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Form **990-PF**

Department of the Treasury Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
▶ 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.

F	or c	aler	ndar year 2014 or tax year beginning JUL	1, 2014	, and er	ding	JUN 30	2015	
_	Nar	ne of	foundation			, , , , , , , , , , , , , , , , , , , ,	A Employer id	lentification	number
_	Α	ND	REWS FAMILY FOUNDATION				20-03	368768	
_	Nun	ber a	and street (or P O box number if mail is not delivered to street	address)	_·	Room/suite	B Telephone r	number	
_	P	.0	. BOX 6637				970 9	22-71	12
			own, state or province, country, and ZIP or foreign p WMASS VILLAGE, CO 8161				C If exemption a	pplication is p	ending, check here
-			all that apply: Initial return	Initial return of a fo	ormer nublic c	harity	D 1. Foreign o	raanizatione	chack hara
·		11001	Final return	Amended return	ornici public ci	iaiity	i. Toreight	n yanızatıon:	s, check here
			Address change	Name change			2. Foreign org	ganizations me	eeting the 85% test, imputation
F	1 C	heck	type of organization: X Section 501(c)(3) ex				1		
		-		Other taxable private found:	ation				tus was terminated (A), check here
ī	Fa		arket value of all assets at end of year J Accounti	,	Accru	ıal	ì		60-month termination
			Part II, col. (c), line 16)	her (specify)					(B), check here
_	▶	\$	3,587,221. (Part I, colu	mn (d) must be on cash i	basis.)				
L	Pa	rt 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 inv		(c) Adjus incor		(d) Disbursements for charitable purposes (cash basis only)
_		1	Contributions, gifts, grants, etc., received	150,000.					(
		2	Check In the foundation is not required to attach Sch. B						
		3	Interest on savings and temporary cash investments						
		4	Dividends and interest from securities	311,090.	31	1,090.			Statement 1
		5a	Gross rents						
		þ	Net rental income or (loss)						
	ē	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 2000 000 000 000	<446,661.	>				
	Revenue	b	assets on line 8a					-	
	Вè	/	Capital gain net income (from Part IV, line 2)			0.			
~~		9	Net short-term capital gain Income modifications						
S		10a	Gross sales less returns						
SCANNED			Less Cost of goods sold						-
وسك			Gross profit or (loss)						
g TT		11	Other income						
		12	Total Add lines 1 through 11	14,429.	31	17090:		0.	
.30		13	Compensation of officers, directors, trustees, etc	0.		₩ <u>~</u> . 10:		0.	0.
~~~ <b>/</b>		14	Other employee salaries and wages		i oor	0.0.20	155		
ලා	es		Pension plans, employee benefits		: OCT	0 5 20	5 12	· · · · ·	
2	nse		Legal fees Stmt 2	3,138.	F THE TOTAL	3,138	CT	0.	0
2015	Expens		Other professional fees Stmt 3	43,000.		3, 130.		0.	0.
			Interest	43,000.		J-,-0-0-0-a		<u> </u>	
	and Administrative	18	Taxes Stmt 4	2,403.		0.		0.	0.
	ist	19	Depreciation and depletion						
	Ē	20	Occupancy		-				
	Ad	21	Travel, conferences, and meetings						
	anc	22	Printing and publications			<del></del>			
	ing	23	Other expenses						
	rat	24	Total operating and administrative					_	
	Operating		expenses. Add lines 13 through 23	48,541.	4	<u>6,138.</u>		0.	
			Contributions, gifts, grants paid	214,925.					214,925.
		26	Total expenses and disbursements. Add lines 24 and 25	263,466.	A.	6,138.		0.	214,925.
-	_	97	Subtract line 26 from line 12:	403,400.	4	0,130.	<del> </del>	<u> </u>	414,943.
			Excess of revenue over expenses and disbursements	<249,037.	>				
			Net investment income (if negative, enter -0-)	1225,057.		4,952.			
			Adjusted net income (if negative, enter -0-)			<u>-, </u>		0.	

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6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

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ANDREWS FAMILY FOUNDATION

214,925.

8

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

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

	n 990-PF (2014) ANDREWS FAMILY FOUNDATION	20-	<u>-0368</u>	<u> 768</u>		Page 4
Pξ	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see ii	nstru	ıctio	าร)
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗓 and enter 1%	1			2,6	50.
	of Part I, line 27b					
c	e All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
	Add lines 1 and 2	3			2,6	
-	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			, _	0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	<del>                                     </del>		2,6	
	Credits/Payments:	13	+		2,0	<del>50.</del>
		1				
	a 2014 estimated tax payments and 2013 overpayment credited to 2014  6a					
	Exempt foreign organizations - tax withheld at source	4				
	: Tax paid with application for extension of time to file (Form 8868)					
	Backup withholding erroneously withheld	4	1			_
	Total credits and payments. Add lines 6a through 6d	7	<del> </del>			0.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	8				<u>53.</u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			2,7	<u>03.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax	11				
Pa	art 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 intervel	ne in			Yes	No
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	on)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publis					
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?			1c		х
	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			-10		41
٠	(1) On the foundation. $\blacktriangleright$ \$ (2) On foundation managers. $\blacktriangleright$ \$ 0					
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	•				
6						
^						77
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		<u> </u>
•	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		<u>_x</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		.,.	4a		<u>X</u>
	olf "Yes," has it filed a tax return on Form 990-T for this year?	Ŋ	I/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		<u> </u>
	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					
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state</li> </ul>	ite law				
	remain in the governing instrument?			6		<u>X</u>
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 II	(V		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	CO					
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			8b	х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call	lendar		<del>_</del>		
	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
<u></u>	Town in Too, ditach a schooling their halfes allo addresses					

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	art VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12	ļ	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	L
	Website address ► n/a	<b></b>		
14	The books are in care of ► HARRY ANDREWS  Telephone no. ► 970 –			
	· · · · · · · · · · · · · · · · · · ·	<u>81615</u>	· .	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	ـــا
	and enter the amount of tax-exempt interest received or accrued during the year	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,	ı	Yes	No
	securities, or other financial account in a foreign country?	16	<u> </u>	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the	i i		
Da	foreign country			<u> </u>
<u> </u>	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<del></del>	V	N1
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	ļ	Yes	No
ıa	During the year did the foundation (either directly or indirectly):  (1) Engage in the sale or exphange or leaving of property with a disqualified passen?			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No. (2) Porrow manay from lead manay to or otherwise extend gradit to (or accept if from)	<b>'</b>		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  Yes X No.			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X 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)?	.		
	(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.)	.		
h	of fany 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)?	. 1ь		
	Organizations relying on a current notice regarding disaster assistance check here	ה <del>ויי</del>		
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		х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		<b>—</b>	
•	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 $\blacktriangleright$	ĺ		
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.) N/A	. <u>2b</u>		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<b></b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		1	
	during the year?	<b>)</b>		
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 ) N/A	. <u>3b</u>		<b></b>
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
þ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	ĺ	1	
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		<u> X</u>
		Form <b>99</b> 6	0-PF	(2014)

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Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	,		es X No	
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire			
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es [X] No	
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section			
4945(d)(4)(A)? (see instructions)		Ye	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f			
the prevention of cruelty to children or animals?			es 🗶 No	i i
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	ın Regulatıons		
section 53.4945 or in a current notice regarding disaster assistance (see instru	uctions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check l	nere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption to	from the tax because it mainta	ined		
expenditure responsibility for the grant?	N	I/A 🔲 Ye	es No	
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).			
${\bf 6a}$ Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Ye	s X No	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		<u>[_(</u>	6b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax :	shelter transaction?	Ye	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7Ь
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	y	
Paid Employees, and Contractors				
List all officers, directors, trustees, foundation managers and their	T	14.00	[ <b>(-15</b>	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	to position	enter -0-)	compensation	allowances
HARRY C. ANDREWS	DIRECTOR			
P.O. BOX 6637	]			
NOWMASS VILLAGE, CO 81615	1.00	0.	0.	0.
KAREN E. ANDREWS	DIRECTOR			
P.O. BOX 6637				
NOWMASS VILLAGE, CO 81615	1.00	0.	0.	0.
	]			
	1			_
	1			
! Compensation of five highest-paid employees (other than those in	<del>,</del>	enter "NONE."	(d) Cooking and	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	devoted to position	(O) Compendation	compensation	allowances
NONE				
	1			
<u> </u>				
	1			_
			_	
		<u> </u>		
otal number of other employees paid over \$50,000	·· <del>····</del>			0

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NO	DNE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	, , , , , , , , , , , , , , , , , , , ,	
	·	
	<del></del>	
	<u> </u>	
	,	
Total number of others receiving over \$50,000 for professional services	. ,,,	<b>&gt;</b>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical i	oformation such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produced		Expenses
1N/A		
2		
3		
4		<del></del>
4		
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
1 N/A		
2		
All above average valeted investments. Can understand		
All other program-related investments. See instructions.  3		
· · · · · · · · · · · · · · · · · · ·		
Total. Add lines 1 through 3	<b>•</b>	0

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 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 3,428,527. 1a b Average of monthly cash balances 429,873. 1b c Fair market value of all other assets 10 3,858,400. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e 0. Acquisition indebtedness applicable to line 1 assets 3,858,400. Subtract line 2 from line 1d 3 57.876. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 3,800,524. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 ĸ 190,026. 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.) 190,026. Minimum investment return from Part X, line 6 2,650. 2a Tax on investment income for 2014 from Part VI, line 5 Income tax for 2014. (This does not include the tax from Part VI.) 2b Add lines 2a and 2b 2c 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 5 Add lines 3 and 4 5 76. 6 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 187 376. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 214,925. 1a b Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a **b** Cash distribution test (attach the required schedule) 3b 214,925. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 2,650. income. Enter 1% of Part I, line 27b 5 Adjusted qualifying distributions. Subtract line 5 from line 4 6 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

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4940(e) reduction of tax in those years.

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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				187,376.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			143,346.	
<b>b</b> Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2014:				
<b>a</b> From 2009				
<b>b</b> From 2010				
c From 2011				
<b>d</b> From 2012				
e From 2013				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: ► \$ 214,925.				
a Applied to 2013, but not more than line 2a			143,346.	
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				71,579.
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>b</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				115,797.
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	<del></del>			
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:		-		<del></del>
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013				
e Excess from 2014				
423581				

Part XIV Private Operating F  1 a If the foundation has received a ruling of	or determination letter tha	<del> </del>	I-A, question 9)	N/A	
1 a if the foundation has received a ruling (		t it io a privata aparatina			<del></del>
foundation, and the ruling is effective for		-	▶ ∟		
b Check box to indicate whether the foun		ng foundation described T		4942(j)(3) or 494	<u>2(j)(5)</u>
2 a Enter the lesser of the adjusted net	Tax year	41,0040	Prior 3 years	(1) 0044	
income from Part I or the minimum	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed		<u> </u>			
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed			:		
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	ormation (Comple the year-see inst	ete this part only ructions.)	if the foundation	had \$5,000 or mo	re in assets
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wi year (but only if they have contributed in the contributed in the contributed in th	ho have contributed more		tributions received by the	foundation before the close	e of any tax
HARRY C. ANDREWS					
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large porti	on of the ownership of a pai	tnership or
None					
2 Information Regarding Contribut	tion, Grant, Gift, Loan	, Scholarship, etc., P	rograms:		
Check here X if the foundation the foundation makes gifts, grants, etc.	only makes contributions	to preselected charitable	organizations and does i	not accept unsolicited reque omplete items 2a, b, c, and e	sts for funds. If d.
a The name, address, and telephone num	nber or e-mail address of	the person to whom app	ications should be addre	ssed:	
<b>b</b> The form in which applications should	be submitted and informa	tion and materials they s	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	ds, such as by geographic	al areas, charitable fields	, kinds of institutions, or	other factors;	

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year Thacher School public Charity General Purpose no relationship 1,000. Aspen Humane Society no relationship public Charity General Purpose 500. Aspen Animal Shelter NO relationship Public Charity General Purpose 2,000. Snowmass Chapel NO relationship Public Charity General Purpose 10,000. Aspen Music Festival NO relationship Public Charity General Purpose 500 See continuation sheet(s) Total ▶ 3a 214,925. b Approved for future payment None Total

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

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
<b>9</b> . 1.1.	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion	Amount	function income
a					
b					
C					
d					
e					
f					
g Fees and contracts from government agencies		<b></b> :			
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	311,090.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property		.,,		<del></del>	
6 Net rental income or (loss) from personal					
property					
7 Other investment income			19		
8 Gain or (loss) from sales of assets other			4.0	446 664	
than inventory			18	<446,661.	>
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					····
b	<del>-</del>				
c					
e		0.		<135,571.	> 0.
13 Total. Add line 12, columns (b), (d), and (e)	<u></u>		1		<135,571.
(See worksheet in line 13 instructions to verify calculations.)				· · · · · · · · · · · · · · · · · · ·	<u> </u>
	4b - A			. D	
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which incom	ne is reported	ın column (e) of Part XVI-A	contrib	outed importantly to the accord	nplishment of
the foundation's exempt purposes (other than b					
NOT APPLICABLE					
	_				
		-			<u> </u>
		-			
423621				<del></del>	- 000 55
423021 11-24-14					Form <b>990-PF</b> (2014)

Part XVII	Information Regarding Exempt Organizations	ransfers To a	and Transactions a	and Relationshi	ips With Nonch	aritable	Э	
the Code	organization directly or indirectly engage i e (other than section 501(c)(3) organization	ons) or in section 52	?7, relating to political organ		1 501(c) of		Yes	No
a Transier (1) Cas	s from the reporting foundation to a nonc h	naritable exempt or	ganization of:			12/1)		x
` '	er assets					1a(1) 1a(2)		X
· ·	ansactions;					10(2)		1
(1) Sale	es of assets to a noncharitable exempt org	ganization				1b(1)		х
(2) Pure	chases of assets from a noncharitable exe	empt organization				1b(2)		Х
(3) Ren	tal of facilities, equipment, or other assets	3				1b(3)		Х
(4) Reir	mbursement arrangements					1b(4)		X
(5) Loa	ns or loan guarantees					1b(5)		Х
(6) Perf	formance of services or membership or fu	ındraising solicitatio	ns			1b(6)		X
-	of facilities, equipment, mailing lists, other					10		X_
or servic	swer to any of the above is "Yes," completes ses given by the reporting foundation. If the (d) the value of the goods, other assets, or	e foundation receiv					sets,	
a) Line no	·		exempt organization	(d) Description of	transfers, transactions, ar	nd sharing ar	rangeme	ents
		N/A						
		· · · · · · · · · · · · · · · · · · ·				-		
	· · · <del>-</del> · ·	<del></del> -	· · · · ·	<del>-  </del>				
					•			
				-	-			
			· · · · · · · · · · · · · · · · · · ·					
					-			
ın sectio	undation directly or indirectly affiliated will in 501(c) of the Code (other than section complete the following schedule.		ion 527?		A December of relation	Yes	ΙX	No
<del> </del>	(a) Name of organization		(b) Type of organization	(C)	Description of relation	nsnip		
	N/A			-				
	<del></del>	<u>.                                    </u>		<del> </del>				
Sign Here	er penalties of perjury, I declare that I have exami belief, it is true, correct and complete Declaration				as any knowledge	May the IRS eturn with the shown below	e prepar (see ins	er
	Print/Type preparer's name	Preparer's s			heck If PTII	V		
		12	$\mathcal{D}$		elf- employed			
Paid		PA C	R	10/1/15 3	P	00156	760	
Preparer Use Only	Firm's name ► REESE HEN		ANY, INC.		Firm's EIN ► 84-			
	Firm's address ► 400 EAST	MAIN STR	EET, SUITE 2					
	ASPEN, C	0 81611				925		
						Form <b>99</b> 0	)-PF	(2014)

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

Name of the organization

**Employer identification number** 

AN	DREWS FAMILY FOUNDATION	20-0368768
Organization type (check o	ne).	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	
	527 political organization	
Form 990-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	
· -	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ile. See instructions
General Rule		
	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	·
Special Rules		
sections 509(a)(1) any one contributo	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
year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ations of more than \$1,000 exclusively for religious, charitable, scientific, literary, or eductruelty to children or animals. Complete Parts I, II, and III	· ·
year, contributions is checked, enter t purpose. Do not co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from secularized for religious, charitable, etc., purposes, but no such contributions totaled makere the total contributions that were received during the year for an exclusively religious complete any of the parts unless the <b>General Rule</b> applies to this organization because re, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000 If this box s, charitable, etc ,
but it must answer "No" on	hat is not covered by the General Rule and/or the Special Rules does not file Schedule B Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Forther the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	•

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Employer identification number

# ANDREWS FAMILY FOUNDATION

20-0368768

<u> </u>	TO TIME TO CANDITION		_ 0300700
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	HARRY AND KAREN ANDREWS P.O. BOX 6637 SNOWMASS VILLAGE, CO 81615	\$\$	Person X Payroll
(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 Oncash (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Oncash Occash (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll (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

## ANDREWS FAMILY FOUNDATION

20-0368768

Part II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<b>\$</b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Independence Pass Foundation  NO relationship  Fublic Charity  Seneral Purpose  Mountain Rescue Aspen  NO relationship  Fublic Charity  Seneral Purpose	3 Grants and Contributions Paid During the	Year (Continuation)			
Spellbinders  no relationship  public Charity Seneral Purpose  1.  Rearing Fork Volunteers  No relationship  Public Charity Seneral Purpose  1.  Rearing Fork Volunteers  No relationship  Public Charity Seneral Purpose  Housian Rescue Aspen  No relationship  Public Charity Seneral Purpose  No relationship  Public Charity Seneral Purpose  No relationship  Public Charity Seneral Purpose  Public Charity Seneral Purpose  No relationship  Public Charity Seneral Purpose  Public Charity Seneral Purpose  No relationship  Public Charity Seneral Purpose  The Samba Pund  No relationship  Public Charity Seneral Purpose  The Samba Pund  No relationship  Public Charity Seneral Purpose		show any relationship to		Purpose of grant or contribution	Amount
Independence Pass Foundation  NO relationship  Public Charity  Seneral Purpose  Purpose  Public Charity  Seneral Purpose  NO relationship  Public Charity  Seneral Purpose  Purpose  NO relationship  Public Charity  Seneral Purpose  Purpose  NO relationship  Public Charity  Seneral Purpose	Maille and address (notife of pushless)	or substantial contributor			
No relationship Public Charity Seneral Purpose  NO relationship Fublic Charity Seneral Purpose  Sigma Alpha Epsilon NO relationship Fublic Charity Seneral Purpose  The Samba Fund NO relationship Fublic Charity Seneral Purpose  Snowmass Faramedic Scholarship NO relationship Fublic Charity Seneral Purpose	Spellbinders	no relationship	public Charity	General Purpose	1,000
NO relationship Public Charity General Purpose  Sigma Alpha Epsilon NO relationship Public Charity General Purpose  The Samba Fund NO relationship Public Charity General Purpose  NO relationship Public Charity General Purpose  NO relationship Public Charity General Purpose	Independence Pass Foundation	NO relationship	Public Charity	General Purpose	500
NO relationship Public Charity Seneral Purpose  Feed my Sheep- New Castle NO relationship Public Charity Seneral Purpose  Sigma Alpha Epsilon NO relationship Public Charity Seneral Purpose  The Samba Fund NO relationship Public Charity Seneral Purpose  Snowmass Paramedic Scholarship NO relationship Public Charity Seneral Purpose	Roaring Fork Volunteers	NO relationship	Public Charity	General Purpose	500
Feed my Sheep- New Castle  NO relationship  Public Charity General Purpose  Sigma Alpha Epsilon  NO relationship  Public Charity General Purpose  Phe Samba Fund  NO relationship  Public Charity General Purpose  Snowmass Paramedic Scholarship  NO relationship  Public Charity General Purpose	Mountain Rescue Aspen	NO relationship	Public Charity	General Purpose	500
Sigma Alpha Epsilon  NO relationship  Public Charity General Purpose  The Samba Fund  NO relationship  Public Charity General Purpose  Snowmass Paramedic Scholarship  NO relationship  Public Charity General Purpose	ACES	NO relationship	Public Charity	General Purpose	500
The Samba Fund  NO relationship  Public Charity General Purpose  Snowmass Paramedic Scholarship  NO relationship  Public Charity General Purpose	Feed my Sheep- New Castle	NO relationship	Public Charity	General Purpose	500
Snowmass Paramedic Scholarship NO relationship Public Charity General Purpose	Sigma Alpha Epsilon	NO relationship	Public Charity	General Purpose	500
	The Samba Fund	NO relationship	Public Charity	General Purpose	500
	Snowmass Paramedic Scholarship	NO relationship	Public Charity	General Purpose	500
	AVSC	NO relationship	Public Charity	General Purpose	500

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y	<del>,                                      </del>	1		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
Hospice of the Valley	NO relationship	Public Charity	General Purpose	500
P.S.S. Wildlife Foundation	NO relationship	Public Charity	General Purpose	1,000
Musk Ox Development Corp	NO relationship	Public Charity	General Purpose	2,000
Heldmen King Scholarship Aspen Board of Realtors	NO relationship	Public Charity	General Purpose	1,000
Mayo Clinic	NO relationship	Public Charity	General Purpose	36,000
AARP Foundation	NO relationship	Public Charity	General Purpose	100
Snowmass Chapel	NO relationship	Public Charity	General Purpose	325
Snowmass Chapel	NO relationship	Public Charity	General Purpose	3,000
P.S.S. Wildlife Foundation	NO relationship	Public Charity	General Purpose	1,000
Thacher School	NO relationship	Public Charity	General Purpose	50,000

Port VV Supplementary Informati	S FAMILY FOUNDAY	LTON	20-0	368768
Part XV Supplementary Informati 3 Grants and Contributions Paid During the		·		T
Recipient	If recipient is an individual,	1		
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	Or Substantial Contributor	теориенс		
Latin School	NO relationship	Public Charity	General Purpose	3,000,
International Wellness Center	NO relationship	Public Charity	General Purpose	1,000,
MN Arboretum	NO relationship	Public Charity	General Purpose	500,
MN Zoo	NO relationship	Public Charity	General Purpose	1,000,
Winter Sports Clinic	NO relationship	Public Charity	General Purpose	2,000,
Mayo Clinic- Dr. Patel	NO relationship	Public Charity	General Purpose	50,000.
Thacher School	NO relationship	Public Charity	General Purpose	5,000,
Spellbinders	NO relationship	Public Charity	General Purpose	1,000,
Duke University	NO relationship	Public Charity	General Purpose	5,000,
Musk Ox Development Corp	NO relationship	Public Charity	General Purpose	1,000,
Total from continuation sheets				

Part XV Supplementary Informati	S FAMILY FOUNDAT	TION	20-03	68768
3 Grants and Contributions Paid During th		<del></del>		
Recipient	If recipient is an individual,			-
	show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	/undunt
	_			
ALS	NO relationship	Public Charity	General Purpose	
		<del> </del>		1,00
Hospice of the Valley	NO relationship	Public Charity	General Purpose	
				1,00
Roaring Fork Conservancy	NO relationship	Public Charity	General Purpose	
				1,00
P.S.S. Wildlife Foundation	NO relationship	Public Charity	General Purpose	
	No relationship	abile charley	Scherar rarpose	1,00
			_	
Spellbusters	NO relationship	Public Charity	General Purpose	2,000
				2,000
Chandler School	NO relationship	Public Charity	General Purpose	
				25,000
				_
<del></del>				
Total from continuation sheets		<del></del>	I	ļ

Form 990-PF	Dividend	s and Inter	est from Secur	ities St	atement 1
Source	Gross Amount	Capital Gains Dividend	Revenue	(b) Net Invest- ment Income	(c) Adjusted Net Income
CHARLES SCHWAB	320,602	9,51	311,090.	311,090.	311,090.
To Part I, line 4	320,602	9,51	311,090.	311,090.	311,090.
Form 990-PF		Accounti	ng Fees	St	catement 2
Description		(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
ACCOUNTING	_	3,138.	3,138.	0.	0.
To Form 990-PF, Pg	1, ln 16b =	3,138.	3,138.	0.	0.
Form 990-PF	0	ther Profes	sional Fees	St	catement 3
Description		(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Investment Mgmt Fee	s s	43,000.	43,000.	0.	0.
To Form 990-PF, Pg	1, ln 16c =	43,000.	43,000.	0.	0.
Form 990-PF		Tax	es	St	catement 4
Description		(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Description					
2014 990-pf tax		2,403.	0.	0.	0.

Form 990-PF Other	Investments		Statement 5
Description	Valuation Method	Book Value	Fair Market Value
CHARLES SCHWAB	FMV	3,939,779.	3,456,414.
Total to Form 990-PF, Part II, line 3	13	3,939,779.	3,456,414.