

## 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 May 16, 2016 Return of Private Foundation

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

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

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

For calendar year 2014 or tax year beginning JUL	1, 2014	, and ending	JUN 30, 2015	
Name of foundation			A Employer identification	number
			54 0440500	
Tucson Osteopathic Medical  Number and street (or P O box number if mail is not delivered to street		Room/suite	74-2449503	
3182 N. Swan Road	address)	Hoom/suite	B Telephone number 520-299-45	15
City or town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	
Tucson, AZ 85712	ostai codo		i exemption application is p	ending, check here
G Check all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	, check here
Final return	Amended return			
Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test, mputation
H Check type of organization: X Section 501(c)(3) ex			E If private foundation sta	
	Other taxable private founda		under section 507(b)(1)	(A), check here
I Fair market value of all assets at end of year J Accounting	-	X Accrual	F If the foundation is in a	
(from Part II, col. (c), line 16)	her (specify)	nasis )	under section 507(b)(1)	(B), check here
Part I Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received	24,800.			
2 Check X If the foundation is not required to attach Sch. B				
Interest on savings and temporary cash investments	20,196.	20,196.		Statement 1
4 Dividends and interest from securities 52 Gross rents	120,562.	120,562.	120,562.	Statement 2
5a Gross rents				
D Net rental income or (loss)	6 001			
6a Net gain or (loss) from sale of assets not on line 10  B Gross sales price for all 1,976,000  assets on line 6a 1,976,000	6,021.			
b Gross sales price for all 1,976,000.  Capital gain net income (from Part IV, line 2)	}	6,021.		
8 Net short-term capital gain	<del></del>	0,021.	0.	<del> </del>
9 Income modifications				
Gross sales less returns and allowances				
b Less Cost of goods sold			·	<u> </u>
c Gross profit or (loss)			055 550	<u> </u>
11 Other income	275,558.	0. 146,779.		Statement 3
12 Total. Add lines 1 through 11  13 Compensation of officers, directors, trustees, etc	447,137. 91,164.	1,562.	416,316. 32,852.	56,751.
<ul> <li>13 Compensation of officers, directors, trustees, etc</li> <li>14 Other employee salaries and wages</li> </ul>	180,699.	3,096.	65,100.	
15 Pension plans, employee benefits	200,0331		05/2003	223/3021
in l				
5 b Accounting fees Stmt 4	54,929.	941.	19,790.	34,198.
c Other professional ree RECEIVED	22,853.	130.	2,740.	19,983.
§ 17 Interest RECEIVED				
18 Taxes Stmt 6 7 19 Depreciation are expletion AY 1 8 2016 C	33,370.	521.	13,902.	18,947.
19 Depreciation an Expletion AY 1 8 2016	9,101.	413.	8,688.	<del></del>
20 Occupancy	18,355.	78.	1,634.	16,643.
17 Interest 18 Taxes 19 Depreciation and epletion AY 1 8 2016 20 Occupancy 21 Travel, conferences, and gentines N, UT 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23	13,478.	7.	157.	13,314.
22 Printing and publications 22 Printing and publications 23 Other expenses 24 Stmt 7	347,393.	2,448.	51,496.	293,449.
to 24 Total operating and administrative				
expenses. Add lines 13 through 23	771,342.	9,196.	196,359.	565,787.
25 Contributions, girts, grants paid	37,000.			<u>37,000.</u>
26 Total expenses and disbursements.	000 000	0 100	100 000	600 505
Add lines 24 and 25	808,342.	9,196.	196,359.	602,787.
27 Subtract line 26 from line 12:	261 205	_		
Excess of revenue over expenses and disbursements     Net investment income (if negative, enter -0-)	<361,205.	137,583.	<u> </u>	<del></del>
C Adjusted net income (if negative, enter -0-)	<del> </del>		219,957.	

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

_		90-PF (2014) Tucson Osteopathic Medic	cal Foundation  Beginning of year		1-2449503	Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	id of year (c) Fair Market	Value
=	Γ.	<del></del>		<del></del>	<del></del>	
	1	Cash - non-interest-bearing	275,894.	322,792	322	,792.
	2	Savings and temporary cash investments	3,158,065.	3,029,664	3,029	,664.
	3	Accounts receivable ►			j	
		Less: allowance for doubtful accounts				
	4	Pledges receivable ►				
		Less: allowance for doubtful accounts ▶		<del></del>	<del>- </del>	
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other	}		Į	
		disqualified persons		<del></del>		
	7	Other notes and loans receivable			j	
		Less; allowance for doubtful accounts		<del></del>		
əts	8	Inventories for sale or use	38,089.	32,941		<u>,941.</u>
Assets	9	Prepaid expenses and deferred charges	10,366.	10,360	). 10	,360.
•	i	Investments - U.S. and state government obligations		<del></del>	<del></del>	
	l	Investments - corporate stock Stmt 9	5,715,849.	5,678,181	L. 5,678	<u>,181.</u>
	ĺ	Investments - corporate bonds			<del></del>	
	11	Investments - land, buildings, and equipment basis				
	]	Less accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other				
	14	Land, buildings, and equipment; basis ► 1,583,455.	4 456 505	4 450 444		
	ľ	Less accumulated depreciation   431,044.	1,176,525.	1,152,411 4,437	1,152 7. 4	,411.
	15	Other assets (describe Interest Receivable)	5,880.	4,43	4	<u>,437.</u>
	16	Total assets (to be completed by all filers - see the	10 200 660	10 000 50	10 000	<b>50</b>
		instructions. Also, see page 1, item I)		10,230,786		,786.
	17	Accounts payable and accrued expenses	30,966.	35,965	2.	
	18	Grants payable	<del></del>			
Liabilities	19	Deferred revenue				
Ē	20	Loans from officers, directors, trustees, and other disqualified persons				
E E	21	Mortgages and other notes payable				
	22	Other liabilities (describe			-	
	22	Total liabilities (add lines 17 through 22)	30,966.	35,965	5.	
	25	Foundations that follow SFAS 117, check here	30,7300.		<u></u>	
		and complete lines 24 through 26 and lines 30 and 31.	l.			
es	24	Unrestricted	10,349,702.	10,194,821		
auc	25,	Temporarily restricted			Ť	
Bal	26	Permanently restricted			7	
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here				
F		and complete lines 27 through 31.				
ō	27	Capital stock, trust principal, or current funds	Ĭ			
šets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			7	
Ass	29	Retained earnings, accumulated income, endowment, or other funds			7	
let	30	Total net assets or fund balances	10,349,702.	10,194,821		
	31	Total liabilities and net assets/fund balances	10,380,668.	10,230,786	5.	
	art	Analysis of Changes in Net Assets or Fund Ba	alances			
				<del></del>	<del></del>	
		net assets or fund balances at beginning of year - Part II, column (a), line 3	30	}	10 240	700
		st agree with end-of-year figure reported on prior year's return)		}-	1 10,349	
		r amount from Part I, line 27a	0 C!	<u></u>		, <u>205.</u> >
		r increases not included in line 2 (itemize)	<u> </u>	tement 8		,324.
		lines 1, 2, and 3		-	4 10,194	
		eases not included in line 2 (itemize)	lump (h) line 20		5 10,194	0.
0	rutal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	iurini (D), liile 30		6   10,194 Form <b>990-l</b>	
400					101111 333-1	· (2014)

423511 11-24-14

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.

Form **990-PF** (2014)

604,479.

602,787.

See the Part VI instructions.

7 Add lines 5 and 6

7

Tale Exempt operating foundations described in section 4940(cf)(2), check here	_	n 990-PF (2014) Tucson Osteopathic Medical Foundation 74-244 art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	9503	ictio	Page 4
Domestic fundations that meat the section 4940(a) requirements in Part V, chick here		<del>▀▀▀▀</del> ▘▀▀▝▀▝▀▀▀▀▀▀▀▀▀▀▀▀▀▀▀▀▀▀▀▀▀▀▀▀▀▀▀▀			
b Domestic foundations that meet the section 4940(a) requirements in Part V, check here  □ and enter 1% of Part I, line 27b c Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, cock (b). 2 Tax under section 51f (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 3 2, 752. 4 Subbite 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, It zar or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3, It zar or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3, It zar or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3, It zar or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3, It zar or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3, It zar or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3, It zar or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3, It zar or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3, It zar or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3, It zar or less, enter -0- 5 Tax based on investment line 5 and 5 line 5 line 4 from line 5, It zar or less, enter -0- 5 Tax based on investment line 5 in zar or line 6 from 8868) 6 Tax based on investment line 2 from line 6 from 8868) 6 Tax based on investment line 2 from line 6 from 8868) 7 Tax based on line 6 from 8868) 8 Tax due. If the botal of lines 5 and 8 is more than line 7, enter amount of line 10 to line 5 and 8 is more than 1, enter line 2 from 8868) 9 Tax due. If the botal of lines 5 and 8 is more than 1, enter line 2 from 8868) 1 Tax based on lines 5 and 8 is more than 1, enter line 2 from 8868) 1 Tax based on lines 5 and 8 is more than 1, enter lines 1 from 92 fro	16	· · · · · · · · · · · · · · · · · · ·			
of Part I, line 27b  All other domestoc toundstons enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).  Tax under saction 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  A doff lines 1 and 2  Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  Condish-Pymones:  a 2014 estimated tax payments and 2016 overpayment crodided to 2014  Exempt foreign organizations - tax withheld at source  Tax pad with application for extension of time to the (Form 8968)  Exempt foreign organizations - tax withheld at source  To relat excitic and payments. Add lines so through 86  Extension and payments. Add lines so through 86  Total excitic and payments. Add lines so through 86  Extension and payments. Add lines so through 86  Total excitic to total lines and 8 is more than line 7, enter amount owed  To vice payment. If line 7 is more than the total of lines as so send 9, enter the amount owed  To vice payment. If line 7 is more than the total of lines as so fail, enter the amount overpaid  Total excitic accordance than \$100 during the case interest to amount overpaid  Total excitic accordance than \$100 during the year (either directly or indirectly) for polidical lipid purposes (see instructions for the definition)?  If the answers it "see" to 1 is or 16, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in comnection with the activities.  To Did the foundation file Form 1120-POL for this year?  If the answer is "see" to 1 is or 16, attach a detailed description of the activities and copies of any materials published or distributed by the foundation magnetic pay paid by the foundation of the activities.  To Did the foundation have wireleted business gives in connection of the activities.  He has the foundation engaged in any activities that we	ь			2.7	52.
c All other domestic foundations entire 2% of the 27b. Exempt foreign organizations entire 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 3 2,752. 4 Subbitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter-0-)  5 Tax based on investment income. Subtract time 4 from line 3, if zero or less, enter-0-  6 Credits/Payments: 2 2014 estimented tax payments and 2013 oversyment credited to 2014  5 Exempt foreign organizations - tax withheld at source  6 Tax paid with application for extension of time to file (Form 8868)  6 Extension and payments. Add lines 5 attrough 6d  7 Totals credits and payments. Add lines 6 attrough 6d  8 Extension and payments. Add lines 6 attrough 6d  9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  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 owed  11 Enter the amount of lines 10 tone Credited to 2014 settinated tax. Per 1, 848. Included 11 1, 848.  12 Enter any pending for undersymborated 11 1, 848. Included 11 1, 848.  13 Enter any pending for undersymborated 11 1, 848. Included 11 1, 848.  14 Enter the amount of line 10 tone Credited to 2014 settinated tax. Pending for undersymborated 11 1, 848.  15 Enter any pending the super (either directly or inderectly) for potitical purposes (see instructions for the definition)?  15 If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or destributed by the foundation in Commencion with the activities.  16 Extension the form 112-Pol. to this yeas?  17 On the foundation rengaged in any activities 11 has the not previously been reported to the IRS?  18 'Yes,' has it field a tax return on Form 990-T for this yeas?  19 'Yes, "attach a defaulted dissense; pros is none of \$5,000 or more during the yea	•			<u>- , , </u>	<u> </u>
2 Tax under section S11 (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. Lizer or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. Lizer or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. Lizer or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. Lizer or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. Lizer or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. Lizer or less, enter -0- 6 Backup withholding erroriecusly withheld 7 Total credits and payments. Add lines 5e through 6d 8 Enter any penalty for underpayment of estimated tax. Check here in 1 from 220 is attached 9 Tax due. If the total of lines 5 and 6 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 6, enter the amount owed 10 Overpayment. If line 7 is more than the total of lines 5 settinated tax. It is fine the amount of line 10 to the Cededate 2 202 Settinated tax. It is fine the amount of line 10 to the Cededate 2 202 Settinated tax. It is fine the amount of line 10 to the Cededate 2 202 Settinated tax. It is fine the amount of line 10 to the Cededate 2 202 Settinated tax. It is fine the amount of line 10 to the Cededate 2 202 Settinated tax. It is fine the amount of line 10 to the Cededate 2 202 Settinated tax. It is settinated 1 to 10	c	'			
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4 Subtile 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-\ 5 Crodins7eymomis: a 2014 estimated tax payments and 2013 overpayment credited to 2014 b Exempt foregon organizations - tax withheld at source c Tax paid with applications - tax withheld at source c Tax paid with applications - tax withheld at source c Tax paid with applications - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding errorecusty withheld 7 Total credits and payments. Add lines 6 through 6d 8 Enter any peanalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total clines 5 and 8 e. more than line 7, enter amount over 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 ☐ 1, 848. Retunded ☐ 1, 848.  Part VII-A   Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any rational, state, or local lepislation or did it participate or intervene in any political ampagn? 1b Did it spend more than \$100 during the year (either deventy or indirectly) for political purposes (see instructions for the definition)? 1c If the answer is "Yes" to Ta or 1b, attach a detailed description of the activities and complete or distributed by the foundation in connection with the activities. 1 the foundation have unrelated business gross and previously been reported to the IRS? 1 h "Yes," attach a detailed description of the activities. 2 that the foundation have unrelated business gross income of \$1,000 or more during the year? 3 h If "Yes," attach the statement required by General Instruction 7. 4 A the the requirements of section 508(e) (relating to sections 4941 through 4945) satisfed either:  • by state legislation that effectively amends the governing instrument so tha	3			2,7	52.
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 b Exempt foreign organizations - tax withheld at source c Tax paid with application for exension of time to lite (From 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6 at through 6d 6 Enter any penalty for underpsyment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax dive. If the Istall of lines 5 and 8 is more than line 7, enter amount of line 10 Overpayment. If line 7 is more than the lotal of them 5s and 8, enter the amount overpaid 11 Enter the amount of line 10 to be; Credited to 2015 setimated tax. 11 Enter the amount of line 10 to be; Credited to 2015 setimated tax. 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 15 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 16 If the answer is "Yes" to 1 or 1b, attach a detailed description of the activities. 17 On the foundation or connection with the activities. 2 Did the foundation file Form 1120-POL for this year? 3 Enter the rembursement (if any) paid by the foundation or connection with the activities. 3 Has the foundation made any changes, not previously reported to the IRS? 1/* "Yes," attach a detailed description of the activities. 4 Did the foundation have unrelated business gross consciously or more during the year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?  7 Wes, "attach the statement required by General Instruction." 5 Are the requirements of section 50(6) (relating to sections 4941 through 4945) satisfied either: 6 Pay fanguage an the governing instrument. 7 Sy Sanguage an the governing instrument. 8 Enter the states to which the foundation reports or with which i	4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
a 2014 estimated tax payments and 2013 overpayment credited to 2014 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of their to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 6 Enter any penalty for underpayment of estimated tax. Check here I of 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 30 to bet Credited to 2015 estimated tax.  12 Part VII-A   Statements Regarding Activities 13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 15 Did dispend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 16 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 Committed Political P	5			2,7	52.
b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6 at through 6d 8 Enter any penalty for undergrayment of estimated tax. Check here if form 2220 is attached 9 Tax due. If the total oil fines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of times 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credite to 2015 setimated tax the 1 1, 848. Refunded 11 1 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 inference in any political campaign? 1b Did it spend more than 5100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b 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.  c Did the foundation file Form 1120-POL for this year?  1c Enter the reminute (famy) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation made any changes, not previously been reported to the IRS?  If 'Yes,' attach a detailed description of the activities.  3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaxis, or other small instruction of the activities.  4 Did the foundation have at least \$5,000 in assets at any time during the year?  If 'Yes,' attach a detailed description of the activities.  8 Has the foundation have any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaxis, or other small instruction of the activities.  8 Has the foundation that effectively amends the governing instruction of the chan	6	Credits/Payments:			
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3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?  b If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "Yes," attach the statement required by General Instruction T.  Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:  ■ By language in the governing instrument, or  ■ By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?  Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV  8a Enter the states to which the foundation reports or with which it is registered (see instructions)  AZ  b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation  9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV	2		2_		<u>X</u>
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?  b If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "Yes," attach the statement required by General Instruction T.  6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:  By language in the governing instrument, or  By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?  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)  AZ  b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation  9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV  9 X			1	!	
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	J		9	x	}
	10				X

Form 990-PF (2014) Tucson Osteopathic Medic	al Foundation	<u> </u>	<u>74-24495</u>	03 Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	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	1 4945(e))?	Y	es 🗓 No	+ (
(2) Influence the outcome of any specific public election (see section 4955); of	r to carry on, directly or indire	ectly,		
any voter registration drive?			es X No	1 1
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es X No	1 1
(4) Provide a grant to an organization other than a charitable, etc., organizatio		. —		
4945(d)(4)(A)? (see instructions)		Y	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			1 1
the prevention of cruelty to children or animals?			es X No	1 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described			1 1
section 53.4945 or in a current notice regarding disaster assistance (see instru		•	N/A	5ь ]
Organizations relying on a current notice regarding disaster assistance check h			<b>▶</b> □	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ined	,	
expenditure responsibility for the grant?		. —	es 🔲 No	1 1
If "Yes," attach the statement required by Regulations section 53.494		.,		]
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	pay promiums on		es X No	1 1
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	erconal benefit contract?	''	- i	Sb X
If "Yes" to 6b, file Form 8870.	ersonal benefit contract.		<u> </u>	21
7a At any time during the tax year, was the foundation a party to a prohibited tax s	holter transaction?		es X No	- 1
		L !!		7b
b If "Yes," did the foundation receive any proceeds or have any net income attributed Part VIII Information About Officers, Directors, Trust		nagers Highly		<u> </u>
Paid Employees, and Contractors	ces, i dulluation Ma	magers, riigin	y	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address	hours per week devoted	(If not paid,	i and deletted i	(e) Expense account, other allowances
	to position	enter -0-)	compensation	allowatices
		ľ	i	
See Statement 10		91,914.	900.	0.
See Scatement 10	<del> </del>	91,914.	300.	
			ļ	
		<del> </del>		
		<del> </del>		
		ļ		
	1. ded - 1: - 4) 16	and a UNIONE II		
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter "NONE."	(d) Contributions to	(a) Eynansa
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	eimployee benefit plans and deferred	(e) Expense account, other
	devoted to position		compensation	allowances
- <del></del>		perations		
3182 N. Swan Road, Tucson, AZ 85712	40.00	59,215.	920.	<u> </u>
	Program & Mee			_
3182 N. Swan Road, Tucson, AZ 85712	40.00	50,066.	764.	<u> </u>
		1		
			]	
			(	
		ļ	<u> </u>	
Total number of other employees paid over \$50,000			<b></b>	0
			Form	<b>990-PF</b> (2014)

423551 11-24-14

T120-001

Total. Add lines 1 through 3

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: 5,697,015. Average monthly fair market value of securities 1a 3,393,208. Average of monthly cash balances 1b 1,200,149. c Fair market value of all other assets 1c 10,290,372. 1d d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 10,290,372. 3 Subtract line 2 from line 1d 4 154,356. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 10,136,016. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 506,801 6 Minimum investment return. Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here \rightarrow \mathbb{X} and do not complete this part.) 1 Minimum investment return from Part X, line 6 Tax on investment income for 2014 from Part VI, line 5 2a Income tax for 2014. (This does not include the tax from Part VI.) Add lines 2a and 2b 2c C Distributable amount before adjustments. Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions 5 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 602,787. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a Program-related investments - total from Part IX-B 16 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: 3 Suitability test (prior IRS approval required) 3a 3b Cash distribution test (attach the required schedule) 602,787. 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 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

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Form 990-PF (2014)

Part X

4940(e) reduction of tax in those years.

•	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2013	2013	2014
Distributable amount for 2014 from Part XI, line 7				
Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only		]		
b Total for prior years:				
Excess distributions carryover, if any, to 2014:				
<b>a</b> From 2009		1		
<b>b</b> From 2010		1		
c From 2011		1		
d From 2012				
e From 2013		j		
f Total of lines 3a through e				
Qualifying distributions for 2014 from				
Part XII, line 4: ► \$				
a Applied to 2013, but not more than line 2a		1		
b Applied to undistributed income of prior		<del></del>		
years (Election required - see instructions)				
c Treated as distributions out of corpus		+		
		1		
(Election required - see instructions)	<del></del>	<del></del>		
d Applied to 2014 distributable amount		<del> </del>		
e Remaining amount distributed out of corpus		<del></del>	<del></del>	
Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount				
must be shown in column (a))				
Enter the net total of each column as indicated below:			}	
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5				
<b>b</b> Prior years' undistributed income. Subtract		1		
line 4b from line 2b				
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable	<del>-</del>			
amount - see instructions				
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.				
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must		]		
be distributed in 2015		İ		
Amounts treated as distributions out of				
corpus to satisfy requirements imposed by		1		
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)		1		
· · · · · · · · · · · · · · · · · · ·		<del> </del>		
Excess distributions carryover from 2009				
not applied on line 5 or line 7		<del> </del>	<del></del>	
Excess distributions carryover to 2015.		[		
Subtract lines 7 and 8 from line 6a		<del>- </del>	<del></del>	<del></del>
Analysis of line 9:		1		
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013				
e Excess from 2014 3581 -24-14				Form <b>990-PF</b>

Part XV : Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year N/A Integrative Touch for Kids None Trustee Award 8340 N. Thornydale Road, 100-153 Tucson, AZ 857141 1,000. Pima Council on Aging None N/A Trustee Award 8567 E. Broadway Blvd. 1,000. Tucson, AZ 85710 Therapeutic Ranch For Animals and None N/A Trustee Award 3230 N. Craycroft Rd. 1,000. Tucson AZ 85712 Tu Nidito Children and Family None N/A Trustee Award Services 3922 N. Mountain Avenue 1,000. Tucson AZ 85719 Project Linus, Tucson Chapter None N/A Trustee Award 7981 S. Farmview Place 1 000. Tucson AZ 85756 See continuation sheet(s) ▶ 3a 37,000. Total b Approved for future payment None Total

Form 990-PF (2014)

## **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated I	ousiness income		oy section 512, 513, or 514	(e)
Entor groot amounts among constitute maloated.	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount '	function income
a Medical	Code				176,328.
b Book Sales	- <del>   </del>		<del></del>		
c Other Programs	-				21,297. 37,567.
d Advertising Income	541800				37,307.
	_ 541800				
e	<del>-</del>				
			<del>-    -</del>	<del></del>	
g Fees and contracts from government agencies					<del> </del>
2 Membership dues and assessments	<del>  -</del>			<del></del> +	<del></del>
3 Interest on savings and temporary cash			1 4	20 100	
investments	<del></del>	<del></del>	14	20,196.	
4 Dividends and interest from securities	l		14	120,562.	<del></del>
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	L				
7 Other investment income					
8 Gain or (loss) from sales of assets other			1 1		
than inventory			18	6,021.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a Other Revenue	}		01	40,366.	
b					
c	. i				
d	-   -				
e	_				
12 Subtotal. Add columns (b), (d), and (e)	-		5.	187,145.	235,192.
13 Total. Add line 12, columns (b), (d), and (e)	<del></del>			13	422,337.
(See worksheet in line 13 instructions to verify calculations.	١				

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

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).  egistration fees for admission to medical education seminars ales of medical educational materials eimbursements related to program services						
<u>1b</u>							
<u>1c</u>	Reimbursements related to program services						

Tucson Osteopathic Medical Foundation Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of Yes No the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: X (1) Cash 1a(1) X (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) 1b(2) (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) X (5) Loans or loan guarantees 1b(5) Х 1b(6) (6) Performance of services or membership or fundraising solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization (b) Amount involved (a) Line no (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No Yes in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IBS discuss this and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below (see instr )? Sign Here X Yes Signature of officer or truste Date Check if Print/Type preparer's name Preparer's signature self- employed Paid Carla J. Keegan P00596839 **Preparer** Firm's EIN ► 86-0750225 Firm's name ► Keegan, Linscott & Kenon, **Use Only** 

423622 11-24-14

Firm's address ▶ 3443 N. Campbell Avenue, Suite 115

Tucson, AZ 85719

Form **990-PF** (2014)

Phone no. (520) 884-0176

Part IV Capital Gains and Losses for T	ax on investment income				
(a) List and describe 2-story brick wareh	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
1a Citibank NA CD	P		07/28/14		
b Goldman Sachs Bank	USA CD		P		08/08/14
<u>c Sallie Mae Bank CD</u>	P		08/08/14		
d Bank of China CD	P P		11/10/14 11/10/14		
	e Discover Bank CD				
Merrick Bank CD		<u> </u>	P		01/20/15
g State Bank of India			P		01/26/15
h Safra National Bank	CD		P		02/17/15
Everbank CD			P	-	03/31/15
Worlds Foremost Bar			P		06/23/15
k 1341.346 sh Vanguar	ca 500 Index		P		01/16/15
		<del></del>			
<u>m</u>					
<u>n</u>					
(e) Gross sales price (f) [	Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		Gain or (loss) lus (f) minus (g)	<u> </u>
a 98,000.	,	98,066.	(3) F	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<del></del>
b 247,000.		247,109.	<del></del>		<109.>
c 247,000.		247,105.			<96.>
d 155,000.		154,860.		<del></del>	140.
e 245,000.		244,824.	<del></del>		176.
f 125,000.		124,861.	···		139.
g 125,000.		125,144.			<del>&lt;144.</del> >
h 247,000.		246,686.			314.
137,000.		136,744.			256.
100,000.		102,047.		<del></del>	<2,047.>
k 250,000.		242,542.			7,458.
1					
m				<del></del>	~~~~~
n					<del></del>
0					
Complete only for assets showing gain in o	olumn (h) and owned by t  j) Adjusted basis	he foundation on 12/31/69 (k) Excess of col. (i)		ses (from col. (h)) of col. (h) gain ove	
(i) F.M.V. as of 12/31/69	as of 12/31/69	over col. (j), if any		ot less than "-0-")	
<u>a</u>					<u>&lt;66.</u> >
<u>b</u>			·		<u>&lt;1.09.</u> >
<u>C</u>			<del></del> -		<u>&lt;96.</u> >
<u>d</u>					176.
<u>e</u>			<del></del> ,	<del>-</del>	139.
f					<144.>
<u>g</u> h					314.
"					256.
					<2,047.>
k					7,458.
					7
m					
n					
0					
2 Capital gain net income or (net capital loss)	{ If gain, also enter If (loss), enter -0	in Part I, line 7	,		6,021.
			-		
3 Net short-term capital gain or (loss) as defir if gain, also enter in Part I, line 8, column (c if (loss), enter "-0-" in Part I, line 8		d (6):	<u> </u>		0.

3 Grants and Contributions Paid During the	<del></del>	<del>,</del>	<del> </del>	ļ <del></del>
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	A
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
The Haven	None	N/A	Trustee Award	
1107 E. Adelaide Drive				1.0
Eastside Neighbors Volunteer Program 8302 E. Broadway Blvd.	None	N/A	Trustee Award	
Cucson AZ 85710	-			1,00
Friends 4 the Future	None	N/A	Trustee Award	
5460 E. Grand Rd. #30613 Fucson, AZ 85715				1,00
Grow 2B Fit Foundation 5861 N. Oracle Road	None	N/A	Trustee Award	
Tucson, AZ 85704			<del> </del>	1,00
Helping Hands for Single Moms	None	N/A	Trustee Award	
360 E. Coronado Rd., Suite 150 Phoenix, AZ 85004				1,00
Peen Outreach Pregnancy Services 3024 E. Fort Lowell Road	None	N/A	Trustee Award	1 00
Pucson, AZ 85716				1,00
Youth On Their Own	None	N/A	Trustee Award	
1660 N. Alvernon Way Fucson, AZ 85712				1,00
Midwestern University-AZCOM	None	N/A	Scholarship Award	
19555 N. 59th Avenue				12,50
A.T. Still University 5850 E. Still Circle	None	N/A	Scholarship Award	
Mesa, AZ 85206			<del>                                     </del>	12,50
			<u> </u>	
Total from continuation sheets				32 0

Form 990-PF Intere	st on Saving	s and T	'empor	ary (	Cash	Invest	ments	St	atement	1
Source			(a) Revenue Ne Per Books		(b) Net Investment Income		(c) Adjusted Net Income		е	
Interest income			20,1	96.		20,	196.		20,196.	
Total to Part I, li	ne 3		20,196.		20,196.		196.	20,		96.
Form 990-PF	Dividends	and Int	erest	from	n Sec	uritie	es	St	atement	2
Source	Gross Amount	Capit Gain Divide	s	Rev	(a) venue Book				~	
Dividend income	120,562.		0.	12	20,56	2. 120,562		2.	120,50	62.
To Part I, line 4	120,562.		0.	12	20,56	2.	120,56	2.	120,50	52.
Form 990-PF		Other	Incor	ne	=. <del></del> =-			St	atement	3
Description			Re	(a) venue Bool	_	Net I	b) Invest- Income		(c) Adjusted Net Incor	
Medical Book Sales Other Programs Other Revenue			<del></del>	21 37	,328. ,297. ,567.				176,32 21,29 37,56 40,36	97. 57.
Total to Form 990-P	F, Part I, l	ine 11		275	,558.		0	<u> </u>	275,55	58.

	- <del></del>			
Form 990-PF	Statement 4			
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Accounting Fees	54,929.	941.	19,790.	34,198.
To Form 990-PF, Pg 1, ln 16b	54,929.	941.	19,790.	34,198.
Form 990-PF (	Other Profes	sional Fees	St	atement 5
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Other Professional Fees	22,853.	130.	2,740.	19,983.
To Form 990-PF, Pg 1, ln 16c	22,853.	130.	2,740.	19,983.
Form 990-PF	Tax	es	St	atement 6
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Other Taxes	33,370.	521.	13,902.	18,947.
To Form 990-PF, Pg 1, ln 18	33,370.	521.	13,902.	18,947.
Form 990-PF	Other E	xpenses	St	atement 7
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Admission Fees Advertising AOA Fees Audio/Visual Bank Charges Banquet Expense Cleaning	7,239. 7,410. 9,518. 6,590. 14,469. 98,332. 7,640.	124. 0. 0. 0. 0. 131.	2,608. 0. 0. 0. 0. 2,753.	4,507. 7,410. 9,518. 6,590. 14,469. 98,332. 4,756.

Tucson Osteopathic Medical	Foundation			74-24495	03
Computer. Expense	4,596.	79.	1,656.	2,86	1.
Dues & Subscriptions	213.	4.	76.	13	3.
Educational Materials	520.	0.	0.	52	0.
Employee Benefits	71,212.	1,220.	25,658.	44,33	4.
Entertainment	250.	0.	0.	25	0.
Equipment	3,878.	66.	1,398.	2,41	4.
Honorarium	34,900.	0.	0.	34,90	
Insurance	7,199.	123.	2,594.	4,48	
Office Supplies	521.	9.	188.	32	
Postage	8,752.	16.	333.	8,40	
Refunds	6,718.	0.	0.	-	
Repairs & Maintenance	19,399.	332.	6,990.	12,07	
Supplies	5,803.	49.	1,037.	4,71	
Telephone	9,248.	158.	3,333.	5,75	
Utilities	7,973.	137.	2,872.	4,96	
Depreciation (charitable)	15,013.	0.	0.	15,01	
To Form 990-PF, Pg 1, ln 23	347,393.	2,448.	51,496.	293,44	9.
Form 990-PF Other Increases	in Net Assets	or Fund Bala	inces S	tatement	8
Description				Amount	
Unrealized Gain (Loss) on Inv	estments			206,324.	
Total to Form 990-PF, Part II	I, line 3			206,32	4.
Form 990-PF	Corporate S	tock		tatement	<u></u>
Description		Book	F Value	air Market Value	
Corporate stock		5,6	78,181.	5,678,18	<del></del>

5,678,181.

5,678,181.

Total to Form 990-PF, Part II, line 10b

Form 990-PF Part VIII - List of Officers, Directors Trustees and Foundation Managers			Statement 10	
Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	Expense
Deborah Jane Power, D.O. 7520 N. Oracle Road, Suite 100 Tucson, AZ 85704	Chairman 12.00	0.	0.	0.
Howard R. Zveitel, D.O. 4925 N. Bear Canyon Rd. Tucson, AZ 85749	Chairman-Elect 8.00	0.	0.	0.
Scott J. Biehler, D.O. 4892 N. Stone Ave., Suite 100 Tucson, AZ 85704	Secretary/Treas 2.00	o.	0.	0.
Jerry H. Hutchinson, Jr., D.O. 3190 N. Swan Road Tucson, AZ 85712	Immediate Past 15.00	Chairman 0.	0.	0.
John F. Manfredonia, D.O. 5210 E. Williams Circle, Suite 300 Tucson, AZ 85711	Trustee 2.00	. 0.	0.	0.
Issa Y. Hallaq, D.O. 1 W. Wetmore Rd., Suite 103 Tucson, AZ 85705	Trustee 15.00	0.	0.	0.
John Q. Harris, D.O. 3535 S. 12th Avenue Tucson, AZ 85713	Trustee 1.00	0.	0.	0.
Kenneth S. Snow, D.O. 698 E. Wetmore, Suite 100 Tucson, AZ 85705	Trustee 4.00	0.	0.	0.
Edmund Krasinski, Jr., D.O. 6879 N. Oracle, Suite 133 Tucson, AZ 85704	Trustee 4.00	0.	0.	0.
Kenneth M. Belkoff, D.O. 5670 N. Professional Park Drive, Suite 100 Tucson, AZ 85704	Trustee 1.00	0.	0.	0.

Tucson Osteopathic Medical Foundation			74-2449503	
Bridget T. Walsh, D.O. 7520 N. Oracle Road, Suite 100 Tucson, AZ 85704	Trustee 7.00	0.	0.	0.
Matthew P. Namanny, D.O. 6422 E. Speedway, Suite 150 Tucson, AZ 85710	Trustee 1.00	750.	0.	0.
George S. Nash 6500 N. Mesa View Drive Tucson, AZ 85718	Executive Dire	91,164.	900.	0.
Totals included on 990-PF, Page (	5. Part VIII	91,914.	900.	0.