE, OR 97539	NONE	PC	EMERGENCY SERVICES/EMERGENCY GRANT	2,500.
WILDERNESS TRAILS P.O. BOX 4655 MEDFORD, OR 97501	NONE	PC	CAMPER SPONSORSHIPS FOR AT-RISK YOUTH	1,500.
WINTERSPRING CENTER P O BOX 8169 MEDFORD, OR 97501	NONE	PC	YOUTH BEREAVEMENT SUPPORT PROGRAM	2,600.
YMCA: ROGUE VALLEY FAMILY YMCA 522 WEST SIXTH STREET MEDFORD, OR 97501	NONE	PC	FINANCIAL ASSISTANCE FOR CHILD CARE PROJECT	4,000.
<b>Total from continuation sheets</b>				

## Part XV Supplementary Information

**3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution**

NAME OF RECIPIENT - LIVING OPPORTUNITIES

## DEVELOPMENT OF EMPLOYMENT SKILLS TRAINING FOR PEOPLE WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES

**Anna May Family Foundation**  
**Investment Book and Fair Value**  
12/31/2014  
93-1269424

		<b>Book Value</b> Column ( b )	<b>Fair Market Value</b> Column ( c )
Line 10a	<b>U.S. and state government obligations</b>		
UBS Paine Webber	A/C 07232	<u>126,328</u>	<u>123,994</u>
Line 10b	<b>Corporate Stock</b>		
UBS Paine Webber	A/C 07216	199,679	199,088
UBS Paine Webber	A/C 07231	185,234	255,112
UBS Paine Webber	A/C 07232	184,219	176,031
UBS Paine Webber	A/C 07233	417,994	518,489
UBS Paine Webber	A/C 07236	133,405	136,065
UBS Paine Webber	A/C 07237	117,265	136,770
UBS Paine Webber	A/C 07238	139,431	161,363
UBS Paine Webber	A/C 07239	330,156	348,091
UBS Paine Webber	A/C 34823	177,808	250,686
UBS Paine Webber	A/C 35850	851,083	789,108
		<u>2,736,273</u>	<u>2,970,804</u>
Line 13	<b>Other Assets</b>		
UBS Paine Webber	A/C 07232	<u>28,455</u>	<u>28,908</u>

# Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► File a separate application for each return.  
► Information about Form 8868 and its instructions is at [www.irs.gov/form8868](http://www.irs.gov/form8868).

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

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

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

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

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

Part I only

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

Enter filer's identifying number

Type or print	Name of exempt organization or other filer, see instructions. <b>ANNA MAY FAMILY FOUNDATION</b>	Employer identification number (EIN) or <b>93-1269424</b>
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. <b>1314-B CENTER DRIVE BOX 264</b>	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>MEDFORD, OR 97501</b>	

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

**0 4**

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

**AMY BELKIN, EXECUTIVE DIRECTOR**

- The books are in the care of ► **1314-B CENTER DRIVE BOX 264 - MEDFORD, OR 97501**

Telephone No. ► **541-857-1040** Fax No. ► \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group, check this box ►  If it is for part of the group, check this box ►  and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until

**AUGUST 15, 2015**, to file the exempt organization return for the organization named above. The extension

is for the organization's return for:

►  calendar year **2014** or

►  tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

2 If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return

Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$	<b>2,645.</b>
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	<b>3,200.</b>
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.	3c	\$	<b>0.</b>

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